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***Commonwealth of Virginia  
Department Of Medical  
Assistance Services***

**Medallion 3.0  
Data Book and Capitation Rates  
Fiscal Year 2017:  
Rates Effective  
July 1, 2016**

**Revised July 2016**

**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

July 27, 2016

Dear Bill:

**Re: REVISED FY 2017 Medallion 3.0 Data Book and Capitation Rates**

The enclosed report provides a detailed description of the methodology used for calculating capitation rates for the Virginia Medicaid Medallion 3.0 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.

Sandra Hunt, Partner, Susan Maerki, Project Manager, and Peter Davidson, Lead Actuary, oversaw the development of these rates.

Very Truly Yours,

*PricewaterhouseCoopers*

PricewaterhouseCoopers LLP



**Actuarial Certification of  
Proposed FY 2017 Medallion 3.0 Capitation Rates  
Commonwealth of Virginia Department 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 2017 capitation rates developed for the Medicaid managed care program known as the Medallion 3.0 program under the Virginia Department of Medical Assistance Services (DMAS) Medicaid program. This certification applies to the established Medallion 3.0 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 solely 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 and 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 will need to review the rates in relation to the benefits provided. The health plan should compare the rates with their 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*

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

July 27, 2016

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Date

**Virginia Department of Medical Assistance Services  
Crosswalk from CMS Rate Setting Checklist to FY 2017 Medallion 3.0 Report**

<b>Item</b>	<b>Location</b>	<b>Comments</b>
AA.1.0	Overview of Rate setting Methodology	Entire Report
<b>AA.1.1</b>	Actuarial Certification	Pages i-v
AA.1.2	Projection of Expenditures	NA
<b>AA.1.3</b>	Procurement, Prior Approval and Rate setting	NA
AA.1.5	Risk contracts	NA
		Medallion 3.0 contract specifies that capitation is payment in full. Some drug costs are subject to reinsurance. (See AA.6.0)
<b>AA.1.6</b>	Limit on Payment to other providers	NA
		DMAS limits payments
AA.1.7	Rate Modifications	Rates from July 1, 2016 to June 30, 2017. Introduction and various locations
		Rates are FY 2017 from July 1, 2016 to June 30, 2017.
<b>AA.2.0</b>	Base Year Utilization and Cost Data	LIFC/ABAD Pages 9-20; Exh II: 1a-1b AA/FC Pages 37-38; Exh III: 1a-1b, ALTC/HAP Pages 43-44; Exh IV: 1a-1b
		Paid Claims Data including MCO Encounter MCO Encounter for AA/FC  MCO Encounter ALTC Post HAP Expansion Dec 2014 to Nov 2015
AA.2.1	Medicaid Eligibles under the Contract	Pages 2-4
		Data submitted by participating MCOs matched to DMAS eligibility and capitation payment files
<b>AA.2.2</b>	Dual Eligibles	NA
		Duals not eligible
AA.2.3	Spenddown	NA
		Individuals on spend down are not eligible
<b>AA.2.4</b>	State Plan Services only	NA
		Data submitted by participating MCOs is limited to State plan or State plan substitute 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 FY 2017 Medallion 3.0 Report**

<b>Item</b>	<b>Location</b>	<b>Comments</b>	
AA.3.0	Adjustments to Base Year Data	LIFC/ABAD Pages 20-26; Exh II: 2a-2j AA/FC Pages 38-40; Exh III: 2a-2j, ALTC/HAP: Pages 44-46; Exh IV: 2a-2j	Program and Policy Adjustments, and Other Adjustments
AA.3.1	Benefit Differences	NA	
AA.3.2	Administrative Cost Allowance Calculations	LIFC/ABAD Pages 29-30 Exh II: 2k AA/FC Page 40 Exh III: 2k, ALTC/HAP: Page 46 Exh IV: 2k	
AA.3.3	Special Populations' Adjustments	AA/FC Pages 38-40; Exh III: 2a-2i, ALTC/HAP Pages 44-46; Exh IV	MCO Encounter ALTC Post HAP Expansion Dec 2014 to Nov 2015
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	LIFC/ABAD Pages 26-29; Exh II: 3a-3c AA/FC Page 41; Exh III: 3a-3b ALTC/HAP: Page 46-47; Exh IV: 3a-3b	Trend Adjustment

**Virginia Department of Medical Assistance Services  
Crosswalk from CMS Rate Setting Checklist to FY 2017 Medallion 3.0 Report**

<b>Item</b>	<b>Location</b>	<b>Comments</b>	
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	LIFC/ABAD Pages 26-29; Exh II: 3a-3c AA/FC Page 41; Exh III: 3a-3b ALTC/HAP: Page 46-47; Exh IV: 3a-3b	IBNR Presented with 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 17-18	Use two years of base data; rate cell blending and other high cost claims
AA 5.1	Special Population and Assessment of the Data for Distortions	LIFC/ABAD Pages 26-29; Exh II: 3a-3c	Removal of high cost inpatient claims above \$100,000 for trend evaluation; Other high cost claims >\$250,000 redistributed
AA.5.2	Cost-neutral data smoothing adjustment	Page 17-18	Use two years of base data; redistribution of inpatient hospital claims >\$250,000
AA.5.3	Risk Adjustment	LIFC/ABAD Pages 31-33; Exh II: 6, 7a-7g	CDPS risk adjustment for LIFC/ABAD

**Virginia Department of Medical Assistance Services  
Crosswalk from CMS Rate Setting Checklist to FY 2017 Medallion 3.0 Report**

<b>Item</b>		<b>Location</b>	<b>Comments</b>
AA.6.0	Stop Loss, Reinsurance or Risk Sharing arrangements	LIFC/ABAD Page 33-34; Exh II: 8a, 9a-9g AA/FC Page 41-42; Exh III.6 ALTC/HAP Pages 47-48, Ex IV.6	Reinsurance for 90% of drug cost above \$150,000 annual per member per year threshold.
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	LIFC/ABAD Pages 36-37 AA/FC Page 42 ALTC/HAP Page 48	Applies to all Medallion 3.0 programs starting in FY 2017

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Exhibit 2d Freestanding Psychiatric Hospital Rate Adjustment

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- Exhibit 5a Summary of FY 2017 Base Capitation Rates – Before CDPS Adjustment
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## **II. Adoption Assistance and Foster Care**

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- Exhibit 1a Historical Eligibility and Claims – MCO Adoption Assistance
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### **MCO Encounter Adoption Assistance and Foster Care Adjustments**

- Exhibit 2a Pharmacy Adjustment
- Exhibit 2b Exempt Infant Formula Carveout Adjustment
- Exhibit 2c.1 Hospital Inpatient Adjustments
- Exhibit 2c.2 Hospital Inpatient Adjustments– Children’s Hospital of the King’s Daughters
- Exhibit 2d Freestanding Psychiatric Hospital Rate Adjustment
- Exhibit 2e.1 Hospital Outpatient Adjustment
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- Exhibit 2f DME Fee Adjustment
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- Exhibit 2k Administrative Cost Adjustment
- Exhibit 3a IBNR, Policy/Program, and Trend Adjustments –Adoption Assistance

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**MCO Capitation Rate Calculations for Adoption Assistance and Foster Care**

Exhibit 4a Capitation Rate Calculations – MCO Encounter Data – Adoption Assistance

Exhibit 4b Capitation Rate Calculations - MCO Encounter Data – Foster Care

**Capitation Rates for Adoption Assistance and Foster Care**

Exhibit 5 Summary of FY 2017 MCO Adoption Assistance and Foster Care Capitation Rates

Exhibit 6 Drug Reinsurance Adjustment

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Exhibit 8 MCO February 2016 Member Month Distribution

**III. Acute and Long Term Care and Health and Acute Care Program**

**MCO ALTC Base Data**

Exhibit 1a Historical Eligibility and Claims – Health Plan Encounter ALTC Child

Exhibit 1b Historical Eligibility and Claims – Health Plan Encounter ALTC Adult

**MCO Encounter ALTC Adjustments**

Exhibit 2a Pharmacy Adjustment

Exhibit 2b Exempt Infant Formula Carveout Adjustment

Exhibit 2c.1 Hospital Inpatient Adjustments

Exhibit 2c.2 Hospital Inpatient Adjustments– Children’s Hospital of the King’s Daughters

Exhibit 2d Freestanding Psychiatric Hospital Rate Adjustment

Exhibit 2e.1 Hospital Inpatient Adjustments

Exhibit 2e.2 Hospital Outpatient Adjustments – Children’s Hospital of the King’s Daughters

Exhibit 2f DME Fee Adjustment

Exhibit 2g Hepatitis C Treatment Adjustment

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- Exhibit 2i Emergency Room Triage Adjustment
  - Exhibit 2j Resource Based Relative Value Scale Adjustment
  - Exhibit 2k Administrative Cost Adjustment
  - Exhibit 3a IBNR, Policy/Program, and Trend Adjustments – Health Plan Encounter ALTC Child
  - Exhibit 3b IBNR, Policy/Program, and Trend Adjustments – Health Plan Encounter ALTC Adult

**MCO ALTC Rate Calculations**

- Exhibit 4a Capitation Rate Calculations - Health Plan Encounter ALTC Child
- Exhibit 4b Capitation Rate Calculations - Health Plan Encounter ALTC Adult

**Capitation rates for MCO ALTC**

- Exhibit 5 Summary of FY 2017 MCO ALTC Capitation Rates – Child and Adult
- Exhibit 6 Drug Reinsurance Adjustment
- Exhibit 7 FY 2017 Capitation Rate for MCO ALTC
- Exhibit 8 MCO ALTC February 2016 Member Month Distribution

***Virginia Medicaid Medallion 3.0  
Data Book and Proposed Capitation Rates  
Fiscal Year 2017  
For Rates Effective July 1, 2016***

***Prepared by PricewaterhouseCoopers LLP  
REVISED July 2016***

## ***Background***

PricewaterhouseCoopers LLP (PwC) has prepared a report describing the calculation of the State Fiscal Year 2017 capitation rates for the Virginia Department of Medical Assistance Services (DMAS) Medicaid Medallion 3.0 program in effect for the period July 1, 2016 to June 30, 2017. This covers the longstanding Medicaid managed care program for Medicaid eligibles in the Low Income Families and Children (LIFC) and Medicaid only Aged, Blind and Disabled (ABAD) aid categories. It also covers the recent managed care population expansions for Adoption Assistance and Foster Care (AA/FC), some of the eligibles for waiver services through Managed Care Organizations (MCOs) under Acute Long Term Care (ALTC), and the recent enrollment of those who were in Fee for Service under Health and Acute Care Program (HAP).

This report and the accompanying actuarial certification provides documentation for the development of actuarially sound capitation rates. The documentation has been developed to demonstrate compliance with regulations and guidance issued by the Centers for Medicare and Medicaid Services (CMS) under the 2015 and Managed Care Rate Setting Consultation and the 2016 Managed Care Rate Development Guides.

This information will help CMS and The Commonwealth of Virginia, Department of Medical Assistance Services ensure that the Medallion 3.0 Medicaid managed care rates meet three sets of standards:

- Medicaid managed care capitation rates and the rate development process comply with all applicable laws, regulations, and other guidance for Medicaid managed care, including that the rates have been developed in accordance with generally accepted actuarial principles and practices.
- The rate development reflects, as appropriate, program compliance with all applicable laws, regulation, and other guidance for the Medicaid program, including but not limited to eligibility, benefits, financing, any applicable waiver or demonstration requirements, and program integrity.

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- The final capitation rates must be reasonable, and the documentation must be sufficient to demonstrate that the rates comply with applicable law.

Regulations issued by the Centers for Medicare and Medicaid Services under 42 CFR §438.6(c) 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 and issued a Managed Care Rate Development Guide in late 2015. We have followed that checklist in developing the rates shown here and have included a checklist review as a supplement 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

## ***I. General Information***

This section provides information listed under the General Information section of the 2015 Managed Care Rate Setting Consultation Guide and the 2016 Medicaid Managed Care Rate Development Guide. It is an overview of the rate development for three population groups included in the Virginia Medallion 3.0 program. Details regarding the rate development for each population are incorporated in three separate sections of the report.



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## ***Actuarial Certification***

The actuarial certification, signed by Peter B. Davidson, follows the introductory letter from PricewaterhouseCoopers. Mr. Davidson meets the qualification standards established by the American Academy of Actuaries and complies with the Actuarial Practice Standards Board requirements in certifying the final rates meet the standards in 42 CFR §438.6(c).

### ***Certified Rates***

The certified capitation rates are presented in separate exhibits for the three population groups.

LIFC/ABAD Base Rates, Section II, Exhibit 5a and Risk Adjusted, Behavior Health Home and Physician Access Adjusted Rates Net of Reinsurance, Section II, Exhibits 9a -9f

Adoption Assistance/Foster Care, Section III, Exhibit 7

ALTC/HAP, Section IV, Exhibit 7

## ***General Program Information***

### ***Managed Care Programs***

This report includes capitation rate development for the Virginia Medallion 3.0 program. This combines the previous Medallion II population which covers the Low Income Families and Children (LIFC) and Aged, Blind and Disabled (ABAD) populations, and two recent expansion groups, Adoption Assistance and Foster Children (AA/FC), and the Acute and Long Term Care and Health and Acute Care Program (ALTC/HAP) populations.

### ***Rating Period***

The rate report and discussion is for capitation payments to be made in State Fiscal Year 2017, with effective dates from July 1, 2016 to June 30, 2017.

### ***Covered Populations***

The description of each of the populations is presented in the introductory paragraphs of Sections II to IV.

### ***Covered Services***

The services covered by the health plans are the same for each of the covered populations. 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 if providers participate in the Vaccines for Children program, for school-based health services, community based behavioral health services, dental services,

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Applied Behavioral Analysis services, and for Early Intervention (Part C) services. Managed care plans are also not responsible for the home and community based services for the ALTC/HAP populations.

## ***Data***

The following subsections describe the data that is used for the Medallion 3.0 managed care rate development.

### ***Description of the Data***

#### ***Types of Data***

The established Medicaid managed care programs use managed care organization encounter data. The more recent population expansion programs, which fall under Medallion 3.0 program, use DMAS FFS claims data or a combination of MCO encounter data and the DMAS FFS claims data.

The type of data that may be used includes:

- Virginia Medicaid eligibility and capitation payment files;
- FFS data for the population covered by recent managed care program expansions;
- Health plan encounter data for the population in managed care;
- Health plan vendor payments for subcontracted services;
- 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;
- Other administrative data, such as the health insurance premium fee assessment;
- For some components of the analysis, data from other Medicaid programs.

#### ***Age of Data***

The historical data period used to develop the rates is the same for each of the three population groups. Base data covers the two year period, from July 1, 2013 to June 30, 2015, which corresponds to State Fiscal Years 2014 and 2015. The contract period trend development in the draft rates uses three years of data, State Fiscal Years 2013, 2014, and 2015 with run out through February 2016.

## *Data Sources*

The primary sources of data are:

<b>Source</b>	<b>Data</b>
Virginia DMAS	Medicaid Eligibility File (monthly) Capitation Payment invoice files (monthly) FFS paid claims files (monthly) Administrative data, as needed
Participating Health Plans	MCO encounter data (annual submission of three years of data with updates) MCO subcapitation and vendor payment data Financial data as submitted to the Virginia Bureau of Insurance (annual) Administrative data, as requested

## *Subcapitation Data*

Subcapitation data submitted by the health plan is primarily for vision and non-emergency transportation. Some plans have vendor arrangements for laboratory services. Two plans have subcapitation vendors for behavioral and mental health services, although one of these plans converted from subcapitation to a FFS contract on January 1, 2015. There is limited primary care professional services capitation.

## *Availability and Quality of the Data*

### *Validation*

The description of the data validation process is presented in Section II under the heading Databook.

### *Data Concerns*

Data concerns, including any adjustments, review for outliers, or data smoothing are described separately for the three population groups. For all populations, the processing redistributes “shock” claims, primarily inpatient hospital claims, if the paid amount is greater than \$250,000. All inpatient hospital trend models search for claims that exceed \$100,000 and remove the dollars greater than that amount before evaluating trend model results. Other data concerns, such as small numbers in rate cells, may result in combining rate cells. In trend evaluation, if there are small numbers of member months or claims payments, an all services trend may be applied rather than a trend by service category. Alternatively, trend developed for a similar population may be used, such as applying LIFC Child trend to the Adoption Assistance or Foster Care population.

## *Data Changes*

### *New Data Sources*

Kaiser Permanente health plan joined the Medallion 3.0 managed care program in November 2013 and submitted encounter data for the period November 2013 to June 2015 with run out through October 2015. It operates in the Northern Virginia region and total enrollment as of June 2015 was 7,526 across all managed care population aid

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categories. Looking at the February 2016 snapshot, the Kaiser population represents 5.0% of the member months (MM) in NOVA and about 1.2% of the statewide enrolled population.

The Kaiser data was incorporated into the historical base as is, with the exception of repricing of professional claims paid to Kaiser salaried physicians. These professional paid amounts were submitted as if they had been paid at the Medicare fee schedule. Those paid amounts were re-priced to 90% of the Medicare Washington DC-Baltimore MD–Northern Virginia fee schedule, similar to the percent of Medicare that Kaiser paid to external physicians. Total Kaiser paid amounts represented about 4.4% of the Northern Virginia region total paid amounts and about 0.3% of total paid claims in the base historical data. We expect this proportion to grow as Kaiser continues to increase enrollment.

As of December 2013, the Virginia Department of Medical Assistance Services (DMAS) entered into a vendor relationship with Magellan for Administrative Services Organization management and payment of behavioral and mental health services. Magellan is responsible for the management and payment of inpatient and outpatient hospital and professional behavioral and mental health services for all Medicaid eligibles who receive care through the Fee for Service (FFS) Medicaid program. It is also responsible for the management and payment of other behavioral and mental health services covered by the Medicaid program but are carved out of the MCO service responsibility.

Magellan paid claims data from December 2013 to June 2015, with run out through October 2015, was used to supplement and complete the historical data for the expansion populations with rate development that used DMAS FFS invoice data. This affects the Health and Acute Care Program population component of the FY 2017 rate development.

### ***Other Data Source Changes***

The Adoption Assistance and Foster Care FFS population transitioned to managed care in a phased expansion beginning in September 2013 and completed by June 2014. After review of the declining FFS membership in AA/FC and the summary of the base period claims experience, we determined that the MCO encounter data for the AA/FC population was sufficient and credible. Therefore, the FY 2017 Adoption Assistance and Foster Care rate development uses only the MCO encounter experience.

### ***Future Plans***

*Not Applicable at this time.*

### ***Data Adjustments***

Data adjustments for policy and program changes between the historical base data period and the contract period may vary by the three population programs under Medallion 3.0 and are described in the separate sections that follow. In most cases, the same policy and program adjustments are applied to all three populations. The methodology to develop the data adjustment will be the same, although adjustment values may vary given the different utilization and cost of services among the populations. Adjustments for Medallion 3.0 LIFC and ABAD population are described in Section II, Medallion 3.0 rate Development, under MCO Encounter Policy and

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Program Adjustments and presented in Exhibits 2a-2j and with additional adjustments in Exhibits 8a and 8c. The adjustments for the Adoption Assistance and Foster Care program are described in Section III, Adoption Assistance and Foster Care. The AA/FC Encounter Policy and Program Adjustments are presented in Exhibits 2a-2j and Exhibit 6. The adjustments for the ALTC/HAP program are described in Section IV, ALTC and Health and Acute Care Program. The ALTC/HAP Policy and Program Adjustments are presented in Exhibits 2a-2j and Exhibit 6.

Risk adjustment is applied to rates developed for the LIFC and ABAD populations and is described in Section II, Medallion 3.0 rate Development.

### ***Other Rate Development Considerations***

*Not applicable at this time.*

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## ***II. Overview of Medallion 3.0 Rate Development***

### ***Medallion 3.0 program description***

The Virginia Medallion 3.0 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. 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.

Capitation rate cells for Medallion 3.0 vary based on the following criteria:

- **Aid Category.** Members eligible for participation in the programs include Low Income Families with Children (LIFC), and Aged, Blind, and Disabled (ABAD). In addition, the following LIFC and ABAD subgroups are in separate rate setting categories: Foster Care, Adoption Assistance and the combined Acute and Long Term Care (ALTC) and Health and Acute Care Program (HAP).
- **Demographics.** LIFC and ABAD 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. The ALTC/HAP group has separate capitation rates for over and under 21. There are no age rate cells for the foster care and adoption assistance rate cells; all eligibles are under 21.
- **Region.** The state is divided into seven rate regions for LIFC and ABAD: Northern Virginia, Other Metropolitan Statistical Area (Other 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 was established July 1, 2012 and is composed of the 15 FIPS codes that had been Primary Care Case 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. Statewide rates are developed for the Foster Care, Adoption Assistance and ALTC/HAP rate cells.

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 if providers participate in the Vaccines for Children program, for school-based health services, community based behavioral health services, dental services, Applied Behavioral Analysis services, and for Early Intervention (Part C) services.

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Payments to managed care plans for Medallion 3.0 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 3.0 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, LIFC and ABAD rates are adjusted for differences in health status among health plans within each geographic region.

## ***Databook***

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. We also describe the adjustments that are made to the data in the early stages of the rate development process.

### ***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 calls 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. The types of data used for the rate development include those listed under Data Sources in Section I.

The historical data used to develop the FY 2017 base rates includes health plan incurred claims and sub capitation payments for FY 2014 and FY 2015 (July 1, 2013 to June 30, 2015), with run-out through October 2015. Analysis for development of contract period trend includes incurred claims from July 2012 through June 2015 (for all service categories except inpatient hospital), with run-out through February 2016.

Data for the ALTC/HAP population uses the post expansion period, incurred claims for December 2014 to November 2015 with run out to February 2016.

Supplemental and diagnostic components of the 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 adjustment factors.

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## *Managed care expansions and changes in MCO service areas FY 2013 to FY 2015*

We considered managed care expansions in the Medallion 3.0 program during the base data period, FY 2014 to FY 2015, the period evaluated for contract period trend, July 2012 to February 2016, and changes that have occurred in FY 2016 or will occur in FY 2017. A number of program changes were important for the FY 2017 rate development:

- Effective January 1, 2012, there was an MCO expansion into the Roanoke-Alleghany area. A separate Roanoke-Alleghany rate setting region was established. Previously this had been a region with combined Primary Care Case Management and Medallion 3.0 members served by one MCO. A new MCO, MajestaCare, entered that market with this expansion. Rates for the Roanoke-Alleghany expansion initially were developed by blending the historical experience of the FFS program and MCO data. We now have three years of MCO health plan data for the Roanoke-Alleghany region for FY 2017 rate development, including the historical data for MajestaCare.
- There was an MCO expansion into the Far Southwest region effective July 1, 2012, creating a new region, Far Southwest. The counties affected are shown in Exhibit 12. This area had not been served by any of the contracted MCOs and Medicaid members were converted from PCCM only to mandatory managed care for Medallion 3.0 and FAMIS eligible enrollees. Initially rates were based on FFS data. We now have three years of MCO health plan data for the region for the FY 2017 rate development.
- 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. Approximately 150 foster care children were enrolled in MCOs in Richmond City through the fall of 2013. Effective FY 2014, this program began a staggered by region statewide expansion to children in both Foster Care and Adoption Assistance programs. Expansion began in the Tidewater region September 1, 2013 and was completed statewide by June 2014. The Foster Care and Adoption Assistance rate development uses the new MCO encounter data as the historical base.
- MCO members who become eligible to participate in home and community-based services (HCBS) waivers remain in Medallion 3.0 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. Effective December 1, 2014, DMAS enrolled all Medicaid FFS eligibles that are in the Elderly or Disabled with Consumer Direction HCBS waiver into the MCOs. This expansion is named Health and Acute Care Program (HAP). The HAP population is combined with the existing ALTC population that was enrolled in the MCOs. The FY 2017 rate development uses the combined ALTC/HAP post expansion population as the historical base for the ALTC/HAP waiver group. This includes the FY 2015 months from December 2014 to June 2015 and the post FY 2015 months from July 2015 to November 2015.



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- There continues to be growth in Medicaid enrollment and the Medallion 3.0 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 each of the population groups.

There were changes in health plan service areas during the FY 2014 to FY 2015 period. None of these required adjustment to the historical data used in the FY 2017 rate setting process.

- 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 Risk Adjustment scores. Since then, Wellpoint has changed the corporate name to Anthem and references to the Virginia plan use the name Anthem Healthkeepers.
- Kaiser Permanente Health Plan joined the Medallion 3.0 program in November 2013. At present, it operates only in the Northern Virginia region. As a new plan, it submitted encounter data for the first time for the FY 2016 rate development. Although ABAD enrollment is increasing, it is a small plan and will be paid the base ABAD capitation rates without CDPS risk adjustment for FY 2017 with adjustments for drug reinsurance. The Kaiser LIFC enrollment meets the minimum risk adjustment criteria and the Kaiser LIFC capitation rates will include CDPS risk adjustment.
- MajestaCare, a plan operating in the Roanoke-Alleghany and Far Southwest regions, withdrew from the Medallion 3.0 program effective December 1, 2014. Approximately 10,400 MajestaCare members were assigned to the other health plans operating in those regions. MajestaCare submitted encounter data for FY 2014 and for FY 2015 with runout through February 2015 and that data is included in the historical base data.
- Aetna completed its acquisition of Coventry Health Care, parent of CoventryCares, in 2013. As part of the continuing integration process, Aetna has been rebranding the state Medicaid and CHIP government business. On May 1, 2016, the CoventryCares in Virginia changed its name to Aetna Better Health of Virginia.

## *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

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that is not included in the Medallion 3.0 program, or claims that were incurred outside of the member eligibility period. We also exclude claims for plan reported non-state plan services unless they are substitute services. The primary substitute service is services in an IMD. The non–state plan service exclusion is small and is primarily the cost of school-based physicals. This exclusion removed \$433,056 from the base period across all Medallion 3,0 populations. We have 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<sup>1</sup>.

The newborn processing requires multiple steps. DMAS policy provides three months for the mother and the 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 be reimbursed for capitation payments due to coverage during the three-month 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.

We make an adjustment to count member months for the period up until a newborn is assigned a permanent Medicaid identification number. This is 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, a newborn ID does not necessarily link to the mother's ID. To the extent these steps do not identify all newborns, the imputed member months were underestimated.

To assure that all newborn MM are included, we use 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 are 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. For FY 2017, 47,057 newborn member months were added. This represents 0.3% of the total population and 5.0% of the age under 1 population.

Newborn claims that still could not be matched to a newborn ID are 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.

Subcapitated service costs were added based on PMPM values or the claims information provided by the plans. The member months are calculated by PwC from the DMAS capitation payment file, rather than the member months 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 and other eligibility categories and

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<sup>1</sup> 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 3.0 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 3.0 plan.

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 the allocation method that has been used in the past eight years of Medallion 3.0 rate setting. This allocation method is described in more detail under the subheading “Behavioral and mental health capitated subcontractor services.”

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.

Similar edits and processing are used to summarize the FFS claims data for the managed care expansion populations. Because all payments are FFS, this summarization does not require separate consideration of newborns, or allocation of mental and behavioral health. Only non-emergency transportation is paid as a vendor subcapitation payment under the FFS program. 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**

<b>Service Category</b>	<b>Unit Count</b>	<b>Multiple Units</b>
DME/Supplies	Record Counts	
FQHC/RHC	Units	Yes
Home Health Services	Claims	
Inpatient – Maternity	Admits	
Inpatient – Newborn	Admits	
Inpatient – Other	Admits	
Inpatient – Psych	Days	

**Table 1 continued  
Service Unit Definitions**

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.

### *Validation: Review of the health plan encounter data*

Health plans are required to submit a certification to DMAS with each annual data submission and with any data updates. This must be signed by the Chief Actuary, Chief Financial Officer, or Chief Executive Officer who certifies that the submission is a complete and accurate representation of their experience. Claims data that is paid under FFS arrangements is submitted as the actual paid amount.

The base capitation rates for FY 2017 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:

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- Claims that were duplicates, pended or rejected during claims processing were removed.
  - Claims with dates of service outside the FY 2014 to FY 2015 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 2014 to FY 2015 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. It also includes a "dropped claims" summary with the amount of the original submission that was excluded by the processing edits.

### *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.

A summary of the subcapitated service costs that were added to the base data is in the table below:

<b>Table 2 Subcapitated Service Costs Added to Base Data</b>				
<b>Aid Category</b>	<b>Non-Mental Health Subcapitated Service Payment (FY14-FY15)</b>	<b>% of Total Base Period Payment</b>	<b>Total Subcapitated Service Payment Including MH (FY14-FY15)</b>	<b>% of Total Base Period Payment</b>
LIFC	\$69,908,778	2.6%	\$94,444,367	3.5%
ABAD	\$8,700,858	0.5%	\$37,015,526	2.2%
ALTC (MCO)*	\$498,839	0.3%	\$597,558	0.3%
AA	\$521,511	1.9%	\$1,614,742	5.9%
FC	\$422,662	1.4%	\$2,571,150	8.7%
*ALTC MCO based upon post expansion base period December 2014 to November 2015				

### *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 psychiatric services (CoventryCares, now Aetna Better Health, for the base period up until January 1, 2015 and Optima for the entire base period), the sub capitated 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 sub capitation arrangements.

To allocate the mental health capitation payments, we analyze mental health claims level detail provided by the four plans that do not capitate those services (Anthem, Virginia Premier, InTotal Health, Kaiser and MajestaCare) by service type and aid category to determine a distribution to apply to the capitated mental health service payments. As of January 1, 2015, Aetna Better Health changed its behavioral and mental health services vendor payments from capitation to FFS. Therefore, three quarters of their base period (July 2013 to December 2014) are allocated using this methodology and the FFS paid claims from January to June 2015 are assigned to the population and service category indicated on the claim.

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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 8.1 times the LIFC mental health PMPM, or \$38.39 PMPM for ABAD compared to \$4.73 PMPM for LIFC. For ABAD, the distribution of dollars was 87.2% inpatient and 12.8% professional while the LIFC distribution was 56.5% inpatient and 43.5% professional.<sup>2</sup> PMPM relativities were calculated for the other managed care populations as part of the redistribution. The PMPM cost of the ALTC population was 5.8 times the LIFC amount, Foster Care was 14.8 times greater, Adoption Assistance was 6.4, and FAMIS was 0.6 times the LIFC PMPM amount.

These relative factors were applied to the mental health capitation payments to modify the health plan reports for the two health plans that subcapitated mental health services. This behavioral and mental health distribution was included in the health plan reports that Aetna Better Health and Optima reviewed and approved. The modified reports were then aggregated for the historical base data.

### *Removal of PCP supplemental payment from professional claims*

Twenty four months of the historical data for the Medallion 3.0 LIFC, ABAD and ALTC populations, from January 1, 2013 to December 31, 2014 and the run out of the professional claims payment, was reviewed to remove health plan payments related to the Medicare enhanced primary care physician supplemental payment program. Eighteen months of PCP supplemental payments, from July 1, 2013 to December 31, 2014, was removed from the base period used for the FY 2017 rate setting and the prior six months, January 1, 2013 to June 30, 2013, was removed from the historical data used to evaluate contract period trend.

As part of the health plan data submission, plans were required to document how the PCP supplemental program was administered and provide information sufficient to remove the PCP supplemental amount from the base data. Because health plans implemented the program differently, this analysis is done separately for each health plan. In some cases, a plan submitted professional claims with the PCP payment removed from the claim record, others made separate or lump sum payments outside the standard adjudication process, and others provided multiple records that permitted us to adjust the claim and remove the PCP supplemental payment. All claims that included the PCP supplemental payment were adjusted at the record level.

Primary care PCP supplemental payments for the DMAS FFS providers were processed as lump sum payments and those professional claims did not require adjustment.

### *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

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<sup>2</sup> The analysis of FFS paid mental health claims also includes FAMIS members.

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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. Inpatient hospital claims data were summed separately for FY 2014 and FY 2015 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 affected 1.1% of the LIFC Child inpatient dollars. The impact on LIFC Adult and ABAD was smaller. For LIFC Adult, 0.1% of the inpatient dollars and for ABAD, 0.5% of the inpatient dollars, was redistributed. This redistribution is shown in a separate column labeled “Base Claims Redistribution and Adjustments FY14-15” as an adjustment to the inpatient hospital service categories in the Exhibits 4 for each rate cell calculation.

### ***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 1 for each population. These Exhibits 1 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 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 2017 LIFC and ABAD Capitation Rate Calculations***

The capitation rates for fiscal year 2017 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 4 of Adjusted and Trended Claims.



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

1. The combined FY 2014 to FY 2015 historical data for each rate cell and service category is brought forward to Exhibits 4a to 4b from the corresponding rate cell in Exhibits 1a to 1b. This information serves as the starting point for the capitation rate calculation.
2. The Virginia General Assembly has mandated a number of changes in covered services and payment levels. Each of these adjustments, as well as adjustments for other services not included in the source data, is described in detail in Exhibits 2.
3. The claims data is adjusted to reflect the expected value of any IBNR claims and to update the data to the FY 2017 contract period. These adjustments are described for each population and are shown in the relevant Exhibits 3a to 3c. The resulting claims are shown in Exhibits 4 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 under the heading Projected Non-Benefit Costs: Administrative Adjustment.
7. For LIFC and ABAD Medallion 3.0 populations, 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.
8. The LIFC and ABAD MCO-specific risk adjusted capitation rates are further adjusted by the drug reinsurance adjustment. A drug reinsurance adjustment is also applied to the AA/FC and the ALTC/HAP Child and Adult rates that are developed on a statewide basis and do not vary by health plan.
9. For the ABAD category only, an additional behavioral health home pilot adjustment is applied to the ABAD adults for each plan in the region that will administer a pilot.
10. A Tidewater Physician Access adjustment is applied to ABAD and LIFC members who are in the Tidewater region only.
11. Beginning FY 2016, the health plans participate in a Performance Incentive Award determined by results of three HEDIS and three administrative metrics. The maximum amount at risk for each health plan is 0.15% of the PMPM capitation rate and the maximum award is 0.15% of the PMPM capitation rate. Total awards

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for all contractors will equal total penalties. This is not reflected in the capitation rates presented in this report.

The next section describes the specific adjustments applied to the health plan encounter data for the LIFC and ABAD populations.

### ***LIFC and ABAD 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. The experience data are shown for LIFC in Exhibits 1a and for ABAD in Exhibits 1b

### ***Projected Benefit Costs: 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. In FY 2015, the proportion of generic scripts in the LIFC population was 85.5% (82.8% LIFC Child and 88.8% LIFC Adult) and it was 85.1% in ABAD. 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 2017 rate development.

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 submit pharmacy data to the State Medicaid agency, which then submits 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 modified the rebates currently provided MCOs. Managed care plans furnished information that confirmed that projected pharmacy rebates were reduced at least 50% in the time period after passage of the ACA but that they still receive rebates equal to 1.9% of total pharmacy expenditures.

Separate pharmacy adjustment factors were developed for the LIFC and ABAD aid categories, as shown in Exhibit 2a. It is applied to the full base period Pharmacy service line in Exhibits 4a to 4b under the column labeled "Policy and Program Adjustments."

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### *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. It is applied to the full base period to DME/Supplies service lines in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

### *Hospital inpatient adjustments*

The hospital capital percentage averaged 8.9% during the FY 2014- FY 2015 base period. The percentage was decreased to 8.5% in FY 2016 and is expected to remain at that value in FY 2017.

The hospital inpatient adjustment of a 2.6% cost per unit increase authorized by the Virginia General Assembly effective FY 2013 is now reflected in the base data used to evaluate contract trend. 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. This is fully reflected in the FY 2014 and FY 2015 base data.

There are no unit cost adjustments for either FY 2015 or FY 2016. The Virginia General Assembly authorized a unit cost adjustment for FY 2017 equal to half the regulatory inflation of 2.1%, a value of, 1.05%.

Hospital inpatient reimbursement rates are being rebased for FY 2017. For LIFC and ABAD inpatient medical/surgical, the rebasing is a negative adjustment of 2.65%. For inpatient psychiatric in acute care hospitals, the positive adjustment is 27.0%.

These adjustments are applied to the total inpatient hospital claims in the base period, excluding inpatient payments to Children’s Hospital of the King’s Daughters (CHKD). 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.

These adjustment factors are shown in Exhibit 2c.1 and applied to all hospital inpatient service categories in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

The FY 2017 unit cost adjustment is different for CHKD, a hospital that serves children primarily in the Rural and Tidewater regions. The hospital has a higher inpatient capital percentage than the statewide average, 10.3% in the base period, and it increases to 10.5% for FY 2016 and FY 2017. The Virginia General Assembly authorized a unit cost adjustment for FY 2017 equal to the full value of the regulatory inflation, 2.1%, for CHKD. The base dollars are total Rural and Tidewater region child hospital inpatient payments. The 2.1% unit cost increase is applied to the CHKD total Rural and Tidewater region child inpatient hospital claims. This is then decreased by the value of the FY 2017 MCO hospital rebasing factor.

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These adjustment factors are presented in Exhibit 2c.2 and are -0.024% and 0.050% for the LIFC and ABAD age under 21 rate cells in the Rural region and -0.119% and -0.118% for the LIFC and ABAD age under 21 rate cell in the Tidewater region. They are applied to all hospital inpatient service categories for those rate cells and regions in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

### *Freestanding inpatient psychiatric hospital rate adjustment*

The Inpatient psychiatric hospitals also received the FY 2013 increase in unit cost of 2.6% that is applicable to the operating cost component and is now reflected in the historical data. The FY 2014 unit cost adjustment for rebasing is a negative 0.9%. There is no FY 2015 or FY 2016 unit cost adjustment. The Virginia General Assembly authorized a unit cost adjustment for FY 2017 equal to half the regulatory inflation of 2.1%, or a value of, 1.05%.

Hospital inpatient reimbursement rates are being rebased for FY 2017. For LIFC and ABAD freestanding inpatient psychiatric hospitals, the rebasing adjustment is 2.50%.

These adjustment factors with the calculation are shown in Exhibit 2d and applied to inpatient psychiatric service categories in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

### *Outpatient hospital adjustment*

There are three adjustments to outpatient hospital for FY 2017. DMAS used to pay outpatient hospital as a percent of cost and rate setting used the outpatient hospital trend based on the historical trend. As of January 1, 2014, DMAS FFS started reimbursing outpatient hospital using Enhanced Ambulatory Patient Groups (EAPGs). Inflation adjustments will now be applied to outpatient hospital rates in the same manner as inpatient hospital. FY 2017 is the first year that outpatient hospital inflation has been modified. Outpatient hospital rates are going to be adjusted by 50% of inflation, a 1.05% unit cost increase.

The outpatient hospital adjustment is structured similarly to the inpatient hospital adjustment. The adjustments are applied to the total outpatient hospital claims in the base period, excluding inpatient payments to CHKD.

There also is an MCO outpatient hospital rebasing adjustment. For LIFC and ABAD, the rebasing adjustment is 0.1%.

These adjustment factors are shown in Exhibit 2e.1 and applied to all hospital outpatient service categories in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

The third outpatient adjustment is to apply the full inflation amount, a 2.1% unit cost increase, for CHKD, similar to the inpatient adjustment and will be subject to the rebasing adjustment.

The outpatient adjustment factors range from 0.02% to 0.13% for the age under 21 rate cells in the Rural region and 0.26% to 0.84% for the Tidewater region. They are shown in Exhibit 2e.2, and they are applied to all hospital outpatient service categories for those child rate cells and regions in Exhibits 4a to 4b under the column labeled “Policy and Program Adjustments.”

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## *Durable Medical Equipment fee adjustment*

The FY 2015 Final Budget reduced Medicaid fees for the DME products covered under the Medicare competitive bid program to a level based on the average of the competitive bid prices in the three areas of the state in the Medicare competitive bid program. This was estimated to result in \$4.9 million in total savings, and \$1.6 million in MCO savings. DMAS estimated that the Medicare competitive bid rates for these services are 33% lower than the current FFS Medicaid rates for the services. Many of the DME amounts paid by the MCOs were lower than the DMAS FFS Medicaid fee schedule.

DMAS provided a list of DME HCPCS codes subject to the Medicare competitive bid program and the average Medicare bid payment rate for three areas in Virginia that participate in the program. These were compared to the average per unit payment of the MCOs for those services to calculate the cost savings per unit and a savings percentage per affected DME code. This information was used to determine the proportion of DME claims in FY 2014 subject to the fee reduction and the average savings percentage based on the mix of DME codes subject to the savings. Overall, 5.4% of LIFC DME claims dollars were for codes subject to the reduction and 14.4% for ABAD. Savings on this subset were 24.3% for LIFC and 20.6% for ABAD.

This results in adjustment factor reductions shown in Exhibit 2f and added in Exhibit 4a and 4b under the column labeled “Policy and Program Adjustments.”

## *Hepatitis C treatment adjustment*

With the recent approval of breakthrough drugs for the treatment of Hepatitis C over the past few years, standards of treatment for Hepatitis C are evolving rapidly. The most recent drugs, Sovaldi, Olysio, Harvoni, and Viekira Pak have fewer adverse side effects, are predicted to attain the desired sustained virological response levels in 90% of patients, and are much more expensive. In late January 2016, the FDA approved Zepatier, another drug that can be used for treatment of Hepatitis C and does not require concurrent treatment with interferon. The FY 2014-FY 2015 base period now includes approximately 18 months of Hepatitis C treatment experience since the approval of Sovaldi in early December 2013.

The DMAS Pharmaceutical and Therapeutics Committee initial recommended treatment protocols for Sovaldi and Olysio at its meeting in April 2014. Approvals and duration of treatment approval were dependent on genotype, treatment naïve or experienced, and the extent of liver damage (Metavir Score of F3 or greater). In addition, “Patient has abstained from the use of illicit drugs and alcohol for a minimum of three (3) months as evidenced by negative urine confirmation tests in each of the two months immediately prior to therapy.” The proposed protocols were similar to protocols approved by other Medicaid agencies and commercial insurers and those recommended by the California Institute for Clinical and Economic Review in 2014.

Both the Centers for Disease Control and CMS recently recommended protocols that increase the proportion of individuals being treated with drug therapies. The DMAS Pharmacy and Therapeutics Committee met in April 2016 and revised the state Medicaid treatment protocol. The revised treatment protocol applies to patients 18 years or older. As under the current protocol, the patient must be evaluated for current history of substance and

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alcohol abuse and level of kidney and liver impairment. Those with Metavir score of F2 or greater may be approved for drug therapy. Such documentation is not required if the patient 1) has a comorbid disease including HIV, hepatitis B or serious extra hepatic manifestations, 2) has renal failure, is on dialysis or has a liver transplant or 3) is diagnosed with Genotype 3 hepatitis C. If patient's life expectancy is less than a year, they do not qualify for hepatitis C drug therapy treatment.

Analysis of the historical data indicated that approximately 4.0% of the adult population was tested for the disease, over 8,300 LIFC adult and ABAD members have a diagnosis of Hepatitis C, and of those, approximately 4.0% have undergone drug therapy.

The Hepatitis C Drug treatment adjustment is developed by applying estimates of increases in Hepatitis C testing, identification of new cases, and increases in the frequency of drug treatment using the new drug regimens. The estimated increase in the percentage undergoing drug therapy is based upon identification of new treatment cases in the post FY 2015 period, with run out through February 2016. The number of new cases in the run out is annualized and compared to the actual number of cases with treatment in FY 2015. If the annualized cases with drug therapy in the run out period is less than the number of treated cases in FY 2015, the value is set to 0%. Then, using estimates of the proportion of the population by Hepatitis C infection, by fibrosis stage and age group,<sup>3</sup> factors are applied to estimate the increase in the percentage of the diagnosed population that is expected to receive drug therapy because of the change in the treatment protocol. The cost of the new Hepatitis C drug therapy is estimated to average \$90,000 per person, or approximately \$13,500 more than the \$76,477 average cost of drug therapy at the end of the period in the base data.

The calculation of the additional cost of hepatitis C treatment is presented in Exhibit 2g. The increase is converted to a percentage adjustment to total claims in the pharmacy service category, and ranges from 0.2% for LIFC Child to 6.7% for ABAD Adult. The adjustment is added in Exhibits 4a to 4b 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, provider incentive programs, and/or alternative payment models. 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.

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<sup>3</sup> McGarry, L. et al. *Economic Model of a Birth Cohort Screening Program for Hepatitis C Virus*. *Hepatology*, Vol 55, no.5, 2012

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The estimated weighted average value of the case management and provider incentive programs paid outside of the encounter data is \$1.77 PMPM, or 0.16% of the weighted average of the medical cost component of the LIFC and ABAD 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 4b.

### *ER Triage adjustment*

The 2015 General Assembly final Budget conference report eliminated ER triage for physician services. DMAS FFS policy had applied ER Triage review only to Level III ER claims. If a case was determined to have insufficient documentation of medical necessity for an emergency, DMAS could reduce the physician payment to an all-inclusive rate of \$22.06 for the code 99283 instead of paying the physician fee of \$43.54 plus ancillaries. Eliminating the ER Triage review increases the Level III ER payment to physicians by the difference in the physician fee plus the average amount of ancillary services billed on those claims.

PwC prepared an estimate of the payment increase based upon review of historical Level III ER claims paid at the ER Triage rate.

The ER Triage adjustment reflects the additional amount estimated to cover the cost of discontinuing Level III Triage review and paying such claims at the average fee for CPT code 99283, plus the average of the ancillary payments that are associated with the claim. The historical base data was analyzed by health plan to identify the number of Level III ER claims paid at the ER Triage level and was re-priced to reflect each plan's average cost of a Level III professional claim paid in full. For Level III claims for LIFC and ABAD, this is approximately \$1.5 million per year. Plan payment of the physician fee varied and the average of \$43.65 is slightly higher than the DMAS Medicaid fee schedule.

Approximately 81.0% and 13.4% of the Level III claims paid as ER Triage were for services to the LIFC and ABAD populations, respectively. The paid amount of these claims is increased to the weighted average of the plan professional fee payment and then calculated as a percentage of the Professional-Evaluation and Management service line.

The calculation of the additional cost is presented in Exhibit 2i. The adjustment is added in Exhibits 4a to 4b under the column labeled "Policy and Program Adjustments."<sup>4</sup>

### *RBRVS rebasing adjustment*

Each year DMAS adjusts physician rates consistent with the Medicare Resource Based Relative Value Scale update in a budget neutral manner based on funding. Previously, the update was based solely on DMAS FFS data. Plans reported that the rebasing is not cost neutral to their operations and that the impact on them varies. Last year the DMAS update used both FFS and MCO data. For the last two years of rate development, the DMAS analysis has used both FFS and the MCO data, as repriced to the DMAS physician fee schedule. Claims covered

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<sup>4</sup> Level III adjustment for LIFC and ABAD is estimated at \$1.47 million annualized value and at \$1.55 million across all programs, including AA/FC, ALTC/HAP and FAMIS.

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all professional providers, including physicians, nurse practitioners, psychologists, therapists, opticians, and federally qualified health centers and the full range of CPT codes from 10000 to 99499. The new physician rates for FY 2017 resulted in a -0.17 percent reduction to the MCO experience and a 0.63% increase to the FFS experience. Other codes, such as J codes for drugs administered in an office setting, that are grouped in the professional service categories, are excluded from the adjustment.

The managed care professional fee RBRVS is shown in Exhibit 2j. The adjustment is added in Exhibits 4a to 4b under the column labeled "Policy and Program Adjustments."

### ***Projected Benefit Cost Trends: IBNR and trend applied to LIFC and ABAD encounter data***

The base period data reflects experience in the Virginia Medallion 3.0 program during FY 2014 through FY 2015. These data must be adjusted to reflect the contract period of FY 2017 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). Unless otherwise indicated below, trend was based on 6 month rolling average.

Trend adjustments are applied to move the historical data from the midpoint of the data period (July 1, 2014) to the midpoint of the contract period (January 1, 2017), or 30 months. Data period trend for these groups are developed from a regression analysis on the 24 months of historical Virginia health plan data with run-out through October 2015 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 2012, the beginning of FY 2013, through June 2015, or 36 months with run out through February 2016. Because we now have three years of experience, data used for contract trend development now includes the FFS Far Southwest LIFC and ABAD data.

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. Due to the robustness of the



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data (both the population size and the long data period) and the maturity of the program, development of trend for FY 2017 primarily relied on the regression analysis subject to the adjustments described below.

Pharmacy trend estimates rely upon the standard models, but the LIFC Adult and ABAD pharmacy trend reflects adjustments for drugs used to treat Hepatitis C. Beginning February 2014 total pharmacy trend shows a significant step up in costs reflecting the introduction of Hepatitis C treatment with Sovaldi and Olysio. The upward trend continues consistent with the later approval of Harvoni. Because of this, two adjustments are made to LIFC Adult and ABAD pharmacy trend: 1) drug costs observed in the data due to Hepatitis C treatment changes are removed prior to estimating the regression and 2) an adjustment to base costs to reflect Hepatitis C treatment costs as of the end of the data period rather than the average cost over the base period.

We adjusted the pharmacy prior data period, July 2013 to January 2014, with an increase in the PMPM that reflects the difference in average PMPM pre and post usage availability of the new Hepatitis C regimens. This change was applied to the relevant months in the data period pharmacy trend for the LIFC Adult and the ABAD populations. For LIFC Adult, \$2.76 PMPM and for ABAD, \$9.23 PMPM is added to the trend data used in the regression models in each month, and the regression is recalculated. The effect is to dampen the data period unit cost trend calculated using the original claims data.

The equivalent of the dollars added to the data trend model are also added to the base data in the Exhibit 4 rate cell calculations under the column "Base Claims Redistribution and Adjustments FY14-FY15". Approximately \$1.7 million is added across the LIFC Adult rate cells and \$4.7 million across the ABAD rate cells. This is a 0.8% increase to the pharmacy base claims dollars.

The contract period pharmacy trend is calculated excluding the Hepatitis C drug therapies. In conjunction with the separate Hepatitis C adjustment, we believe that this adequately accounts for expected pharmacy costs in FY 2017. Pharmacy reinsurance also protects plans from unexpected pharmacy costs.

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 3.0 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 2012, the beginning of FY 2013, to February 2016. 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 cell, those Ages 6-14, increased. We also include an age-gender adjustment for LIFC Adult and ABAD. For LIFC Adult, the risk mix for all services combined increased 1.0% from July 2012 to February 2016. For ABAD, the adjustment for all services combined increased 2.2% from July 2012 to February 2016. Because they are applied as the reciprocal, the negative age-gender adjustment increases the PMPM values and the positive age-gender adjustment reduces the data and contract period PMPM values that are evaluated for trend.

<b>Table 3</b>						
<b>Estimated Change in Age-Gender Mix : July 2012 to October 2015</b>						
<b>AID Group</b>	<b>IP Med/Surg &amp; Psych</b>	<b>OP/HH</b>	<b>Prof</b>	<b>Pharmacy</b>	<b>Other</b>	<b>All Services</b>
LIFC Child	-4.5%	-1.2%	-2.0%	2.5%	-0.5%	-1.5%
LIFC Adult	-0.2%	0.3%	-1.0%	2.2%	-0.4%	0.2%
ABAD	3.5%	1.8%	-0.3%	2.6%	1.6%	2.2%

In addition to the age-gender adjustments, the trend models apply an adjustment to offset the impact of increases or decreases to services that are already reflected in the adjustments in Exhibits 2.

Hospital Inpatient Med/Surg data and contract period trend were modified to reflect the unit cost and rebasing adjustments included in Exhibit 2c. The adjustment applied to inpatient hospital is the same for LIFC Child, LIFC Adult and ABAD. It is presented in the following table.

<b>Table 4</b>		
<b>Summary of Adjustments to Trend</b>		
<b>Service</b>	<b>Time Period</b>	<b>Adjustment</b>
Inpatient Hospital	July 2012 – June 2013	0.975
	July 2013 – June 2014	0.931

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

In the MCO trend Exhibits 3a to 3c, 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 2j, which are summarized in column two. This is for informational 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. Values are incorporated as derived from the data and contract period trend models. For most trends, we use 6-month rolling averages. Because of seasonality, LIFC Child pharmacy trend uses the 12-month rolling average.

The weighted average data period trend is 6.8% for the LIFC Child, -0.5% for LIFC Adult, and 4.8% for ABAD. For LIFC Child, the increases are driven by a combination unit cost and utilization trend. LIFC Adult data trend shows a mix – there are unit cost decreases in professional and other service cost trend and utilization decreases

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in inpatient hospitals, outpatient hospital, and prescription drug. For ABAD, some of the trend increase is utilization, but we observe a substantial cost component for both inpatient hospital, practitioner, and pharmacy. Since the data used in this data period analysis has run-out through October 2015, 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 1.0%.

For the contract period, any negative service line trend supported by the analysis of the July 2012 to December 2015 trend with run out to February 2016 is limited to 0.0%. Final ABAD rates use a 12-month rolling average for Inpatient Med/Surg contract period trend rather than the 6-month rolling average results. Using these values, the contract period trend shows modest annual rates of increase. The weighted average annualized MCO contract period trend for LIFC Child is 3.4%, LIFC Adult is 1.2%, and ABAD is 3.7%. Contract trend is applied for 18 months, to the midpoint of the contract period.

The applied trend factors are shown in Exhibit 3a for LIFC Child Under 21, Exhibit 3b for LIFC Adult 21 and Over, and Exhibit 3c for ABAD. These trend and IBNR factors are applied to the historical data in Exhibits 4a to 4b by applicable service category.

### *Projected Non-Benefit Costs: 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 2015 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 the health plan audits. The administrative expense also excludes payment of any health insurer fee related to the DMAS line of business, which were included in a rate adjustment for the FY 2015 capitation rates. The adjusted value 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 DMAS managed care programs - ABAD, ALTC/HAP, LIFC Child, LIFC Adult, FAMIS, FAMIS MOMS, and Adoption Assistance/Foster Care using the ratio of the adjusted and trended base medical expense PMPM for each aid category. The resulting CY 2015 administrative cost ranges from \$11.84 PMPM for LIFC Child to \$80.22 PMPM for ABAD 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 2017 contract period. The salary component is trended using the Bureau of Labor Statistics 2015 calendar year employment cost trend for total compensation, private industry, management, business and financial services. The non-salary

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administrative component and the Claims Adjustment Expense components are trended using the 2015 calendar year Consumer Price Index for All Urban Consumers (CPI-U). The trended administrative PMPM ranges from \$12.14 for LIFC Child to \$82.22 for ABAD.

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 1.51 average claims PMPM for LIFC Child to 11.24 average claims PMPM for the ABAD population, with an overall average of 2.5 claims across all program categories, including Medallion 3.0, ALTC, Adoption Assistance/Foster Care and FAMIS and FAMIS MOMS. This reallocation increases the LIFC trended administrative PMPM and decreases the ABAD administrative PMPM.

The reallocated administrative costs are compared to the weighted average of the medical component of the FY 2017 base rates to determine separate administrative allowances as a percentage of the base capitation rate. This percentage is 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 9.4% for LIFC Child, 8.8% for LIFC Adult, and 7.4% for ABAD.

A rate adjustment for the health insurance premium excise tax is not included in the administrative cost adjustment presented here. Separately, there will be a retroactive payment for the FY 2016 rate year. The September 2016 health plan assessment, a calculation based on their DMAS revenue and members in CY 2015 will not be final until August 2016 and will not be paid until September 2016. DMAS plans to make an aggregated retrospective adjustment to the FY 2016 capitation rates to reflect this cost and the applicable tax liability in late 2016.

The Consolidated Appropriations Act of 2016, Title II, § 201, Moratorium on Annual Fee on Health Insurance Providers, suspends collection of the health insurance provider fee for the 2017 calendar year. This 2017 moratorium applies to fee year 2017. Therefore, no fee will be due in fee year 2017 based on the 2016 data year. If the moratorium is not extended, an aggregated retrospective adjustment process will be used to pay the health insurer fee adjustment for the FY 2017 rates in the fall of 2018.

The administrative factor adjustment is shown in Exhibit 2k. 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 4b.

### ***Base capitation rates: LIFC and ABAD***

Rates are developed for FY 2017, from July 1, 2016 to June 30, 2017. The base capitation rates have been trended to the midpoint of the fiscal year (January 1, 2017).

The health plan base capitation rates for LIFC and ABAD as presented in the adjusted and trended claims in Exhibits 4a – 4b are shown in Exhibit 5a. Total weighted averages use the February 2016 member month distribution.

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## *Comparison of FY 2016 and FY 2017 health plan base capitation rates*

The FY 2016 rates are compared to FY 2017 rates in Exhibit 5b. The weighted average change is a 5.78% increase for ABAD, a 1.80% increase for LIFC, and an overall increase of 3.31%. Member month weighting for the draft rates uses the February 2016 enrollment. The Member Months are shown in Exhibit 5c.

## *Health plan risk adjusted capitation rates*

The Virginia Medallion 3.0 base capitation rates have been developed using health plan encounter 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 within the evaluation period.

Virginia specific relative weights are used for the CDPS assessment. This report uses the CDPS model Version 5.4 Med/Surg with Rx Virginia specific weights developed from the FY 2012 to FY 2014 encounter data that was developed for the final FY 2016 rates.

## *General overview of CDPS methodology*

CDPS scores are developed using encounter claims records from both the FFS and managed care delivery systems. Either each person enrolled in the Virginia Medicaid program that is enrolled in a managed care plan, or who could be enrolled if a plan were operational in his or her 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. Three separate models 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

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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 FY 2017 analysis builds upon the CDPS Version 5.4 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. CDPS risk adjustment is applied to the LIFC and ABAD populations. Previously, ABAD included the ALTC population, but ALTC are no longer included because they were moved to a new ALTC/HAP category as of December 1, 2014.

The CDPS relative risk scores that are applied to the revised FY 2017 base rates:

1. Use calculations based on the most recent fiscal year of both MCO and DMAS FFS data, FY 2015, 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;
5. Exclude health plan member scores in eligibility categories and regions where average monthly plan membership during the period of risk analysis is below the credibility threshold, and
6. 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. The relative risk scores for the health plan regions for the draft rates use health plan enrollment as of February 2016.

### *Health plan CDPS adjusted rates*

The FY 2017 risk adjusted rates for each health plan, effective July 1, 2016 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 in Exhibit 6 to the base capitation rates in Exhibits 5a – 5b for each geographic region. Kaiser Permanente, a new entrant into the Northern Virginia region in November 2013, is not included in the risk adjustment calculation.

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Exhibit 7g displays the regional average capitation rates with the CDPS adjustment. These rates reflect both the enrollment mix of each health plan as of February 2016 and the CDPS adjustment factors and are provided for informational purposes only.

## ***Additional adjustments***

### ***Drug reinsurance adjustment***

Beginning FY 2015, DMAS established a program to reinsure 90% of drug costs above \$150,000 per member per year. This applies to the combined cost of pharmacy prescription drugs as well as drugs administered under professional supervision in a hospital outpatient or physician office setting. The reinsurance program does not focus on one drug or a group of drugs but is designed around members with high drug costs regardless of the drugs therapy that is used. The goal is to address the high cost drug issue using financial criteria rather than drug criteria. DMAS has determined that a reinsurance program will not cover 100% of the cost. This is to provide an incentive for plans to continue to manage the appropriate use of all drugs.

The FY 2014 and FY 2015 historical data was analyzed to determine the total dollars and the number of members with drug costs in increments of \$25,000. This included outpatient prescription pharmacy drugs, specialty drugs administered in a hospital outpatient or physician office setting, or a combination of both. Results of the continuance table analysis indicated there was an increase in the dollar expenditure of those with high annual drug costs and/or the number of members during the base period for each of the three major aid group categories, LIFC Child, LIFC Adult, and ABAD. For LIFC Child, less than 70 high cost members accounted for approximately 6.9% of pharmacy and physician administered drug expenses. For LIFC Adult, there were 37 high drug cost people in the base period, who represented 1.8% of LIFC Adult drug expenditures. ABAD had the greatest number of people who met the threshold. Expenditures for 110 people were \$46 million in the two year base period, or about 7.4% of the ABAD pharmacy and J code expenditures.

The reinsurance amounts were calculated separately for LIFC Child, LIFC Adult, and ABAD for each year. This begins with the calculation of the discounted threshold, the annual drug cost, that when trended to FY 2017, would reach the \$150,000 reinsurance threshold. A 15% specialty drug unit cost trend was used as the discount rate. This 15% unit cost trend is supported by an analysis of the contract trend for specialty drugs, defined as all outpatient prescription drugs where MCO plans pay \$500 or more per prescription, while non specialty drugs showed small positive or even negative unit cost trend.

Exhibit 8a presents the steps in the reinsurance calculation and information on the number of people who met the threshold in each of the base years. For FY 2014, the dollars above the discounted threshold amounts were trended 36 months at 15% (three years to the midpoint of the FY 2017 period ended June 30, 2017). This amount is reduced by \$150,000 per person plus the additional 10% of risk that will be retained by the health plans. This is the estimate of the 90% reinsurance pool for that year. Because of the uncertainty, the number of people estimated to reach the threshold is increased by 20% and the reinsurance pool is increased by the number of additional individuals multiplied by the average cost with the applied specialty trend. The calculation is repeated

for the FY 2015 dollars above the discounted threshold amount, which is trended at 15% for 24 months (two years to the midpoint of the FY 2017 period ended June 30, 2017). The number of people estimated to reach the threshold is increased by 20% and their costs are added to the reinsurance pool. The average of the two year base period reinsurance pool is divided by the historical members in the aid category to develop each reinsurance amount PMPM.

The reinsurance amounts range from \$1.65 PMPM for LIFC Adult to \$31.47 PMPM for ABAD. These amounts will be subtracted from the health plan capitation payment for those rate cells to fund a drug reinsurance pool as required by the CMS checklist.

### *Behavioral Health Home Pilot Adjustment*

In collaboration with the Office of the Governor and in alignment with the Governor’s - A Healthy Virginia plan, DMAS and the Medallion 3.0 MCOs established behavioral health home pilot programs to coordinate care for beneficiaries who are insured through the Medallion 3.0 Medicaid program. The pilot was effective July 1, 2015. The Behavioral Health Home (BHH) pilot program includes adult members over the age of 21 who have a serious mental illness or a serious emotional disturbance. These health homes adopt a “whole person” philosophy for treatment that calls for team-based care of all primary, acute, behavioral health, and some substance abuse services. Virginia will use health homes to enhance the treatment of both mental and physical health conditions and significantly decrease the level of impairment experienced by these individuals. Five of the MCOs are participating and the pilot programs will have a presence in every major region in the state. The following table lists the BHH pilots by health plan and region.

<b>Table 5</b>		
<b>Behavioral Health Home Pilot</b>		
<b>MCO</b>	<b>BHH Model Design</b>	<b>Service Area</b>
Aetna Better Health	In-house and/or co-located partnership model of integrated care.	Richmond Region
Anthem HealthKeepers Plus	Enhanced Care Coordination (CCC model)	Richmond Region
InTotal	Case Management/Health Home model.	Northern Virginia Region
Optima	Blended model of in-house (one location), co-located and facilitated referral system to integrate care services.	Tidewater Region
Virginia Premier	Primary Care Physician (PCP) assignment to members being seen in the behavioral health home.	Far Southwest



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DMAS has budgeted for case management services for the pilot. For FY 2016, each plan received \$100,000 for its pilot in a region. For FY 2017, the case management amount is \$50,000, because the case management costs incurred from July 1, 2015 through December 31, 2015 are included in the administrative costs reported to the BOI and used in the administrative cost adjustment (Exhibit 2). The adjustment is calculated as a PMPM addition to the ABAD Adult rate cells in each health plan BHH pilot region. The adjustment in Exhibit 8b uses the projected FY 2017 ABAD adult member months for the pilot region. Under the current contract, non-traditional behavioral health services are carved out of Medallion 3.0 and administered by Magellan under an ASO arrangement. In these pilots, most plans will coordinate non-traditional behavioral health services with Magellan.

One plan, Anthem, administers and directly pays the non-traditional behavioral health services that are otherwise carved out of Medallion 3.0. In order to reimburse the plan for these services, there is a separate rate adjustment to the ABAD adult rate cells in the pilot region. This was calculated using the same historical base period, FY 2014 to FY 2015, to identify managed care members who met the pilot criteria and to match them to the historical claims for the behavioral health services that Anthem will administer. This historical data is trended using standard data period and contract period models. The trended amount, \$1,386 PMPM, is multiplied by the projected number of BHH pilot enrollees by month for each plan. Anthem enrolled their target 30 members in July 2015 and has maintained that enrollment throughout the year. The total BHH medical component dollars is divided by the projected ABAD Adult annualized member months for Anthem in the Richmond/Charlottesville region. The resulting PMPM is added to the ABAD Adult rate cells for Anthem in the pilot region.

### *Tidewater physician access adjustment*

Beginning FY2016, DMAS will pay a managed care supplemental payment for professional claims associated with physicians affiliated with a medical school in Eastern Virginia/Tidewater that is a political subdivision of the Commonwealth. This is the managed care equivalent of supplemental professional payments that have been made to Eastern Virginia Medical School for the FFS Medicaid population.

This adjustment uses professional claims in the MCO historical two-year base data (FY 2014-FY 2015) for the same physicians included in the FFS supplemental payment program. The physicians were identified using Provider NPIs. Using similar rules as the FFS supplemental payments pricing, the professional claims were re-priced to the Average Commercial Rate, defined as 137% of the CY 2016 Medicare Fee RBRVS for Virginia Rest of State. Anesthesia pricing used the claims reported units rather than the Medicare national average units. There were some non-Medicare covered services, such as child preventive care, that have RBRVS units and were re-priced by using CY 2015 RVUs with Virginia geographic factor and its conversion factor. We also applied such rules as lower payment for second surgeon and multiple procedures on same day.

This calculation assumes that the CY 2016 Medicare pricing will be used for the entire FY 2017 Medallion 3.0 rate year. We have not applied any prospective utilization and unit cost trends to the estimated supplemental payment.

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There is an estimated \$3.4 million annualized managed care supplemental payment in FY 2017 for all health plans in all aid categories. The adjustment is applied as \$1.90 PMPM for ABAD and LIFC in the Tidewater Region only. This calculation is shown in Exhibit 8c.

### *Teaching Hospital Access Adjustment*

In order to assure access to university teaching hospital and professional services, one health plan has entered into contracts that require higher payment levels than those built into the base rates. DMAS will pay a managed care supplemental payment for hospital and their staff physicians affiliated with specific hospitals as documented in their financial statements. These are payments that are not included in the historical base data presented in Exhibits 1. This adjustment is shown in Exhibit 8d.

### *Performance Incentive Award*

Beginning FY 2016, DMAS implemented a Performance Incentive Award (PIA) program. This builds upon a pilot program established in FY 2015 and is based upon criteria established by DMAS using three HEDIS measures and three administrative measures designed to measure managed care quality. The Performance Incentive Award, or penalty, will be relative to performance among the contracting health plans. The maximum amount at risk for each Contractor is 0.15% of the PMPM capitation rate and the maximum award is 0.15% of the PMPM capitation rate. Total awards for all Contractors will equal total penalties for all Contractors.

The structure of the PIA follows the HEDIS reporting year timeframe. HEDIS 2017, for instance, reflects services provided in the calendar year 2016. The three administrative measures are based on the monthly reporting deliverables received by the Department from July 1 to June 31 of each measurement year.

DMAS anticipates that Performance Incentive Award report cards for each health plan will be completed by December 31, 2016 for FY 2016. Payment or penalties pursuant to the PIA will be distributed by March 2017. This process and the schedule will recur in the following years. Therefore, the FY 2017 PIA will be complete by December 31, 2017 and payment or penalties will be distributed by March 2018.

The value of the 0.15% maximum Performance Incentive award or penalty is not reflected in the FY 2017 capitation rates because total awards for all Contractors will equal total penalties for all Contractors.

The health plan CDPS specific rates, as adjusted for removal of the drug reinsurance amount and with the addition of the Behavioral Health Home adjustment, the Tidewater Physician Access adjustment, and the Teaching Hospital Access adjustment, are shown in Exhibits 9a to 9g.

These 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 adjusted capitation rates.

The final Exhibit 10 lists the counties in each Medallion 3.0 region.

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## ***III. Adoption Assistance and Foster Care***

### ***Background***

The Medallion 3.0 program began a Foster Care Pilot in Richmond effective November 1, 2011. As of June 2013, that pilot had enrolled 152 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 was a Medallion 3.0 managed care expansion for Adoption Assistance (AA) and Foster Care (FC) children into the Tidewater region, and into Central Virginia, which includes Greater Richmond and portions of the Rural region under Medallion 3.0, in November 2013. Additional phased expansion was into Northern Virginia in December 2013, Charlottesville in March 2014, Halifax/Lynchburg in April 2014, Roanoke Alleghany in May 2014, and Far Southwest in June 2014. Therefore, FY 2015 data reflects a full year of completed AA/FC managed care expansion. As of February 2016, there were 5,750 Adoption Assistance and 4,775 Foster Children enrolled in the MCOs.

### ***Databook***

The Adoption Assistance and Foster Care databook uses MCO encounter data for the period FY 2014 and FY 2015 to develop separate rates at the statewide level. Adoption Assistance and Foster Care children enrolled in the MCOs through a phased managed care expansion over the period September 2013 to June 2014. Therefore, the MCO encounter date reflects a growing population in the first base year and the total AA/FC population for the FY 2015 period.

Adoption Assistance and Foster Care children are defined as children, up to the age of 21, who are in DESIG codes 72 (Adoption Assistance), 76 (Foster Care) or 74 (combined). Adoption Assistance and Foster Care members with TPL or residing in a psychiatric residential treatment facility are excluded from Medallion 3.0. In addition, Adoption Assistance or Foster Care children who are eligible for the Home and Community Based Service waiver, primarily the Elderly and Disabled with Consumer Direction (EDCD), are excluded from the Adoption Assistance and Foster Care rate development and are assigned to the Acute and Long Term Care (ALTC) Child category. The major services not covered by the AA/FC expansion are community mental health rehabilitation services, school-based special education services, early intervention services, and case management.

The AA/FC base period identified a monthly average of 8,600 children enrolled in the expansion with 54% in Adoption Assistance and 46% in Foster Care. Statewide, there were 10,525 children as of February 29, 2016.

Processing of the data is similar to that used for the development of the MCO base data in the existing Medallion 3.0 program. One high cost claimant accumulated more than \$1.5 million of pharmacy claims in FY 2014. These claims are redistributed across both Adoption Assistance and Foster Care and all service categories based on the underlying claims cost distribution.

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## ***Projected Costs: MCO Adoption Assistance and Foster Care legislative and program adjustments***

Legislation and policy changes in the existing Medallion 3.0 program for FY 2014 and later must be reflected in the development of per capita rates, as the data used to develop rates does not fully include the effect of those changes.

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

In general, the methodology for Adoption Assistance and Foster Care adjustments is similar to those developed for the Medallion 3.0 population, specifically LIFC Child where appropriate. Actual adjustment values may differ where the adjustment is developed using AA/FC MCO data instead of existing Medallion 3.0 encounter data, but some of the adjustments use factors for Medallion 3.0 encounter 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 3.0 MCO or LIFC Child population are described. A summary of the adjustments for the MCO Foster Care and Adoption Assistance program is in the following table:

**Table III.1****Medallion 3.0 Adjustment Methodology Used in MCO Adoption Assistance/ Foster Care Rates**

<b>Medallion 3.0 Exhibit Number and Adjustment Name</b>	<b>AA/FC</b>	<b>Adoption Assistance/Foster Care Values</b>
2a Pharmacy Adjustment	2a	2a: -1.6% AA / -1.4% FC
2b Exempt Infant Formula Carveout	2b	2b: -2.1% AA / -1.7% FC
2c.1 Hospital Inpatient Adjustment	2c	2c.1: -1.2% AA and -1.3% FC IP Med/Surg and -20.2% IP Psych both AA and FC
2c.2 Hospital Inpatient Adjustment-CHKD	2c	2c.2: -0.095% IP Med/Surg AA -0.070% IP Med/Surg FC
2d Freestanding Psychiatric Hospital Adjustment	2d	2d: 2.1% AA / 2.1% FC
2e.1 Hospital Outpatient Adjustment	2e	2e.1: 1.10% ER and 0.96% Other AA 1.13% ER and 1.05% Other FC
2e.2 Hospital Outpatient Adjustment-CHKD	2e	2e.2: 0.09% ER and 0.36% Other AA 0.04% ER and 0.19% Other FC
2f DME Fee Adjustment	2f	2f: -0.8% AA / -1.6% FC
2g Hepatitis C Adjustment	2g	2g: 0.002% AA /0.026% FC
2h Provider Incentive	2h	2h: 0.2% AA / 0.2% FC Same as LIFC Child
2i Emergency Room Triage Adjustment	2i	2i: 0.16% AA / 0.09% FC
2j Resource Based Relative Value Scale Adjustment	2j	2j: -0.15% AA/FC
2k MCO Administrative Cost	2k	2k: 7.4% AA / 8.2% FC

### *Pharmacy adjustment*

The outpatient prescription drug adjustment is based on MCO AA/FC data, taking into consideration aspects of pharmacy management reported by the health plans. The calculation uses the MCO data net cost and subtracts out the estimated change in discount and health plan rebates to determine an adjusted PMPM.

Review of the Adoption Assistance and Foster Care brand-generic mix shows very high use of generics and a higher proportional usage than observed in the LIFC Child population. In the FY 2014 to FY 2015 period, over 88% of the prescriptions were for generic drugs.

Overall, pharmacy services represented approximately 48% of the total AA base period costs and 34% of total FC base period costs. MCO Adoption Assistance and Foster Care pharmacy utilization rates are up to two times

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higher than LIFC Child and unit cost is about twice as high. The AA pharmacy utilization increased in FY 2015, but is still about 20% lower than the FY 2015 FC pharmacy utilization. However, the AA/FC MCO expansion relies on less than two full years of data and experience may change as the program matures.

### ***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.

This adjustment is shown in Exhibit 2b and is applied to the full base period DME/Supplies service line in AA/FC Exhibit 4a and 4b under the column labeled "Policy and Program Adjustments."

### ***Projected Non Benefit Costs: MCO plan administrative adjustment***

The Adoption Assistance and Foster Care MCO plan administrative adjustment is calculated using the same methodology described for the LIFC and ABAD populations. These programs are included when the CY 2015 average administrative dollar PMPM is apportioned across the eligibility groups enrolled in the Virginia DMAS managed care programs and described in Section II under the same subheading.

The resulting CY 2015 administrative cost was \$22.86 PMPM for Adoption Assistance and \$31.40 PMPM for Foster Care and is the sum of lines 1 and 2 of the administrative adjustment exhibit. Trending the separate administrative expense and salary components increases the value to \$23.43 PMPM for Adoption Assistance and \$32.18 PMPM for Foster Care.

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. The reallocated administrative costs are compared to the weighted average of the medical component of the FY 2016 AA and FY 2016 FC 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 7.4% for Adoption Assistance and 8.2% for Foster Care.

As for LIFC and ABAD, a rate adjustment for the health insurance premium excise tax is not included in the administrative cost adjustment presented here. An aggregated retrospective adjustment process will pay the health insurer fee adjustment for the FY 2016 rates in the fall of calendar year 2016.

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## ***Projected Benefit Cost Trends: MCO Adoption Assistance and Foster Care trend and IBNR adjustments***

The small AA/FC population and the phased expansion process produced unreliable results when trend models were developed using the Adoption Assistance and Foster Care data. As a result, the applied data period and contract period trend for the draft rates uses the factors developed for the LIFC Child population. This therefore incorporates the age-gender factors and the hospital inpatient adjustment that is described in Section II. The separate service trend factors are applied to the distribution of those services in the historical AA and FC experience. The trend factors are presented in Exhibits 3a and 3b.

Incurred But Not Reported (IBNR) completion factors in the first column of AA/FC Exhibits 3a and 3b are based on the LIFC Child historical data and are applied to the total claims in the first column of AA/FC Exhibits 4a and 4b, 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 October 2015 or four months past the end of the data reporting period.

The second column of AA/FC Exhibits 3a and 3b provides information on the cumulative impact of the policy and program adjustments in AA/FC Exhibits 2a - 2j. This is for informational 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 Adoption Assistance population is 6.8% and for Foster Care is 6.4%. The contract period has a weighted average of 4.3% for AA and 3.9% for FC.

The resulting trend factors are shown in AA/FC Exhibits 3a and 3b. These trend and IBNR factors are applied to the historical data in Exhibits 4a and 4b by applicable service category.

The administrative factor is then applied to the medical component of the capitation rate to produce the statewide MCO Foster Care and Adoption Assistance rate.

## ***Base capitation rates: Adoption Assistance and Foster Care***

The adjusted and trended MCO rates of \$339.21 for Adoption Assistance and \$470.17 for Foster Care are shown in Exhibits 4a and 4b and summarized in Exhibit 5. The MCO rate is compared to the FY 2016 Foster Care and Adoption Assistance rates that were developed using a combination of FFS and MCO data. The FY 2017 Adoption Assistance rate is 0.6% lower and the FY 2017 Foster Care rate is 5.4% lower than the FY 2016 blended rates. For information purposes, the FY 2017 rates are also compared to the FY 2016 value of the MCO component of the blended Adoption Assistance and Foster Care rates.

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## *Drug reinsurance adjustment*

The drug reinsurance adjustment was calculated for the populations similarly to the process described for Medallion 3.0. Amounts were calculated separately for MCO AA, MCO FC for each year.

Exhibit 6 presents the steps in the reinsurance calculation and information on the number of people who met the threshold in each of the base years. For FY 2014, the dollars above the discounted threshold amounts were trended 36 months at 15% (three years to the midpoint of the FY 2017 period ended June 30, 2017). This amount is reduced by \$150,000 per person plus the additional 10% of risk that will be retained by the health plans. This is the estimate of the 90% reinsurance pool for that year. Because of the uncertainty, the number of people estimated to reach the threshold is increased by 20% and the reinsurance pool is increased by the number of additional individuals multiplied by the average cost with the applied specialty trend. The calculation is repeated for the FY 2015 dollars above the discounted threshold amount, which is trended at 15% for 24 months (two years to the midpoint of the FY 2017 period ended June 30, 2017). The number of people estimated to reach the threshold is increased by 20% and their costs are added to the reinsurance pool. The average of the two year base period reinsurance pool is divided by the historical members in the aid category to develop each reinsurance amount PMPM.

The reinsurance amounts are \$7.68 PMPM for AA and \$11.63 PMPM for FC. A single hemophiliac child who has incurred more \$1.5 million of pharmacy expenses in FY 2014 explains the high value for the FC population. These amounts will be subtracted from the health plan capitation payment for those rate cells to fund a drug reinsurance pool.

## *Adoption Assistance and Foster Care rates*

In Exhibit 7, the AA and FC rates are adjusted to remove the drug reinsurance amount. The resulting rate is \$331.51 for Adoption Assistance and \$458.54 for Foster Care.

These FY 2017 rates are compared to the FY 2016 rates, which were based upon a combination of FFS and MCO and did not include a drug reinsurance adjustment. After the drug reinsurance adjustment, the FY 2017 Adoption Assistance rate is 0.6% lower and the FY 2017 Foster Care rate is 5.4% lower than the FY 2016 rates.

The Adoption Assistance and Foster Care program will be included in the calculation of the FY 2017 Performance Incentive Awards. The value of the 0.15% maximum Performance Incentive Award or penalty is not reflected in the FY 2016 capitation rates because total awards for all contractors will equal total penalties for all contractors.

Exhibit 8 displays the Adoption Assistance and Foster Care enrollment in the health plans as of February 2016.



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## ***IV. ALTC and Health and Acute Care Program***

### ***Background***

Effective December 1, 2014, DMAS enrolled all Medicaid Fee for Service eligibles that are in the Elderly or Disabled with Consumer Direction (EDCD) waiver and who otherwise meet the criteria for enrollment into managed care into the Medallion 3.0 MCOs. This expansion was named Health and Acute Care Program (HAP). The HAP population was combined with the existing Acute and Long-Term Care (ALTC) waiver population that was enrolled in the MCOs and the combined population is referred to as the ALTC/HAP population in this report. As of December 1, 2014, new rate cells for the combined ALTC/HAP group were established.

The ALTC population consists of MCO members who become eligible to participate in selected waivers and who remain in Medallion 3.0 for coverage of acute care services. The waivers include EDCD, plus the Intellectual Disabilities (ID) waiver, the Day Support waiver, and the Individual and Family Developmental Disabilities Support (IFDDS or DD) waiver for those with physical or intellectual disabilities. The MCO ALTC population had been primarily assigned to ABAD aid code categories.

Prior to the rate change effective in FY 2015, the Medallion 3.0 rate setting evaluated the ABAD ALTC population historical base, developed adjustments, and blended the projected ABAD ALTC capitation rate with those for the general ABAD population. ABAD ALTC members are higher cost and had been growing as a proportion of all Medallion 3.0 ABAD. Absent the ALTC/HAP expansion, ABAD ALTC was projected to be 6.25% of the ABAD population by the end of FY 2015. Up until the expansion, the small LIFC ALTC waiver population had not been analyzed separately and had been included in the LIFC capitation rate development. The ABAD ALTC and the LIFC ALTC populations are combined for the ALTC/HAP population rate development.

### ***Databook***

Capitation rates for the ALTC/HAP Expansion are developed by analyzing and adjusting the historical eligibility and claims experience for those who are in MCO ALTC after the FFS HAP population was transitioned to the MCOs. The one year ALTC/HAP post expansion period is from December 2014 to November 2015.

These Medallion 3.0 rates are developed to be consistent with the requirements of Medicaid managed care rate setting and meet the criteria for actuarial soundness.

Capitation rate cells for Medallion 3.0 ALTC are statewide and vary based on age. ALTC Child rates are developed for all waiver populations up to age 21 and ALTC Adult rates are developed for those 21 to 64. There is no rate cell distinction by aid code category; the ALTC population is defined by eligibility for the waiver services, regardless of whether they are categorized in a LIFC, ABAD, Foster Care, or another aid code. Because of the relatively small population, the ALTC Child and Adult rates do not vary by region. These rate cell categories may be re-evaluated in the future if there is substantial growth in the program.

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Processing of the data is similar to that used for the development of the MCO base data in the Medallion 3.0 program. Claims were excluded for services that will not be the responsibility of the MCO. The major exclusion is the cost of the EDCD and other waiver services. These will continue to be paid through the Medicaid FFS program.

The ALTC/HAP post expansion base period data identified a monthly average of approximately 9,000 people who receive waiver services, and continues to increase. By February 2016, there were nearly 9,200 ALTC members. The majority was eligible for the EDCD waiver and the remainder was in the developmental disability waivers, primarily the ID waiver. Approximately 41% are children and 59% are adult.

Exhibits 1a present the post expansion historical claims data for the ALTC/HAP Child and Adult population with EDCD or ID related waiver who were enrolled in MCOs. The column labeled FY 2015 includes experience for the latter part of FY 2014, from December 2014 to June 2015. The Post FY 2015 period includes experience from July 0215 to November 2015.

### ***Projected Benefit Costs: ALTC/HAP program adjustments***

Legislation and policy changes in the Medallion 3.0 program for FY 2013 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 Exhibits 1a is adjusted by the policy and program factors described in this section (Exhibits ALTC 2a to 2i) and the Trend and IBNR factors (Exhibits 3a and 3b).

The methodology for ALTC/HAP adjustments is the same as that used for the Medallion 3.0 program. The percentage or PMPM adjustment values may differ from the Medallion 3.0 where the adjustment is based on the ALTC/HAP post expansion data. All of the adjustments are reflected in the column "Policy and Program Adjustments" in Exhibits 4a. Only those adjustments that differ from the ones used for Medallion 3.0 MCO ABAD or LIFC are described.

A summary of the adjustments for the MCO ALTC population is presented in the following table:

**Table IV.1  
Medallion 3.0 Adjustment Methodology Used in MCO ALTC Adjustment**

<b>Medallion Exhibit Number and Adjustment Name</b>	<b>ALTC</b>	<b>ALTC Values</b>
2a Pharmacy Adjustment	2a	2a: -1.7% Child and -1.3% Adult
2b Exempt Infant Formula Carveout	2b	2b: -1.5% Child and N/A Adult
2c.1 Hospital Inpatient Adjustment	2c.1	2c: -1.5% IP Med/Surg and 22.7% IP Psych
2c.2 Hospital Inpatient Adjustment - CHKD	2c.2	2c: -0.0129% IP Med/Surg Child and N/A Adult
2d Freestanding Psychiatric Hospital Adjustment	2d	2d: 0.4%
2e Hospital Outpatient Adjustment	2e.1	2e: 1.14% OP – ER and 1.12% OP - Other
2e Hospital Outpatient Adjustment - CHKD	2e.2	2e: 0.11% OP – ER and 0.16% OP - Other Child N/A Adult
2f DME Fee Adjustment	2f	2f: 0.0% Not applicable
2g Hepatitis C Treatment Adjustment	2g	2g: 6.7% uses ABAD value
2h Provider Incentive Adjustment	2h	2h: 0.1% ALTC
2i Emergency Room Triage Adjustment	2i	2i: 0.2% ALTC
2j Resource Based Relative Value Scale Adjustment	2j	2j: -0.15% ALTC
2k MCO Administrative Cost	2k	2k: 6.1% ALTC

### *Hepatitis C treatment adjustment*

The adjustment has not been updated for the post-expansion ALTC time period and the adjustment uses the ABAD population values.

This is presented in Exhibit 2g. The percentage adjustment to total claims in the pharmacy service category is 6.7% for both ALTC/HAP Child and ALTC/HAP Adult. The adjustment is added in Exhibits 4a under the column labeled “Policy and Program Adjustments.”

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## ***Projected Non Benefit Costs: ALTC/HAP plan administrative adjustment***

The ALTC/HAP plan administrative adjustment is calculated using the same methodology described for the LIFC and ABAD populations. This program was included when the CY 2015 average administrative dollar PMPM was apportioned across the eligibility groups enrolled in the Virginia DMAS managed care programs using the ratio of the adjusted and trended base medical expense PMPM for each aid category.

The resulting CY 2015 administrative cost was \$154.09 PMPM for ALTC/HAP and is the sum of lines 1 and 2 of the administrative adjustment exhibit. Trending the separate administrative expense and salary components increases the value to \$157.93 PMPM.

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 reduces the administration adjustment to \$105.26 PMPM. The reallocated administrative costs are compared to the weighted average of the medical component of the FY 2017 ALTC/HAP 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 6.1% for ALTC.

As for LIFC and ABAD, a rate adjustment for the health insurance premium excise tax is not included in the administrative cost adjustment presented here. An aggregated retrospective adjustment process will be used to pay the health insurer fee adjustment for the FY 2016 rates in the fall of calendar year 2016.

## ***Projected Benefit Cost Trends: ALTC trend and IBNR adjustments***

Because the one year ALTC/HAP post expansion period is too short to develop trend, data period and contract period trend apply the service level trends developed for the ABAD population, weighted by the service distribution PMPM of the ALTC/HAP Child and Adult populations, to develop an All Services data period and contract period trend. We used the monthly historical ABAD expenditures for FY 2014 and FY 2015 with run-out through October 2015 to develop the data period trend. Contract period trend was evaluated using ABAD monthly health plan expenditures for July 2012 through December 2015, with run out through February 2016.

Incurred But Not Reported (IBNR) completion factors in the first column of ALTC Exhibits 3a and 3b are based on the ALTC/HAP historical data and are applied to the total claims in the first column of Exhibits 4a, 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 February 2016, or two months past the end of the data reporting period. The second column of Exhibits 3a and 3b provides information on the cumulative impact of the policy and program adjustments in ALTC/HAP Exhibits 2a - 2j. This is for informational purposes and should be evaluated in conjunction with the IBNR and applied trend.

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Utilization and cost trend are presented separately for the data period and as a combined PMPM trend for the contract period. Overall, the data periods trend using the ABAD service values weighted by the service distribution in the ALTC/HAP population is 4.4% for Child and 4.0% for Adult. The ALTC/HAP Child contract period trend is positive at 3.5% for Child and 3.0% for Adult.

The resulting trend factors are shown in ALTC/HAP Exhibits 3a and 3b. These trend and IBNR factors are applied to the historical data in Exhibits 4a and 4b.

## ***Capitation rates for ALTC and HAP***

The resulting rates of \$1,946.43 for ALTC Child and \$2,513.63 for ALTC Adult are shown in Exhibit 5. The FY 2017 ALTC Child rate is 4.09% higher than the ALTC Child blended PMPM in the FY 2016 rates and the FY 2017 ALTC Adult rate is 2.84% higher than the ALTC Adult blended PMPM of the FY 2016 rates. For comparison purposes, Exhibit 5 also presents the comparison to the ALTC MCO only component that was used in the blending for the FY 2016 rates.

## ***Additional Adjustments***

### ***Drug reinsurance adjustment***

DMAS will reinsure 90% of drug costs above \$150,000 per member per year. As in the LIFC and ABAD rate development, this will apply to the combined cost of pharmacy prescription drugs as well as the cost of drugs administered under professional supervision in a hospital outpatient or physician office setting.

The one year ALTC/HAP post expansion historical data was analyzed to determine the total dollars and the number of members with drug costs in increments of \$25,000. This included outpatient prescription pharmacy drugs, specialty drugs administered in a hospital outpatient or physician office setting, or a combination of both. For ALTC/HAP Child, high cost members account for approximately 25.5% of pharmacy and physician administered drug expenses. For ALTC/HAP Adult, they represented 18.9% of drug expenditures. The reinsurance amounts were calculated separately for ALTC/HAP Child and Adult. This begins with the calculation of the discounted threshold, the annual cost drug cost, that when trended to FY 2017, would reach the FY 2016 \$150,000 reinsurance threshold. A 15% specialty drug unit cost trend was used as the discount rate. In general, members with \$125,000 to \$150,000 in annual drug costs during the base period were estimated to meet the \$150,000 threshold for FY 2017. As a conservative adjustment, the number of people projected to meet the drug insurance threshold was increased 20%.

Exhibit 6 presents the steps in the reinsurance calculation and information on the number of people who met the threshold in each of the base years. For the December 2014 to November 2015 base period, the dollars above the discounted threshold amounts were trended 19 months at 15% (to January 1, 2017). This amount is reduced by \$150,000 per person plus the additional 10% of risk that will be retained by the health plans. This is the estimate of the 90% reinsurance pool for that year. Because of the uncertainty, the number of people estimated to reach the threshold is increased by 20% and the reinsurance pool is increased by the number of additional individuals multiplied by the average cost with the applied specialty trend.

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The ALTC/HAP reinsurance amounts are \$95.25 PMPM for Child and \$25.16 PMPM for Adult. This calculation is shown in Exhibit 6 and the ALTC rates, as adjusted for removal of the drug reinsurance amount, are shown in Exhibit 7.

### ***ALTC/HAP Net of Reinsurance Rates***

The ALTC base rates from Exhibits 5 are carried forward to Exhibit 7 and the drug reinsurance amounts from Exhibit 6 is subtracted. For Child, the rate net of reinsurance will be \$1,851.18 PMPM, which reflects the \$95.25 PMPM reduction from drug reinsurance. For Adult, the rate will be \$2,288.47 PMPM, which reflects the \$25.16 PMPM reduction from drug reinsurance.

Compared to the FY 2016 blended ALTC/HAP payment without reinsurance, the FY 2017 ALTC Child rate is a 1.0% decrease and the FY 2017 ALTC Adult rate is a 1.8% increase. For information purposes, Exhibit 7 also presents the comparison to the ALTC MCO only component that was used in the blending for the FY 2016 rates.

The ALTC/HAP program will be included the calculation of the FY 2017 Performance Incentive Awards. The value of the 0.15% maximum Performance Incentive award or penalty is not reflected in the FY 2017 capitation rates because total awards for all Contractors will equal total penalties for all contractors.

For informational purposes, the February 2016 MCO ALTC population member months are presented in Exhibit 8.

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	118,142	132,805						
<b>Service Type</b>								
DME/Supplies	\$368,157	\$391,967	\$3.12	\$2.95	750	692	\$49.87	\$51.16
FQHC / RHC	\$824	\$2,721	\$0.01	\$0.02	2	4	\$43.39	\$64.78
Home Health	\$28,828	\$33,739	\$0.24	\$0.25	9	8	\$327.59	\$374.88
IP - Maternity	\$0	\$819	\$0.00	\$0.01	0	0	-	\$819.28
IP - Newborn	\$16,455,819	\$19,698,088	\$139.29	\$148.32	478	443	\$3,497.96	\$4,017.56
IP - Other	\$3,259,606	\$3,225,592	\$27.59	\$24.29	41	41	\$8,028.59	\$7,183.95
IP - Psych	\$205	\$133	\$0.00	\$0.00	0	0	-	-
Lab	\$251,635	\$450,172	\$2.13	\$3.39	1,766	2,239	\$14.47	\$18.17
OP - Emergency Room & Related	\$1,654,646	\$1,726,218	\$14.01	\$13.00	1,069	933	\$157.19	\$167.12
OP - Other	\$1,154,961	\$1,371,795	\$9.78	\$10.33	420	428	\$279.45	\$289.77
Pharmacy	\$3,072,141	\$2,215,897	\$26.00	\$16.69	4,343	4,049	\$71.84	\$49.45
Prof - Anesthesia	\$103,852	\$124,652	\$0.88	\$0.94	54	56	\$195.21	\$202.69
Prof - Child EPSDT	\$1,028,105	\$832,437	\$8.70	\$6.27	7,314	5,562	\$14.28	\$13.52
Prof - Evaluation & Management	\$10,152,619	\$11,174,815	\$85.94	\$84.14	12,933	12,956	\$79.74	\$77.94
Prof - Maternity	\$20,629	\$120,491	\$0.17	\$0.91	3	10	\$793.42	\$1,075.82
Prof - Other	\$3,029,532	\$2,814,940	\$25.64	\$21.20	6,879	7,725	\$44.73	\$32.92
Prof - Psych	\$3,137	\$12,381	\$0.03	\$0.09	4	17	\$76.51	\$64.82
Prof - Specialist	\$528,563	\$625,492	\$4.47	\$4.71	611	590	\$87.87	\$95.80
Prof - Vision	\$180,767	\$223,002	\$1.53	\$1.68	84	107	\$218.85	\$188.03
Radiology	\$165,240	\$258,842	\$1.40	\$1.95	902	992	\$18.61	\$23.58
Transportation/Ambulance	\$462,607	\$466,894	\$3.92	\$3.52	218	99	\$215.37	\$427.95
<b>Total</b>	<b>\$41,921,872</b>	<b>\$45,771,087</b>	<b>\$354.84</b>	<b>\$344.65</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	451,555	455,223						
<b>Service Type</b>								
DME/Supplies	\$625,421	\$767,238	\$1.39	\$1.69	248	279	\$67.06	\$72.50
FQHC / RHC	\$6,028	\$7,286	\$0.01	\$0.02	3	3	\$49.01	\$65.05
Home Health	\$8,120	\$16,378	\$0.02	\$0.04	0	2	\$507.49	\$282.38
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,811,812	\$5,469,771	\$8.44	\$12.02	13	15	\$7,533.23	\$9,732.69
IP - Psych	\$39,318	\$16,101	\$0.09	\$0.04	2	0	\$553.78	\$1,006.31
Lab	\$983,635	\$1,256,332	\$2.18	\$2.76	2,009	2,207	\$13.01	\$15.01
OP - Emergency Room & Related	\$4,002,048	\$4,445,254	\$8.86	\$9.77	666	684	\$159.80	\$171.30
OP - Other	\$4,114,041	\$5,130,829	\$9.11	\$11.27	225	260	\$486.52	\$521.00
Pharmacy	\$6,514,514	\$6,848,968	\$14.43	\$15.05	4,241	4,299	\$40.83	\$42.00
Prof - Anesthesia	\$283,999	\$299,454	\$0.63	\$0.66	58	69	\$129.50	\$113.77
Prof - Child EPSDT	\$805,981	\$738,973	\$1.78	\$1.62	1,519	1,424	\$14.10	\$13.68
Prof - Evaluation & Management	\$14,635,001	\$14,465,259	\$32.41	\$31.78	5,381	5,636	\$72.27	\$67.66
Prof - Maternity	\$5,095	\$68,562	\$0.01	\$0.15	0	2	\$463.21	\$979.46
Prof - Other	\$4,092,169	\$4,795,506	\$9.06	\$10.53	2,277	2,635	\$47.75	\$47.97
Prof - Psych	\$101,276	\$104,783	\$0.22	\$0.23	43	40	\$63.14	\$69.53
Prof - Specialist	\$974,503	\$1,018,603	\$2.16	\$2.24	363	339	\$71.36	\$79.15
Prof - Vision	\$840,442	\$877,674	\$1.86	\$1.93	167	143	\$133.36	\$162.20
Radiology	\$239,814	\$311,291	\$0.53	\$0.68	327	365	\$19.48	\$22.49
Transportation/Ambulance	\$1,450,600	\$1,399,488	\$3.21	\$3.07	111	59	\$347.45	\$629.83
<b>Total</b>	<b>\$43,533,817</b>	<b>\$48,037,750</b>	<b>\$96.41</b>	<b>\$105.53</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 6-14</b>								
<b>Northern Virginia</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	623,920	671,885						
<b>Service Type</b>								
DME/Supplies	\$498,921	\$592,571	\$0.80	\$0.88	106	120	\$90.73	\$88.52
FQHC / RHC	\$4,226	\$3,839	\$0.01	\$0.01	1	1	\$56.34	\$66.20
Home Health	\$202,921	\$112,131	\$0.33	\$0.17	2	2	\$1,734.37	\$1,205.71
IP - Maternity	\$11,882	\$13,026	\$0.02	\$0.02	0	0	\$2,970.59	\$2,605.21
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,834,404	\$4,712,004	\$6.15	\$7.01	7	8	\$9,959.49	\$11,219.06
IP - Psych	\$921,569	\$1,278,386	\$1.48	\$1.90	30	38	\$591.89	\$607.60
Lab	\$1,096,860	\$1,519,731	\$1.76	\$2.26	1,490	1,672	\$14.16	\$16.23
OP - Emergency Room & Related	\$4,165,377	\$4,418,244	\$6.68	\$6.58	373	376	\$214.74	\$209.77
OP - Other	\$4,216,463	\$5,023,893	\$6.76	\$7.48	185	186	\$437.21	\$481.54
Pharmacy	\$13,482,555	\$15,670,771	\$21.61	\$23.32	3,814	3,889	\$67.98	\$71.97
Prof - Anesthesia	\$252,647	\$232,035	\$0.40	\$0.35	35	36	\$139.58	\$116.72
Prof - Child EPSDT	\$218,043	\$190,438	\$0.35	\$0.28	269	209	\$15.57	\$16.29
Prof - Evaluation & Management	\$13,391,843	\$14,241,502	\$21.46	\$21.20	3,478	3,679	\$74.07	\$69.13
Prof - Maternity	\$30,828	\$44,592	\$0.05	\$0.07	1	1	\$1,063.04	\$655.76
Prof - Other	\$5,523,461	\$5,031,236	\$8.85	\$7.49	2,037	2,256	\$52.14	\$39.83
Prof - Psych	\$933,635	\$1,007,059	\$1.50	\$1.50	271	269	\$66.23	\$66.85
Prof - Specialist	\$1,328,331	\$1,370,806	\$2.13	\$2.04	265	256	\$96.28	\$95.81
Prof - Vision	\$1,473,907	\$1,661,168	\$2.36	\$2.47	374	251	\$75.77	\$118.01
Radiology	\$480,085	\$608,586	\$0.77	\$0.91	359	401	\$25.72	\$27.11
Transportation/Ambulance	\$1,962,444	\$2,024,699	\$3.15	\$3.01	137	53	\$276.09	\$687.50
<b>Total</b>	<b>\$54,030,402</b>	<b>\$59,756,717</b>	<b>\$86.60</b>	<b>\$88.94</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 15-20 Female</b>								
<b>Northern Virginia</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	88,466	97,781						
<b>Service Type</b>								
DME/Supplies	\$75,171	\$89,234	\$0.85	\$0.91	88	91	\$115.29	\$120.59
FQHC / RHC	\$694	\$502	\$0.01	\$0.01	2	1	\$43.36	\$83.72
Home Health	\$4,484	\$3,714	\$0.05	\$0.04	1	1	\$407.63	\$309.46
IP - Maternity	\$1,830,945	\$1,993,910	\$20.70	\$20.39	81	79	\$3,061.78	\$3,086.55
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$884,347	\$787,771	\$10.00	\$8.06	15	13	\$8,188.39	\$7,431.80
IP - Psych	\$413,181	\$591,020	\$4.67	\$6.04	93	117	\$604.07	\$620.17
Lab	\$265,054	\$418,231	\$3.00	\$4.28	2,804	2,904	\$12.82	\$17.67
OP - Emergency Room & Related	\$1,530,036	\$1,516,175	\$17.30	\$15.51	734	648	\$282.71	\$287.32
OP - Other	\$1,130,857	\$1,312,511	\$12.78	\$13.42	399	401	\$383.99	\$401.63
Pharmacy	\$2,322,606	\$2,727,029	\$26.25	\$27.89	5,680	5,568	\$55.47	\$60.11
Prof - Anesthesia	\$145,019	\$138,593	\$1.64	\$1.42	124	114	\$158.84	\$149.83
Prof - Child EPSDT	\$34,457	\$37,552	\$0.39	\$0.38	269	239	\$17.37	\$19.27
Prof - Evaluation & Management	\$2,338,491	\$2,502,097	\$26.43	\$25.59	4,248	4,311	\$74.68	\$71.23
Prof - Maternity	\$875,194	\$910,988	\$9.89	\$9.32	176	182	\$674.26	\$613.87
Prof - Other	\$661,068	\$809,188	\$7.47	\$8.28	1,722	2,058	\$52.07	\$48.26
Prof - Psych	\$251,904	\$274,426	\$2.85	\$2.81	521	491	\$65.63	\$68.57
Prof - Specialist	\$274,499	\$295,394	\$3.10	\$3.02	448	433	\$83.08	\$83.80
Prof - Vision	\$204,678	\$225,566	\$2.31	\$2.31	441	236	\$63.02	\$117.30
Radiology	\$388,136	\$454,958	\$4.39	\$4.65	1,047	1,084	\$50.29	\$51.51
Transportation/Ambulance	\$363,251	\$367,439	\$4.11	\$3.76	272	156	\$180.90	\$289.55
<b>Total</b>	<b>\$13,994,071</b>	<b>\$15,456,297</b>	<b>\$158.19</b>	<b>\$158.07</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Female								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	121,738	145,155						
<b>Service Type</b>								
DME/Supplies	\$512,169	\$601,165	\$4.21	\$4.14	332	333	\$152.02	\$149.17
FQHC / RHC	\$1,846	\$5,065	\$0.02	\$0.03	3	7	\$52.75	\$61.77
Home Health	\$55,095	\$52,208	\$0.45	\$0.36	14	13	\$385.28	\$320.30
IP - Maternity	\$13,908,555	\$14,523,510	\$114.25	\$100.06	412	365	\$3,326.61	\$3,291.07
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$6,157,948	\$7,334,056	\$50.58	\$50.53	73	67	\$8,344.10	\$9,076.80
IP - Psych	\$575,188	\$730,451	\$4.72	\$5.03	83	85	\$686.38	\$710.56
Lab	\$831,326	\$1,603,378	\$6.83	\$11.05	5,935	6,546	\$13.81	\$20.25
OP - Emergency Room & Related	\$6,618,272	\$6,351,576	\$54.36	\$43.76	1,913	1,551	\$341.01	\$338.48
OP - Other	\$6,758,953	\$7,180,372	\$55.52	\$49.47	1,430	1,328	\$465.75	\$446.96
Pharmacy	\$10,423,113	\$10,856,952	\$85.62	\$74.80	18,253	16,527	\$56.29	\$54.31
Prof - Anesthesia	\$928,699	\$927,656	\$7.63	\$6.39	587	537	\$155.98	\$142.89
Prof - Child EPSDT	\$52,966	\$107,603	\$0.44	\$0.74	294	367	\$17.74	\$24.25
Prof - Evaluation & Management	\$6,431,332	\$7,151,286	\$52.83	\$49.27	9,201	8,783	\$68.90	\$67.31
Prof - Maternity	\$6,278,156	\$6,463,575	\$51.57	\$44.53	908	802	\$681.52	\$665.94
Prof - Other	\$2,056,330	\$2,786,913	\$16.89	\$19.20	2,730	3,216	\$74.24	\$71.65
Prof - Psych	\$276,547	\$348,179	\$2.27	\$2.40	422	454	\$64.64	\$63.46
Prof - Specialist	\$1,561,987	\$1,749,367	\$12.83	\$12.05	1,350	1,291	\$114.09	\$111.98
Prof - Vision	\$195,895	\$256,473	\$1.61	\$1.77	189	186	\$102.24	\$114.04
Radiology	\$2,585,226	\$3,025,252	\$21.24	\$20.84	4,299	4,146	\$59.28	\$60.32
Transportation/Ambulance	\$720,605	\$707,597	\$5.92	\$4.87	887	355	\$80.07	\$164.94
<b>Total</b>	<b>\$66,930,210</b>	<b>\$72,762,636</b>	<b>\$549.79</b>	<b>\$501.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	83,503	91,572						
<b>Service Type</b>								
DME/Supplies	\$84,830	\$111,746	\$1.02	\$1.22	80	93	\$151.48	\$158.28
FQHC / RHC	\$542	\$732	\$0.01	\$0.01	1	1	\$60.26	\$73.21
Home Health	\$3,679	\$2,692	\$0.04	\$0.03	2	2	\$306.58	\$179.47
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,209,057	\$1,441,568	\$14.48	\$15.74	14	10	\$12,464.50	\$18,481.64
IP - Psych	\$421,925	\$346,947	\$5.05	\$3.79	94	75	\$643.18	\$604.44
Lab	\$125,294	\$180,866	\$1.50	\$1.98	1,284	1,302	\$14.02	\$18.20
OP - Emergency Room & Related	\$869,466	\$868,126	\$10.41	\$9.48	414	395	\$302.00	\$288.03
OP - Other	\$923,161	\$997,670	\$11.06	\$10.89	235	234	\$563.93	\$557.98
Pharmacy	\$1,942,945	\$2,638,007	\$23.27	\$28.81	3,655	3,718	\$76.39	\$92.97
Prof - Anesthesia	\$49,091	\$46,597	\$0.59	\$0.51	43	48	\$163.64	\$125.94
Prof - Child EPSDT	\$156,417	\$25,851	\$1.87	\$0.28	232	202	\$97.03	\$16.73
Prof - Evaluation & Management	\$1,510,193	\$1,618,749	\$18.09	\$17.68	2,907	2,985	\$74.64	\$71.06
Prof - Maternity	\$50	\$9,226	\$0.00	\$0.10	0	1	\$50.12	\$1,318.06
Prof - Other	\$3,298,235	\$2,026,736	\$39.50	\$22.13	1,757	1,897	\$269.84	\$140.02
Prof - Psych	\$127,797	\$167,780	\$1.53	\$1.83	308	349	\$59.61	\$62.98
Prof - Specialist	\$309,364	\$316,198	\$3.70	\$3.45	352	339	\$126.37	\$122.23
Prof - Vision	\$168,966	\$185,106	\$2.02	\$2.02	336	182	\$72.27	\$133.27
Radiology	\$113,695	\$141,448	\$1.36	\$1.54	567	597	\$28.81	\$31.05
Transportation/Ambulance	\$313,536	\$294,541	\$3.75	\$3.22	155	80	\$290.31	\$480.49
<b>Total</b>	<b>\$11,628,242</b>	<b>\$11,420,585</b>	<b>\$139.26</b>	<b>\$124.72</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	14,865	21,680						
<b>Service Type</b>								
DME/Supplies	\$72,493	\$47,413	\$4.88	\$2.19	385	256	\$151.98	\$102.63
FQHC / RHC	\$0	\$431	\$0.00	\$0.02	0	4	-	\$53.83
Home Health	\$14,914	\$4,215	\$1.00	\$0.19	20	9	\$596.57	\$247.93
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,163,924	\$1,311,107	\$78.30	\$60.48	62	53	\$15,115.90	\$13,657.36
IP - Psych	\$68,135	\$132,196	\$4.58	\$6.10	84	98	\$655.14	\$746.87
Lab	\$32,181	\$74,974	\$2.16	\$3.46	1,962	2,358	\$13.24	\$17.60
OP - Emergency Room & Related	\$488,640	\$514,785	\$32.87	\$23.74	1,188	855	\$331.96	\$333.41
OP - Other	\$483,837	\$614,948	\$32.55	\$28.36	537	446	\$727.57	\$763.91
Pharmacy	\$1,143,025	\$1,577,014	\$76.89	\$72.74	14,335	11,389	\$64.37	\$76.64
Prof - Anesthesia	\$26,005	\$29,466	\$1.75	\$1.36	132	146	\$158.57	\$111.61
Prof - Child EPSDT	\$3,985	\$8,353	\$0.27	\$0.39	194	236	\$16.60	\$19.56
Prof - Evaluation & Management	\$475,173	\$599,883	\$31.97	\$27.67	5,477	4,791	\$70.03	\$69.30
Prof - Maternity	\$5,257	\$9,401	\$0.35	\$0.43	2	6	\$1,752.46	\$854.67
Prof - Other	\$232,873	\$336,185	\$15.67	\$15.51	2,027	2,044	\$92.74	\$91.03
Prof - Psych	\$21,937	\$21,568	\$1.48	\$0.99	303	203	\$58.50	\$58.77
Prof - Specialist	\$169,001	\$183,948	\$11.37	\$8.48	869	813	\$156.92	\$125.31
Prof - Vision	\$25,793	\$38,477	\$1.74	\$1.77	217	190	\$95.88	\$111.85
Radiology	\$95,927	\$127,934	\$6.45	\$5.90	1,690	1,482	\$45.83	\$47.79
Transportation/Ambulance	\$65,782	\$90,974	\$4.43	\$4.20	489	188	\$108.55	\$267.57
<b>Total</b>	<b>\$4,588,884</b>	<b>\$5,723,272</b>	<b>\$308.70</b>	<b>\$263.99</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Northern Virginia</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	21,054	28,724						
<b>Service Type</b>								
DME/Supplies	\$156,717	\$169,413	\$7.44	\$5.90	985	692	\$90.69	\$102.24
FQHC / RHC	\$0	\$1,293	\$0.00	\$0.04	0	9	-	\$58.75
Home Health	\$20,405	\$30,523	\$0.97	\$1.06	28	35	\$416.43	\$363.37
IP - Maternity	\$45,381	\$35,029	\$2.16	\$1.22	6	4	\$4,125.58	\$3,502.95
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,095,810	\$2,999,396	\$99.54	\$104.42	111	99	\$10,803.14	\$12,602.50
IP - Psych	\$74,838	\$124,589	\$3.55	\$4.34	58	68	\$733.71	\$769.07
Lab	\$111,110	\$243,013	\$5.28	\$8.46	5,004	5,848	\$12.66	\$17.36
OP - Emergency Room & Related	\$804,768	\$976,606	\$38.22	\$34.00	1,120	993	\$409.55	\$410.68
OP - Other	\$1,400,158	\$2,304,707	\$66.50	\$80.24	1,296	1,249	\$616.00	\$771.06
Pharmacy	\$3,457,733	\$4,708,505	\$164.23	\$163.92	33,270	28,921	\$59.24	\$68.01
Prof - Anesthesia	\$72,273	\$93,868	\$3.43	\$3.27	304	330	\$135.60	\$118.97
Prof - Child EPSDT	\$8,657	\$19,149	\$0.41	\$0.67	463	470	\$10.66	\$17.02
Prof - Evaluation & Management	\$1,229,790	\$1,536,567	\$58.41	\$53.49	9,999	9,404	\$70.10	\$68.26
Prof - Maternity	\$18,200	\$60,529	\$0.86	\$2.11	21	37	\$491.88	\$687.83
Prof - Other	\$552,747	\$616,474	\$26.25	\$21.46	4,500	4,637	\$70.01	\$55.54
Prof - Psych	\$63,873	\$84,918	\$3.03	\$2.96	543	553	\$67.09	\$64.14
Prof - Specialist	\$478,623	\$612,729	\$22.73	\$21.33	1,990	1,861	\$137.06	\$137.57
Prof - Vision	\$82,280	\$110,246	\$3.91	\$3.84	659	575	\$71.18	\$80.06
Radiology	\$355,965	\$462,127	\$16.91	\$16.09	3,420	3,455	\$59.32	\$55.88
Transportation/Ambulance	\$122,568	\$150,473	\$5.82	\$5.24	1,414	579	\$49.42	\$108.64
<b>Total</b>	<b>\$11,151,896</b>	<b>\$15,340,153</b>	<b>\$529.68</b>	<b>\$534.05</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,523,243	1,644,825						
<b>Service Type</b>								
DME/Supplies	\$2,393,879	\$2,770,747	\$1.57	\$1.68	228	237	\$82.56	\$85.17
FQHC / RHC	\$14,160	\$21,869	\$0.01	\$0.01	2	2	\$51.12	\$64.32
Home Health	\$338,447	\$255,601	\$0.22	\$0.16	4	4	\$734.16	\$480.45
IP - Maternity	\$15,796,764	\$16,566,295	\$10.37	\$10.07	38	37	\$3,295.11	\$3,264.29
IP - Newborn	\$16,455,819	\$19,698,088	\$10.80	\$11.98	37	36	\$3,497.96	\$4,017.56
IP - Other	\$22,416,907	\$27,281,265	\$14.72	\$16.59	20	20	\$8,927.48	\$9,895.27
IP - Psych	\$2,514,360	\$3,219,822	\$1.65	\$1.96	32	37	\$626.71	\$642.17
Lab	\$3,697,094	\$5,746,696	\$2.43	\$3.49	2,139	2,431	\$13.62	\$17.25
OP - Emergency Room & Related	\$20,133,254	\$20,816,983	\$13.22	\$12.66	678	644	\$233.83	\$235.70
OP - Other	\$20,182,431	\$23,936,726	\$13.25	\$14.55	349	364	\$455.95	\$479.41
Pharmacy	\$42,358,632	\$47,243,143	\$27.81	\$28.72	5,745	5,757	\$58.08	\$59.87
Prof - Anesthesia	\$1,861,584	\$1,892,321	\$1.22	\$1.15	98	103	\$150.14	\$134.45
Prof - Child EPSDT	\$2,308,611	\$1,960,356	\$1.52	\$1.19	1,188	998	\$15.31	\$14.33
Prof - Evaluation & Management	\$50,164,440	\$53,290,157	\$32.93	\$32.40	5,356	5,534	\$73.79	\$70.26
Prof - Maternity	\$7,233,409	\$7,687,365	\$4.75	\$4.67	84	84	\$681.30	\$665.80
Prof - Other	\$19,446,415	\$19,217,178	\$12.77	\$11.68	2,540	2,894	\$60.32	\$48.44
Prof - Psych	\$1,780,106	\$2,021,095	\$1.17	\$1.23	215	223	\$65.14	\$66.03
Prof - Specialist	\$5,624,872	\$6,172,536	\$3.69	\$3.75	453	448	\$97.86	\$100.59
Prof - Vision	\$3,172,727	\$3,577,711	\$2.08	\$2.18	280	204	\$89.35	\$127.98
Radiology	\$4,424,089	\$5,390,438	\$2.90	\$3.28	813	888	\$42.86	\$44.27
Transportation/Ambulance	\$5,461,393	\$5,502,104	\$3.59	\$3.35	225	103	\$190.92	\$388.70
<b>Total</b>	<b>\$247,779,394</b>	<b>\$274,268,497</b>	<b>\$162.67</b>	<b>\$166.75</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	34,102	37,238						
<b>Service Type</b>								
DME/Supplies	\$142,514	\$120,364	\$4.18	\$3.23	521	526	\$96.18	\$73.72
FQHC / RHC	\$404,751	\$376,073	\$11.87	\$10.10	3,565	3,049	\$39.96	\$39.75
Home Health	\$1,850	\$4,388	\$0.05	\$0.12	4	8	\$168.16	\$182.84
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$6,464,836	\$8,376,608	\$189.57	\$224.95	707	678	\$3,218.71	\$3,982.00
IP - Other	\$1,156,080	\$2,052,040	\$33.90	\$55.11	64	59	\$6,352.09	\$11,274.94
IP - Psych	\$48,483	\$47,826	\$1.42	\$1.28	0	0	-	-
Lab	\$59,314	\$55,811	\$1.74	\$1.50	1,352	1,197	\$15.44	\$15.03
OP - Emergency Room & Related	\$324,880	\$466,906	\$9.53	\$12.54	899	965	\$127.20	\$156.00
OP - Other	\$571,399	\$641,191	\$16.76	\$17.22	790	811	\$254.62	\$254.82
Pharmacy	\$817,394	\$549,503	\$23.97	\$14.76	4,523	4,367	\$63.60	\$40.55
Prof - Anesthesia	\$38,821	\$37,334	\$1.14	\$1.00	72	62	\$189.37	\$194.45
Prof - Child EPSDT	\$172,979	\$139,476	\$5.07	\$3.75	4,432	3,796	\$13.73	\$11.84
Prof - Evaluation & Management	\$2,997,064	\$3,510,121	\$87.89	\$94.26	12,327	12,915	\$85.55	\$87.58
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$664,113	\$654,138	\$19.47	\$17.57	6,234	7,140	\$37.49	\$29.52
Prof - Psych	\$37,470	\$37,095	\$1.10	\$1.00	1	1	\$18,735.01	\$18,547.51
Prof - Specialist	\$220,941	\$232,367	\$6.48	\$6.24	551	539	\$141.06	\$138.92
Prof - Vision	\$57,395	\$70,947	\$1.68	\$1.91	57	103	\$353.85	\$221.62
Radiology	\$64,736	\$66,738	\$1.90	\$1.79	1,353	1,477	\$16.84	\$14.56
Transportation/Ambulance	\$183,802	\$197,997	\$5.39	\$5.32	572	412	\$113.03	\$154.73
<b>Total</b>	<b>\$14,428,822</b>	<b>\$17,636,922</b>	<b>\$423.11</b>	<b>\$473.63</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	133,888	131,609						
<b>Service Type</b>								
DME/Supplies	\$180,035	\$187,027	\$1.34	\$1.42	238	219	\$67.94	\$77.93
FQHC / RHC	\$531,250	\$485,274	\$3.97	\$3.69	1,356	1,222	\$35.11	\$36.20
Home Health	\$1,429	\$1,682	\$0.01	\$0.01	1	0	\$204.17	\$336.50
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,317,164	\$1,841,184	\$17.31	\$13.99	26	22	\$7,962.76	\$7,484.49
IP - Psych	\$217,384	\$197,118	\$1.62	\$1.50	2	2	\$9,451.50	\$7,884.71
Lab	\$269,768	\$226,004	\$2.01	\$1.72	1,632	1,530	\$14.82	\$13.47
OP - Emergency Room & Related	\$893,471	\$1,142,328	\$6.67	\$8.68	590	664	\$135.64	\$156.96
OP - Other	\$1,766,692	\$1,958,270	\$13.20	\$14.88	392	422	\$404.18	\$423.59
Pharmacy	\$2,134,459	\$1,928,881	\$15.94	\$14.66	4,621	4,709	\$41.40	\$37.35
Prof - Anesthesia	\$110,277	\$100,801	\$0.82	\$0.77	83	80	\$118.83	\$115.20
Prof - Child EPSDT	\$140,767	\$122,758	\$1.05	\$0.93	1,040	961	\$12.13	\$11.65
Prof - Evaluation & Management	\$3,284,955	\$3,438,805	\$24.54	\$26.13	4,223	4,579	\$69.72	\$68.48
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$872,182	\$907,684	\$6.51	\$6.90	2,127	2,328	\$36.75	\$35.54
Prof - Psych	\$202,073	\$183,861	\$1.51	\$1.40	95	101	\$189.74	\$166.69
Prof - Specialist	\$338,983	\$320,674	\$2.53	\$2.44	301	276	\$100.98	\$105.76
Prof - Vision	\$238,860	\$248,365	\$1.78	\$1.89	86	80	\$247.52	\$281.59
Radiology	\$82,768	\$84,581	\$0.62	\$0.64	398	397	\$18.63	\$19.44
Transportation/Ambulance	\$533,551	\$548,578	\$3.99	\$4.17	428	451	\$111.81	\$110.91
<b>Total</b>	<b>\$14,116,068</b>	<b>\$13,923,873</b>	<b>\$105.43</b>	<b>\$105.80</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 6-14</b>								
<b>Other MSA</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	196,264	205,791						
<b>Service Type</b>								
DME/Supplies	\$236,947	\$231,529	\$1.21	\$1.13	161	152	\$89.96	\$88.95
FQHC / RHC	\$403,961	\$406,501	\$2.06	\$1.98	665	615	\$37.16	\$38.56
Home Health	\$3,979	\$1,872	\$0.02	\$0.01	1	0	\$331.56	\$374.49
IP - Maternity	\$7,979	\$8,410	\$0.04	\$0.04	0	0	\$2,659.63	\$2,803.21
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,103,776	\$1,476,093	\$5.62	\$7.17	10	11	\$6,771.63	\$8,022.25
IP - Psych	\$613,706	\$745,288	\$3.13	\$3.62	46	56	\$807.51	\$772.32
Lab	\$317,370	\$309,842	\$1.62	\$1.51	1,281	1,229	\$15.15	\$14.70
OP - Emergency Room & Related	\$960,370	\$1,200,100	\$4.89	\$5.83	323	350	\$181.58	\$199.92
OP - Other	\$1,547,712	\$1,788,780	\$7.89	\$8.69	310	346	\$305.45	\$301.80
Pharmacy	\$6,029,332	\$7,078,537	\$30.72	\$34.40	5,613	5,813	\$65.67	\$71.00
Prof - Anesthesia	\$61,041	\$73,277	\$0.31	\$0.36	32	36	\$115.61	\$118.19
Prof - Child EPSDT	\$35,006	\$21,342	\$0.18	\$0.10	179	108	\$11.98	\$11.52
Prof - Evaluation & Management	\$3,386,162	\$3,834,469	\$17.25	\$18.63	2,956	3,282	\$70.05	\$68.13
Prof - Maternity	\$7,572	\$6,117	\$0.04	\$0.03	3	2	\$184.69	\$174.76
Prof - Other	\$827,196	\$992,033	\$4.21	\$4.82	1,485	1,690	\$34.05	\$34.22
Prof - Psych	\$682,323	\$887,347	\$3.48	\$4.31	631	744	\$66.16	\$69.55
Prof - Specialist	\$424,665	\$448,436	\$2.16	\$2.18	234	229	\$110.76	\$114.40
Prof - Vision	\$419,335	\$461,086	\$2.14	\$2.24	213	175	\$120.50	\$154.00
Radiology	\$197,238	\$225,591	\$1.00	\$1.10	473	484	\$25.51	\$27.16
Transportation/Ambulance	\$773,697	\$831,628	\$3.94	\$4.04	893	819	\$52.96	\$59.18
<b>Total</b>	<b>\$18,039,368</b>	<b>\$21,028,278</b>	<b>\$91.91</b>	<b>\$102.18</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Female								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	34,168	36,885						
<b>Service Type</b>								
DME/Supplies	\$42,181	\$64,235	\$1.23	\$1.74	150	161	\$99.02	\$129.51
FQHC / RHC	\$159,890	\$107,904	\$4.68	\$2.93	1,073	739	\$52.35	\$47.51
Home Health	\$1,845	\$1,277	\$0.05	\$0.03	2	1	\$368.97	\$638.37
IP - Maternity	\$911,395	\$1,012,875	\$26.67	\$27.46	127	125	\$2,524.64	\$2,630.84
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$339,374	\$419,328	\$9.93	\$11.37	17	18	\$7,220.72	\$7,765.34
IP - Psych	\$170,547	\$251,786	\$4.99	\$6.83	109	119	\$551.93	\$686.07
Lab	\$260,258	\$234,081	\$7.62	\$6.35	4,895	4,194	\$18.67	\$18.16
OP - Emergency Room & Related	\$451,156	\$634,195	\$13.20	\$17.19	698	794	\$227.05	\$259.92
OP - Other	\$690,606	\$830,850	\$20.21	\$22.53	911	1,034	\$266.13	\$261.52
Pharmacy	\$1,290,714	\$1,380,513	\$37.78	\$37.43	9,795	9,683	\$46.28	\$46.38
Prof - Anesthesia	\$71,475	\$71,419	\$2.09	\$1.94	146	133	\$171.40	\$175.05
Prof - Child EPSDT	\$17,140	\$15,484	\$0.50	\$0.42	367	298	\$16.39	\$16.90
Prof - Evaluation & Management	\$986,524	\$1,112,973	\$28.87	\$30.17	4,799	5,013	\$72.19	\$72.23
Prof - Maternity	\$591,146	\$626,049	\$17.30	\$16.97	525	525	\$395.68	\$388.13
Prof - Other	\$303,452	\$347,307	\$8.88	\$9.42	2,345	2,354	\$45.45	\$48.00
Prof - Psych	\$115,814	\$159,606	\$3.39	\$4.33	679	834	\$59.88	\$62.25
Prof - Specialist	\$132,939	\$133,412	\$3.89	\$3.62	615	572	\$75.92	\$75.93
Prof - Vision	\$80,883	\$88,313	\$2.37	\$2.39	286	238	\$99.49	\$120.65
Radiology	\$201,594	\$223,184	\$5.90	\$6.05	1,272	1,338	\$55.66	\$54.25
Transportation/Ambulance	\$170,865	\$202,667	\$5.00	\$5.49	930	826	\$64.55	\$79.79
<b>Total</b>	<b>\$6,989,799</b>	<b>\$7,917,460</b>	<b>\$204.57</b>	<b>\$214.65</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Female								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	66,734	70,918						
<b>Service Type</b>								
DME/Supplies	\$310,614	\$272,899	\$4.65	\$3.85	500	490	\$111.69	\$94.17
FQHC / RHC	\$356,674	\$231,645	\$5.34	\$3.27	1,012	700	\$63.35	\$55.97
Home Health	\$24,196	\$10,232	\$0.36	\$0.14	12	7	\$350.67	\$255.79
IP - Maternity	\$4,373,925	\$4,749,112	\$65.54	\$66.97	287	291	\$2,738.84	\$2,759.51
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,840,426	\$3,165,261	\$42.56	\$44.63	56	56	\$9,192.32	\$9,505.29
IP - Psych	\$386,653	\$348,771	\$5.79	\$4.92	124	108	\$558.75	\$547.52
Lab	\$904,060	\$962,601	\$13.55	\$13.57	7,905	7,093	\$20.57	\$22.96
OP - Emergency Room & Related	\$2,124,433	\$2,610,069	\$31.83	\$36.80	1,400	1,485	\$272.78	\$297.31
OP - Other	\$3,198,659	\$3,571,212	\$47.93	\$50.36	1,875	2,009	\$306.77	\$300.78
Pharmacy	\$5,644,395	\$6,350,156	\$84.58	\$89.54	23,350	22,574	\$43.47	\$47.60
Prof - Anesthesia	\$320,277	\$309,453	\$4.80	\$4.36	342	326	\$168.48	\$160.84
Prof - Child EPSDT	\$39,917	\$41,059	\$0.60	\$0.58	498	449	\$14.42	\$15.49
Prof - Evaluation & Management	\$3,027,181	\$3,237,290	\$45.36	\$45.65	7,853	7,956	\$69.32	\$68.85
Prof - Maternity	\$2,403,625	\$2,643,902	\$36.02	\$37.28	1,108	1,108	\$390.20	\$403.77
Prof - Other	\$1,053,989	\$1,173,232	\$15.79	\$16.54	3,229	3,152	\$58.69	\$62.99
Prof - Psych	\$204,303	\$217,963	\$3.06	\$3.07	625	615	\$58.81	\$59.93
Prof - Specialist	\$831,462	\$833,771	\$12.46	\$11.76	1,482	1,454	\$100.87	\$97.01
Prof - Vision	\$130,105	\$146,081	\$1.95	\$2.06	212	211	\$110.26	\$117.24
Radiology	\$958,655	\$1,092,907	\$14.37	\$15.41	2,962	3,135	\$58.20	\$58.99
Transportation/Ambulance	\$580,402	\$568,684	\$8.70	\$8.02	1,771	1,514	\$58.94	\$63.54
<b>Total</b>	<b>\$29,713,950</b>	<b>\$32,536,301</b>	<b>\$445.26</b>	<b>\$458.79</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	28,245	30,635						
<b>Service Type</b>								
DME/Supplies	\$51,637	\$86,067	\$1.83	\$2.81	173	211	\$126.56	\$159.68
FQHC / RHC	\$67,465	\$46,146	\$2.39	\$1.51	644	407	\$44.53	\$44.37
Home Health	\$315	\$1,745	\$0.01	\$0.06	1	1	\$105.00	\$872.33
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$655,157	\$653,867	\$23.20	\$21.34	18	21	\$15,236.21	\$12,337.11
IP - Psych	\$112,314	\$144,998	\$3.98	\$4.73	80	81	\$597.42	\$697.11
Lab	\$54,525	\$50,475	\$1.93	\$1.65	1,328	1,194	\$17.44	\$16.55
OP - Emergency Room & Related	\$236,543	\$257,518	\$8.37	\$8.41	408	399	\$246.14	\$252.72
OP - Other	\$428,748	\$434,095	\$15.18	\$14.17	391	385	\$465.52	\$441.15
Pharmacy	\$872,698	\$1,064,816	\$30.90	\$34.76	5,456	5,626	\$67.96	\$74.14
Prof - Anesthesia	\$14,570	\$13,948	\$0.52	\$0.46	46	39	\$133.67	\$139.48
Prof - Child EPSDT	\$4,748	\$4,019	\$0.17	\$0.13	190	135	\$10.62	\$11.68
Prof - Evaluation & Management	\$475,216	\$546,248	\$16.82	\$17.83	2,788	2,935	\$72.41	\$72.89
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$157,980	\$173,129	\$5.59	\$5.65	1,425	1,784	\$47.12	\$38.01
Prof - Psych	\$84,681	\$118,048	\$3.00	\$3.85	473	606	\$76.08	\$76.26
Prof - Specialist	\$115,142	\$110,404	\$4.08	\$3.60	344	320	\$142.15	\$134.97
Prof - Vision	\$57,194	\$63,250	\$2.02	\$2.06	189	126	\$128.82	\$196.43
Radiology	\$58,242	\$67,587	\$2.06	\$2.21	816	830	\$30.32	\$31.90
Transportation/Ambulance	\$123,206	\$153,341	\$4.36	\$5.01	896	613	\$58.42	\$97.98
<b>Total</b>	<b>\$3,570,383</b>	<b>\$3,989,701</b>	<b>\$126.41</b>	<b>\$130.23</b>				

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	7,950	9,637						
<b>Service Type</b>								
DME/Supplies	\$57,200	\$57,030	\$7.19	\$5.92	691	584	\$124.89	\$121.60
FQHC / RHC	\$20,320	\$9,203	\$2.56	\$0.95	599	252	\$51.18	\$45.56
Home Health	\$4,651	\$6,867	\$0.59	\$0.71	24	12	\$290.70	\$686.74
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$490,431	\$506,213	\$61.69	\$52.53	77	70	\$9,616.30	\$9,039.51
IP - Psych	\$53,067	\$148,313	\$6.68	\$15.39	229	301	\$349.13	\$612.87
Lab	\$34,341	\$53,856	\$4.32	\$5.59	2,943	3,264	\$17.61	\$20.55
OP - Emergency Room & Related	\$230,054	\$254,061	\$28.94	\$26.36	1,220	1,051	\$284.72	\$301.02
OP - Other	\$383,280	\$313,322	\$48.21	\$32.51	1,108	929	\$522.18	\$420.00
Pharmacy	\$717,690	\$840,149	\$90.28	\$87.18	20,133	16,910	\$53.81	\$61.87
Prof - Anesthesia	\$8,511	\$9,062	\$1.07	\$0.94	97	91	\$132.99	\$124.13
Prof - Child EPSDT	\$2,650	\$3,480	\$0.33	\$0.36	367	291	\$10.91	\$14.87
Prof - Evaluation & Management	\$256,352	\$319,283	\$32.25	\$33.13	5,695	5,770	\$67.94	\$68.90
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$128,836	\$96,628	\$16.21	\$10.03	2,930	2,438	\$66.38	\$49.35
Prof - Psych	\$16,758	\$22,432	\$2.11	\$2.33	258	437	\$98.00	\$63.91
Prof - Specialist	\$89,587	\$86,956	\$11.27	\$9.02	1,188	961	\$113.83	\$112.64
Prof - Vision	\$14,379	\$16,181	\$1.81	\$1.68	154	107	\$140.97	\$188.15
Radiology	\$54,050	\$57,880	\$6.80	\$6.01	2,207	1,980	\$36.97	\$36.40
Transportation/Ambulance	\$57,401	\$67,133	\$7.22	\$6.97	1,162	1,020	\$74.55	\$81.97
<b>Total</b>	<b>\$2,619,559</b>	<b>\$2,868,050</b>	<b>\$329.50</b>	<b>\$297.61</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Other MSA</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	7,145	8,061						
<b>Service Type</b>								
DME/Supplies	\$122,686	\$97,674	\$17.17	\$12.12	1,780	1,614	\$115.74	\$90.10
FQHC / RHC	\$21,335	\$22,923	\$2.99	\$2.84	957	852	\$37.43	\$40.08
Home Health	\$16,768	\$15,118	\$2.35	\$1.88	59	49	\$479.09	\$458.12
IP - Maternity	\$2,148	\$4,538	\$0.30	\$0.56	2	1	\$2,147.69	\$4,538.32
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$801,181	\$980,391	\$112.13	\$121.62	143	134	\$9,425.66	\$10,893.23
IP - Psych	\$32,059	\$91,582	\$4.49	\$11.36	72	128	\$745.55	\$1,064.91
Lab	\$91,635	\$76,307	\$12.83	\$9.47	7,611	6,962	\$20.22	\$16.32
OP - Emergency Room & Related	\$209,570	\$272,026	\$29.33	\$33.75	858	997	\$410.12	\$406.01
OP - Other	\$603,171	\$725,190	\$84.42	\$89.96	2,541	2,669	\$398.66	\$404.46
Pharmacy	\$1,178,343	\$1,802,762	\$164.92	\$223.64	44,811	43,814	\$44.16	\$61.25
Prof - Anesthesia	\$19,492	\$17,096	\$2.73	\$2.12	205	199	\$159.77	\$127.58
Prof - Child EPSDT	\$4,222	\$5,570	\$0.59	\$0.69	700	651	\$10.12	\$12.75
Prof - Evaluation & Management	\$368,245	\$453,661	\$51.54	\$56.28	8,869	9,681	\$69.73	\$69.76
Prof - Maternity	\$1,891	\$2,149	\$0.26	\$0.27	2	3	\$1,890.88	\$1,074.29
Prof - Other	\$408,346	\$251,448	\$57.15	\$31.19	6,348	5,548	\$108.03	\$67.47
Prof - Psych	\$21,488	\$34,098	\$3.01	\$4.23	878	990	\$41.09	\$51.28
Prof - Specialist	\$182,529	\$176,132	\$25.55	\$21.85	2,627	2,315	\$116.71	\$113.27
Prof - Vision	\$21,535	\$28,525	\$3.01	\$3.54	400	478	\$90.48	\$88.86
Radiology	\$100,968	\$127,919	\$14.13	\$15.87	3,794	3,955	\$44.70	\$48.14
Transportation/Ambulance	\$63,930	\$86,308	\$8.95	\$10.71	3,305	3,483	\$32.48	\$36.88
<b>Total</b>	<b>\$4,271,543</b>	<b>\$5,271,417</b>	<b>\$597.84</b>	<b>\$653.94</b>				

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	508,496	530,774						
<b>Service Type</b>								
DME/Supplies	\$1,143,812	\$1,116,826	\$2.25	\$2.10	281	274	\$96.13	\$92.13
FQHC / RHC	\$1,965,646	\$1,685,669	\$3.87	\$3.18	1,116	941	\$41.56	\$40.49
Home Health	\$55,033	\$43,182	\$0.11	\$0.08	4	3	\$348.31	\$356.87
IP - Maternity	\$5,295,446	\$5,774,935	\$10.41	\$10.88	46	48	\$2,699.00	\$2,736.94
IP - Newborn	\$6,464,836	\$8,376,608	\$12.71	\$15.78	47	48	\$3,218.71	\$3,982.00
IP - Other	\$9,703,589	\$11,094,376	\$19.08	\$20.90	28	27	\$8,286.58	\$9,260.75
IP - Psych	\$1,634,214	\$1,975,683	\$3.21	\$3.72	51	57	\$754.14	\$780.90
Lab	\$1,991,272	\$1,968,976	\$3.92	\$3.71	2,608	2,413	\$18.02	\$18.45
OP - Emergency Room & Related	\$5,430,476	\$6,837,203	\$10.68	\$12.88	625	679	\$205.04	\$227.71
OP - Other	\$9,190,268	\$10,262,910	\$18.07	\$19.34	658	715	\$329.73	\$324.37
Pharmacy	\$18,685,026	\$20,995,316	\$36.75	\$39.56	8,657	8,714	\$50.94	\$54.47
Prof - Anesthesia	\$644,466	\$632,390	\$1.27	\$1.19	101	98	\$150.79	\$146.18
Prof - Child EPSDT	\$417,430	\$353,190	\$0.82	\$0.67	756	650	\$13.03	\$12.28
Prof - Evaluation & Management	\$14,781,700	\$16,452,851	\$29.07	\$31.00	4,801	5,147	\$72.66	\$72.28
Prof - Maternity	\$3,004,235	\$3,278,216	\$5.91	\$6.18	182	185	\$390.36	\$399.88
Prof - Other	\$4,416,095	\$4,595,597	\$8.68	\$8.66	2,347	2,550	\$44.40	\$40.75
Prof - Psych	\$1,364,911	\$1,660,450	\$2.68	\$3.13	439	512	\$73.40	\$73.38
Prof - Specialist	\$2,336,248	\$2,342,153	\$4.59	\$4.41	517	500	\$106.62	\$105.88
Prof - Vision	\$1,019,686	\$1,122,748	\$2.01	\$2.12	174	156	\$138.09	\$162.64
Radiology	\$1,718,251	\$1,946,388	\$3.38	\$3.67	985	1,046	\$41.15	\$42.09
Transportation/Ambulance	\$2,486,854	\$2,656,336	\$4.89	\$5.00	905	825	\$64.85	\$72.79
<b>Total</b>	<b>\$93,749,492</b>	<b>\$105,172,003</b>	<b>\$184.37</b>	<b>\$198.15</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	83,826	93,478						
<b>Service Type</b>								
DME/Supplies	\$500,552	\$484,141	\$5.97	\$5.18	1,229	1,149	\$58.30	\$54.08
FQHC / RHC	\$50,731	\$75,051	\$0.61	\$0.80	165	165	\$44.00	\$58.22
Home Health	\$267,724	\$66,792	\$3.19	\$0.71	27	15	\$1,416.53	\$570.87
IP - Maternity	\$2,838	\$21,862	\$0.03	\$0.23	0	0	\$2,838.07	\$10,930.95
IP - Newborn	\$19,845,397	\$20,281,654	\$236.75	\$216.97	667	645	\$4,258.11	\$4,035.69
IP - Other	\$2,886,250	\$3,676,231	\$34.43	\$39.33	73	74	\$5,670.43	\$6,371.29
IP - Psych	\$136,590	\$113,958	\$1.63	\$1.22	0	0	\$45,529.94	-
Lab	\$153,724	\$172,531	\$1.83	\$1.85	1,563	1,595	\$14.08	\$13.89
OP - Emergency Room & Related	\$1,463,372	\$1,854,019	\$17.46	\$19.83	1,190	1,318	\$176.05	\$180.62
OP - Other	\$1,923,988	\$2,285,067	\$22.95	\$24.44	1,362	1,381	\$202.29	\$212.48
Pharmacy	\$1,631,351	\$1,384,241	\$19.46	\$14.81	4,479	4,335	\$52.14	\$40.99
Prof - Anesthesia	\$92,521	\$88,022	\$1.10	\$0.94	78	73	\$169.76	\$155.24
Prof - Child EPSDT	\$626,665	\$530,095	\$7.48	\$5.67	6,300	5,146	\$14.24	\$13.22
Prof - Evaluation & Management	\$8,446,458	\$9,114,527	\$100.76	\$97.50	14,486	14,513	\$83.47	\$80.62
Prof - Maternity	\$998	\$781	\$0.01	\$0.01	0	0	\$499.00	\$781.45
Prof - Other	\$1,395,196	\$1,717,535	\$16.64	\$18.37	5,630	6,788	\$35.48	\$32.48
Prof - Psych	\$105,227	\$87,954	\$1.26	\$0.94	2	3	\$9,566.11	\$4,188.29
Prof - Specialist	\$685,132	\$657,815	\$8.17	\$7.04	811	729	\$120.89	\$115.81
Prof - Vision	\$125,868	\$142,211	\$1.50	\$1.52	60	57	\$298.43	\$321.62
Radiology	\$139,745	\$158,608	\$1.67	\$1.70	1,357	1,306	\$14.74	\$15.59
Transportation/Ambulance	\$376,860	\$393,468	\$4.50	\$4.21	478	328	\$112.92	\$153.94
<b>Total</b>	<b>\$40,857,188</b>	<b>\$43,306,565</b>	<b>\$487.40</b>	<b>\$463.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	350,842	361,699						
<b>Service Type</b>								
DME/Supplies	\$797,715	\$786,089	\$2.27	\$2.17	432	459	\$63.21	\$56.82
FQHC / RHC	\$107,590	\$99,159	\$0.31	\$0.27	92	77	\$39.86	\$42.50
Home Health	\$245,090	\$497,962	\$0.70	\$1.38	9	14	\$891.24	\$1,177.21
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,908,819	\$4,568,791	\$11.14	\$12.63	25	27	\$5,369.26	\$5,592.16
IP - Psych	\$604,361	\$470,569	\$1.72	\$1.30	2	1	\$10,243.41	\$23,528.45
Lab	\$644,751	\$703,204	\$1.84	\$1.94	1,652	1,721	\$13.35	\$13.56
OP - Emergency Room & Related	\$3,998,049	\$4,675,152	\$11.40	\$12.93	766	880	\$178.42	\$176.25
OP - Other	\$7,129,604	\$7,070,612	\$20.32	\$19.55	674	677	\$361.80	\$346.43
Pharmacy	\$5,757,574	\$5,730,879	\$16.41	\$15.84	4,474	4,511	\$44.01	\$42.15
Prof - Anesthesia	\$298,589	\$256,680	\$0.85	\$0.71	78	82	\$130.56	\$103.50
Prof - Child EPSDT	\$565,396	\$473,748	\$1.61	\$1.31	1,375	1,209	\$14.07	\$13.00
Prof - Evaluation & Management	\$9,616,394	\$10,136,973	\$27.41	\$28.03	4,709	4,955	\$69.84	\$67.87
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,461,839	\$2,575,178	\$7.02	\$7.12	1,832	2,181	\$45.96	\$39.17
Prof - Psych	\$564,441	\$503,894	\$1.61	\$1.39	117	112	\$164.56	\$149.92
Prof - Specialist	\$1,017,698	\$1,045,291	\$2.90	\$2.89	341	303	\$101.94	\$114.31
Prof - Vision	\$540,495	\$562,035	\$1.54	\$1.55	93	77	\$198.93	\$242.99
Radiology	\$195,740	\$203,233	\$0.56	\$0.56	415	430	\$16.14	\$15.67
Transportation/Ambulance	\$1,268,011	\$1,323,518	\$3.61	\$3.66	350	224	\$123.84	\$196.13
<b>Total</b>	<b>\$39,722,157</b>	<b>\$41,682,967</b>	<b>\$113.22</b>	<b>\$115.24</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 6-14								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	510,254	553,701						
<b>Service Type</b>								
DME/Supplies	\$696,174	\$697,566	\$1.36	\$1.26	205	206	\$79.74	\$73.30
FQHC / RHC	\$132,260	\$135,598	\$0.26	\$0.24	69	65	\$44.93	\$45.47
Home Health	\$25,298	\$12,848	\$0.05	\$0.02	1	1	\$436.17	\$347.25
IP - Maternity	\$21,943	\$26,243	\$0.04	\$0.05	0	0	\$2,742.83	\$2,915.86
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,984,806	\$4,630,588	\$9.77	\$8.36	14	13	\$8,594.49	\$7,782.50
IP - Psych	\$1,717,836	\$2,219,015	\$3.37	\$4.01	48	57	\$845.81	\$850.20
Lab	\$727,213	\$835,579	\$1.43	\$1.51	1,139	1,155	\$15.01	\$15.68
OP - Emergency Room & Related	\$4,254,725	\$4,842,786	\$8.34	\$8.75	445	480	\$224.73	\$218.45
OP - Other	\$5,874,310	\$6,525,681	\$11.51	\$11.79	460	465	\$300.43	\$304.13
Pharmacy	\$15,293,538	\$17,387,742	\$29.97	\$31.40	5,308	5,322	\$67.76	\$70.81
Prof - Anesthesia	\$194,430	\$192,660	\$0.38	\$0.35	35	38	\$130.40	\$110.72
Prof - Child EPSDT	\$106,418	\$72,888	\$0.21	\$0.13	171	121	\$14.60	\$13.04
Prof - Evaluation & Management	\$9,176,315	\$10,301,788	\$17.98	\$18.61	3,103	3,256	\$69.56	\$68.57
Prof - Maternity	\$11,523	\$13,011	\$0.02	\$0.02	0	1	\$640.14	\$419.72
Prof - Other	\$3,482,092	\$4,085,821	\$6.82	\$7.38	1,530	1,759	\$53.52	\$50.35
Prof - Psych	\$1,446,165	\$1,680,261	\$2.83	\$3.03	510	579	\$66.73	\$62.86
Prof - Specialist	\$1,228,143	\$1,188,342	\$2.41	\$2.15	236	204	\$122.33	\$126.27
Prof - Vision	\$851,375	\$957,979	\$1.67	\$1.73	224	178	\$89.38	\$116.64
Radiology	\$400,548	\$446,536	\$0.78	\$0.81	450	452	\$20.95	\$21.43
Transportation/Ambulance	\$1,755,036	\$1,925,047	\$3.44	\$3.48	681	529	\$60.60	\$78.83
<b>Total</b>	<b>\$52,380,148</b>	<b>\$58,177,978</b>	<b>\$102.66</b>	<b>\$105.07</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 15-20 Female</b>								
<b>Richmond/Charlottesville</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	87,817	98,601						
<b>Service Type</b>								
DME/Supplies	\$141,609	\$161,839	\$1.61	\$1.64	150	157	\$128.85	\$125.55
FQHC / RHC	\$56,048	\$73,374	\$0.64	\$0.74	169	167	\$45.38	\$53.40
Home Health	\$9,710	\$22,202	\$0.11	\$0.23	2	7	\$606.88	\$396.47
IP - Maternity	\$2,240,848	\$2,308,248	\$25.52	\$23.41	106	98	\$2,887.69	\$2,867.39
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,307,453	\$982,922	\$14.89	\$9.97	20	16	\$8,955.16	\$7,679.08
IP - Psych	\$698,038	\$998,836	\$7.95	\$10.13	174	194	\$547.48	\$628.20
Lab	\$428,978	\$550,042	\$4.88	\$5.58	3,577	3,280	\$16.39	\$20.41
OP - Emergency Room & Related	\$2,174,514	\$2,398,936	\$24.76	\$24.33	1,001	1,051	\$296.86	\$277.85
OP - Other	\$2,157,061	\$2,424,879	\$24.56	\$24.59	991	991	\$297.40	\$297.71
Pharmacy	\$2,830,737	\$3,414,679	\$32.23	\$34.63	8,582	8,542	\$45.07	\$48.65
Prof - Anesthesia	\$167,335	\$163,716	\$1.91	\$1.66	134	130	\$170.23	\$153.58
Prof - Child EPSDT	\$28,784	\$26,723	\$0.33	\$0.27	228	208	\$17.28	\$15.62
Prof - Evaluation & Management	\$2,353,112	\$2,623,801	\$26.80	\$26.61	4,664	4,709	\$68.95	\$67.82
Prof - Maternity	\$1,200,702	\$1,186,888	\$13.67	\$12.04	238	195	\$689.27	\$739.49
Prof - Other	\$846,091	\$847,532	\$9.63	\$8.60	1,780	1,985	\$64.96	\$51.96
Prof - Psych	\$280,672	\$361,145	\$3.20	\$3.66	639	773	\$60.00	\$56.89
Prof - Specialist	\$368,132	\$362,124	\$4.19	\$3.67	432	396	\$116.50	\$111.22
Prof - Vision	\$146,443	\$174,484	\$1.67	\$1.77	245	198	\$81.68	\$107.18
Radiology	\$390,981	\$440,721	\$4.45	\$4.47	1,185	1,203	\$45.09	\$44.57
Transportation/Ambulance	\$402,960	\$467,474	\$4.59	\$4.74	686	561	\$80.30	\$101.45
<b>Total</b>	<b>\$18,230,210</b>	<b>\$19,990,563</b>	<b>\$207.59</b>	<b>\$202.74</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 21-44 Female</b>								
<b>Richmond/Charlottesville</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	188,053	209,652						
<b>Service Type</b>								
DME/Supplies	\$772,817	\$681,757	\$4.11	\$3.25	362	316	\$136.16	\$123.33
FQHC / RHC	\$318,577	\$263,894	\$1.69	\$1.26	318	241	\$63.87	\$62.64
Home Health	\$75,308	\$75,419	\$0.40	\$0.36	15	13	\$315.10	\$339.73
IP - Maternity	\$12,163,576	\$13,651,483	\$64.68	\$65.11	250	246	\$3,104.54	\$3,182.16
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$9,518,090	\$11,336,274	\$50.61	\$54.07	65	65	\$9,358.99	\$10,014.38
IP - Psych	\$969,126	\$1,311,981	\$5.15	\$6.26	113	109	\$545.07	\$691.61
Lab	\$1,619,200	\$2,107,428	\$8.61	\$10.05	5,761	5,631	\$17.93	\$21.42
OP - Emergency Room & Related	\$10,031,111	\$11,181,463	\$53.34	\$53.33	1,996	1,979	\$320.62	\$323.34
OP - Other	\$11,822,943	\$12,821,595	\$62.87	\$61.16	1,945	1,873	\$387.92	\$391.92
Pharmacy	\$15,945,713	\$17,223,620	\$84.79	\$82.15	22,008	20,543	\$46.23	\$47.99
Prof - Anesthesia	\$909,176	\$935,014	\$4.83	\$4.46	349	369	\$166.45	\$145.17
Prof - Child EPSDT	\$56,416	\$64,018	\$0.30	\$0.31	242	225	\$14.87	\$16.27
Prof - Evaluation & Management	\$8,030,515	\$8,651,928	\$42.70	\$41.27	7,864	7,703	\$65.17	\$64.29
Prof - Maternity	\$6,080,405	\$6,709,827	\$32.33	\$32.00	560	535	\$692.45	\$718.17
Prof - Other	\$2,633,361	\$3,352,864	\$14.00	\$15.99	2,081	2,228	\$80.76	\$86.12
Prof - Psych	\$583,989	\$645,350	\$3.11	\$3.08	657	598	\$56.76	\$61.77
Prof - Specialist	\$2,349,722	\$2,430,287	\$12.49	\$11.59	957	929	\$156.75	\$149.66
Prof - Vision	\$243,814	\$287,768	\$1.30	\$1.37	139	139	\$112.00	\$118.62
Radiology	\$2,403,071	\$2,780,682	\$12.78	\$13.26	3,183	3,246	\$48.17	\$49.03
Transportation/Ambulance	\$1,222,933	\$1,271,933	\$6.50	\$6.07	1,743	1,280	\$44.77	\$56.86
<b>Total</b>	<b>\$87,749,865</b>	<b>\$97,784,586</b>	<b>\$466.62</b>	<b>\$466.41</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	75,187	84,238						
<b>Service Type</b>								
DME/Supplies	\$129,960	\$212,679	\$1.73	\$2.52	167	174	\$124.25	\$174.61
FQHC / RHC	\$29,148	\$23,240	\$0.39	\$0.28	100	73	\$46.34	\$45.39
Home Health	\$2,236	\$4,789	\$0.03	\$0.06	3	3	\$131.52	\$266.08
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,799,249	\$1,095,071	\$23.93	\$13.00	16	13	\$18,359.68	\$12,443.98
IP - Psych	\$366,292	\$539,073	\$4.87	\$6.40	94	106	\$619.78	\$721.65
Lab	\$100,714	\$127,544	\$1.34	\$1.51	983	972	\$16.36	\$18.69
OP - Emergency Room & Related	\$1,022,589	\$1,187,860	\$13.60	\$14.10	523	536	\$311.77	\$315.42
OP - Other	\$1,238,155	\$1,379,999	\$16.47	\$16.38	469	468	\$421.00	\$419.71
Pharmacy	\$2,307,794	\$2,692,517	\$30.69	\$31.96	4,901	4,962	\$75.15	\$77.30
Prof - Anesthesia	\$42,666	\$42,664	\$0.57	\$0.51	46	49	\$149.18	\$123.31
Prof - Child EPSDT	\$12,192	\$10,502	\$0.16	\$0.12	141	119	\$13.81	\$12.58
Prof - Evaluation & Management	\$1,199,468	\$1,358,007	\$15.95	\$16.12	2,703	2,805	\$70.82	\$68.97
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,514,974	\$1,345,892	\$20.15	\$15.98	1,494	1,603	\$161.82	\$119.60
Prof - Psych	\$216,591	\$269,485	\$2.88	\$3.20	572	622	\$60.42	\$61.74
Prof - Specialist	\$286,323	\$317,773	\$3.81	\$3.77	293	289	\$156.20	\$156.38
Prof - Vision	\$118,552	\$134,326	\$1.58	\$1.59	171	134	\$110.90	\$142.60
Radiology	\$117,361	\$132,853	\$1.56	\$1.58	735	732	\$25.49	\$25.87
Transportation/Ambulance	\$278,587	\$318,107	\$3.71	\$3.78	422	342	\$105.49	\$132.38
<b>Total</b>	<b>\$10,782,852</b>	<b>\$11,192,380</b>	<b>\$143.41</b>	<b>\$132.87</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	19,815	25,762						
<b>Service Type</b>								
DME/Supplies	\$103,626	\$112,893	\$5.23	\$4.38	453	392	\$138.54	\$134.08
FQHC / RHC	\$11,202	\$14,648	\$0.57	\$0.57	142	128	\$47.67	\$53.27
Home Health	\$5,847	\$20,456	\$0.30	\$0.79	16	21	\$224.87	\$454.57
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,436,325	\$1,726,954	\$72.49	\$67.03	74	66	\$11,677.44	\$12,161.65
IP - Psych	\$132,226	\$236,623	\$6.67	\$9.18	139	163	\$577.41	\$678.00
Lab	\$54,574	\$58,133	\$2.75	\$2.26	2,077	1,683	\$15.91	\$16.09
OP - Emergency Room & Related	\$746,106	\$869,232	\$37.65	\$33.74	1,413	1,251	\$319.67	\$323.62
OP - Other	\$745,627	\$989,368	\$37.63	\$38.40	840	799	\$537.58	\$576.55
Pharmacy	\$1,582,302	\$1,784,763	\$79.85	\$69.28	16,005	13,606	\$59.87	\$61.10
Prof - Anesthesia	\$28,946	\$32,641	\$1.46	\$1.27	113	132	\$154.79	\$115.34
Prof - Child EPSDT	\$1,905	\$5,874	\$0.10	\$0.23	147	119	\$7.87	\$22.95
Prof - Evaluation & Management	\$588,187	\$707,399	\$29.68	\$27.46	5,329	5,069	\$66.84	\$65.00
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$174,965	\$282,593	\$8.83	\$10.97	1,479	1,543	\$71.65	\$85.32
Prof - Psych	\$49,978	\$58,624	\$2.52	\$2.28	374	392	\$80.87	\$69.63
Prof - Specialist	\$187,532	\$204,164	\$9.46	\$7.92	718	635	\$158.12	\$149.68
Prof - Vision	\$23,388	\$32,781	\$1.18	\$1.27	110	111	\$128.51	\$137.16
Radiology	\$103,725	\$121,607	\$5.23	\$4.72	1,920	1,835	\$32.72	\$30.86
Transportation/Ambulance	\$104,801	\$135,925	\$5.29	\$5.28	855	565	\$74.27	\$111.96
<b>Total</b>	<b>\$6,081,260</b>	<b>\$7,394,679</b>	<b>\$306.90</b>	<b>\$287.04</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Richmond/Charlottesville</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	22,222	27,717						
<b>Service Type</b>								
DME/Supplies	\$214,002	\$240,099	\$9.63	\$8.66	1,299	967	\$88.95	\$107.47
FQHC / RHC	\$53,886	\$25,332	\$2.42	\$0.91	490	268	\$59.35	\$40.86
Home Health	\$43,827	\$53,724	\$1.97	\$1.94	95	73	\$249.02	\$319.79
IP - Maternity	\$23,185	\$2,159	\$1.04	\$0.08	3	0	\$3,864.24	\$2,158.58
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,775,029	\$4,500,609	\$169.88	\$162.38	177	153	\$11,544.43	\$12,713.58
IP - Psych	\$265,266	\$280,209	\$11.94	\$10.11	240	195	\$597.45	\$622.69
Lab	\$140,085	\$178,644	\$6.30	\$6.45	5,047	4,797	\$14.99	\$16.12
OP - Emergency Room & Related	\$1,070,708	\$1,182,902	\$48.18	\$42.68	1,374	1,302	\$420.88	\$393.38
OP - Other	\$2,367,993	\$2,643,611	\$106.56	\$95.38	2,580	2,361	\$495.71	\$484.71
Pharmacy	\$4,036,425	\$5,212,261	\$181.64	\$188.05	41,350	38,499	\$52.71	\$58.62
Prof - Anesthesia	\$74,256	\$82,534	\$3.34	\$2.98	253	316	\$158.67	\$112.91
Prof - Child EPSDT	\$6,991	\$9,642	\$0.31	\$0.35	517	411	\$7.30	\$10.16
Prof - Evaluation & Management	\$1,225,013	\$1,459,529	\$55.13	\$52.66	9,896	9,540	\$66.85	\$66.23
Prof - Maternity	\$7,941	\$1,233	\$0.36	\$0.04	6	1	\$661.77	\$616.73
Prof - Other	\$445,464	\$732,324	\$20.05	\$26.42	3,502	3,744	\$68.68	\$84.68
Prof - Psych	\$98,174	\$134,307	\$4.42	\$4.85	1,039	970	\$51.03	\$59.96
Prof - Specialist	\$529,653	\$597,975	\$23.83	\$21.57	1,754	1,557	\$163.02	\$166.29
Prof - Vision	\$52,256	\$70,958	\$2.35	\$2.56	340	346	\$82.95	\$88.81
Radiology	\$271,101	\$326,108	\$12.20	\$11.77	3,927	3,773	\$37.28	\$37.42
Transportation/Ambulance	\$189,321	\$187,790	\$8.52	\$6.78	3,963	2,220	\$25.80	\$36.63
<b>Total</b>	<b>\$14,890,576</b>	<b>\$17,921,948</b>	<b>\$670.08</b>	<b>\$646.60</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,338,016	1,454,848						
<b>Service Type</b>								
DME/Supplies	\$3,356,456	\$3,377,063	\$2.51	\$2.32	367	358	\$82.04	\$77.79
FQHC / RHC	\$759,442	\$710,296	\$0.57	\$0.49	133	112	\$51.34	\$52.24
Home Health	\$675,039	\$754,193	\$0.50	\$0.52	9	9	\$677.75	\$694.47
IP - Maternity	\$14,452,391	\$16,009,995	\$10.80	\$11.00	42	42	\$3,069.10	\$3,134.91
IP - Newborn	\$19,845,397	\$20,281,654	\$14.83	\$13.94	42	41	\$4,258.11	\$4,035.69
IP - Other	\$29,616,021	\$32,517,440	\$22.13	\$22.35	32	32	\$8,394.56	\$8,483.55
IP - Psych	\$4,889,736	\$6,170,265	\$3.65	\$4.24	57	63	\$762.83	\$805.20
Lab	\$3,869,240	\$4,733,104	\$2.89	\$3.25	2,180	2,181	\$15.92	\$17.90
OP - Emergency Room & Related	\$24,761,173	\$28,192,350	\$18.51	\$19.38	865	921	\$256.80	\$252.54
OP - Other	\$33,259,681	\$36,140,810	\$24.86	\$24.84	857	857	\$347.88	\$347.71
Pharmacy	\$49,385,433	\$54,830,702	\$36.91	\$37.69	8,334	8,227	\$53.15	\$54.98
Prof - Anesthesia	\$1,807,919	\$1,793,932	\$1.35	\$1.23	105	113	\$154.40	\$131.39
Prof - Child EPSDT	\$1,404,767	\$1,193,489	\$1.05	\$0.82	888	741	\$14.19	\$13.29
Prof - Evaluation & Management	\$40,635,463	\$44,353,951	\$30.37	\$30.49	5,132	5,267	\$71.01	\$69.46
Prof - Maternity	\$7,301,569	\$7,911,741	\$5.46	\$5.44	95	91	\$691.76	\$720.43
Prof - Other	\$12,953,981	\$14,939,740	\$9.68	\$10.27	1,990	2,295	\$58.38	\$53.69
Prof - Psych	\$3,345,237	\$3,741,019	\$2.50	\$2.57	414	448	\$72.40	\$68.83
Prof - Specialist	\$6,652,335	\$6,803,771	\$4.97	\$4.68	449	418	\$132.76	\$134.14
Prof - Vision	\$2,102,193	\$2,362,542	\$1.57	\$1.62	166	140	\$113.54	\$138.96
Radiology	\$4,022,272	\$4,610,348	\$3.01	\$3.17	1,025	1,059	\$35.18	\$35.91
Transportation/Ambulance	\$5,598,510	\$6,023,262	\$4.18	\$4.14	774	573	\$64.90	\$86.73
<b>Total</b>	<b>\$270,694,256</b>	<b>\$297,451,666</b>	<b>\$202.31</b>	<b>\$204.46</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	44,021	45,558						
<b>Service Type</b>								
DME/Supplies	\$165,859	\$155,550	\$3.77	\$3.41	569	602	\$79.51	\$68.01
FQHC / RHC	\$115,770	\$115,864	\$2.63	\$2.54	654	556	\$48.28	\$54.86
Home Health	\$10,013	\$13,733	\$0.23	\$0.30	21	23	\$131.76	\$156.05
IP - Maternity	\$0	\$2,550	\$0.00	\$0.06	0	0	-	\$2,550.00
IP - Newborn	\$9,980,364	\$10,892,772	\$226.72	\$239.10	692	714	\$3,933.96	\$4,015.96
IP - Other	\$1,388,792	\$2,075,881	\$31.55	\$45.57	71	76	\$5,321.04	\$7,207.92
IP - Psych	\$58,359	\$64,420	\$1.33	\$1.41	0	1	-	\$21,473.46
Lab	\$77,155	\$82,596	\$1.75	\$1.81	1,483	1,567	\$14.18	\$13.89
OP - Emergency Room & Related	\$617,164	\$748,665	\$14.02	\$16.43	1,201	1,221	\$140.10	\$161.56
OP - Other	\$890,922	\$1,080,256	\$20.24	\$23.71	1,096	1,114	\$221.56	\$255.49
Pharmacy	\$921,543	\$678,838	\$20.93	\$14.90	5,007	4,677	\$50.17	\$38.23
Prof - Anesthesia	\$52,554	\$64,198	\$1.19	\$1.41	74	80	\$192.51	\$210.48
Prof - Child EPSDT	\$271,190	\$199,187	\$6.16	\$4.37	5,512	4,089	\$13.41	\$12.83
Prof - Evaluation & Management	\$4,431,756	\$4,734,833	\$100.67	\$103.93	14,526	15,023	\$83.17	\$83.02
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$683,916	\$650,196	\$15.54	\$14.27	6,406	7,232	\$29.10	\$23.68
Prof - Psych	\$44,997	\$46,209	\$1.02	\$1.01	0	0	-	-
Prof - Specialist	\$312,721	\$361,476	\$7.10	\$7.93	811	803	\$105.11	\$118.63
Prof - Vision	\$74,727	\$80,802	\$1.70	\$1.77	87	94	\$233.42	\$226.91
Radiology	\$79,805	\$87,176	\$1.81	\$1.91	1,449	1,462	\$15.02	\$15.70
Transportation/Ambulance	\$256,233	\$282,134	\$5.82	\$6.19	697	691	\$100.18	\$107.61
<b>Total</b>	<b>\$20,433,840</b>	<b>\$22,417,336</b>	<b>\$464.18</b>	<b>\$492.06</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	167,836	165,346						
<b>Service Type</b>								
DME/Supplies	\$219,806	\$295,677	\$1.31	\$1.79	230	269	\$68.35	\$79.65
FQHC / RHC	\$155,529	\$138,791	\$0.93	\$0.84	259	229	\$43.00	\$43.95
Home Health	\$25,238	\$29,869	\$0.15	\$0.18	13	8	\$137.16	\$287.20
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,787,481	\$2,203,398	\$10.65	\$13.33	25	27	\$5,035.16	\$5,939.08
IP - Psych	\$250,599	\$228,584	\$1.49	\$1.38	2	1	\$11,933.30	\$12,030.73
Lab	\$286,613	\$298,849	\$1.71	\$1.81	1,576	1,620	\$13.00	\$13.39
OP - Emergency Room & Related	\$1,517,322	\$1,808,446	\$9.04	\$10.94	796	849	\$136.25	\$154.63
OP - Other	\$3,175,129	\$3,360,777	\$18.92	\$20.33	600	624	\$378.35	\$390.97
Pharmacy	\$2,660,875	\$2,775,603	\$15.85	\$16.79	4,687	4,909	\$40.59	\$41.03
Prof - Anesthesia	\$174,161	\$173,205	\$1.04	\$1.05	89	97	\$140.57	\$130.13
Prof - Child EPSDT	\$224,835	\$192,245	\$1.34	\$1.16	1,282	1,147	\$12.54	\$12.17
Prof - Evaluation & Management	\$4,577,521	\$4,683,991	\$27.27	\$28.33	4,748	5,055	\$68.93	\$67.25
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,215,894	\$1,335,369	\$7.24	\$8.08	1,690	1,942	\$51.43	\$49.90
Prof - Psych	\$245,311	\$250,774	\$1.46	\$1.52	116	111	\$151.71	\$164.66
Prof - Specialist	\$382,849	\$486,736	\$2.28	\$2.94	350	320	\$78.29	\$110.30
Prof - Vision	\$274,372	\$279,157	\$1.63	\$1.69	84	73	\$232.32	\$276.94
Radiology	\$90,389	\$92,657	\$0.54	\$0.56	390	404	\$16.56	\$16.66
Transportation/Ambulance	\$720,234	\$685,483	\$4.29	\$4.15	552	418	\$93.34	\$118.95
<b>Total</b>	<b>\$17,984,158</b>	<b>\$19,319,611</b>	<b>\$107.15</b>	<b>\$116.84</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 6-14								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	259,722	268,972						
<b>Service Type</b>								
DME/Supplies	\$241,489	\$266,843	\$0.93	\$0.99	128	119	\$87.43	\$100.05
FQHC / RHC	\$198,736	\$188,025	\$0.77	\$0.70	205	186	\$44.78	\$45.14
Home Health	\$33,015	\$45,679	\$0.13	\$0.17	9	8	\$179.43	\$249.61
IP - Maternity	\$23,206	\$5,615	\$0.09	\$0.02	0	0	\$2,900.80	\$2,807.34
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,735,080	\$2,716,372	\$6.68	\$10.10	12	11	\$6,968.19	\$11,461.48
IP - Psych	\$598,081	\$704,384	\$2.30	\$2.62	28	40	\$1,001.81	\$777.47
Lab	\$351,473	\$384,797	\$1.35	\$1.43	1,060	1,138	\$15.33	\$15.09
OP - Emergency Room & Related	\$1,799,490	\$2,140,867	\$6.93	\$7.96	452	503	\$183.77	\$190.03
OP - Other	\$3,077,040	\$3,662,107	\$11.85	\$13.62	504	549	\$282.12	\$297.73
Pharmacy	\$8,393,742	\$9,866,378	\$32.32	\$36.68	5,756	5,913	\$67.38	\$74.44
Prof - Anesthesia	\$100,384	\$110,231	\$0.39	\$0.41	34	39	\$135.84	\$126.85
Prof - Child EPSDT	\$54,819	\$29,251	\$0.21	\$0.11	185	109	\$13.71	\$11.98
Prof - Evaluation & Management	\$4,642,438	\$5,044,783	\$17.87	\$18.76	3,114	3,312	\$68.88	\$67.95
Prof - Maternity	\$10,256	\$1,014	\$0.04	\$0.00	1	0	\$341.88	\$253.49
Prof - Other	\$1,646,248	\$1,507,783	\$6.34	\$5.61	1,215	1,337	\$62.58	\$50.32
Prof - Psych	\$692,122	\$778,549	\$2.66	\$2.89	504	543	\$63.45	\$63.91
Prof - Specialist	\$520,529	\$621,598	\$2.00	\$2.31	226	221	\$106.47	\$125.30
Prof - Vision	\$450,049	\$526,924	\$1.73	\$1.96	190	143	\$109.45	\$164.82
Radiology	\$198,711	\$220,144	\$0.77	\$0.82	436	462	\$21.08	\$21.26
Transportation/Ambulance	\$1,057,443	\$1,109,646	\$4.07	\$4.13	698	546	\$70.00	\$90.66
<b>Total</b>	<b>\$25,824,352</b>	<b>\$29,930,990</b>	<b>\$99.43</b>	<b>\$111.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Female								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	46,532	48,486						
<b>Service Type</b>								
DME/Supplies	\$77,648	\$81,237	\$1.67	\$1.68	140	173	\$142.74	\$116.55
FQHC / RHC	\$100,352	\$118,092	\$2.16	\$2.44	496	519	\$52.13	\$56.26
Home Health	\$16,633	\$16,706	\$0.36	\$0.34	23	13	\$186.88	\$315.20
IP - Maternity	\$1,246,058	\$1,218,395	\$26.78	\$25.13	118	108	\$2,726.60	\$2,800.91
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$610,184	\$605,277	\$13.11	\$12.48	18	21	\$8,843.24	\$7,120.90
IP - Psych	\$192,741	\$271,970	\$4.14	\$5.61	81	133	\$609.94	\$504.58
Lab	\$237,402	\$292,017	\$5.10	\$6.02	3,809	4,016	\$16.07	\$18.00
OP - Emergency Room & Related	\$987,904	\$1,078,953	\$21.23	\$22.25	966	1,008	\$263.72	\$264.90
OP - Other	\$1,141,036	\$1,358,216	\$24.52	\$28.01	1,085	1,184	\$271.29	\$283.85
Pharmacy	\$1,593,776	\$1,745,213	\$34.25	\$35.99	9,773	9,624	\$42.06	\$44.88
Prof - Anesthesia	\$85,858	\$86,129	\$1.85	\$1.78	135	139	\$163.54	\$153.25
Prof - Child EPSDT	\$26,870	\$27,308	\$0.58	\$0.56	350	302	\$19.80	\$22.40
Prof - Evaluation & Management	\$1,288,339	\$1,363,012	\$27.69	\$28.11	4,840	5,013	\$68.64	\$67.29
Prof - Maternity	\$747,418	\$695,700	\$16.06	\$14.35	410	376	\$469.78	\$458.00
Prof - Other	\$406,760	\$402,970	\$8.74	\$8.31	1,645	1,791	\$63.77	\$55.68
Prof - Psych	\$149,375	\$186,839	\$3.21	\$3.85	683	795	\$56.39	\$58.19
Prof - Specialist	\$181,251	\$211,427	\$3.90	\$4.36	567	589	\$82.46	\$88.87
Prof - Vision	\$89,128	\$96,601	\$1.92	\$1.99	268	168	\$85.62	\$142.48
Radiology	\$232,806	\$242,387	\$5.00	\$5.00	1,221	1,242	\$49.19	\$48.28
Transportation/Ambulance	\$251,822	\$263,157	\$5.41	\$5.43	965	761	\$67.30	\$85.61
<b>Total</b>	<b>\$9,663,361</b>	<b>\$10,361,606</b>	<b>\$207.67</b>	<b>\$213.70</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 21-44 Female</b>								
<b>Rural</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	89,609	95,228						
<b>Service Type</b>								
DME/Supplies	\$322,186	\$337,707	\$3.60	\$3.55	419	365	\$103.07	\$116.73
FQHC / RHC	\$420,230	\$474,153	\$4.69	\$4.98	900	867	\$62.53	\$68.88
Home Health	\$168,555	\$153,289	\$1.88	\$1.61	51	45	\$444.74	\$428.18
IP - Maternity	\$6,056,659	\$7,033,944	\$67.59	\$73.86	283	290	\$2,866.38	\$3,052.93
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,961,274	\$4,624,345	\$44.21	\$48.56	64	62	\$8,339.52	\$9,418.22
IP - Psych	\$451,162	\$444,842	\$5.03	\$4.67	90	85	\$668.39	\$661.97
Lab	\$801,780	\$1,018,482	\$8.95	\$10.70	5,909	6,267	\$18.17	\$20.48
OP - Emergency Room & Related	\$3,901,955	\$4,074,219	\$43.54	\$42.78	1,889	1,780	\$276.68	\$288.42
OP - Other	\$5,554,085	\$6,843,208	\$61.98	\$71.86	2,142	2,278	\$347.17	\$378.52
Pharmacy	\$7,544,304	\$8,202,132	\$84.19	\$86.13	22,063	21,384	\$45.79	\$48.33
Prof - Anesthesia	\$424,857	\$456,505	\$4.74	\$4.79	360	384	\$158.23	\$149.67
Prof - Child EPSDT	\$51,274	\$60,049	\$0.57	\$0.63	416	355	\$16.51	\$21.29
Prof - Evaluation & Management	\$3,723,133	\$3,862,922	\$41.55	\$40.56	7,659	7,595	\$65.10	\$64.09
Prof - Maternity	\$3,257,643	\$3,646,962	\$36.35	\$38.30	950	959	\$459.28	\$479.30
Prof - Other	\$1,259,013	\$1,358,609	\$14.05	\$14.27	2,083	2,250	\$80.94	\$76.09
Prof - Psych	\$274,389	\$296,145	\$3.06	\$3.11	640	660	\$57.43	\$56.52
Prof - Specialist	\$1,126,415	\$1,206,223	\$12.57	\$12.67	1,368	1,363	\$110.29	\$111.49
Prof - Vision	\$128,623	\$156,102	\$1.44	\$1.64	145	148	\$118.98	\$133.19
Radiology	\$1,114,832	\$1,264,769	\$12.44	\$13.28	2,874	2,975	\$51.95	\$53.57
Transportation/Ambulance	\$703,277	\$784,869	\$7.85	\$8.24	2,037	1,674	\$46.23	\$59.07
<b>Total</b>	<b>\$41,245,645</b>	<b>\$46,299,478</b>	<b>\$460.28</b>	<b>\$486.20</b>				

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	39,549	42,251						
<b>Service Type</b>								
DME/Supplies	\$63,358	\$87,304	\$1.60	\$2.07	154	189	\$124.48	\$131.09
FQHC / RHC	\$31,322	\$35,523	\$0.79	\$0.84	211	200	\$45.07	\$50.46
Home Health	\$11,339	\$8,149	\$0.29	\$0.19	12	12	\$283.47	\$194.02
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$455,813	\$463,593	\$11.53	\$10.97	18	15	\$7,725.64	\$8,915.25
IP - Psych	\$139,390	\$142,840	\$3.52	\$3.38	73	59	\$583.22	\$686.73
Lab	\$50,061	\$56,284	\$1.27	\$1.33	895	909	\$16.98	\$17.59
OP - Emergency Room & Related	\$474,965	\$466,576	\$12.01	\$11.04	532	553	\$270.94	\$239.76
OP - Other	\$644,062	\$758,788	\$16.29	\$17.96	505	563	\$387.29	\$382.84
Pharmacy	\$1,305,435	\$1,758,923	\$33.01	\$41.63	5,319	5,354	\$74.47	\$93.31
Prof - Anesthesia	\$19,093	\$20,988	\$0.48	\$0.50	38	45	\$153.98	\$133.68
Prof - Child EPSDT	\$7,418	\$4,303	\$0.19	\$0.10	158	107	\$14.27	\$11.47
Prof - Evaluation & Management	\$631,403	\$662,622	\$15.97	\$15.68	2,733	2,745	\$70.11	\$68.55
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$197,480	\$357,689	\$4.99	\$8.47	1,135	1,142	\$52.77	\$88.96
Prof - Psych	\$93,524	\$119,785	\$2.36	\$2.84	460	481	\$61.69	\$70.67
Prof - Specialist	\$123,863	\$143,733	\$3.13	\$3.40	317	296	\$118.64	\$138.07
Prof - Vision	\$64,961	\$74,965	\$1.64	\$1.77	150	101	\$131.77	\$210.58
Radiology	\$55,787	\$61,183	\$1.41	\$1.45	706	754	\$23.98	\$23.04
Transportation/Ambulance	\$165,106	\$189,272	\$4.17	\$4.48	665	514	\$75.32	\$104.63
<b>Total</b>	<b>\$4,534,381</b>	<b>\$5,412,518</b>	<b>\$114.65</b>	<b>\$128.10</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	12,142	13,871						
<b>Service Type</b>								
DME/Supplies	\$59,648	\$60,298	\$4.91	\$4.35	575	604	\$102.49	\$86.39
FQHC / RHC	\$12,844	\$13,996	\$1.06	\$1.01	222	228	\$57.09	\$53.22
Home Health	\$13,845	\$22,076	\$1.14	\$1.59	42	34	\$329.65	\$566.04
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$708,663	\$899,071	\$58.36	\$64.82	79	78	\$8,858.29	\$9,989.68
IP - Psych	\$83,428	\$105,414	\$6.87	\$7.60	145	106	\$567.54	\$864.05
Lab	\$30,958	\$32,801	\$2.55	\$2.36	1,552	1,641	\$19.72	\$17.29
OP - Emergency Room & Related	\$479,025	\$506,777	\$39.45	\$36.54	1,591	1,446	\$297.53	\$303.10
OP - Other	\$625,011	\$777,019	\$51.48	\$56.02	1,305	1,277	\$473.49	\$526.44
Pharmacy	\$1,026,041	\$978,759	\$84.50	\$70.56	17,003	16,026	\$59.64	\$52.83
Prof - Anesthesia	\$19,201	\$22,569	\$1.58	\$1.63	129	151	\$146.57	\$129.71
Prof - Child EPSDT	\$1,310	\$8,483	\$0.11	\$0.61	166	174	\$7.80	\$42.20
Prof - Evaluation & Management	\$364,845	\$402,789	\$30.05	\$29.04	5,390	5,312	\$66.89	\$65.60
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$63,027	\$118,204	\$5.19	\$8.52	1,122	1,372	\$55.53	\$74.53
Prof - Psych	\$30,609	\$32,197	\$2.52	\$2.32	537	507	\$56.37	\$54.94
Prof - Specialist	\$124,503	\$150,495	\$10.25	\$10.85	887	942	\$138.64	\$138.20
Prof - Vision	\$18,180	\$19,093	\$1.50	\$1.38	122	87	\$147.80	\$190.93
Radiology	\$59,245	\$81,904	\$4.88	\$5.90	1,827	2,198	\$32.04	\$32.23
Transportation/Ambulance	\$88,355	\$95,609	\$7.28	\$6.89	1,185	854	\$73.69	\$96.87
<b>Total</b>	<b>\$3,808,736</b>	<b>\$4,327,555</b>	<b>\$313.68</b>	<b>\$311.99</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Rural</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	10,881	12,235						
<b>Service Type</b>								
DME/Supplies	\$162,776	\$141,335	\$14.96	\$11.55	1,555	1,448	\$115.44	\$95.76
FQHC / RHC	\$71,402	\$53,060	\$6.56	\$4.34	1,426	1,040	\$55.22	\$50.06
Home Health	\$44,193	\$49,192	\$4.06	\$4.02	126	114	\$387.66	\$424.07
IP - Maternity	\$2,119	\$3,725	\$0.19	\$0.30	1	1	\$2,119.31	\$3,724.57
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,265,951	\$1,988,353	\$208.25	\$162.51	191	154	\$13,097.99	\$12,664.67
IP - Psych	\$62,755	\$67,916	\$5.77	\$5.55	95	78	\$729.71	\$848.94
Lab	\$61,691	\$78,909	\$5.67	\$6.45	4,571	4,694	\$14.88	\$16.49
OP - Emergency Room & Related	\$421,720	\$436,062	\$38.76	\$35.64	1,301	1,112	\$357.39	\$384.53
OP - Other	\$1,432,436	\$1,334,398	\$131.65	\$109.06	3,141	2,864	\$502.96	\$456.99
Pharmacy	\$1,929,971	\$2,365,685	\$177.37	\$193.35	45,224	41,238	\$47.06	\$56.26
Prof - Anesthesia	\$44,077	\$40,302	\$4.05	\$3.29	294	302	\$165.08	\$130.85
Prof - Child EPSDT	\$4,290	\$5,541	\$0.39	\$0.45	504	443	\$9.39	\$12.26
Prof - Evaluation & Management	\$577,042	\$601,947	\$53.03	\$49.20	9,387	8,761	\$67.79	\$67.38
Prof - Maternity	\$1,997	\$2,199	\$0.18	\$0.18	1	1	\$1,997.49	\$2,198.58
Prof - Other	\$170,054	\$196,826	\$15.63	\$16.09	3,603	3,409	\$52.05	\$56.62
Prof - Psych	\$30,211	\$35,513	\$2.78	\$2.90	495	534	\$67.28	\$65.28
Prof - Specialist	\$283,597	\$280,122	\$26.06	\$22.90	2,145	1,971	\$145.81	\$139.36
Prof - Vision	\$28,773	\$30,898	\$2.64	\$2.53	353	321	\$89.92	\$94.49
Radiology	\$143,215	\$131,363	\$13.16	\$10.74	3,892	3,575	\$40.58	\$36.04
Transportation/Ambulance	\$123,191	\$103,392	\$11.32	\$8.45	3,859	2,380	\$35.21	\$42.60
<b>Total</b>	<b>\$7,861,462</b>	<b>\$7,946,738</b>	<b>\$722.49</b>	<b>\$649.51</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	670,292	691,947						
<b>Service Type</b>								
DME/Supplies	\$1,312,770	\$1,425,952	\$1.96	\$2.06	255	262	\$92.22	\$94.46
FQHC / RHC	\$1,106,184	\$1,137,505	\$1.65	\$1.64	382	355	\$51.91	\$55.64
Home Health	\$322,832	\$338,693	\$0.48	\$0.49	20	17	\$291.36	\$344.55
IP - Maternity	\$7,328,044	\$8,264,228	\$10.93	\$11.94	46	48	\$2,841.43	\$3,012.84
IP - Newborn	\$9,980,364	\$10,892,772	\$14.89	\$15.74	45	47	\$3,933.96	\$4,015.96
IP - Other	\$12,913,238	\$15,576,291	\$19.27	\$22.51	31	31	\$7,503.33	\$8,795.20
IP - Psych	\$1,836,515	\$2,030,369	\$2.74	\$2.93	37	44	\$882.52	\$796.54
Lab	\$1,897,131	\$2,244,735	\$2.83	\$3.24	2,112	2,248	\$16.08	\$17.32
OP - Emergency Room & Related	\$10,199,545	\$11,260,565	\$15.22	\$16.27	854	877	\$213.71	\$222.78
OP - Other	\$16,539,720	\$19,174,769	\$24.68	\$27.71	884	943	\$335.12	\$352.70
Pharmacy	\$25,375,688	\$28,371,532	\$37.86	\$41.00	8,716	8,774	\$52.12	\$56.08
Prof - Anesthesia	\$920,185	\$974,128	\$1.37	\$1.41	107	117	\$153.80	\$144.19
Prof - Child EPSDT	\$642,006	\$526,367	\$0.96	\$0.76	855	673	\$13.44	\$13.55
Prof - Evaluation & Management	\$20,236,476	\$21,356,899	\$30.19	\$30.86	5,121	5,310	\$70.75	\$69.75
Prof - Maternity	\$4,017,315	\$4,345,874	\$5.99	\$6.28	156	158	\$460.97	\$475.84
Prof - Other	\$5,642,391	\$5,927,646	\$8.42	\$8.57	1,853	2,053	\$54.50	\$50.08
Prof - Psych	\$1,560,539	\$1,746,011	\$2.33	\$2.52	402	433	\$69.48	\$69.89
Prof - Specialist	\$3,055,727	\$3,461,811	\$4.56	\$5.00	520	516	\$105.18	\$116.33
Prof - Vision	\$1,128,813	\$1,264,542	\$1.68	\$1.83	155	125	\$130.18	\$175.77
Radiology	\$1,974,791	\$2,181,582	\$2.95	\$3.15	968	1,022	\$36.50	\$37.01
Transportation/Ambulance	\$3,365,660	\$3,513,562	\$5.02	\$5.08	917	732	\$65.70	\$83.25
<b>Total</b>	<b>\$131,355,934</b>	<b>\$146,015,832</b>	<b>\$195.97</b>	<b>\$211.02</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	98,676	102,508						
<b>Service Type</b>								
DME/Supplies	\$233,862	\$225,194	\$2.37	\$2.20	349	381	\$81.57	\$69.25
FQHC / RHC	\$36,011	\$22,490	\$0.36	\$0.22	116	74	\$37.87	\$35.64
Home Health	\$96,823	\$77,458	\$0.98	\$0.76	31	35	\$375.28	\$256.48
IP - Maternity	\$0	\$2,783	\$0.00	\$0.03	0	0	-	\$1,391.63
IP - Newborn	\$23,532,775	\$28,078,399	\$238.49	\$273.91	530	670	\$5,402.07	\$4,904.52
IP - Other	\$2,325,296	\$3,130,139	\$23.56	\$30.54	32	36	\$8,909.18	\$10,262.75
IP - Psych	\$144,358	\$157,504	\$1.46	\$1.54	0	0	-	-
Lab	\$198,143	\$210,247	\$2.01	\$2.05	1,015	979	\$23.73	\$25.14
OP - Emergency Room & Related	\$1,992,318	\$2,013,537	\$20.19	\$19.64	1,228	1,201	\$197.33	\$196.25
OP - Other	\$2,569,988	\$2,786,273	\$26.04	\$27.18	641	648	\$487.48	\$503.63
Pharmacy	\$1,645,654	\$1,357,694	\$16.68	\$13.24	3,891	3,766	\$51.43	\$42.21
Prof - Anesthesia	\$165,253	\$198,411	\$1.67	\$1.94	97	98	\$207.34	\$236.49
Prof - Child EPSDT	\$798,230	\$526,641	\$8.09	\$5.14	7,118	4,682	\$13.64	\$13.17
Prof - Evaluation & Management	\$10,028,220	\$11,027,740	\$101.63	\$107.58	14,285	14,730	\$85.37	\$87.64
Prof - Maternity	\$0	\$3,146	\$0.00	\$0.03	0	0	-	\$1,573.14
Prof - Other	\$1,674,267	\$1,936,951	\$16.97	\$18.90	6,617	7,650	\$30.77	\$29.64
Prof - Psych	\$112,100	\$121,443	\$1.14	\$1.18	2	0	\$8,007.13	-
Prof - Specialist	\$837,875	\$984,691	\$8.49	\$9.61	923	907	\$110.39	\$127.05
Prof - Vision	\$177,690	\$185,437	\$1.80	\$1.81	132	126	\$164.22	\$171.70
Radiology	\$142,603	\$158,756	\$1.45	\$1.55	1,096	1,142	\$15.82	\$16.28
Transportation/Ambulance	\$409,244	\$423,685	\$4.15	\$4.13	451	323	\$110.25	\$153.45
<b>Total</b>	<b>\$47,120,712</b>	<b>\$53,628,620</b>	<b>\$477.53</b>	<b>\$523.17</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	396,620	380,498						
<b>Service Type</b>								
DME/Supplies	\$716,984	\$730,391	\$1.81	\$1.92	206	230	\$105.50	\$100.20
FQHC / RHC	\$73,088	\$50,613	\$0.18	\$0.13	73	52	\$30.28	\$30.90
Home Health	\$283,281	\$187,784	\$0.71	\$0.49	20	15	\$438.52	\$384.80
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,178,701	\$4,531,226	\$8.01	\$11.91	10	12	\$9,432.35	\$11,924.28
IP - Psych	\$642,645	\$620,203	\$1.62	\$1.63	3	1	\$6,006.02	\$34,455.71
Lab	\$825,970	\$856,748	\$2.08	\$2.25	1,203	1,224	\$20.77	\$22.07
OP - Emergency Room & Related	\$5,319,383	\$5,228,789	\$13.41	\$13.74	775	850	\$207.77	\$193.94
OP - Other	\$7,285,300	\$8,374,283	\$18.37	\$22.01	448	498	\$491.72	\$530.86
Pharmacy	\$5,948,902	\$6,137,514	\$15.00	\$16.13	3,845	4,009	\$46.81	\$48.28
Prof - Anesthesia	\$334,842	\$400,875	\$0.84	\$1.05	63	81	\$160.13	\$155.86
Prof - Child EPSDT	\$574,196	\$462,431	\$1.45	\$1.22	1,331	1,162	\$13.05	\$12.56
Prof - Evaluation & Management	\$9,809,623	\$9,965,296	\$24.73	\$26.19	4,184	4,549	\$70.93	\$69.09
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,610,963	\$3,203,429	\$6.58	\$8.42	2,420	2,843	\$32.64	\$35.54
Prof - Psych	\$586,820	\$583,578	\$1.48	\$1.53	102	102	\$174.49	\$181.07
Prof - Specialist	\$942,947	\$1,084,017	\$2.38	\$2.85	453	428	\$62.96	\$79.82
Prof - Vision	\$610,279	\$613,586	\$1.54	\$1.61	74	63	\$250.01	\$307.41
Radiology	\$173,280	\$220,508	\$0.44	\$0.58	344	382	\$15.25	\$18.21
Transportation/Ambulance	\$1,408,367	\$1,413,964	\$3.55	\$3.72	283	213	\$150.72	\$209.76
<b>Total</b>	<b>\$41,325,570</b>	<b>\$44,665,235</b>	<b>\$104.19</b>	<b>\$117.39</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 6-14</b>								
<b>Tidewater</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	580,860	582,413						
<b>Service Type</b>								
DME/Supplies	\$794,398	\$768,736	\$1.37	\$1.32	157	174	\$104.64	\$91.18
FQHC / RHC	\$78,245	\$63,602	\$0.13	\$0.11	49	39	\$33.07	\$33.69
Home Health	\$23,043	\$18,054	\$0.04	\$0.03	2	1	\$274.32	\$273.55
IP - Maternity	\$10,533	\$48,038	\$0.02	\$0.08	0	0	\$2,106.67	\$3,695.26
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,772,713	\$3,323,916	\$6.50	\$5.71	7	7	\$10,872.37	\$10,133.89
IP - Psych	\$1,670,547	\$1,624,898	\$2.88	\$2.79	61	61	\$566.29	\$552.50
Lab	\$1,040,454	\$1,142,261	\$1.79	\$1.96	861	914	\$24.96	\$25.74
OP - Emergency Room & Related	\$5,563,993	\$5,433,754	\$9.58	\$9.33	420	451	\$273.81	\$248.38
OP - Other	\$7,645,335	\$8,233,655	\$13.16	\$14.14	334	354	\$473.19	\$479.26
Pharmacy	\$19,666,263	\$21,562,780	\$33.86	\$37.02	5,022	5,301	\$80.89	\$83.80
Prof - Anesthesia	\$271,929	\$289,271	\$0.47	\$0.50	35	38	\$161.00	\$156.03
Prof - Child EPSDT	\$118,826	\$90,495	\$0.20	\$0.16	190	146	\$12.89	\$12.73
Prof - Evaluation & Management	\$9,806,688	\$10,349,558	\$16.88	\$17.77	2,831	3,060	\$71.57	\$69.70
Prof - Maternity	\$6,961	\$23,814	\$0.01	\$0.04	0	1	\$535.46	\$350.20
Prof - Other	\$3,899,401	\$4,014,327	\$6.71	\$6.89	1,801	1,971	\$44.73	\$41.96
Prof - Psych	\$1,525,782	\$1,641,056	\$2.63	\$2.82	545	589	\$57.80	\$57.38
Prof - Specialist	\$1,351,629	\$1,374,506	\$2.33	\$2.36	302	291	\$92.60	\$97.23
Prof - Vision	\$896,407	\$933,943	\$1.54	\$1.60	162	81	\$114.48	\$238.19
Radiology	\$357,686	\$404,603	\$0.62	\$0.69	391	400	\$18.91	\$20.83
Transportation/Ambulance	\$2,025,190	\$2,117,359	\$3.49	\$3.64	361	251	\$115.89	\$174.15
<b>Total</b>	<b>\$60,526,021</b>	<b>\$63,458,626</b>	<b>\$104.20</b>	<b>\$108.96</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 15-20 Female</b>								
<b>Tidewater</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	103,265	107,652						
<b>Service Type</b>								
DME/Supplies	\$186,421	\$287,831	\$1.81	\$2.67	171	206	\$126.47	\$156.09
FQHC / RHC	\$55,889	\$50,677	\$0.54	\$0.47	105	88	\$61.69	\$64.15
Home Health	\$5,603	\$18,016	\$0.05	\$0.17	4	6	\$169.80	\$353.26
IP - Maternity	\$2,710,795	\$2,728,013	\$26.25	\$25.34	113	109	\$2,786.02	\$2,800.83
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,128,264	\$1,221,983	\$10.93	\$11.35	15	16	\$8,612.71	\$8,728.45
IP - Psych	\$453,309	\$593,671	\$4.39	\$5.51	110	163	\$478.68	\$406.62
Lab	\$308,854	\$444,915	\$2.99	\$4.13	2,646	2,510	\$13.56	\$19.76
OP - Emergency Room & Related	\$2,927,700	\$2,751,473	\$28.35	\$25.56	958	962	\$355.22	\$318.72
OP - Other	\$2,559,802	\$2,690,705	\$24.79	\$24.99	491	545	\$606.01	\$549.91
Pharmacy	\$3,862,610	\$4,404,872	\$37.40	\$40.92	7,779	8,073	\$57.70	\$60.82
Prof - Anesthesia	\$235,337	\$233,440	\$2.28	\$2.17	160	164	\$171.28	\$158.37
Prof - Child EPSDT	\$70,707	\$70,816	\$0.68	\$0.66	387	337	\$21.25	\$23.39
Prof - Evaluation & Management	\$2,440,415	\$2,679,021	\$23.63	\$24.89	4,006	4,247	\$70.79	\$70.31
Prof - Maternity	\$1,527,179	\$1,586,615	\$14.79	\$14.74	277	243	\$640.86	\$728.81
Prof - Other	\$1,004,507	\$1,135,615	\$9.73	\$10.55	1,975	2,111	\$59.12	\$59.97
Prof - Psych	\$314,708	\$360,688	\$3.05	\$3.35	665	752	\$55.02	\$53.47
Prof - Specialist	\$481,416	\$506,511	\$4.66	\$4.71	628	649	\$89.07	\$86.95
Prof - Vision	\$166,444	\$175,139	\$1.61	\$1.63	196	91	\$98.60	\$213.58
Radiology	\$486,234	\$520,831	\$4.71	\$4.84	1,049	1,058	\$53.88	\$54.87
Transportation/Ambulance	\$444,679	\$482,814	\$4.31	\$4.48	629	475	\$82.15	\$113.28
<b>Total</b>	<b>\$21,370,872</b>	<b>\$22,943,644</b>	<b>\$206.95</b>	<b>\$213.13</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Female								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	237,426	254,243						
<b>Service Type</b>								
DME/Supplies	\$1,238,406	\$1,271,143	\$5.22	\$5.00	494	455	\$126.61	\$131.94
FQHC / RHC	\$804,726	\$840,968	\$3.39	\$3.31	493	452	\$82.50	\$87.77
Home Health	\$182,856	\$121,106	\$0.77	\$0.48	19	14	\$498.25	\$409.14
IP - Maternity	\$15,563,708	\$16,853,370	\$65.55	\$66.29	258	260	\$3,043.95	\$3,058.13
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$8,084,675	\$10,315,243	\$34.05	\$40.57	56	61	\$7,270.39	\$8,039.94
IP - Psych	\$794,933	\$1,039,858	\$3.35	\$4.09	80	88	\$500.90	\$555.78
Lab	\$1,117,317	\$1,825,400	\$4.71	\$7.18	4,331	4,129	\$13.04	\$20.87
OP - Emergency Room & Related	\$14,491,645	\$13,230,520	\$61.04	\$52.04	1,783	1,749	\$410.88	\$357.11
OP - Other	\$11,382,606	\$11,050,747	\$47.94	\$43.47	858	898	\$670.55	\$580.85
Pharmacy	\$17,746,048	\$19,533,969	\$74.74	\$76.83	18,224	17,836	\$49.22	\$51.69
Prof - Anesthesia	\$1,307,776	\$1,365,735	\$5.51	\$5.37	427	458	\$154.80	\$140.75
Prof - Child EPSDT	\$154,880	\$190,806	\$0.65	\$0.75	418	396	\$18.75	\$22.76
Prof - Evaluation & Management	\$8,941,081	\$9,534,387	\$37.66	\$37.50	6,806	6,897	\$66.39	\$65.25
Prof - Maternity	\$8,476,280	\$9,143,308	\$35.70	\$35.96	698	675	\$613.42	\$639.48
Prof - Other	\$4,312,988	\$4,514,514	\$18.17	\$17.76	2,398	2,477	\$90.90	\$86.02
Prof - Psych	\$686,743	\$812,203	\$2.89	\$3.19	651	688	\$53.35	\$55.69
Prof - Specialist	\$3,440,001	\$3,396,917	\$14.49	\$13.36	1,441	1,425	\$120.68	\$112.49
Prof - Vision	\$276,942	\$297,096	\$1.17	\$1.17	97	83	\$144.62	\$169.67
Radiology	\$3,135,296	\$3,580,681	\$13.21	\$14.08	2,643	2,743	\$59.96	\$61.60
Transportation/Ambulance	\$1,258,539	\$1,390,842	\$5.30	\$5.47	1,734	1,125	\$36.68	\$58.35
<b>Total</b>	<b>\$103,397,448</b>	<b>\$110,308,812</b>	<b>\$435.49</b>	<b>\$433.87</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	86,548	89,846						
<b>Service Type</b>								
DME/Supplies	\$171,404	\$220,014	\$1.98	\$2.45	176	221	\$135.28	\$132.86
FQHC / RHC	\$10,968	\$16,722	\$0.13	\$0.19	46	43	\$33.34	\$51.61
Home Health	\$11,834	\$22,395	\$0.14	\$0.25	3	8	\$563.54	\$386.12
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$749,322	\$1,278,759	\$8.66	\$14.23	14	13	\$7,646.15	\$13,183.08
IP - Psych	\$297,596	\$378,478	\$3.44	\$4.21	93	101	\$444.84	\$499.97
Lab	\$143,564	\$166,737	\$1.66	\$1.86	720	715	\$27.63	\$31.15
OP - Emergency Room & Related	\$1,256,204	\$1,210,897	\$14.51	\$13.48	475	473	\$366.45	\$342.06
OP - Other	\$2,026,421	\$2,014,956	\$23.41	\$22.43	370	409	\$759.81	\$658.27
Pharmacy	\$2,815,579	\$4,632,137	\$32.53	\$51.56	4,460	4,518	\$87.54	\$136.95
Prof - Anesthesia	\$61,755	\$54,183	\$0.71	\$0.60	52	50	\$166.01	\$143.72
Prof - Child EPSDT	\$16,651	\$14,811	\$0.19	\$0.16	184	159	\$12.53	\$12.47
Prof - Evaluation & Management	\$1,270,987	\$1,394,028	\$14.69	\$15.52	2,459	2,629	\$71.68	\$70.83
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,572,494	\$807,773	\$18.17	\$8.99	1,464	1,572	\$148.97	\$68.62
Prof - Psych	\$228,785	\$255,682	\$2.64	\$2.85	510	593	\$62.19	\$57.57
Prof - Specialist	\$346,701	\$368,142	\$4.01	\$4.10	357	363	\$134.48	\$135.35
Prof - Vision	\$135,537	\$144,297	\$1.57	\$1.61	149	70	\$125.96	\$273.81
Radiology	\$103,254	\$116,828	\$1.19	\$1.30	614	646	\$23.30	\$24.17
Transportation/Ambulance	\$328,190	\$354,502	\$3.79	\$3.95	411	273	\$110.73	\$173.52
<b>Total</b>	<b>\$11,547,247</b>	<b>\$13,451,341</b>	<b>\$133.42</b>	<b>\$149.72</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	18,787	23,480						
<b>Service Type</b>								
DME/Supplies	\$141,766	\$166,326	\$7.55	\$7.08	637	579	\$142.19	\$146.93
FQHC / RHC	\$51,324	\$110,472	\$2.73	\$4.70	343	299	\$95.57	\$188.84
Home Health	\$5,556	\$13,569	\$0.30	\$0.58	11	19	\$308.65	\$357.08
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,724,597	\$1,495,427	\$91.80	\$63.69	80	59	\$13,687.28	\$12,891.61
IP - Psych	\$69,278	\$66,591	\$3.69	\$2.84	85	71	\$520.88	\$479.07
Lab	\$40,806	\$62,687	\$2.17	\$2.67	1,316	1,225	\$19.80	\$26.16
OP - Emergency Room & Related	\$765,755	\$797,461	\$40.76	\$33.96	1,265	1,186	\$386.55	\$343.59
OP - Other	\$809,068	\$981,381	\$43.07	\$41.80	678	693	\$762.55	\$723.73
Pharmacy	\$1,575,305	\$1,528,679	\$83.85	\$65.11	14,235	12,893	\$70.69	\$60.60
Prof - Anesthesia	\$34,286	\$37,798	\$1.83	\$1.61	141	167	\$155.85	\$115.59
Prof - Child EPSDT	\$3,769	\$5,967	\$0.20	\$0.25	218	219	\$11.05	\$13.91
Prof - Evaluation & Management	\$527,330	\$617,781	\$28.07	\$26.31	5,081	4,808	\$66.29	\$65.67
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$182,196	\$216,151	\$9.70	\$9.21	1,819	1,586	\$63.97	\$69.64
Prof - Psych	\$49,087	\$61,937	\$2.61	\$2.64	559	429	\$56.10	\$73.73
Prof - Specialist	\$232,385	\$275,348	\$12.37	\$11.73	1,025	959	\$144.79	\$146.77
Prof - Vision	\$17,903	\$30,271	\$0.95	\$1.29	53	92	\$215.70	\$168.17
Radiology	\$98,867	\$112,882	\$5.26	\$4.81	1,721	1,699	\$36.69	\$33.96
Transportation/Ambulance	\$83,647	\$109,814	\$4.45	\$4.68	1,006	718	\$53.11	\$78.16
<b>Total</b>	<b>\$6,412,924</b>	<b>\$6,690,543</b>	<b>\$341.35</b>	<b>\$284.95</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Tidewater</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	22,607	26,914						
<b>Service Type</b>								
DME/Supplies	\$310,546	\$399,964	\$13.74	\$14.86	1,512	1,523	\$109.04	\$117.12
FQHC / RHC	\$141,779	\$95,887	\$6.27	\$3.56	976	743	\$77.10	\$57.52
Home Health	\$78,617	\$43,966	\$3.48	\$1.63	65	44	\$644.41	\$448.63
IP - Maternity	\$12,708	\$29,424	\$0.56	\$1.09	2	0	\$4,236.00	\$29,424.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,580,750	\$3,670,013	\$114.16	\$136.36	136	144	\$10,081.06	\$11,327.20
IP - Psych	\$118,988	\$122,738	\$5.26	\$4.56	176	95	\$358.40	\$576.24
Lab	\$94,223	\$163,101	\$4.17	\$6.06	3,828	3,515	\$13.06	\$20.69
OP - Emergency Room & Related	\$1,214,607	\$1,254,227	\$53.73	\$46.60	1,155	1,157	\$558.18	\$483.32
OP - Other	\$2,806,161	\$2,762,722	\$124.13	\$102.65	2,032	2,063	\$733.06	\$596.96
Pharmacy	\$4,221,643	\$4,610,885	\$186.74	\$171.32	37,287	36,290	\$60.10	\$56.65
Prof - Anesthesia	\$98,383	\$109,714	\$4.35	\$4.08	380	416	\$137.41	\$117.59
Prof - Child EPSDT	\$21,223	\$13,816	\$0.94	\$0.51	610	722	\$18.47	\$8.53
Prof - Evaluation & Management	\$1,236,068	\$1,487,442	\$54.68	\$55.27	9,589	9,795	\$68.42	\$67.71
Prof - Maternity	\$6,386	\$539	\$0.28	\$0.02	14	1	\$245.63	\$179.66
Prof - Other	\$603,001	\$951,546	\$26.67	\$35.36	3,639	4,083	\$87.97	\$103.91
Prof - Psych	\$84,598	\$102,763	\$3.74	\$3.82	947	972	\$47.39	\$47.12
Prof - Specialist	\$598,265	\$773,674	\$26.46	\$28.75	2,272	2,295	\$139.75	\$150.32
Prof - Vision	\$48,310	\$71,948	\$2.14	\$2.67	274	365	\$93.44	\$87.85
Radiology	\$348,999	\$350,900	\$15.44	\$13.04	3,810	3,875	\$48.62	\$40.38
Transportation/Ambulance	\$121,104	\$149,742	\$5.36	\$5.56	3,244	2,598	\$19.81	\$25.69
<b>Total</b>	<b>\$14,746,360</b>	<b>\$17,165,011</b>	<b>\$652.29</b>	<b>\$637.77</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,544,789	1,567,554						
<b>Service Type</b>								
DME/Supplies	\$3,793,787	\$4,069,598	\$2.46	\$2.60	261	281	\$112.84	\$111.03
FQHC / RHC	\$1,252,030	\$1,251,432	\$0.81	\$0.80	148	131	\$65.57	\$73.16
Home Health	\$687,613	\$502,349	\$0.45	\$0.32	12	11	\$443.91	\$359.59
IP - Maternity	\$18,297,744	\$19,661,629	\$11.84	\$12.54	47	50	\$3,002.58	\$3,024.40
IP - Newborn	\$23,532,775	\$28,078,399	\$15.23	\$17.91	34	44	\$5,402.07	\$4,904.52
IP - Other	\$23,544,320	\$28,966,707	\$15.24	\$18.48	21	23	\$8,824.71	\$9,743.26
IP - Psych	\$4,191,653	\$4,603,942	\$2.71	\$2.94	52	57	\$623.29	\$622.24
Lab	\$3,769,330	\$4,872,096	\$2.44	\$3.11	1,652	1,663	\$17.72	\$22.43
OP - Emergency Room & Related	\$33,531,605	\$31,920,657	\$21.71	\$20.36	832	867	\$313.04	\$281.89
OP - Other	\$37,084,680	\$38,894,721	\$24.01	\$24.81	505	547	\$570.53	\$544.36
Pharmacy	\$57,482,004	\$63,768,529	\$37.21	\$40.68	7,414	7,711	\$60.23	\$63.30
Prof - Anesthesia	\$2,509,562	\$2,689,426	\$1.62	\$1.72	122	138	\$159.77	\$148.76
Prof - Child EPSDT	\$1,758,482	\$1,375,784	\$1.14	\$0.88	980	755	\$13.94	\$13.96
Prof - Evaluation & Management	\$44,060,411	\$47,055,253	\$28.52	\$30.02	4,705	5,005	\$72.74	\$71.97
Prof - Maternity	\$10,016,807	\$10,757,422	\$6.48	\$6.86	126	127	\$616.80	\$650.07
Prof - Other	\$15,859,818	\$16,780,306	\$10.27	\$10.70	2,379	2,653	\$51.78	\$48.41
Prof - Psych	\$3,588,624	\$3,939,350	\$2.32	\$2.51	425	464	\$65.60	\$64.99
Prof - Specialist	\$8,231,219	\$8,763,806	\$5.33	\$5.59	618	622	\$103.49	\$107.89
Prof - Vision	\$2,329,512	\$2,451,718	\$1.51	\$1.56	129	85	\$140.06	\$220.99
Radiology	\$4,846,218	\$5,465,988	\$3.14	\$3.49	893	963	\$42.17	\$43.47
Transportation/Ambulance	\$6,078,959	\$6,442,721	\$3.94	\$4.11	629	452	\$75.13	\$109.14
<b>Total</b>	<b>\$306,447,154</b>	<b>\$332,311,834</b>	<b>\$198.37</b>	<b>\$211.99</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	45,422	46,046						
<b>Service Type</b>								
DME/Supplies	\$194,969	\$169,909	\$4.29	\$3.69	715	674	\$72.08	\$65.65
FQHC / RHC	\$75,527	\$128,650	\$1.66	\$2.79	518	635	\$38.55	\$52.83
Home Health	\$31,030	\$25,991	\$0.68	\$0.56	62	28	\$133.18	\$238.45
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$9,371,966	\$10,074,039	\$206.33	\$218.78	1,257	854	\$1,969.17	\$3,073.22
IP - Other	\$1,348,543	\$991,598	\$29.69	\$21.53	130	67	\$2,740.94	\$3,828.56
IP - Psych	\$31,075	\$28,479	\$0.68	\$0.62	0	1	-	\$5,695.84
Lab	\$106,914	\$97,056	\$2.35	\$2.11	2,100	1,995	\$13.45	\$12.68
OP - Emergency Room & Related	\$417,373	\$552,543	\$9.19	\$12.00	1,010	997	\$109.19	\$144.45
OP - Other	\$429,865	\$482,473	\$9.46	\$10.48	663	369	\$171.20	\$340.39
Pharmacy	\$1,045,057	\$913,782	\$23.01	\$19.84	4,735	4,608	\$58.31	\$51.68
Prof - Anesthesia	\$39,125	\$52,943	\$0.86	\$1.15	59	66	\$174.67	\$208.44
Prof - Child EPSDT	\$279,389	\$207,084	\$6.15	\$4.50	5,542	4,342	\$13.32	\$12.43
Prof - Evaluation & Management	\$4,642,547	\$4,548,798	\$102.21	\$98.79	14,225	14,270	\$86.22	\$83.07
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,139,355	\$1,082,134	\$25.08	\$23.50	7,710	8,244	\$39.04	\$34.21
Prof - Psych	\$24,035	\$20,515	\$0.53	\$0.45	0	2	\$24,035.14	\$2,930.68
Prof - Specialist	\$290,558	\$316,783	\$6.40	\$6.88	601	588	\$127.77	\$140.30
Prof - Vision	\$85,634	\$92,714	\$1.89	\$2.01	70	100	\$325.18	\$241.30
Radiology	\$67,765	\$67,348	\$1.49	\$1.46	1,216	1,111	\$14.73	\$15.80
Transportation/Ambulance	\$213,036	\$268,780	\$4.69	\$5.84	351	360	\$160.32	\$194.70
<b>Total</b>	<b>\$19,833,764</b>	<b>\$20,121,619</b>	<b>\$436.66</b>	<b>\$436.99</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	171,126	166,239						
<b>Service Type</b>								
DME/Supplies	\$304,037	\$260,085	\$1.78	\$1.56	307	295	\$69.49	\$63.70
FQHC / RHC	\$116,523	\$138,424	\$0.68	\$0.83	212	248	\$38.56	\$40.30
Home Health	\$11,342	\$20,024	\$0.07	\$0.12	4	4	\$210.04	\$370.81
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,756,170	\$3,038,970	\$10.26	\$18.28	36	34	\$3,430.02	\$6,452.17
IP - Psych	\$130,477	\$86,927	\$0.76	\$0.52	3	1	\$3,034.35	\$8,692.73
Lab	\$398,980	\$370,208	\$2.33	\$2.23	2,006	1,964	\$13.95	\$13.61
OP - Emergency Room & Related	\$1,179,547	\$1,524,864	\$6.89	\$9.17	722	745	\$114.55	\$147.72
OP - Other	\$2,136,991	\$1,649,298	\$12.49	\$9.92	496	298	\$302.39	\$399.54
Pharmacy	\$2,767,797	\$2,957,032	\$16.17	\$17.79	4,853	5,070	\$39.99	\$42.10
Prof - Anesthesia	\$129,955	\$105,331	\$0.76	\$0.63	80	76	\$113.30	\$100.70
Prof - Child EPSDT	\$231,571	\$171,582	\$1.35	\$1.03	1,267	1,077	\$12.81	\$11.50
Prof - Evaluation & Management	\$5,028,058	\$5,341,345	\$29.38	\$32.13	4,900	5,195	\$71.96	\$74.22
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,148,301	\$1,491,362	\$12.55	\$8.97	2,261	2,509	\$66.62	\$42.92
Prof - Psych	\$220,781	\$210,624	\$1.29	\$1.27	166	162	\$93.51	\$93.99
Prof - Specialist	\$485,506	\$504,656	\$2.84	\$3.04	303	286	\$112.33	\$127.57
Prof - Vision	\$330,134	\$332,459	\$1.93	\$2.00	93	91	\$249.16	\$264.91
Radiology	\$84,719	\$94,536	\$0.50	\$0.57	371	403	\$16.00	\$16.93
Transportation/Ambulance	\$513,733	\$546,166	\$3.00	\$3.29	184	234	\$195.71	\$168.21
<b>Total</b>	<b>\$17,974,621</b>	<b>\$18,843,893</b>	<b>\$105.04</b>	<b>\$113.35</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 6-14								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	251,604	260,616						
<b>Service Type</b>								
DME/Supplies	\$297,247	\$282,198	\$1.18	\$1.08	141	132	\$100.25	\$98.60
FQHC / RHC	\$159,335	\$164,373	\$0.63	\$0.63	177	180	\$43.05	\$42.00
Home Health	\$12,296	\$14,242	\$0.05	\$0.05	4	3	\$161.79	\$219.10
IP - Maternity	\$14,352	\$7,057	\$0.06	\$0.03	0	0	\$1,594.61	\$2,352.26
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,850,497	\$1,447,450	\$7.35	\$5.55	20	12	\$4,480.62	\$5,524.62
IP - Psych	\$989,717	\$1,255,028	\$3.93	\$4.82	70	86	\$674.19	\$673.66
Lab	\$524,582	\$549,912	\$2.08	\$2.11	1,637	1,746	\$15.28	\$14.51
OP - Emergency Room & Related	\$1,343,599	\$1,666,683	\$5.34	\$6.40	435	448	\$147.32	\$171.17
OP - Other	\$1,710,123	\$1,961,858	\$6.80	\$7.53	330	257	\$247.52	\$351.02
Pharmacy	\$10,540,983	\$11,922,798	\$41.90	\$45.75	6,761	7,136	\$74.35	\$76.94
Prof - Anesthesia	\$82,945	\$78,811	\$0.33	\$0.30	34	32	\$116.82	\$112.59
Prof - Child EPSDT	\$50,033	\$38,342	\$0.20	\$0.15	193	151	\$12.37	\$11.70
Prof - Evaluation & Management	\$5,587,336	\$6,655,645	\$22.21	\$25.54	3,572	3,839	\$74.61	\$79.84
Prof - Maternity	\$5,262	\$6,568	\$0.02	\$0.03	1	1	\$478.38	\$505.21
Prof - Other	\$1,244,313	\$1,310,718	\$4.95	\$5.03	1,546	1,707	\$38.39	\$35.36
Prof - Psych	\$904,374	\$988,974	\$3.59	\$3.79	618	615	\$69.74	\$73.99
Prof - Specialist	\$645,737	\$608,933	\$2.57	\$2.34	286	280	\$107.60	\$100.15
Prof - Vision	\$513,994	\$548,376	\$2.04	\$2.10	167	123	\$146.65	\$204.62
Radiology	\$217,310	\$234,229	\$0.86	\$0.90	526	533	\$19.72	\$20.23
Transportation/Ambulance	\$783,716	\$832,055	\$3.11	\$3.19	277	360	\$134.94	\$106.55
<b>Total</b>	<b>\$27,477,752</b>	<b>\$30,574,249</b>	<b>\$109.21</b>	<b>\$117.32</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Female								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	47,667	49,764						
<b>Service Type</b>								
DME/Supplies	\$117,048	\$84,785	\$2.46	\$1.70	163	152	\$180.91	\$134.58
FQHC / RHC	\$68,674	\$54,279	\$1.44	\$1.09	360	319	\$48.02	\$41.09
Home Health	\$23,169	\$15,863	\$0.49	\$0.32	25	23	\$234.03	\$166.98
IP - Maternity	\$1,518,842	\$1,623,199	\$31.86	\$32.62	243	194	\$1,573.93	\$2,013.90
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$690,489	\$636,126	\$14.49	\$12.78	31	26	\$5,523.91	\$5,836.02
IP - Psych	\$400,199	\$497,263	\$8.40	\$9.99	160	194	\$629.24	\$616.95
Lab	\$418,733	\$410,519	\$8.78	\$8.25	5,974	5,598	\$17.64	\$17.68
OP - Emergency Room & Related	\$812,130	\$813,776	\$17.04	\$16.35	1,058	942	\$193.18	\$208.34
OP - Other	\$1,057,216	\$1,058,901	\$22.18	\$21.28	1,432	904	\$185.80	\$282.37
Pharmacy	\$2,461,952	\$2,791,587	\$51.65	\$56.10	11,117	11,424	\$55.75	\$58.93
Prof - Anesthesia	\$96,008	\$100,847	\$2.01	\$2.03	158	157	\$153.37	\$155.15
Prof - Child EPSDT	\$33,397	\$34,530	\$0.70	\$0.69	432	359	\$19.47	\$23.19
Prof - Evaluation & Management	\$1,596,759	\$1,805,528	\$33.50	\$36.28	5,438	5,709	\$73.92	\$76.26
Prof - Maternity	\$889,339	\$980,740	\$18.66	\$19.71	450	486	\$497.67	\$486.24
Prof - Other	\$509,973	\$576,145	\$10.70	\$11.58	2,043	2,269	\$62.85	\$61.23
Prof - Psych	\$160,394	\$212,032	\$3.36	\$4.26	593	747	\$68.05	\$68.42
Prof - Specialist	\$215,567	\$216,217	\$4.52	\$4.34	746	778	\$72.75	\$67.00
Prof - Vision	\$92,766	\$101,494	\$1.95	\$2.04	198	154	\$117.72	\$159.08
Radiology	\$272,018	\$315,140	\$5.71	\$6.33	1,465	1,486	\$46.74	\$51.13
Transportation/Ambulance	\$204,837	\$218,275	\$4.30	\$4.39	469	450	\$109.89	\$116.85
<b>Total</b>	<b>\$11,639,510</b>	<b>\$12,547,247</b>	<b>\$244.18</b>	<b>\$252.14</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	92,862	96,276						
<b>Service Type</b>								
DME/Supplies	\$313,504	\$416,362	\$3.38	\$4.32	341	379	\$118.84	\$136.87
FQHC / RHC	\$148,273	\$134,064	\$1.60	\$1.39	451	375	\$42.49	\$44.58
Home Health	\$93,598	\$81,767	\$1.01	\$0.85	77	46	\$156.52	\$219.21
IP - Maternity	\$6,686,580	\$6,885,121	\$72.01	\$71.51	582	362	\$1,483.60	\$2,367.65
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$5,066,823	\$4,572,678	\$54.56	\$47.50	164	95	\$3,995.92	\$6,008.77
IP - Psych	\$728,271	\$622,619	\$7.84	\$6.47	154	132	\$610.97	\$588.49
Lab	\$1,667,395	\$1,483,759	\$17.96	\$15.41	10,014	8,758	\$21.52	\$21.12
OP - Emergency Room & Related	\$2,686,879	\$2,972,093	\$28.93	\$30.87	1,724	1,546	\$201.42	\$239.55
OP - Other	\$5,323,837	\$5,766,217	\$57.33	\$59.89	3,241	1,873	\$212.29	\$383.75
Pharmacy	\$9,569,783	\$10,066,040	\$103.05	\$104.55	27,109	25,805	\$45.62	\$48.62
Prof - Anesthesia	\$419,150	\$419,600	\$4.51	\$4.36	370	357	\$146.50	\$146.56
Prof - Child EPSDT	\$78,427	\$83,906	\$0.84	\$0.87	578	465	\$17.53	\$22.49
Prof - Evaluation & Management	\$4,448,236	\$4,673,723	\$47.90	\$48.55	8,187	8,185	\$70.21	\$71.17
Prof - Maternity	\$3,712,836	\$3,709,752	\$39.98	\$38.53	982	949	\$488.34	\$487.16
Prof - Other	\$1,385,862	\$1,537,457	\$14.92	\$15.97	2,594	2,788	\$69.04	\$68.73
Prof - Psych	\$391,341	\$393,350	\$4.21	\$4.09	919	823	\$55.06	\$59.55
Prof - Specialist	\$1,433,856	\$1,335,216	\$15.44	\$13.87	1,724	1,682	\$107.47	\$98.95
Prof - Vision	\$171,874	\$189,104	\$1.85	\$1.96	169	138	\$131.60	\$170.83
Radiology	\$1,233,098	\$1,368,795	\$13.28	\$14.22	3,211	3,238	\$49.62	\$52.69
Transportation/Ambulance	\$633,556	\$709,376	\$6.82	\$7.37	1,184	1,163	\$69.14	\$76.06
<b>Total</b>	<b>\$46,193,179</b>	<b>\$47,420,998</b>	<b>\$497.44</b>	<b>\$492.55</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	40,054	41,821						
<b>Service Type</b>								
DME/Supplies	\$64,838	\$90,901	\$1.62	\$2.17	147	159	\$132.05	\$164.38
FQHC / RHC	\$22,321	\$25,407	\$0.56	\$0.61	154	178	\$43.34	\$41.04
Home Health	\$6,691	\$6,160	\$0.17	\$0.15	4	6	\$514.68	\$280.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$564,012	\$906,631	\$14.08	\$21.68	20	20	\$8,418.08	\$12,769.46
IP - Psych	\$301,967	\$330,114	\$7.54	\$7.89	148	161	\$611.27	\$587.39
Lab	\$95,077	\$89,187	\$2.37	\$2.13	1,535	1,535	\$18.56	\$16.68
OP - Emergency Room & Related	\$366,478	\$395,069	\$9.15	\$9.45	605	543	\$181.60	\$208.92
OP - Other	\$542,916	\$686,805	\$13.55	\$16.42	629	398	\$258.65	\$495.17
Pharmacy	\$2,026,113	\$1,930,338	\$50.58	\$46.16	6,472	6,893	\$93.80	\$80.35
Prof - Anesthesia	\$17,807	\$17,335	\$0.44	\$0.41	46	43	\$114.88	\$114.80
Prof - Child EPSDT	\$8,374	\$7,418	\$0.21	\$0.18	206	166	\$12.21	\$12.81
Prof - Evaluation & Management	\$840,171	\$991,826	\$20.98	\$23.72	3,296	3,441	\$76.37	\$82.71
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$172,190	\$352,370	\$4.30	\$8.43	1,208	1,433	\$42.71	\$70.56
Prof - Psych	\$118,050	\$141,282	\$2.95	\$3.38	494	577	\$71.63	\$70.25
Prof - Specialist	\$180,331	\$185,053	\$4.50	\$4.42	392	400	\$137.66	\$132.75
Prof - Vision	\$72,933	\$82,524	\$1.82	\$1.97	132	128	\$165.01	\$184.62
Radiology	\$62,689	\$75,429	\$1.57	\$1.80	846	870	\$22.19	\$24.88
Transportation/Ambulance	\$130,198	\$155,645	\$3.25	\$3.72	263	356	\$148.46	\$125.42
<b>Total</b>	<b>\$5,593,156</b>	<b>\$6,469,495</b>	<b>\$139.64</b>	<b>\$154.69</b>				

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	14,554	16,369						
<b>Service Type</b>								
DME/Supplies	\$74,556	\$69,232	\$5.12	\$4.23	525	497	\$117.04	\$102.11
FQHC / RHC	\$19,316	\$16,385	\$1.33	\$1.00	372	268	\$42.83	\$44.77
Home Health	\$17,376	\$9,818	\$1.19	\$0.60	79	27	\$181.00	\$265.36
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,144,359	\$956,347	\$78.63	\$58.42	382	73	\$2,471.62	\$9,660.07
IP - Psych	\$99,695	\$147,867	\$6.85	\$9.03	139	188	\$589.91	\$575.36
Lab	\$127,907	\$100,097	\$8.79	\$6.12	4,290	3,410	\$24.58	\$21.52
OP - Emergency Room & Related	\$353,681	\$431,301	\$24.30	\$26.35	1,468	1,321	\$198.70	\$239.35
OP - Other	\$714,374	\$649,135	\$49.08	\$39.66	2,523	992	\$233.46	\$479.77
Pharmacy	\$1,327,795	\$1,589,546	\$91.23	\$97.11	21,861	21,150	\$50.08	\$55.10
Prof - Anesthesia	\$21,402	\$16,953	\$1.47	\$1.04	143	114	\$123.71	\$109.37
Prof - Child EPSDT	\$3,892	\$4,522	\$0.27	\$0.28	279	270	\$11.51	\$12.29
Prof - Evaluation & Management	\$533,981	\$603,448	\$36.69	\$36.87	6,158	6,147	\$71.49	\$71.97
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$188,824	\$168,425	\$12.97	\$10.29	1,805	1,831	\$86.26	\$67.45
Prof - Psych	\$38,524	\$49,354	\$2.65	\$3.02	642	668	\$49.45	\$54.18
Prof - Specialist	\$225,282	\$185,235	\$15.48	\$11.32	1,215	1,121	\$152.84	\$121.15
Prof - Vision	\$29,359	\$29,296	\$2.02	\$1.79	167	99	\$144.62	\$217.01
Radiology	\$75,112	\$92,739	\$5.16	\$5.67	2,192	2,301	\$28.26	\$29.54
Transportation/Ambulance	\$90,326	\$97,610	\$6.21	\$5.96	721	704	\$103.35	\$101.68
<b>Total</b>	<b>\$5,085,760</b>	<b>\$5,217,310</b>	<b>\$349.44</b>	<b>\$318.73</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Roanoke/Alleghany</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	10,073	11,478						
<b>Service Type</b>								
DME/Supplies	\$79,552	\$102,254	\$7.90	\$8.91	1,231	1,194	\$77.01	\$89.54
FQHC / RHC	\$32,381	\$32,638	\$3.21	\$2.84	1,083	882	\$35.62	\$38.67
Home Health	\$53,559	\$21,417	\$5.32	\$1.87	538	67	\$118.49	\$334.64
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,644,473	\$1,619,905	\$163.26	\$141.13	567	204	\$3,454.78	\$8,307.20
IP - Psych	\$93,032	\$155,983	\$9.24	\$13.59	175	254	\$632.87	\$641.91
Lab	\$143,061	\$138,765	\$14.20	\$12.09	8,600	7,710	\$19.82	\$18.82
OP - Emergency Room & Related	\$240,949	\$280,053	\$23.92	\$24.40	1,240	1,031	\$231.46	\$284.03
OP - Other	\$901,131	\$901,064	\$89.46	\$78.50	4,620	2,201	\$232.37	\$428.06
Pharmacy	\$2,115,463	\$2,430,793	\$210.01	\$211.78	49,476	47,169	\$50.94	\$53.88
Prof - Anesthesia	\$28,761	\$24,924	\$2.86	\$2.17	299	234	\$114.59	\$111.27
Prof - Child EPSDT	\$5,249	\$5,419	\$0.52	\$0.47	656	533	\$9.53	\$10.63
Prof - Evaluation & Management	\$581,152	\$642,544	\$57.69	\$55.98	9,671	9,282	\$71.59	\$72.37
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$162,117	\$284,665	\$16.09	\$24.80	4,006	4,083	\$48.21	\$72.90
Prof - Psych	\$39,868	\$45,359	\$3.96	\$3.95	724	798	\$65.57	\$59.45
Prof - Specialist	\$276,963	\$263,240	\$27.50	\$22.93	2,522	2,347	\$130.83	\$117.26
Prof - Vision	\$31,391	\$33,284	\$3.12	\$2.90	334	300	\$112.11	\$115.97
Radiology	\$107,953	\$107,950	\$10.72	\$9.40	3,859	3,484	\$33.33	\$32.40
Transportation/Ambulance	\$99,165	\$117,512	\$9.84	\$10.24	2,447	2,851	\$48.28	\$43.09
<b>Total</b>	<b>\$6,636,221</b>	<b>\$7,207,771</b>	<b>\$658.81</b>	<b>\$627.96</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	673,362	688,609						
<b>Service Type</b>								
DME/Supplies	\$1,445,753	\$1,475,726	\$2.15	\$2.14	276	271	\$93.33	\$94.73
FQHC / RHC	\$642,352	\$694,220	\$0.95	\$1.01	276	278	\$41.50	\$43.55
Home Health	\$249,063	\$195,281	\$0.37	\$0.28	29	14	\$153.65	\$238.44
IP - Maternity	\$8,219,773	\$8,515,377	\$12.21	\$12.37	98	65	\$1,499.68	\$2,290.93
IP - Newborn	\$9,371,966	\$10,074,039	\$13.92	\$14.63	85	57	\$1,969.17	\$3,073.22
IP - Other	\$14,065,365	\$14,169,705	\$20.89	\$20.58	68	39	\$3,685.89	\$6,362.69
IP - Psych	\$2,774,432	\$3,124,282	\$4.12	\$4.54	74	84	\$668.70	\$650.35
Lab	\$3,482,650	\$3,239,504	\$5.17	\$4.70	3,380	3,200	\$18.36	\$17.64
OP - Emergency Room & Related	\$7,400,635	\$8,636,383	\$10.99	\$12.54	813	782	\$162.21	\$192.45
OP - Other	\$12,816,454	\$13,155,751	\$19.03	\$19.10	1,003	606	\$227.68	\$378.52
Pharmacy	\$31,854,943	\$34,601,915	\$47.31	\$50.25	10,202	10,374	\$55.64	\$58.13
Prof - Anesthesia	\$835,153	\$816,745	\$1.24	\$1.19	110	105	\$135.86	\$135.16
Prof - Child EPSDT	\$690,331	\$552,803	\$1.03	\$0.80	906	724	\$13.57	\$13.31
Prof - Evaluation & Management	\$23,258,238	\$25,262,858	\$34.54	\$36.69	5,527	5,728	\$74.99	\$76.86
Prof - Maternity	\$4,607,437	\$4,697,060	\$6.84	\$6.82	168	168	\$490.10	\$486.99
Prof - Other	\$6,950,935	\$6,803,277	\$10.32	\$9.88	2,346	2,555	\$52.81	\$46.40
Prof - Psych	\$1,897,367	\$2,061,490	\$2.82	\$2.99	496	505	\$68.18	\$71.08
Prof - Specialist	\$3,753,801	\$3,615,332	\$5.57	\$5.25	602	596	\$111.05	\$105.76
Prof - Vision	\$1,328,086	\$1,409,251	\$1.97	\$2.05	145	121	\$163.71	\$203.26
Radiology	\$2,120,664	\$2,356,165	\$3.15	\$3.42	1,075	1,099	\$35.16	\$37.36
Transportation/Ambulance	\$2,668,568	\$2,945,419	\$3.96	\$4.28	438	498	\$108.51	\$103.13
<b>Total</b>	<b>\$140,433,964</b>	<b>\$148,402,582</b>	<b>\$208.56</b>	<b>\$215.51</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age Under 1								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	27,274	27,118						
<b>Service Type</b>								
DME/Supplies	\$128,823	\$103,478	\$4.72	\$3.82	917	781	\$61.83	\$58.61
FQHC / RHC	\$13,766	\$18,525	\$0.50	\$0.68	135	176	\$44.99	\$46.66
Home Health	\$16,626	\$15,044	\$0.61	\$0.55	25	24	\$296.89	\$273.52
IP - Maternity	\$0	\$3,971	\$0.00	\$0.15	0	7	-	\$264.76
IP - Newborn	\$5,467,562	\$5,752,120	\$200.47	\$212.11	2,070	1,215	\$1,162.10	\$2,094.41
IP - Other	\$995,470	\$1,146,265	\$36.50	\$42.27	177	112	\$2,470.15	\$4,530.69
IP - Psych	\$26,046	\$18,209	\$0.95	\$0.67	1	0	\$8,681.85	-
Lab	\$82,067	\$68,303	\$3.01	\$2.52	2,897	2,292	\$12.47	\$13.19
OP - Emergency Room & Related	\$323,158	\$446,145	\$11.85	\$16.45	1,357	1,355	\$104.76	\$145.71
OP - Other	\$349,343	\$331,384	\$12.81	\$12.22	1,534	982	\$100.19	\$149.38
Pharmacy	\$775,967	\$427,017	\$28.45	\$15.75	5,635	5,664	\$60.58	\$33.36
Prof - Anesthesia	\$26,422	\$19,227	\$0.97	\$0.71	64	66	\$182.22	\$129.04
Prof - Child EPSDT	\$130,343	\$108,761	\$4.78	\$4.01	4,103	3,664	\$13.98	\$13.13
Prof - Evaluation & Management	\$2,805,422	\$2,871,655	\$102.86	\$105.89	15,236	15,804	\$81.02	\$80.41
Prof - Maternity	\$0	\$2,342	\$0.00	\$0.09	0	1	-	\$780.53
Prof - Other	\$709,518	\$738,171	\$26.01	\$27.22	9,194	9,752	\$33.95	\$33.49
Prof - Psych	\$19,540	\$14,040	\$0.72	\$0.52	0	0	-	-
Prof - Specialist	\$203,858	\$203,751	\$7.47	\$7.51	725	764	\$123.66	\$117.99
Prof - Vision	\$44,920	\$43,028	\$1.65	\$1.59	71	59	\$278.07	\$325.08
Radiology	\$47,080	\$46,634	\$1.73	\$1.72	1,274	1,332	\$16.26	\$15.49
Transportation/Ambulance	\$172,444	\$185,351	\$6.32	\$6.83	442	485	\$171.61	\$168.96
<b>Total</b>	<b>\$12,338,375</b>	<b>\$12,563,422</b>	<b>\$452.39</b>	<b>\$463.29</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 1-5								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	101,199	99,317						
<b>Service Type</b>								
DME/Supplies	\$122,917	\$152,066	\$1.21	\$1.53	300	285	\$48.55	\$64.46
FQHC / RHC	\$44,211	\$42,077	\$0.44	\$0.42	115	113	\$45.72	\$45.10
Home Health	\$4,536	\$6,602	\$0.04	\$0.07	4	2	\$141.74	\$471.59
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,170,358	\$882,492	\$11.56	\$8.89	93	42	\$1,487.11	\$2,521.40
IP - Psych	\$90,887	\$63,650	\$0.90	\$0.64	1	0	\$15,147.86	-
Lab	\$291,469	\$271,724	\$2.88	\$2.74	2,703	2,635	\$12.79	\$12.46
OP - Emergency Room & Related	\$957,307	\$1,277,888	\$9.46	\$12.87	1,064	1,042	\$106.68	\$148.20
OP - Other	\$1,316,883	\$1,300,549	\$13.01	\$13.09	1,244	713	\$125.57	\$220.28
Pharmacy	\$1,968,986	\$1,906,976	\$19.46	\$19.20	6,487	6,457	\$35.99	\$35.69
Prof - Anesthesia	\$106,639	\$80,113	\$1.05	\$0.81	138	112	\$91.69	\$86.33
Prof - Child EPSDT	\$122,351	\$105,343	\$1.21	\$1.06	1,110	1,026	\$13.07	\$12.41
Prof - Evaluation & Management	\$3,514,030	\$3,361,206	\$34.72	\$33.84	6,178	6,187	\$67.45	\$65.64
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$810,669	\$900,932	\$8.01	\$9.07	2,388	2,497	\$40.25	\$43.59
Prof - Psych	\$134,396	\$120,784	\$1.33	\$1.22	142	135	\$112.09	\$108.42
Prof - Specialist	\$396,976	\$354,147	\$3.92	\$3.57	434	413	\$108.49	\$103.64
Prof - Vision	\$192,103	\$189,167	\$1.90	\$1.90	187	139	\$121.58	\$164.64
Radiology	\$79,403	\$78,198	\$0.78	\$0.79	584	555	\$16.13	\$17.01
Transportation/Ambulance	\$406,463	\$401,100	\$4.02	\$4.04	334	340	\$144.14	\$142.44
<b>Total</b>	<b>\$11,730,584</b>	<b>\$11,495,017</b>	<b>\$115.92</b>	<b>\$115.74</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 6-14								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	162,352	164,565						
<b>Service Type</b>								
DME/Supplies	\$183,547	\$247,281	\$1.13	\$1.50	150	153	\$90.19	\$117.70
FQHC / RHC	\$86,160	\$92,875	\$0.53	\$0.56	141	149	\$45.02	\$45.42
Home Health	\$9,686	\$13,612	\$0.06	\$0.08	13	3	\$55.35	\$316.57
IP - Maternity	\$12,591	\$7,609	\$0.08	\$0.05	0	0	\$4,197.00	\$2,536.45
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$996,310	\$1,471,554	\$6.14	\$8.94	51	19	\$1,446.02	\$5,638.14
IP - Psych	\$323,241	\$300,349	\$1.99	\$1.83	28	24	\$857.40	\$896.57
Lab	\$421,065	\$395,973	\$2.59	\$2.41	2,083	2,069	\$14.94	\$13.96
OP - Emergency Room & Related	\$1,286,363	\$1,690,273	\$7.92	\$10.27	721	674	\$131.89	\$182.95
OP - Other	\$1,516,976	\$1,749,174	\$9.34	\$10.63	946	521	\$118.59	\$244.98
Pharmacy	\$6,563,823	\$7,285,167	\$40.43	\$44.27	8,165	8,491	\$59.42	\$62.56
Prof - Anesthesia	\$73,764	\$66,148	\$0.45	\$0.40	58	52	\$94.33	\$92.90
Prof - Child EPSDT	\$26,677	\$21,242	\$0.16	\$0.13	172	135	\$11.48	\$11.49
Prof - Evaluation & Management	\$4,223,785	\$4,324,215	\$26.02	\$26.28	4,784	4,938	\$65.26	\$63.86
Prof - Maternity	\$5,014	\$6,252	\$0.03	\$0.04	0	1	\$1,253.61	\$625.18
Prof - Other	\$1,598,369	\$1,689,588	\$9.85	\$10.27	2,043	1,925	\$57.83	\$63.99
Prof - Psych	\$591,581	\$632,341	\$3.64	\$3.84	648	614	\$67.43	\$75.08
Prof - Specialist	\$475,527	\$499,061	\$2.93	\$3.03	361	361	\$97.34	\$100.94
Prof - Vision	\$361,428	\$376,249	\$2.23	\$2.29	406	309	\$65.75	\$88.86
Radiology	\$223,589	\$224,589	\$1.38	\$1.36	752	740	\$21.97	\$22.12
Transportation/Ambulance	\$611,937	\$655,460	\$3.77	\$3.98	510	582	\$88.65	\$82.10
<b>Total</b>	<b>\$19,591,431</b>	<b>\$21,749,013</b>	<b>\$120.67</b>	<b>\$132.16</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 15-20 Female</b>								
<b>Far Southwest</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	34,159	34,711						
<b>Service Type</b>								
DME/Supplies	\$53,356	\$49,134	\$1.56	\$1.42	162	184	\$115.99	\$92.53
FQHC / RHC	\$28,652	\$31,222	\$0.84	\$0.90	239	247	\$42.20	\$43.67
Home Health	\$7,800	\$19,312	\$0.23	\$0.56	6	6	\$458.85	\$1,135.99
IP - Maternity	\$1,166,892	\$1,126,894	\$34.16	\$32.47	597	280	\$686.41	\$1,391.23
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,249,336	\$634,166	\$36.57	\$18.27	129	37	\$3,404.18	\$5,982.70
IP - Psych	\$105,379	\$169,538	\$3.08	\$4.88	61	71	\$609.13	\$823.00
Lab	\$265,732	\$234,380	\$7.78	\$6.75	5,552	4,789	\$16.81	\$16.92
OP - Emergency Room & Related	\$725,337	\$955,904	\$21.23	\$27.54	1,551	1,352	\$164.29	\$244.48
OP - Other	\$958,454	\$1,027,252	\$28.06	\$29.59	3,900	1,721	\$86.32	\$206.40
Pharmacy	\$1,212,639	\$1,369,093	\$35.50	\$39.44	12,657	12,700	\$33.66	\$37.27
Prof - Anesthesia	\$74,870	\$79,093	\$2.19	\$2.28	206	192	\$127.77	\$142.77
Prof - Child EPSDT	\$18,001	\$14,834	\$0.53	\$0.43	338	277	\$18.73	\$18.50
Prof - Evaluation & Management	\$1,251,841	\$1,214,159	\$36.65	\$34.98	6,398	6,283	\$68.74	\$66.81
Prof - Maternity	\$748,265	\$689,564	\$21.91	\$19.87	446	443	\$589.19	\$537.88
Prof - Other	\$355,486	\$370,721	\$10.41	\$10.68	2,140	2,261	\$58.34	\$56.69
Prof - Psych	\$119,099	\$134,270	\$3.49	\$3.87	667	656	\$62.68	\$70.78
Prof - Specialist	\$171,746	\$178,844	\$5.03	\$5.15	744	785	\$81.13	\$78.72
Prof - Vision	\$77,418	\$81,452	\$2.27	\$2.35	487	355	\$55.82	\$79.31
Radiology	\$293,970	\$278,425	\$8.61	\$8.02	2,063	1,953	\$50.06	\$49.30
Transportation/Ambulance	\$168,596	\$184,333	\$4.94	\$5.31	460	509	\$128.80	\$125.23
<b>Total</b>	<b>\$9,052,869</b>	<b>\$8,842,590</b>	<b>\$265.02</b>	<b>\$254.75</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 21-44 Female</b>								
<b>Far Southwest</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	64,737	66,950						
<b>Service Type</b>								
DME/Supplies	\$252,356	\$199,160	\$3.90	\$2.97	440	422	\$106.30	\$84.64
FQHC / RHC	\$94,704	\$122,654	\$1.46	\$1.83	398	433	\$44.09	\$50.75
Home Health	\$63,966	\$44,585	\$0.99	\$0.67	86	29	\$137.56	\$271.86
IP - Maternity	\$3,580,711	\$3,916,220	\$55.31	\$58.49	1,018	463	\$652.22	\$1,515.56
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,327,495	\$3,566,035	\$66.85	\$53.26	431	186	\$1,862.09	\$3,428.88
IP - Psych	\$386,358	\$378,852	\$5.97	\$5.66	107	107	\$670.76	\$635.66
Lab	\$1,009,614	\$922,444	\$15.60	\$13.78	9,198	7,703	\$20.35	\$21.47
OP - Emergency Room & Related	\$2,261,696	\$2,689,395	\$34.94	\$40.17	2,270	1,841	\$184.72	\$261.87
OP - Other	\$3,707,573	\$3,736,999	\$57.27	\$55.82	5,920	2,555	\$116.08	\$262.15
Pharmacy	\$8,276,562	\$8,235,676	\$127.85	\$123.01	33,732	32,375	\$45.48	\$45.60
Prof - Anesthesia	\$257,414	\$272,370	\$3.98	\$4.07	402	384	\$118.57	\$127.10
Prof - Child EPSDT	\$29,023	\$28,568	\$0.45	\$0.43	518	421	\$10.39	\$12.17
Prof - Evaluation & Management	\$2,970,378	\$2,833,586	\$45.88	\$42.32	8,362	7,952	\$65.85	\$63.87
Prof - Maternity	\$2,132,411	\$2,084,269	\$32.94	\$31.13	695	682	\$568.34	\$547.92
Prof - Other	\$720,452	\$790,769	\$11.13	\$11.81	2,005	2,221	\$66.59	\$63.80
Prof - Psych	\$180,910	\$175,490	\$2.79	\$2.62	618	525	\$54.23	\$59.94
Prof - Specialist	\$872,775	\$838,559	\$13.48	\$12.53	1,424	1,449	\$113.61	\$103.73
Prof - Vision	\$114,968	\$131,729	\$1.78	\$1.97	248	243	\$85.93	\$97.36
Radiology	\$884,250	\$966,716	\$13.66	\$14.44	3,363	3,428	\$48.74	\$50.55
Transportation/Ambulance	\$469,037	\$466,246	\$7.25	\$6.96	1,123	1,064	\$77.45	\$78.53
<b>Total</b>	<b>\$32,592,651</b>	<b>\$32,400,322</b>	<b>\$503.46</b>	<b>\$483.95</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

Age 15-20 Male								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	29,783	30,338						
<b>Service Type</b>								
DME/Supplies	\$58,351	\$60,599	\$1.96	\$2.00	196	209	\$119.82	\$114.77
FQHC / RHC	\$19,686	\$17,508	\$0.66	\$0.58	203	165	\$39.06	\$41.99
Home Health	\$3,502	\$5,037	\$0.12	\$0.17	6	4	\$218.87	\$503.75
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$329,639	\$465,939	\$11.07	\$15.36	31	37	\$4,337.35	\$4,956.79
IP - Psych	\$108,678	\$95,136	\$3.65	\$3.14	66	46	\$662.67	\$813.13
Lab	\$67,395	\$59,809	\$2.26	\$1.97	1,735	1,513	\$15.65	\$15.64
OP - Emergency Room & Related	\$387,587	\$487,373	\$13.01	\$16.06	899	832	\$173.73	\$231.64
OP - Other	\$444,055	\$385,522	\$14.91	\$12.71	1,219	609	\$146.75	\$250.50
Pharmacy	\$1,114,262	\$1,222,170	\$37.41	\$40.29	8,093	8,133	\$55.47	\$59.44
Prof - Anesthesia	\$16,338	\$14,549	\$0.55	\$0.48	56	51	\$116.70	\$113.67
Prof - Child EPSDT	\$4,192	\$3,943	\$0.14	\$0.13	185	190	\$9.11	\$8.20
Prof - Evaluation & Management	\$690,976	\$683,231	\$23.20	\$22.52	3,999	4,039	\$69.62	\$66.91
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$195,812	\$151,894	\$6.57	\$5.01	1,380	1,375	\$57.17	\$43.71
Prof - Psych	\$93,860	\$100,437	\$3.15	\$3.31	510	534	\$74.08	\$74.40
Prof - Specialist	\$142,098	\$124,349	\$4.77	\$4.10	458	417	\$125.09	\$117.87
Prof - Vision	\$56,080	\$62,105	\$1.88	\$2.05	287	233	\$78.76	\$105.26
Radiology	\$67,905	\$73,493	\$2.28	\$2.42	1,134	1,130	\$24.13	\$25.71
Transportation/Ambulance	\$133,601	\$124,294	\$4.49	\$4.10	301	293	\$178.85	\$167.51
<b>Total</b>	<b>\$3,934,016</b>	<b>\$4,137,389</b>	<b>\$132.09</b>	<b>\$136.38</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 21-44 Male</b>								
<b>Far Southwest</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	14,766	16,557						
<b>Service Type</b>								
DME/Supplies	\$79,682	\$65,394	\$5.40	\$3.95	635	482	\$102.03	\$98.34
FQHC / RHC	\$21,114	\$20,881	\$1.43	\$1.26	360	335	\$47.66	\$45.20
Home Health	\$8,030	\$41,962	\$0.54	\$2.53	63	38	\$102.95	\$806.95
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$680,804	\$910,847	\$46.11	\$55.01	419	125	\$1,319.39	\$5,265.01
IP - Psych	\$107,552	\$149,589	\$7.28	\$9.03	137	174	\$640.19	\$623.29
Lab	\$122,113	\$134,075	\$8.27	\$8.10	5,095	4,354	\$19.48	\$22.32
OP - Emergency Room & Related	\$436,364	\$578,672	\$29.55	\$34.95	2,053	1,645	\$172.75	\$254.92
OP - Other	\$642,255	\$679,477	\$43.50	\$41.04	3,984	1,296	\$131.02	\$380.02
Pharmacy	\$2,034,232	\$1,881,218	\$137.76	\$113.62	31,139	28,374	\$53.09	\$48.05
Prof - Anesthesia	\$17,840	\$15,171	\$1.21	\$0.92	140	115	\$103.72	\$96.02
Prof - Child EPSDT	\$3,477	\$3,562	\$0.24	\$0.22	384	300	\$7.35	\$8.60
Prof - Evaluation & Management	\$560,144	\$585,457	\$37.93	\$35.36	6,792	6,529	\$67.03	\$64.99
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$98,554	\$112,820	\$6.67	\$6.81	1,446	1,563	\$55.40	\$52.30
Prof - Psych	\$37,319	\$45,269	\$2.53	\$2.73	575	567	\$52.79	\$57.82
Prof - Specialist	\$162,342	\$149,461	\$10.99	\$9.03	1,033	877	\$127.73	\$123.52
Prof - Vision	\$24,589	\$28,003	\$1.67	\$1.69	213	175	\$93.85	\$116.19
Radiology	\$93,409	\$105,603	\$6.33	\$6.38	2,341	2,380	\$32.43	\$32.16
Transportation/Ambulance	\$90,432	\$115,028	\$6.12	\$6.95	944	1,052	\$77.82	\$79.28
<b>Total</b>	<b>\$5,220,253</b>	<b>\$5,622,490</b>	<b>\$353.53</b>	<b>\$339.58</b>				

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

<b>Age 45 and Over</b>								
<b>Far Southwest</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	6,914	8,396						
<b>Service Type</b>								
DME/Supplies	\$88,792	\$79,362	\$12.84	\$9.45	1,753	1,626	\$87.91	\$69.74
FQHC / RHC	\$11,033	\$34,549	\$1.60	\$4.11	460	776	\$41.63	\$63.63
Home Health	\$18,480	\$18,148	\$2.67	\$2.16	90	70	\$355.38	\$370.36
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$780,354	\$1,094,625	\$112.87	\$130.37	653	342	\$2,075.41	\$4,580.02
IP - Psych	\$19,837	\$66,689	\$2.87	\$7.94	71	176	\$483.83	\$542.18
Lab	\$90,021	\$123,386	\$13.02	\$14.70	7,388	8,168	\$21.15	\$21.59
OP - Emergency Room & Related	\$179,548	\$296,069	\$25.97	\$35.26	1,328	1,273	\$234.70	\$332.29
OP - Other	\$612,586	\$760,547	\$88.60	\$90.58	5,304	3,053	\$200.45	\$356.06
Pharmacy	\$1,410,807	\$1,930,953	\$204.05	\$229.98	54,120	55,837	\$45.24	\$49.43
Prof - Anesthesia	\$19,224	\$21,765	\$2.78	\$2.59	288	283	\$115.80	\$109.92
Prof - Child EPSDT	\$3,023	\$4,106	\$0.44	\$0.49	689	723	\$7.61	\$8.11
Prof - Evaluation & Management	\$371,100	\$461,093	\$53.67	\$54.92	9,338	9,895	\$68.98	\$66.60
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$82,053	\$133,738	\$11.87	\$15.93	2,647	3,606	\$53.81	\$53.01
Prof - Psych	\$25,247	\$31,397	\$3.65	\$3.74	722	849	\$60.69	\$52.86
Prof - Specialist	\$160,382	\$172,705	\$23.20	\$20.57	2,171	2,185	\$128.20	\$112.95
Prof - Vision	\$15,733	\$26,550	\$2.28	\$3.16	484	455	\$56.39	\$83.49
Radiology	\$71,297	\$93,489	\$10.31	\$11.13	3,457	4,062	\$35.79	\$32.90
Transportation/Ambulance	\$63,378	\$98,213	\$9.17	\$11.70	1,663	1,761	\$66.16	\$79.72
<b>Total</b>	<b>\$4,022,897</b>	<b>\$5,447,384</b>	<b>\$581.85</b>	<b>\$648.81</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	441,184	447,952						
<b>Service Type</b>								
DME/Supplies	\$967,823	\$956,475	\$2.19	\$2.14	320	306	\$82.28	\$83.60
FQHC / RHC	\$319,327	\$380,291	\$0.72	\$0.85	197	212	\$44.19	\$47.96
Home Health	\$132,625	\$164,301	\$0.30	\$0.37	24	11	\$148.85	\$406.69
IP - Maternity	\$4,760,194	\$5,054,694	\$10.79	\$11.28	196	91	\$661.78	\$1,481.45
IP - Newborn	\$5,467,562	\$5,752,120	\$12.39	\$12.84	128	74	\$1,162.10	\$2,094.41
IP - Other	\$10,529,765	\$10,171,921	\$23.87	\$22.71	151	67	\$1,901.37	\$4,042.89
IP - Psych	\$1,167,978	\$1,242,013	\$2.65	\$2.77	41	43	\$774.52	\$768.10
Lab	\$2,349,476	\$2,210,095	\$5.33	\$4.93	3,748	3,422	\$17.05	\$17.30
OP - Emergency Room & Related	\$6,557,360	\$8,421,720	\$14.86	\$18.80	1,197	1,081	\$149.06	\$208.62
OP - Other	\$9,548,126	\$9,970,904	\$21.64	\$22.26	2,197	1,070	\$118.18	\$249.54
Pharmacy	\$23,357,279	\$24,258,271	\$52.94	\$54.15	13,207	13,363	\$48.10	\$48.63
Prof - Anesthesia	\$592,510	\$568,436	\$1.34	\$1.27	145	133	\$111.27	\$114.37
Prof - Child EPSDT	\$337,087	\$290,359	\$0.76	\$0.65	710	621	\$12.92	\$12.53
Prof - Evaluation & Management	\$16,387,677	\$16,334,603	\$37.14	\$36.47	6,485	6,518	\$68.73	\$67.13
Prof - Maternity	\$2,885,690	\$2,782,427	\$6.54	\$6.21	137	137	\$574.15	\$545.68
Prof - Other	\$4,570,913	\$4,888,633	\$10.36	\$10.91	2,511	2,577	\$49.51	\$50.82
Prof - Psych	\$1,201,952	\$1,254,029	\$2.72	\$2.80	479	458	\$68.30	\$73.39
Prof - Specialist	\$2,585,703	\$2,520,878	\$5.86	\$5.63	643	649	\$109.33	\$104.01
Prof - Vision	\$887,239	\$938,283	\$2.01	\$2.09	305	242	\$79.10	\$103.74
Radiology	\$1,760,902	\$1,867,147	\$3.99	\$4.17	1,352	1,380	\$35.44	\$36.25
Transportation/Ambulance	\$2,115,887	\$2,230,027	\$4.80	\$4.98	570	609	\$100.95	\$98.11
<b>Total</b>	<b>\$98,483,076</b>	<b>\$102,257,626</b>	<b>\$223.22</b>	<b>\$228.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
All Regions	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	6,699,382	7,026,509						
<b>Service Type</b>								
DME/Supplies	\$14,414,280	\$15,192,387	\$2.15	\$2.16	281	285	\$91.86	\$91.06
FQHC / RHC	\$6,059,141	\$5,881,281	\$0.90	\$0.84	225	200	\$48.29	\$50.27
Home Health	\$2,460,652	\$2,253,599	\$0.37	\$0.32	12	9	\$362.71	\$421.86
IP - Maternity	\$74,150,355	\$79,847,152	\$11.07	\$11.36	59	49	\$2,259.85	\$2,785.53
IP - Newborn	\$91,118,720	\$103,153,681	\$13.60	\$14.68	50	45	\$3,285.81	\$3,893.47
IP - Other	\$122,789,204	\$139,777,704	\$18.33	\$19.89	38	30	\$5,860.22	\$8,091.33
IP - Psych	\$19,008,888	\$22,366,377	\$2.84	\$3.18	48	54	\$702.68	\$708.33
Lab	\$21,056,193	\$25,015,206	\$3.14	\$3.56	2,298	2,327	\$16.41	\$18.36
OP - Emergency Room & Related	\$108,014,048	\$116,085,860	\$16.12	\$16.52	812	818	\$238.20	\$242.35
OP - Other	\$138,621,360	\$151,536,591	\$20.69	\$21.57	751	659	\$330.69	\$392.54
Pharmacy	\$248,499,005	\$274,069,408	\$37.09	\$39.01	8,105	8,162	\$54.92	\$57.35
Prof - Anesthesia	\$9,171,379	\$9,367,379	\$1.37	\$1.33	110	116	\$149.02	\$137.95
Prof - Child EPSDT	\$7,558,713	\$6,252,347	\$1.13	\$0.89	954	781	\$14.19	\$13.67
Prof - Evaluation & Management	\$209,524,405	\$224,106,570	\$31.28	\$31.89	5,187	5,391	\$72.35	\$70.99
Prof - Maternity	\$39,066,462	\$41,460,105	\$5.83	\$5.90	122	122	\$572.40	\$582.71
Prof - Other	\$69,840,548	\$73,152,378	\$10.42	\$10.41	2,288	2,554	\$54.67	\$48.91
Prof - Psych	\$14,738,737	\$16,423,444	\$2.20	\$2.34	385	409	\$68.64	\$68.64
Prof - Specialist	\$32,239,905	\$33,680,286	\$4.81	\$4.79	529	519	\$109.09	\$110.93
Prof - Vision	\$11,968,257	\$13,126,794	\$1.79	\$1.87	190	147	\$112.87	\$152.41
Radiology	\$20,867,187	\$23,818,058	\$3.11	\$3.39	964	1,017	\$38.76	\$39.99
Transportation/Ambulance	\$27,775,830	\$29,313,432	\$4.15	\$4.17	593	466	\$83.94	\$107.52
<b>Total</b>	<b>\$1,288,943,271</b>	<b>\$1,405,880,040</b>	<b>\$192.40</b>	<b>\$200.08</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,365,586	1,449,266						
<b>Service Type</b>								
DME/Supplies	\$1,652,499	\$1,952,756	\$1.21	\$1.35	206	218	\$70.56	\$74.01
FQHC / RHC	\$12,314	\$15,081	\$0.01	\$0.01	2	2	\$50.88	\$66.14
Home Health	\$248,032	\$168,654	\$0.18	\$0.12	2	2	\$1,016.53	\$629.31
IP - Maternity	\$1,842,827	\$2,007,755	\$1.35	\$1.39	5	5	\$3,061.18	\$3,079.38
IP - Newborn	\$16,455,819	\$19,698,088	\$12.05	\$13.59	41	41	\$3,497.96	\$4,017.56
IP - Other	\$12,999,225	\$15,636,706	\$9.52	\$10.79	13	13	\$8,654.61	\$9,682.17
IP - Psych	\$1,796,198	\$2,232,586	\$1.32	\$1.54	26	30	\$605.19	\$612.17
Lab	\$2,722,478	\$3,825,331	\$1.99	\$2.64	1,758	1,952	\$13.61	\$16.23
OP - Emergency Room & Related	\$12,221,574	\$12,974,017	\$8.95	\$8.95	556	543	\$193.20	\$197.68
OP - Other	\$11,539,484	\$13,836,699	\$8.45	\$9.55	236	249	\$430.34	\$460.13
Pharmacy	\$27,334,761	\$30,100,672	\$20.02	\$20.77	4,112	4,135	\$58.41	\$60.28
Prof - Anesthesia	\$834,607	\$841,331	\$0.61	\$0.58	51	54	\$145.20	\$128.84
Prof - Child EPSDT	\$2,243,003	\$1,825,251	\$1.64	\$1.26	1,290	1,083	\$15.28	\$13.96
Prof - Evaluation & Management	\$42,028,146	\$44,002,422	\$30.78	\$30.36	4,940	5,143	\$74.76	\$70.85
Prof - Maternity	\$931,796	\$1,153,859	\$0.68	\$0.80	12	14	\$682.63	\$662.76
Prof - Other	\$16,604,465	\$15,477,606	\$12.16	\$10.68	2,498	2,840	\$58.41	\$45.12
Prof - Psych	\$1,417,749	\$1,566,430	\$1.04	\$1.08	191	194	\$65.26	\$66.86
Prof - Specialist	\$3,415,261	\$3,626,492	\$2.50	\$2.50	345	330	\$87.08	\$91.07
Prof - Vision	\$2,868,759	\$3,172,516	\$2.10	\$2.19	283	199	\$89.18	\$132.27
Radiology	\$1,386,970	\$1,775,125	\$1.02	\$1.22	453	502	\$26.92	\$29.26
Transportation/Ambulance	\$4,552,438	\$4,553,061	\$3.33	\$3.14	145	67	\$275.59	\$559.34
<b>Total</b>	<b>\$165,108,404</b>	<b>\$180,442,437</b>	<b>\$120.91</b>	<b>\$124.51</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	157,657	195,559						
<b>Service Type</b>								
DME/Supplies	\$741,380	\$817,992	\$4.70	\$4.18	424	377	\$133.01	\$133.03
FQHC / RHC	\$1,846	\$6,789	\$0.01	\$0.03	3	7	\$52.75	\$60.61
Home Health	\$90,415	\$86,947	\$0.57	\$0.44	17	16	\$416.66	\$329.34
IP - Maternity	\$13,953,937	\$14,558,539	\$88.51	\$74.45	319	271	\$3,328.71	\$3,291.55
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$9,417,682	\$11,644,559	\$59.74	\$59.54	77	70	\$9,333.68	\$10,196.64
IP - Psych	\$718,162	\$987,236	\$4.56	\$5.05	79	84	\$687.89	\$722.19
Lab	\$974,617	\$1,921,365	\$6.18	\$9.82	5,436	5,979	\$13.65	\$19.72
OP - Emergency Room & Related	\$7,911,680	\$7,842,966	\$50.18	\$40.11	1,739	1,392	\$346.32	\$345.70
OP - Other	\$8,642,948	\$10,100,027	\$54.82	\$51.65	1,328	1,219	\$495.30	\$508.59
Pharmacy	\$15,023,871	\$17,142,471	\$95.29	\$87.66	19,889	17,778	\$57.50	\$59.17
Prof - Anesthesia	\$1,026,977	\$1,050,990	\$6.51	\$5.37	506	463	\$154.41	\$139.30
Prof - Child EPSDT	\$65,608	\$135,105	\$0.42	\$0.69	307	368	\$16.25	\$22.56
Prof - Evaluation & Management	\$8,136,294	\$9,287,735	\$51.61	\$47.49	8,957	8,431	\$69.14	\$67.59
Prof - Maternity	\$6,301,613	\$6,533,506	\$39.97	\$33.41	704	602	\$681.11	\$666.34
Prof - Other	\$2,841,950	\$3,739,572	\$18.03	\$19.12	2,900	3,294	\$74.58	\$69.65
Prof - Psych	\$362,357	\$454,665	\$2.30	\$2.32	427	440	\$64.65	\$63.34
Prof - Specialist	\$2,209,611	\$2,546,044	\$14.02	\$13.02	1,390	1,322	\$121.01	\$118.18
Prof - Vision	\$303,968	\$405,196	\$1.93	\$2.07	254	244	\$90.98	\$102.06
Radiology	\$3,037,119	\$3,615,313	\$19.26	\$18.49	3,936	3,749	\$58.74	\$59.17
Transportation/Ambulance	\$908,955	\$949,044	\$5.77	\$4.85	920	369	\$75.21	\$157.78
<b>Total</b>	<b>\$82,670,990</b>	<b>\$93,826,060</b>	<b>\$524.37</b>	<b>\$479.78</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	426,667	442,158						
<b>Service Type</b>								
DME/Supplies	\$653,313	\$689,223	\$1.53	\$1.56	214	208	\$85.96	\$89.85
FQHC / RHC	\$1,567,317	\$1,421,897	\$3.67	\$3.22	1,145	997	\$38.51	\$38.72
Home Health	\$9,417	\$10,965	\$0.02	\$0.02	1	1	\$247.83	\$288.54
IP - Maternity	\$919,374	\$1,021,285	\$2.15	\$2.31	10	11	\$2,525.75	\$2,632.18
IP - Newborn	\$6,464,836	\$8,376,608	\$15.15	\$18.94	56	57	\$3,218.71	\$3,982.00
IP - Other	\$5,571,550	\$6,442,512	\$13.06	\$14.57	20	20	\$7,674.31	\$8,960.38
IP - Psych	\$1,162,435	\$1,387,016	\$2.72	\$3.14	36	42	\$908.15	\$886.27
Lab	\$961,235	\$876,212	\$2.25	\$1.98	1,689	1,561	\$16.00	\$15.24
OP - Emergency Room & Related	\$2,866,420	\$3,701,047	\$6.72	\$8.37	489	536	\$164.95	\$187.56
OP - Other	\$5,005,158	\$5,653,186	\$11.73	\$12.79	427	468	\$329.33	\$328.15
Pharmacy	\$11,144,598	\$12,002,250	\$26.12	\$27.14	5,539	5,673	\$56.59	\$57.42
Prof - Anesthesia	\$296,185	\$296,779	\$0.69	\$0.67	62	60	\$135.43	\$135.21
Prof - Child EPSDT	\$370,640	\$303,080	\$0.87	\$0.69	805	690	\$12.95	\$11.92
Prof - Evaluation & Management	\$11,129,922	\$12,442,616	\$26.09	\$28.14	4,239	4,600	\$73.85	\$73.42
Prof - Maternity	\$598,718	\$632,165	\$1.40	\$1.43	43	45	\$390.04	\$383.60
Prof - Other	\$2,824,924	\$3,074,290	\$6.62	\$6.95	2,131	2,401	\$37.28	\$34.75
Prof - Psych	\$1,122,362	\$1,385,957	\$2.63	\$3.13	406	488	\$77.79	\$77.10
Prof - Specialist	\$1,232,670	\$1,245,293	\$2.89	\$2.82	318	304	\$108.91	\$111.19
Prof - Vision	\$853,667	\$931,961	\$2.00	\$2.11	165	142	\$145.57	\$177.51
Radiology	\$604,578	\$667,682	\$1.42	\$1.51	606	637	\$28.04	\$28.45
Transportation/Ambulance	\$1,785,121	\$1,934,210	\$4.18	\$4.37	725	662	\$69.29	\$79.32
<b>Total</b>	<b>\$57,144,440</b>	<b>\$64,496,236</b>	<b>\$133.93</b>	<b>\$145.87</b>				

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	81,829	88,616						
<b>Service Type</b>								
DME/Supplies	\$490,500	\$427,603	\$5.99	\$4.83	630	603	\$114.10	\$96.07
FQHC / RHC	\$398,329	\$263,771	\$4.87	\$2.98	967	665	\$60.38	\$53.69
Home Health	\$45,616	\$32,217	\$0.56	\$0.36	18	11	\$380.13	\$388.16
IP - Maternity	\$4,376,072	\$4,753,650	\$53.48	\$53.64	234	233	\$2,738.47	\$2,760.54
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,132,039	\$4,651,865	\$50.50	\$52.49	65	65	\$9,285.48	\$9,711.62
IP - Psych	\$471,778	\$588,667	\$5.77	\$6.64	130	131	\$531.88	\$610.02
Lab	\$1,030,037	\$1,092,764	\$12.59	\$12.33	7,397	6,665	\$20.42	\$22.20
OP - Emergency Room & Related	\$2,564,056	\$3,136,156	\$31.33	\$35.39	1,336	1,394	\$281.55	\$304.69
OP - Other	\$4,185,110	\$4,609,724	\$51.14	\$52.02	1,859	1,952	\$330.21	\$319.85
Pharmacy	\$7,540,428	\$8,993,066	\$92.15	\$101.48	24,911	23,890	\$44.39	\$50.98
Prof - Anesthesia	\$348,281	\$335,611	\$4.26	\$3.79	306	289	\$166.88	\$157.49
Prof - Child EPSDT	\$46,790	\$50,109	\$0.57	\$0.57	503	450	\$13.65	\$15.08
Prof - Evaluation & Management	\$3,651,778	\$4,010,234	\$44.63	\$45.25	7,732	7,876	\$69.26	\$68.95
Prof - Maternity	\$2,405,516	\$2,646,051	\$29.40	\$29.86	903	887	\$390.44	\$403.98
Prof - Other	\$1,591,171	\$1,521,307	\$19.45	\$17.17	3,472	3,292	\$67.20	\$62.58
Prof - Psych	\$242,549	\$274,493	\$2.96	\$3.10	611	630	\$58.19	\$58.99
Prof - Specialist	\$1,103,578	\$1,096,860	\$13.49	\$12.38	1,554	1,479	\$104.17	\$100.43
Prof - Vision	\$166,019	\$190,787	\$2.03	\$2.15	223	224	\$109.22	\$115.42
Radiology	\$1,113,673	\$1,278,706	\$13.61	\$14.43	2,961	3,084	\$55.15	\$56.15
Transportation/Ambulance	\$701,733	\$722,126	\$8.58	\$8.15	1,846	1,640	\$55.76	\$59.64
<b>Total</b>	<b>\$36,605,052</b>	<b>\$40,675,767</b>	<b>\$447.34</b>	<b>\$459.01</b>				

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,107,926	1,191,717						
<b>Service Type</b>								
DME/Supplies	\$2,266,011	\$2,342,314	\$2.05	\$1.97	347	351	\$70.63	\$67.29
FQHC / RHC	\$375,777	\$406,421	\$0.34	\$0.34	94	85	\$43.39	\$47.87
Home Health	\$550,058	\$604,594	\$0.50	\$0.51	6	7	\$991.10	\$928.72
IP - Maternity	\$2,265,629	\$2,356,353	\$2.04	\$1.98	9	8	\$2,886.15	\$2,887.69
IP - Newborn	\$19,845,397	\$20,281,654	\$17.91	\$17.02	50	51	\$4,258.11	\$4,035.69
IP - Other	\$14,886,577	\$14,953,603	\$13.44	\$12.55	22	22	\$7,222.99	\$6,781.68
IP - Psych	\$3,523,118	\$4,341,451	\$3.18	\$3.64	43	50	\$889.90	\$874.06
Lab	\$2,055,380	\$2,388,899	\$1.86	\$2.00	1,517	1,524	\$14.68	\$15.78
OP - Emergency Room & Related	\$12,913,249	\$14,958,753	\$11.66	\$12.55	653	719	\$214.30	\$209.63
OP - Other	\$18,323,118	\$19,686,236	\$16.54	\$16.52	639	645	\$310.75	\$307.34
Pharmacy	\$27,820,994	\$30,610,058	\$25.11	\$25.69	5,213	5,239	\$57.80	\$58.83
Prof - Anesthesia	\$795,541	\$743,743	\$0.72	\$0.62	61	62	\$142.26	\$119.98
Prof - Child EPSDT	\$1,339,456	\$1,113,956	\$1.21	\$0.93	1,018	853	\$14.24	\$13.15
Prof - Evaluation & Management	\$30,791,748	\$33,535,095	\$27.79	\$28.14	4,569	4,743	\$72.99	\$71.19
Prof - Maternity	\$1,213,223	\$1,200,681	\$1.10	\$1.01	19	16	\$688.55	\$733.46
Prof - Other	\$9,700,191	\$10,571,958	\$8.76	\$8.87	1,953	2,289	\$53.79	\$46.50
Prof - Psych	\$2,613,096	\$2,902,738	\$2.36	\$2.44	362	411	\$78.29	\$71.10
Prof - Specialist	\$3,585,428	\$3,571,345	\$3.24	\$3.00	332	297	\$116.85	\$120.97
Prof - Vision	\$1,782,734	\$1,971,035	\$1.61	\$1.65	168	136	\$114.82	\$145.59
Radiology	\$1,244,375	\$1,381,951	\$1.12	\$1.16	585	594	\$23.04	\$23.42
Transportation/Ambulance	\$4,081,454	\$4,427,614	\$3.68	\$3.72	544	410	\$81.31	\$108.69
<b>Total</b>	<b>\$161,972,555</b>	<b>\$174,350,453</b>	<b>\$146.19</b>	<b>\$146.30</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	230,090	263,131						
<b>Service Type</b>								
DME/Supplies	\$1,090,445	\$1,034,748	\$4.74	\$3.93	461	392	\$123.49	\$120.26
FQHC / RHC	\$383,665	\$303,874	\$1.67	\$1.15	320	233	\$62.58	\$59.49
Home Health	\$124,981	\$149,599	\$0.54	\$0.57	23	20	\$283.40	\$343.91
IP - Maternity	\$12,186,762	\$13,653,642	\$52.97	\$51.89	205	196	\$3,105.70	\$3,181.93
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$14,729,444	\$17,563,837	\$64.02	\$66.75	77	74	\$10,040.52	\$10,788.60
IP - Psych	\$1,366,619	\$1,828,814	\$5.94	\$6.95	128	123	\$557.58	\$678.34
Lab	\$1,813,860	\$2,344,205	\$7.88	\$8.91	5,375	5,156	\$17.60	\$20.73
OP - Emergency Room & Related	\$11,847,924	\$13,233,597	\$51.49	\$50.29	1,886	1,837	\$327.61	\$328.59
OP - Other	\$14,936,563	\$16,454,574	\$64.92	\$62.53	1,911	1,819	\$407.64	\$412.55
Pharmacy	\$21,564,439	\$24,220,644	\$93.72	\$92.05	23,359	21,755	\$48.15	\$50.77
Prof - Anesthesia	\$1,012,378	\$1,050,189	\$4.40	\$3.99	319	340	\$165.50	\$140.87
Prof - Child EPSDT	\$65,311	\$79,533	\$0.28	\$0.30	260	234	\$13.08	\$15.47
Prof - Evaluation & Management	\$9,843,715	\$10,818,855	\$42.78	\$41.12	7,842	7,638	\$65.47	\$64.59
Prof - Maternity	\$6,088,346	\$6,711,060	\$26.46	\$25.50	459	426	\$692.41	\$718.14
Prof - Other	\$3,253,790	\$4,367,782	\$14.14	\$16.60	2,166	2,321	\$78.34	\$85.83
Prof - Psych	\$732,141	\$838,281	\$3.18	\$3.19	669	617	\$57.06	\$61.96
Prof - Specialist	\$3,066,907	\$3,232,426	\$13.33	\$12.28	1,013	967	\$157.88	\$152.48
Prof - Vision	\$319,459	\$391,507	\$1.39	\$1.49	156	158	\$106.88	\$113.02
Radiology	\$2,777,897	\$3,228,397	\$12.07	\$12.27	3,146	3,163	\$46.05	\$46.54
Transportation/Ambulance	\$1,517,055	\$1,595,648	\$6.59	\$6.06	1,881	1,309	\$42.07	\$55.58
<b>Total</b>	<b>\$108,721,701</b>	<b>\$123,101,213</b>	<b>\$472.52</b>	<b>\$467.83</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	557,660	570,613						
<b>Service Type</b>								
DME/Supplies	\$768,160	\$886,612	\$1.38	\$1.55	196	211	\$84.26	\$88.40
FQHC / RHC	\$601,709	\$596,296	\$1.08	\$1.05	281	257	\$46.03	\$48.72
Home Health	\$96,238	\$114,136	\$0.17	\$0.20	12	10	\$167.95	\$242.84
IP - Maternity	\$1,269,265	\$1,226,560	\$2.28	\$2.15	10	9	\$2,729.60	\$2,800.36
IP - Newborn	\$9,980,364	\$10,892,772	\$17.90	\$19.09	55	57	\$3,933.96	\$4,015.96
IP - Other	\$5,977,350	\$8,064,521	\$10.72	\$14.13	21	22	\$6,019.49	\$7,806.89
IP - Psych	\$1,239,170	\$1,412,198	\$2.22	\$2.47	25	35	\$1,056.41	\$843.10
Lab	\$1,002,703	\$1,114,542	\$1.80	\$1.95	1,466	1,539	\$14.72	\$15.23
OP - Emergency Room & Related	\$5,396,844	\$6,243,507	\$9.68	\$10.94	663	707	\$175.04	\$185.74
OP - Other	\$8,928,189	\$10,220,144	\$16.01	\$17.91	628	671	\$305.87	\$320.47
Pharmacy	\$14,875,372	\$16,824,956	\$26.67	\$29.49	5,679	5,797	\$56.36	\$61.03
Prof - Anesthesia	\$432,050	\$454,751	\$0.77	\$0.80	62	68	\$148.98	\$141.05
Prof - Child EPSDT	\$585,133	\$452,294	\$1.05	\$0.79	947	744	\$13.29	\$12.79
Prof - Evaluation & Management	\$15,571,457	\$16,489,240	\$27.92	\$28.90	4,624	4,855	\$72.47	\$71.43
Prof - Maternity	\$757,674	\$696,713	\$1.36	\$1.22	35	32	\$467.41	\$457.46
Prof - Other	\$4,150,298	\$4,254,007	\$7.44	\$7.46	1,798	2,007	\$49.66	\$44.57
Prof - Psych	\$1,225,330	\$1,382,156	\$2.20	\$2.42	359	391	\$73.42	\$74.27
Prof - Specialist	\$1,521,213	\$1,824,970	\$2.73	\$3.20	344	333	\$95.10	\$115.21
Prof - Vision	\$953,237	\$1,058,449	\$1.71	\$1.85	154	118	\$133.37	\$189.17
Radiology	\$657,499	\$703,546	\$1.18	\$1.23	587	613	\$24.12	\$24.14
Transportation/Ambulance	\$2,450,837	\$2,529,692	\$4.39	\$4.43	674	536	\$78.27	\$99.18
<b>Total</b>	<b>\$78,440,091</b>	<b>\$87,442,062</b>	<b>\$140.66</b>	<b>\$153.24</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	112,632	121,334						
<b>Service Type</b>								
DME/Supplies	\$544,610	\$539,340	\$4.84	\$4.45	545	501	\$106.41	\$106.44
FQHC / RHC	\$504,476	\$541,209	\$4.48	\$4.46	878	812	\$61.24	\$65.94
Home Health	\$226,594	\$224,557	\$2.01	\$1.85	57	51	\$423.54	\$437.73
IP - Maternity	\$6,058,779	\$7,037,669	\$53.79	\$58.00	225	228	\$2,866.03	\$3,053.22
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$6,935,888	\$7,511,769	\$61.58	\$61.91	78	73	\$9,527.32	\$10,178.55
IP - Psych	\$597,345	\$618,171	\$5.30	\$5.09	97	86	\$657.87	\$707.29
Lab	\$894,429	\$1,130,193	\$7.94	\$9.31	5,310	5,579	\$17.95	\$20.03
OP - Emergency Room & Related	\$4,802,700	\$5,017,058	\$42.64	\$41.35	1,800	1,675	\$284.30	\$296.31
OP - Other	\$7,611,531	\$8,954,625	\$67.58	\$73.80	2,149	2,223	\$377.44	\$398.43
Pharmacy	\$10,500,317	\$11,546,576	\$93.23	\$95.16	23,755	22,773	\$47.09	\$50.14
Prof - Anesthesia	\$488,135	\$519,377	\$4.33	\$4.28	328	349	\$158.33	\$147.05
Prof - Child EPSDT	\$56,873	\$74,073	\$0.50	\$0.61	398	344	\$15.24	\$21.32
Prof - Evaluation & Management	\$4,665,020	\$4,867,658	\$41.42	\$40.12	7,581	7,452	\$65.56	\$64.60
Prof - Maternity	\$3,259,641	\$3,649,161	\$28.94	\$30.08	756	753	\$459.49	\$479.52
Prof - Other	\$1,492,093	\$1,673,640	\$13.25	\$13.79	2,126	2,267	\$74.77	\$73.03
Prof - Psych	\$335,209	\$363,855	\$2.98	\$3.00	615	630	\$58.10	\$57.12
Prof - Specialist	\$1,534,514	\$1,636,841	\$13.62	\$13.49	1,391	1,376	\$117.53	\$117.61
Prof - Vision	\$175,576	\$206,093	\$1.56	\$1.70	162	158	\$115.21	\$128.89
Radiology	\$1,317,292	\$1,478,036	\$11.70	\$12.18	2,859	2,947	\$49.08	\$49.61
Transportation/Ambulance	\$914,823	\$983,870	\$8.12	\$8.11	2,121	1,652	\$45.95	\$58.91
<b>Total</b>	<b>\$52,915,843</b>	<b>\$58,573,770</b>	<b>\$469.81</b>	<b>\$482.75</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,265,969	1,262,917						
<b>Service Type</b>								
DME/Supplies	\$2,103,068	\$2,232,166	\$1.66	\$1.77	190	214	\$105.17	\$99.33
FQHC / RHC	\$254,201	\$204,105	\$0.20	\$0.16	66	50	\$36.49	\$38.72
Home Health	\$420,584	\$323,708	\$0.33	\$0.26	10	9	\$403.63	\$335.45
IP - Maternity	\$2,721,328	\$2,778,834	\$2.15	\$2.20	9	9	\$2,782.54	\$2,809.74
IP - Newborn	\$23,532,775	\$28,078,399	\$18.59	\$22.23	41	54	\$5,402.07	\$4,904.52
IP - Other	\$11,154,297	\$13,486,023	\$8.81	\$10.68	11	12	\$9,501.10	\$10,788.82
IP - Psych	\$3,208,454	\$3,374,754	\$2.53	\$2.67	44	49	\$686.59	\$652.00
Lab	\$2,516,984	\$2,820,908	\$1.99	\$2.23	1,116	1,135	\$21.38	\$23.62
OP - Emergency Room & Related	\$17,059,599	\$16,638,450	\$13.48	\$13.17	642	677	\$252.03	\$233.45
OP - Other	\$22,086,845	\$24,099,871	\$17.45	\$19.08	409	441	\$512.03	\$518.93
Pharmacy	\$33,939,008	\$38,094,997	\$26.81	\$30.16	4,752	4,968	\$67.70	\$72.86
Prof - Anesthesia	\$1,069,116	\$1,176,180	\$0.84	\$0.93	60	68	\$169.08	\$165.29
Prof - Child EPSDT	\$1,578,610	\$1,165,194	\$1.25	\$0.92	1,103	838	\$13.56	\$13.22
Prof - Evaluation & Management	\$33,355,932	\$35,415,643	\$26.35	\$28.04	4,218	4,526	\$74.96	\$74.35
Prof - Maternity	\$1,534,140	\$1,613,575	\$1.21	\$1.28	23	21	\$640.29	\$718.10
Prof - Other	\$10,761,633	\$11,098,095	\$8.50	\$8.79	2,362	2,678	\$43.20	\$39.37
Prof - Psych	\$2,768,195	\$2,962,447	\$2.19	\$2.35	371	409	\$70.67	\$68.88
Prof - Specialist	\$3,960,568	\$4,317,867	\$3.13	\$3.42	428	418	\$87.73	\$98.11
Prof - Vision	\$1,986,357	\$2,052,403	\$1.57	\$1.63	134	79	\$140.71	\$245.97
Radiology	\$1,263,056	\$1,421,525	\$1.00	\$1.13	500	528	\$23.95	\$25.56
Transportation/Ambulance	\$4,615,669	\$4,792,323	\$3.65	\$3.79	369	266	\$118.63	\$171.37
<b>Total</b>	<b>\$181,890,422</b>	<b>\$198,147,467</b>	<b>\$143.68</b>	<b>\$156.90</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	278,820	304,637						
<b>Service Type</b>								
DME/Supplies	\$1,690,719	\$1,837,433	\$6.06	\$6.03	586	559	\$124.08	\$129.57
FQHC / RHC	\$997,829	\$1,047,327	\$3.58	\$3.44	522	466	\$82.26	\$88.50
Home Health	\$267,029	\$178,641	\$0.96	\$0.59	22	17	\$526.68	\$413.52
IP - Maternity	\$15,576,416	\$16,882,794	\$55.87	\$55.42	220	217	\$3,044.65	\$3,062.92
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$12,390,023	\$15,480,683	\$44.44	\$50.82	64	68	\$8,293.19	\$8,984.73
IP - Psych	\$983,199	\$1,229,188	\$3.53	\$4.03	88	88	\$479.14	\$552.94
Lab	\$1,252,346	\$2,051,188	\$4.49	\$6.73	4,087	3,851	\$13.19	\$20.98
OP - Emergency Room & Related	\$16,472,006	\$15,282,207	\$59.08	\$50.17	1,697	1,653	\$417.78	\$364.17
OP - Other	\$14,997,834	\$14,794,850	\$53.79	\$48.57	941	985	\$685.96	\$591.58
Pharmacy	\$23,542,996	\$25,673,533	\$84.44	\$84.28	19,501	19,085	\$51.96	\$52.99
Prof - Anesthesia	\$1,440,446	\$1,513,246	\$5.17	\$4.97	404	432	\$153.50	\$138.03
Prof - Child EPSDT	\$179,872	\$210,589	\$0.65	\$0.69	420	411	\$18.45	\$20.18
Prof - Evaluation & Management	\$10,704,478	\$11,639,610	\$38.39	\$38.21	6,916	6,992	\$66.62	\$65.57
Prof - Maternity	\$8,482,667	\$9,143,847	\$30.42	\$30.02	596	563	\$612.73	\$639.39
Prof - Other	\$5,098,185	\$5,682,211	\$18.28	\$18.65	2,460	2,550	\$89.21	\$87.76
Prof - Psych	\$820,429	\$976,903	\$2.94	\$3.21	669	693	\$52.82	\$55.49
Prof - Specialist	\$4,270,651	\$4,445,939	\$15.32	\$14.59	1,480	1,466	\$124.18	\$119.45
Prof - Vision	\$343,155	\$399,315	\$1.23	\$1.31	108	108	\$136.44	\$145.21
Radiology	\$3,583,162	\$4,044,463	\$12.85	\$13.28	2,675	2,763	\$57.64	\$57.66
Transportation/Ambulance	\$1,463,290	\$1,650,398	\$5.25	\$5.42	1,808	1,224	\$34.84	\$53.12
<b>Total</b>	<b>\$124,556,733</b>	<b>\$134,164,366</b>	<b>\$446.73</b>	<b>\$440.41</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	555,873	564,486						
<b>Service Type</b>								
DME/Supplies	\$978,140	\$887,878	\$1.76	\$1.57	241	228	\$87.47	\$82.86
FQHC / RHC	\$442,382	\$511,132	\$0.80	\$0.91	229	249	\$41.63	\$43.60
Home Health	\$84,529	\$82,279	\$0.15	\$0.15	10	7	\$177.96	\$238.49
IP - Maternity	\$1,533,193	\$1,630,256	\$2.76	\$2.89	21	17	\$1,574.12	\$2,015.15
IP - Newborn	\$9,371,966	\$10,074,039	\$16.86	\$17.85	103	70	\$1,969.17	\$3,073.22
IP - Other	\$6,209,710	\$7,020,775	\$11.17	\$12.44	35	25	\$3,859.36	\$5,990.42
IP - Psych	\$1,853,435	\$2,197,812	\$3.33	\$3.89	57	69	\$701.79	\$677.08
Lab	\$1,544,287	\$1,516,883	\$2.78	\$2.69	2,153	2,154	\$15.48	\$14.97
OP - Emergency Room & Related	\$4,119,126	\$4,952,935	\$7.41	\$8.77	636	631	\$139.81	\$166.87
OP - Other	\$5,877,111	\$5,839,335	\$10.57	\$10.34	524	346	\$242.10	\$358.87
Pharmacy	\$18,841,902	\$20,515,536	\$33.90	\$36.34	6,361	6,681	\$63.94	\$65.28
Prof - Anesthesia	\$365,840	\$355,269	\$0.66	\$0.63	62	60	\$127.83	\$126.84
Prof - Child EPSDT	\$602,764	\$458,956	\$1.08	\$0.81	982	785	\$13.25	\$12.43
Prof - Evaluation & Management	\$17,694,870	\$19,343,142	\$31.83	\$34.27	4,991	5,224	\$76.53	\$78.71
Prof - Maternity	\$894,601	\$987,308	\$1.61	\$1.75	39	43	\$497.55	\$486.36
Prof - Other	\$5,214,132	\$4,812,730	\$9.38	\$8.53	2,288	2,505	\$49.19	\$40.83
Prof - Psych	\$1,427,634	\$1,573,427	\$2.57	\$2.79	417	441	\$73.84	\$75.92
Prof - Specialist	\$1,817,700	\$1,831,641	\$3.27	\$3.24	364	360	\$107.75	\$108.29
Prof - Vision	\$1,095,462	\$1,157,566	\$1.97	\$2.05	137	115	\$173.24	\$214.20
Radiology	\$704,501	\$786,681	\$1.27	\$1.39	638	651	\$23.83	\$25.69
Transportation/Ambulance	\$1,845,521	\$2,020,922	\$3.32	\$3.58	270	330	\$147.61	\$130.00
<b>Total</b>	<b>\$82,518,804</b>	<b>\$88,556,502</b>	<b>\$148.45</b>	<b>\$156.88</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	117,489	124,123						
<b>Service Type</b>								
DME/Supplies	\$467,612	\$587,848	\$3.98	\$4.74	440	470	\$108.55	\$120.91
FQHC / RHC	\$199,970	\$183,087	\$1.70	\$1.48	495	408	\$41.23	\$43.42
Home Health	\$164,534	\$113,002	\$1.40	\$0.91	117	46	\$143.57	\$238.40
IP - Maternity	\$6,686,580	\$6,885,121	\$56.91	\$55.47	460	281	\$1,483.60	\$2,367.65
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$7,855,655	\$7,148,930	\$66.86	\$57.60	225	102	\$3,559.43	\$6,776.24
IP - Psych	\$920,997	\$926,470	\$7.84	\$7.46	154	151	\$610.74	\$594.65
Lab	\$1,938,363	\$1,722,621	\$16.50	\$13.88	9,184	7,956	\$21.56	\$20.93
OP - Emergency Room & Related	\$3,281,509	\$3,683,447	\$27.93	\$29.68	1,651	1,469	\$203.05	\$242.41
OP - Other	\$6,939,342	\$7,316,416	\$59.06	\$58.94	3,270	1,787	\$216.75	\$395.82
Pharmacy	\$13,013,041	\$14,086,379	\$110.76	\$113.49	28,377	27,167	\$46.84	\$50.13
Prof - Anesthesia	\$469,314	\$461,477	\$3.99	\$3.72	336	313	\$142.87	\$142.34
Prof - Child EPSDT	\$87,567	\$93,847	\$0.75	\$0.76	548	446	\$16.33	\$20.36
Prof - Evaluation & Management	\$5,563,368	\$5,919,716	\$47.35	\$47.69	8,063	8,018	\$70.47	\$71.38
Prof - Maternity	\$3,712,836	\$3,709,752	\$31.60	\$29.89	777	736	\$488.34	\$487.16
Prof - Other	\$1,736,803	\$1,990,547	\$14.78	\$16.04	2,617	2,782	\$67.78	\$69.18
Prof - Psych	\$469,733	\$488,062	\$4.00	\$3.93	868	800	\$55.30	\$58.95
Prof - Specialist	\$1,936,101	\$1,783,691	\$16.48	\$14.37	1,729	1,669	\$114.34	\$103.29
Prof - Vision	\$232,624	\$251,685	\$1.98	\$2.03	183	148	\$130.03	\$164.61
Radiology	\$1,416,163	\$1,569,484	\$12.05	\$12.64	3,140	3,137	\$46.06	\$48.37
Transportation/Ambulance	\$823,047	\$924,498	\$7.01	\$7.45	1,235	1,258	\$68.07	\$71.04
<b>Total</b>	<b>\$57,915,160</b>	<b>\$59,846,080</b>	<b>\$492.94</b>	<b>\$482.15</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	354,767	356,049						
<b>Service Type</b>								
DME/Supplies	\$546,994	\$612,559	\$1.54	\$1.72	257	246	\$72.00	\$84.09
FQHC / RHC	\$192,475	\$202,207	\$0.54	\$0.57	148	152	\$44.04	\$44.87
Home Health	\$42,150	\$59,608	\$0.12	\$0.17	10	5	\$142.40	\$428.83
IP - Maternity	\$1,179,483	\$1,138,475	\$3.32	\$3.20	58	28	\$692.59	\$1,374.97
IP - Newborn	\$5,467,562	\$5,752,120	\$15.41	\$16.16	159	93	\$1,162.10	\$2,094.41
IP - Other	\$4,741,112	\$4,600,414	\$13.36	\$12.92	79	36	\$2,041.82	\$4,323.70
IP - Psych	\$654,230	\$646,883	\$1.84	\$1.82	24	22	\$904.88	\$983.10
Lab	\$1,127,729	\$1,030,189	\$3.18	\$2.89	2,627	2,461	\$14.52	\$14.11
OP - Emergency Room & Related	\$3,679,751	\$4,857,583	\$10.37	\$13.64	963	908	\$129.31	\$180.33
OP - Other	\$4,585,711	\$4,793,881	\$12.93	\$13.46	1,383	734	\$112.13	\$220.12
Pharmacy	\$11,635,677	\$12,210,424	\$32.80	\$34.29	7,918	8,088	\$49.71	\$50.88
Prof - Anesthesia	\$298,033	\$259,130	\$0.84	\$0.73	95	83	\$105.84	\$104.87
Prof - Child EPSDT	\$301,563	\$254,123	\$0.85	\$0.71	759	671	\$13.44	\$12.77
Prof - Evaluation & Management	\$12,486,055	\$12,454,466	\$35.20	\$34.98	6,075	6,168	\$69.53	\$68.05
Prof - Maternity	\$753,280	\$698,158	\$2.12	\$1.96	43	44	\$591.27	\$539.12
Prof - Other	\$3,669,854	\$3,851,306	\$10.34	\$10.82	2,645	2,667	\$46.93	\$48.67
Prof - Psych	\$958,476	\$1,001,872	\$2.70	\$2.81	444	431	\$72.95	\$78.38
Prof - Specialist	\$1,390,204	\$1,360,152	\$3.92	\$3.82	455	452	\$103.40	\$101.39
Prof - Vision	\$731,949	\$752,001	\$2.06	\$2.11	316	240	\$78.39	\$105.44
Radiology	\$711,947	\$701,340	\$2.01	\$1.97	902	885	\$26.68	\$26.70
Transportation/Ambulance	\$1,493,040	\$1,550,539	\$4.21	\$4.35	432	476	\$116.79	\$109.88
<b>Total</b>	<b>\$56,647,275</b>	<b>\$58,787,431</b>	<b>\$159.67</b>	<b>\$165.11</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

**Exhibit 1a**

All Age Categories								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	86,417	91,903						
<b>Service Type</b>								
DME/Supplies	\$420,830	\$343,916	\$4.87	\$3.74	578	543	\$101.04	\$82.75
FQHC / RHC	\$126,851	\$178,083	\$1.47	\$1.94	397	447	\$44.42	\$52.04
Home Health	\$90,475	\$104,694	\$1.05	\$1.14	83	35	\$152.06	\$395.07
IP - Maternity	\$3,580,711	\$3,916,220	\$41.44	\$42.61	762	337	\$652.22	\$1,515.56
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$5,788,653	\$5,571,507	\$66.99	\$60.62	447	190	\$1,799.95	\$3,837.13
IP - Psych	\$513,747	\$595,130	\$5.94	\$6.48	109	125	\$654.46	\$620.57
Lab	\$1,221,748	\$1,179,905	\$14.14	\$12.84	8,352	7,142	\$20.31	\$21.57
OP - Emergency Room & Related	\$2,877,609	\$3,564,137	\$33.30	\$38.78	2,157	1,754	\$185.23	\$265.37
OP - Other	\$4,962,414	\$5,177,022	\$57.42	\$56.33	5,540	2,374	\$124.38	\$284.78
Pharmacy	\$11,721,602	\$12,047,847	\$135.64	\$131.09	34,920	33,797	\$46.61	\$46.55
Prof - Anesthesia	\$294,477	\$309,306	\$3.41	\$3.37	348	326	\$117.37	\$123.77
Prof - Child EPSDT	\$35,524	\$36,235	\$0.41	\$0.39	509	427	\$9.70	\$11.09
Prof - Evaluation & Management	\$3,901,622	\$3,880,137	\$45.15	\$42.22	8,172	7,873	\$66.30	\$64.35
Prof - Maternity	\$2,132,411	\$2,084,269	\$24.68	\$22.68	521	497	\$568.34	\$547.92
Prof - Other	\$901,059	\$1,037,327	\$10.43	\$11.29	1,961	2,229	\$63.80	\$60.75
Prof - Psych	\$243,476	\$252,157	\$2.82	\$2.74	619	562	\$54.60	\$58.57
Prof - Specialist	\$1,195,499	\$1,160,726	\$13.83	\$12.63	1,417	1,413	\$117.16	\$107.25
Prof - Vision	\$155,290	\$186,281	\$1.80	\$2.03	261	250	\$82.65	\$97.43
Radiology	\$1,048,955	\$1,165,808	\$12.14	\$12.69	3,196	3,297	\$45.58	\$46.17
Transportation/Ambulance	\$622,847	\$679,488	\$7.21	\$7.39	1,135	1,126	\$76.18	\$78.83
<b>Total</b>	<b>\$41,835,801</b>	<b>\$43,470,196</b>	<b>\$484.12</b>	<b>\$473.00</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	101	83						
<b>Service Type</b>								
DME/Supplies	\$6,393	\$5,248	\$63.30	\$63.23	5,228	13,157	\$145.31	\$57.67
FQHC / RHC	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Home Health	\$380	\$2,677	\$3.76	\$32.25	238	4,771	\$190.00	\$81.11
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$11,830	\$0.00	\$142.53	0	434	-	\$3,943.35
IP - Other	\$72,274	\$12,013	\$715.58	\$144.74	713	145	\$12,045.67	\$12,013.30
IP - Psych	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Lab	\$319	\$592	\$3.16	\$7.14	1,901	2,602	\$19.93	\$32.91
OP - Emergency Room & Related	\$3,499	\$868	\$34.64	\$10.45	1,188	578	\$349.85	\$216.91
OP - Other	\$8,653	\$3,885	\$85.67	\$46.80	3,208	2,313	\$320.47	\$242.79
Pharmacy	\$47,799	\$21,988	\$473.26	\$264.91	18,416	11,711	\$308.38	\$271.45
Prof - Anesthesia	\$542	\$4,810	\$5.37	\$57.95	475	2,169	\$135.62	\$320.65
Prof - Child EPSDT	\$694	\$141	\$6.87	\$1.70	6,059	1,590	\$13.61	\$12.84
Prof - Evaluation & Management	\$60,865	\$12,091	\$602.62	\$145.68	43,723	18,795	\$165.39	\$93.01
Prof - Maternity	\$0	\$4,188	\$0.00	\$50.46	0	289	-	\$2,093.89
Prof - Other	\$13,932	\$25,465	\$137.94	\$306.81	18,535	18,506	\$89.31	\$198.95
Prof - Psych	\$70	\$0	\$0.69	\$0.00	119	0	\$70.00	-
Prof - Specialist	\$1,469	\$1,935	\$14.55	\$23.31	1,663	723	\$104.96	\$386.99
Prof - Vision	\$1,051	\$275	\$10.41	\$3.31	1,663	578	\$75.09	\$68.72
Radiology	\$1,303	\$403	\$12.90	\$4.85	13,782	3,181	\$11.23	\$18.31
Transportation/Ambulance	\$581	\$401	\$5.75	\$4.83	3,564	289	\$19.36	\$200.47
<b>Total</b>	<b>\$219,825</b>	<b>\$108,809</b>	<b>\$2,176.49</b>	<b>\$1,310.95</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	3,326	2,954						
<b>Service Type</b>								
DME/Supplies	\$384,778	\$293,342	\$115.69	\$99.30	9,453	7,158	\$146.86	\$166.48
FQHC / RHC	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Home Health	\$145,999	\$124,544	\$43.90	\$42.16	357	394	\$1,474.73	\$1,283.95
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,817,998	\$1,961,282	\$546.60	\$663.94	238	244	\$27,545.43	\$32,688.04
IP - Psych	\$170	\$0	\$0.05	\$0.00	0	0	-	-
Lab	\$11,988	\$15,757	\$3.60	\$5.33	2,857	2,856	\$15.14	\$22.41
OP - Emergency Room & Related	\$87,525	\$75,887	\$26.32	\$25.69	1,173	1,194	\$269.31	\$258.12
OP - Other	\$594,900	\$847,228	\$178.86	\$286.81	4,008	4,339	\$535.46	\$793.28
Pharmacy	\$626,480	\$565,231	\$188.36	\$191.34	15,161	14,031	\$149.09	\$163.65
Prof - Anesthesia	\$37,461	\$16,590	\$11.26	\$5.62	736	451	\$183.63	\$149.46
Prof - Child EPSDT	\$5,880	\$3,172	\$1.77	\$1.07	1,443	959	\$14.70	\$13.44
Prof - Evaluation & Management	\$289,547	\$254,787	\$87.06	\$86.25	12,152	12,906	\$85.97	\$80.20
Prof - Maternity	\$0	\$114	\$0.00	\$0.04	0	12	-	\$37.93
Prof - Other	\$2,012,585	\$1,542,501	\$605.11	\$522.17	19,108	19,962	\$380.02	\$313.90
Prof - Psych	\$4,369	\$4,280	\$1.31	\$1.45	271	297	\$58.26	\$58.63
Prof - Specialist	\$77,380	\$49,985	\$23.27	\$16.92	1,054	991	\$265.00	\$204.86
Prof - Vision	\$14,929	\$14,344	\$4.49	\$4.86	639	626	\$84.34	\$93.15
Radiology	\$17,542	\$8,896	\$5.27	\$3.01	2,309	1,938	\$27.41	\$18.65
Transportation/Ambulance	\$19,381	\$18,653	\$5.83	\$6.31	1,689	349	\$41.41	\$216.90
<b>Total</b>	<b>\$6,148,912</b>	<b>\$5,796,591</b>	<b>\$1,848.74</b>	<b>\$1,962.29</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	17,166	17,638						
<b>Service Type</b>								
DME/Supplies	\$501,698	\$433,911	\$29.23	\$24.60	1,951	1,819	\$179.76	\$162.33
FQHC / RHC	\$437	\$764	\$0.03	\$0.04	5	7	\$62.38	\$76.42
Home Health	\$18,795	\$174,550	\$1.09	\$9.90	25	87	\$522.07	\$1,363.68
IP - Maternity	\$51,000	\$44,448	\$2.97	\$2.52	10	6	\$3,642.88	\$4,938.70
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,365,735	\$1,025,805	\$79.56	\$58.16	64	52	\$15,008.07	\$13,497.44
IP - Psych	\$242,895	\$298,673	\$14.15	\$16.93	271	342	\$627.64	\$593.78
Lab	\$42,585	\$66,604	\$2.48	\$3.78	1,727	1,983	\$17.24	\$22.85
OP - Emergency Room & Related	\$281,713	\$298,931	\$16.41	\$16.95	664	757	\$296.54	\$268.58
OP - Other	\$1,051,859	\$1,164,027	\$61.28	\$66.00	1,353	1,370	\$543.60	\$578.25
Pharmacy	\$2,680,077	\$3,063,959	\$156.13	\$173.71	13,876	13,981	\$135.02	\$149.10
Prof - Anesthesia	\$40,962	\$26,844	\$2.39	\$1.52	159	129	\$180.45	\$142.03
Prof - Child EPSDT	\$4,760	\$5,794	\$0.28	\$0.33	231	219	\$14.42	\$17.99
Prof - Evaluation & Management	\$661,749	\$687,168	\$38.55	\$38.96	6,186	6,269	\$74.78	\$74.58
Prof - Maternity	\$19,960	\$10,709	\$1.16	\$0.61	31	60	\$453.63	\$121.69
Prof - Other	\$982,351	\$998,120	\$57.23	\$56.59	3,938	4,911	\$174.36	\$138.28
Prof - Psych	\$66,095	\$73,616	\$3.85	\$4.17	740	835	\$62.41	\$59.95
Prof - Specialist	\$108,200	\$91,035	\$6.30	\$5.16	470	441	\$161.01	\$140.49
Prof - Vision	\$46,988	\$45,801	\$2.74	\$2.60	394	252	\$83.31	\$123.45
Radiology	\$45,849	\$49,868	\$2.67	\$2.83	993	1,082	\$32.27	\$31.34
Transportation/Ambulance	\$91,346	\$87,862	\$5.32	\$4.98	958	465	\$66.63	\$128.45
<b>Total</b>	<b>\$8,305,052</b>	<b>\$8,648,490</b>	<b>\$483.81</b>	<b>\$490.33</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 21-44 Female</b>								
<b>Northern Virginia</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	11,968	12,146						
<b>Service Type</b>								
DME/Supplies	\$156,058	\$120,046	\$13.04	\$9.88	1,240	1,132	\$126.16	\$104.75
FQHC / RHC	\$523	\$1,420	\$0.04	\$0.12	18	30	\$29.08	\$47.32
Home Health	\$22,768	\$6,333	\$1.90	\$0.52	70	19	\$325.26	\$333.31
IP - Maternity	\$208,028	\$194,518	\$17.38	\$16.01	54	59	\$3,852.37	\$3,241.96
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,687,329	\$1,843,674	\$224.54	\$151.79	240	223	\$11,244.05	\$8,157.85
IP - Psych	\$713,617	\$768,139	\$59.63	\$63.24	1,035	1,062	\$691.49	\$714.55
Lab	\$61,786	\$113,276	\$5.16	\$9.33	5,701	6,144	\$10.87	\$18.21
OP - Emergency Room & Related	\$927,925	\$909,073	\$77.53	\$74.85	2,857	2,766	\$325.70	\$324.67
OP - Other	\$831,328	\$996,669	\$69.46	\$82.06	1,334	1,444	\$625.06	\$681.72
Pharmacy	\$3,782,983	\$3,605,827	\$316.09	\$296.87	38,320	36,024	\$98.98	\$98.89
Prof - Anesthesia	\$40,735	\$40,397	\$3.40	\$3.33	285	313	\$143.43	\$127.43
Prof - Child EPSDT	\$4,099	\$7,275	\$0.34	\$0.60	387	448	\$10.62	\$16.06
Prof - Evaluation & Management	\$978,291	\$962,328	\$81.74	\$79.23	14,555	14,443	\$67.39	\$65.83
Prof - Maternity	\$62,668	\$66,070	\$5.24	\$5.44	148	134	\$423.43	\$485.81
Prof - Other	\$367,807	\$436,612	\$30.73	\$35.95	4,396	4,621	\$83.90	\$93.35
Prof - Psych	\$85,724	\$84,394	\$7.16	\$6.95	1,348	1,310	\$63.78	\$63.65
Prof - Specialist	\$229,247	\$204,725	\$19.15	\$16.86	1,768	1,588	\$130.03	\$127.40
Prof - Vision	\$31,324	\$34,200	\$2.62	\$2.82	368	335	\$85.35	\$100.89
Radiology	\$166,658	\$192,510	\$13.93	\$15.85	3,829	3,952	\$43.64	\$48.13
Transportation/Ambulance	\$191,194	\$158,754	\$15.98	\$13.07	5,932	1,940	\$32.32	\$80.83
<b>Total</b>	<b>\$11,550,091</b>	<b>\$10,746,239</b>	<b>\$965.08</b>	<b>\$884.76</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	12,379	13,640						
<b>Service Type</b>								
DME/Supplies	\$230,551	\$186,930	\$18.62	\$13.70	1,274	1,260	\$175.46	\$130.54
FQHC / RHC	\$556	\$563	\$0.04	\$0.04	18	11	\$29.24	\$46.89
Home Health	\$41,258	\$8,743	\$3.33	\$0.64	91	26	\$438.92	\$301.49
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,402,602	\$2,726,819	\$194.09	\$199.91	184	174	\$12,645.27	\$13,771.82
IP - Psych	\$856,485	\$958,162	\$69.19	\$70.25	1,171	1,209	\$709.01	\$697.35
Lab	\$37,211	\$55,839	\$3.01	\$4.09	3,284	3,407	\$10.98	\$14.42
OP - Emergency Room & Related	\$533,116	\$512,897	\$43.07	\$37.60	1,481	1,364	\$348.90	\$330.90
OP - Other	\$874,244	\$1,070,656	\$70.62	\$78.49	1,039	1,111	\$815.53	\$847.71
Pharmacy	\$3,799,302	\$4,430,249	\$306.92	\$324.80	25,963	26,237	\$141.85	\$148.55
Prof - Anesthesia	\$18,475	\$25,107	\$1.49	\$1.84	134	202	\$133.88	\$109.16
Prof - Child EPSDT	\$6,745	\$3,620	\$0.54	\$0.27	240	194	\$27.20	\$16.38
Prof - Evaluation & Management	\$623,206	\$724,163	\$50.34	\$53.09	9,003	9,689	\$67.11	\$65.76
Prof - Maternity	\$2,306	\$4,564	\$0.19	\$0.33	3	4	\$768.62	\$1,140.97
Prof - Other	\$373,787	\$454,879	\$30.20	\$33.35	2,888	2,776	\$125.47	\$144.18
Prof - Psych	\$58,775	\$54,949	\$4.75	\$4.03	937	752	\$60.78	\$64.27
Prof - Specialist	\$131,580	\$139,947	\$10.63	\$10.26	1,039	1,114	\$122.74	\$110.54
Prof - Vision	\$18,395	\$25,443	\$1.49	\$1.87	155	191	\$114.97	\$117.25
Radiology	\$76,433	\$79,009	\$6.17	\$5.79	1,923	1,847	\$38.52	\$37.64
Transportation/Ambulance	\$145,619	\$167,244	\$11.76	\$12.26	4,856	1,782	\$29.07	\$82.55
<b>Total</b>	<b>\$10,230,644</b>	<b>\$11,629,784</b>	<b>\$826.45</b>	<b>\$852.62</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Northern Virginia</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	53,429	58,249						
<b>Service Type</b>								
DME/Supplies	\$994,867	\$1,157,452	\$18.62	\$19.87	1,926	1,870	\$115.99	\$127.49
FQHC / RHC	\$1,467	\$6,813	\$0.03	\$0.12	7	18	\$44.47	\$79.23
Home Health	\$304,494	\$253,648	\$5.70	\$4.35	197	174	\$347.60	\$300.53
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$16,532,972	\$19,316,218	\$309.44	\$331.61	327	307	\$11,370.68	\$12,981.33
IP - Psych	\$1,554,525	\$1,899,581	\$29.10	\$32.61	465	509	\$751.34	\$769.37
Lab	\$368,985	\$532,419	\$6.91	\$9.14	7,280	7,477	\$11.38	\$14.67
OP - Emergency Room & Related	\$2,832,477	\$2,632,808	\$53.01	\$45.20	1,330	1,206	\$478.22	\$449.90
OP - Other	\$6,245,469	\$6,564,318	\$116.89	\$112.69	1,967	2,048	\$713.28	\$660.19
Pharmacy	\$20,683,616	\$23,918,563	\$387.12	\$410.63	60,642	58,413	\$76.60	\$84.36
Prof - Anesthesia	\$243,077	\$248,939	\$4.55	\$4.27	399	440	\$136.87	\$116.54
Prof - Child EPSDT	\$26,501	\$50,006	\$0.50	\$0.86	518	699	\$11.49	\$14.75
Prof - Evaluation & Management	\$4,478,807	\$4,923,838	\$83.83	\$84.53	14,391	14,816	\$69.90	\$68.47
Prof - Maternity	\$17,092	\$38,337	\$0.32	\$0.66	3	9	\$1,139.48	\$891.55
Prof - Other	\$1,811,355	\$2,268,286	\$33.90	\$38.94	5,213	6,061	\$78.04	\$77.09
Prof - Psych	\$199,988	\$186,238	\$3.74	\$3.20	716	607	\$62.73	\$63.17
Prof - Specialist	\$1,563,650	\$1,710,840	\$29.27	\$29.37	2,695	2,585	\$130.30	\$136.34
Prof - Vision	\$325,237	\$352,716	\$6.09	\$6.06	989	971	\$73.87	\$74.87
Radiology	\$1,073,634	\$1,178,523	\$20.09	\$20.23	4,518	4,536	\$53.38	\$53.52
Transportation/Ambulance	\$667,533	\$650,363	\$12.49	\$11.17	4,886	1,688	\$30.68	\$79.37
<b>Total</b>	<b>\$59,925,745</b>	<b>\$67,889,907</b>	<b>\$1,121.60</b>	<b>\$1,165.51</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Northern Virginia	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	98,369	104,710						
<b>Service Type</b>								
DME/Supplies	\$2,274,345	\$2,196,928	\$23.12	\$20.98	2,023	1,855	\$137.15	\$135.76
FQHC / RHC	\$2,983	\$9,560	\$0.03	\$0.09	9	16	\$38.74	\$69.28
Home Health	\$533,694	\$570,495	\$5.43	\$5.45	144	132	\$453.44	\$496.08
IP - Maternity	\$259,028	\$238,966	\$2.63	\$2.28	8	8	\$3,809.24	\$3,463.27
IP - Newborn	\$0	\$11,830	\$0.00	\$0.11	0	0	-	\$3,943.35
IP - Other	\$24,878,909	\$26,885,813	\$252.91	\$256.76	250	235	\$12,159.78	\$13,121.43
IP - Psych	\$3,367,692	\$3,924,555	\$34.24	\$37.48	573	621	\$717.14	\$723.95
Lab	\$522,874	\$784,488	\$5.32	\$7.49	5,461	5,733	\$11.68	\$15.68
OP - Emergency Room & Related	\$4,666,255	\$4,430,463	\$47.44	\$42.31	1,413	1,331	\$402.78	\$381.51
OP - Other	\$9,606,452	\$10,646,782	\$97.66	\$101.68	1,736	1,807	\$675.04	\$675.34
Pharmacy	\$31,620,257	\$35,605,816	\$321.45	\$340.04	43,820	42,851	\$88.03	\$95.23
Prof - Anesthesia	\$381,253	\$362,686	\$3.88	\$3.46	321	344	\$144.80	\$120.98
Prof - Child EPSDT	\$48,679	\$70,009	\$0.49	\$0.67	454	531	\$13.08	\$15.11
Prof - Evaluation & Management	\$7,092,465	\$7,564,376	\$72.10	\$72.24	12,255	12,614	\$70.60	\$68.72
Prof - Maternity	\$102,025	\$123,982	\$1.04	\$1.18	26	32	\$485.84	\$449.21
Prof - Other	\$5,561,816	\$5,725,863	\$56.54	\$54.68	5,082	5,675	\$133.51	\$115.64
Prof - Psych	\$415,021	\$403,477	\$4.22	\$3.85	809	737	\$62.56	\$62.75
Prof - Specialist	\$2,111,527	\$2,198,466	\$21.47	\$21.00	1,929	1,870	\$133.53	\$134.73
Prof - Vision	\$437,923	\$472,779	\$4.45	\$4.52	694	664	\$77.03	\$81.57
Radiology	\$1,381,419	\$1,509,208	\$14.04	\$14.41	3,427	3,462	\$49.17	\$49.96
Transportation/Ambulance	\$1,115,653	\$1,083,276	\$11.34	\$10.35	4,215	1,485	\$32.29	\$83.61
<b>Total</b>	<b>\$96,380,270</b>	<b>\$104,819,820</b>	<b>\$979.78</b>	<b>\$1,001.05</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	63	85						
<b>Service Type</b>								
DME/Supplies	\$3,666	\$4,856	\$58.20	\$57.13	5,905	8,612	\$118.27	\$79.61
FQHC / RHC	\$0	\$114	\$0.00	\$1.34	0	706	-	\$22.71
Home Health	\$826	\$315	\$13.11	\$3.71	381	141	\$412.85	\$315.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$27,449	\$0.00	\$322.93	0	141	-	\$27,449.46
IP - Other	\$0	\$35,588	\$0.00	\$418.68	0	424	-	\$11,862.72
IP - Psych	\$1,365	\$1,753	\$21.66	\$20.63	0	0	-	-
Lab	\$51	\$183	\$0.82	\$2.15	571	2,259	\$17.13	\$11.43
OP - Emergency Room & Related	\$3,275	\$974	\$51.99	\$11.46	1,714	988	\$363.94	\$139.10
OP - Other	\$4,888	\$4,147	\$77.59	\$48.79	3,429	3,529	\$271.55	\$165.87
Pharmacy	\$14,735	\$1,383	\$233.89	\$16.28	19,238	5,647	\$145.89	\$34.59
Prof - Anesthesia	\$465	\$1,278	\$7.38	\$15.04	381	565	\$232.53	\$319.60
Prof - Child EPSDT	\$128	\$114	\$2.04	\$1.34	2,095	1,553	\$11.66	\$10.38
Prof - Evaluation & Management	\$15,873	\$10,782	\$251.95	\$126.85	38,095	19,059	\$79.37	\$79.87
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$53,009	\$91,104	\$841.41	\$1,071.81	19,048	14,541	\$530.09	\$884.50
Prof - Psych	\$199	\$256	\$3.17	\$3.01	0	0	-	-
Prof - Specialist	\$1,765	\$9,120	\$28.02	\$107.30	1,333	1,694	\$252.15	\$760.01
Prof - Vision	\$353	\$1,365	\$5.60	\$16.06	571	2,824	\$117.63	\$68.26
Radiology	\$201	\$349	\$3.19	\$4.10	3,810	3,247	\$10.04	\$15.16
Transportation/Ambulance	\$1,011	\$274	\$16.04	\$3.22	8,000	2,682	\$24.06	\$14.40
<b>Total</b>	<b>\$101,811</b>	<b>\$191,405</b>	<b>\$1,616.05</b>	<b>\$2,251.83</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	2,541	2,369						
<b>Service Type</b>								
DME/Supplies	\$177,463	\$138,803	\$69.84	\$58.59	6,489	5,344	\$129.16	\$131.57
FQHC / RHC	\$29,153	\$81,607	\$11.47	\$34.45	2,182	3,267	\$63.10	\$126.52
Home Health	\$14,878	\$9,660	\$5.86	\$4.08	90	101	\$783.05	\$483.02
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$792,561	\$546,518	\$311.91	\$230.70	194	233	\$19,330.76	\$11,880.83
IP - Psych	\$56,105	\$50,539	\$22.08	\$21.33	0	0	-	-
Lab	\$7,944	\$6,350	\$3.13	\$2.68	2,541	2,138	\$14.77	\$15.05
OP - Emergency Room & Related	\$48,847	\$40,485	\$19.22	\$17.09	1,058	983	\$218.06	\$208.68
OP - Other	\$484,849	\$256,005	\$190.81	\$108.06	3,391	2,604	\$675.28	\$498.06
Pharmacy	\$419,239	\$266,391	\$164.99	\$112.45	12,949	13,464	\$152.90	\$100.22
Prof - Anesthesia	\$13,865	\$10,330	\$5.46	\$4.36	401	370	\$163.12	\$141.50
Prof - Child EPSDT	\$1,864	\$1,684	\$0.73	\$0.71	798	790	\$11.03	\$10.79
Prof - Evaluation & Management	\$144,529	\$163,448	\$56.88	\$68.99	8,425	9,503	\$81.01	\$87.13
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$612,849	\$378,130	\$241.18	\$159.62	14,947	14,918	\$193.63	\$128.40
Prof - Psych	\$10,418	\$9,625	\$4.10	\$4.06	184	142	\$267.12	\$343.75
Prof - Specialist	\$36,276	\$21,078	\$14.28	\$8.90	770	689	\$222.55	\$154.99
Prof - Vision	\$8,329	\$7,284	\$3.28	\$3.07	354	284	\$111.05	\$130.07
Radiology	\$12,584	\$7,020	\$4.95	\$2.96	1,776	1,844	\$33.47	\$19.28
Transportation/Ambulance	\$34,419	\$39,787	\$13.55	\$16.79	3,991	3,369	\$40.73	\$59.83
<b>Total</b>	<b>\$2,906,171</b>	<b>\$2,034,743</b>	<b>\$1,143.71</b>	<b>\$858.90</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	19,685	19,216						
<b>Service Type</b>								
DME/Supplies	\$189,082	\$198,205	\$9.61	\$10.31	1,044	1,050	\$110.38	\$117.91
FQHC / RHC	\$109,622	\$81,850	\$5.57	\$4.26	1,108	940	\$60.30	\$54.35
Home Health	\$1,710	\$1,531	\$0.09	\$0.08	2	2	\$427.47	\$510.46
IP - Maternity	\$44,835	\$17,501	\$2.28	\$0.91	10	4	\$2,637.38	\$2,500.20
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,074,966	\$732,487	\$54.61	\$38.12	52	49	\$12,499.61	\$9,271.99
IP - Psych	\$560,284	\$638,971	\$28.46	\$33.25	358	400	\$954.49	\$996.83
Lab	\$66,912	\$57,938	\$3.40	\$3.02	2,489	2,289	\$16.39	\$15.80
OP - Emergency Room & Related	\$213,707	\$231,183	\$10.86	\$12.03	571	649	\$228.08	\$222.50
OP - Other	\$537,068	\$649,246	\$27.28	\$33.79	836	994	\$391.73	\$408.07
Pharmacy	\$3,036,494	\$3,220,734	\$154.25	\$167.61	16,340	17,530	\$113.28	\$114.73
Prof - Anesthesia	\$22,332	\$19,031	\$1.13	\$0.99	91	84	\$149.88	\$142.02
Prof - Child EPSDT	\$4,268	\$3,043	\$0.22	\$0.16	210	137	\$12.37	\$13.90
Prof - Evaluation & Management	\$584,757	\$655,025	\$29.71	\$34.09	4,884	5,724	\$72.99	\$71.46
Prof - Maternity	\$27,723	\$10,712	\$1.41	\$0.56	30	22	\$565.78	\$297.54
Prof - Other	\$1,190,318	\$1,573,958	\$60.47	\$81.91	3,616	4,784	\$200.69	\$205.45
Prof - Psych	\$134,901	\$196,045	\$6.85	\$10.20	1,127	1,665	\$72.96	\$73.54
Prof - Specialist	\$91,796	\$97,701	\$4.66	\$5.08	497	490	\$112.63	\$124.62
Prof - Vision	\$49,995	\$52,763	\$2.54	\$2.75	322	282	\$94.51	\$116.73
Radiology	\$49,472	\$54,771	\$2.51	\$2.85	892	927	\$33.79	\$36.91
Transportation/Ambulance	\$190,786	\$186,332	\$9.69	\$9.70	4,157	4,089	\$27.97	\$28.46
<b>Total</b>	<b>\$8,181,027</b>	<b>\$8,679,028</b>	<b>\$415.60</b>	<b>\$451.66</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 21-44 Female</b>								
<b>Other MSA</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	11,805	11,873						
<b>Service Type</b>								
DME/Supplies	\$175,916	\$181,823	\$14.90	\$15.31	1,514	1,728	\$118.14	\$106.33
FQHC / RHC	\$77,446	\$41,511	\$6.56	\$3.50	1,643	988	\$47.92	\$42.44
Home Health	\$7,122	\$14,278	\$0.60	\$1.20	22	62	\$323.71	\$234.06
IP - Maternity	\$251,586	\$223,153	\$21.31	\$18.79	78	63	\$3,267.35	\$3,599.23
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,040,875	\$1,832,560	\$172.88	\$154.35	178	220	\$11,662.14	\$8,406.24
IP - Psych	\$498,663	\$552,393	\$42.24	\$46.53	569	669	\$890.47	\$834.43
Lab	\$167,603	\$152,550	\$14.20	\$12.85	8,876	7,794	\$19.19	\$19.78
OP - Emergency Room & Related	\$575,787	\$763,018	\$48.77	\$64.26	2,120	2,405	\$276.02	\$320.60
OP - Other	\$1,161,560	\$1,065,256	\$98.40	\$89.72	2,417	2,606	\$488.46	\$413.21
Pharmacy	\$3,422,458	\$3,590,852	\$289.92	\$302.44	47,921	47,467	\$72.60	\$76.46
Prof - Anesthesia	\$26,921	\$29,000	\$2.28	\$2.44	196	198	\$139.49	\$147.96
Prof - Child EPSDT	\$7,358	\$7,995	\$0.62	\$0.67	632	550	\$11.83	\$14.70
Prof - Evaluation & Management	\$764,375	\$837,128	\$64.75	\$70.51	11,271	12,195	\$68.94	\$69.38
Prof - Maternity	\$90,717	\$73,619	\$7.68	\$6.20	206	160	\$446.88	\$465.94
Prof - Other	\$234,878	\$283,956	\$19.90	\$23.92	4,297	4,933	\$55.57	\$58.18
Prof - Psych	\$82,970	\$99,367	\$7.03	\$8.37	1,426	1,403	\$59.14	\$71.59
Prof - Specialist	\$181,994	\$193,353	\$15.42	\$16.29	2,054	1,970	\$90.05	\$99.21
Prof - Vision	\$31,225	\$34,099	\$2.65	\$2.87	341	350	\$93.21	\$98.55
Radiology	\$165,330	\$167,396	\$14.01	\$14.10	3,836	4,040	\$43.81	\$41.88
Transportation/Ambulance	\$264,488	\$295,838	\$22.40	\$24.92	9,389	9,470	\$28.64	\$31.57
<b>Total</b>	<b>\$10,229,269</b>	<b>\$10,439,144</b>	<b>\$866.52</b>	<b>\$879.23</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	9,919	10,445						
<b>Service Type</b>								
DME/Supplies	\$237,541	\$210,007	\$23.95	\$20.11	1,970	1,642	\$145.91	\$146.96
FQHC / RHC	\$23,496	\$21,447	\$2.37	\$2.05	670	491	\$42.41	\$50.23
Home Health	\$17,205	\$16,208	\$1.73	\$1.55	59	52	\$351.12	\$360.17
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,715,044	\$2,285,837	\$273.72	\$218.85	235	202	\$13,995.07	\$12,987.71
IP - Psych	\$516,700	\$532,680	\$52.09	\$51.00	835	764	\$748.84	\$801.02
Lab	\$57,030	\$48,132	\$5.75	\$4.61	3,900	3,033	\$17.69	\$18.23
OP - Emergency Room & Related	\$374,327	\$371,458	\$37.74	\$35.56	1,507	1,428	\$300.42	\$298.84
OP - Other	\$671,228	\$900,798	\$67.67	\$86.24	1,655	1,758	\$490.66	\$588.76
Pharmacy	\$2,933,713	\$3,220,373	\$295.77	\$308.32	30,158	28,849	\$117.69	\$128.25
Prof - Anesthesia	\$15,564	\$16,678	\$1.57	\$1.60	122	124	\$154.10	\$154.42
Prof - Child EPSDT	\$2,828	\$2,600	\$0.29	\$0.25	195	177	\$17.57	\$16.88
Prof - Evaluation & Management	\$458,978	\$499,003	\$46.27	\$47.77	7,849	8,167	\$70.74	\$70.19
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$471,219	\$673,495	\$47.51	\$64.48	2,890	2,555	\$197.25	\$302.83
Prof - Psych	\$46,077	\$47,320	\$4.65	\$4.53	750	713	\$74.32	\$76.20
Prof - Specialist	\$123,037	\$115,981	\$12.40	\$11.10	1,256	1,144	\$118.53	\$116.45
Prof - Vision	\$23,566	\$26,461	\$2.38	\$2.53	248	236	\$114.96	\$129.08
Radiology	\$65,907	\$62,888	\$6.64	\$6.02	2,512	2,391	\$31.75	\$30.22
Transportation/Ambulance	\$168,447	\$190,927	\$16.98	\$18.28	9,551	9,035	\$21.34	\$24.28
<b>Total</b>	<b>\$8,921,907</b>	<b>\$9,242,293</b>	<b>\$899.48</b>	<b>\$884.85</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 45 and Over								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	32,285	34,254						
<b>Service Type</b>								
DME/Supplies	\$1,143,233	\$1,111,886	\$35.41	\$32.46	4,312	4,192	\$98.55	\$92.92
FQHC / RHC	\$227,333	\$116,734	\$7.04	\$3.41	1,923	1,108	\$43.93	\$36.91
Home Health	\$202,854	\$197,009	\$6.28	\$5.75	233	213	\$324.05	\$324.03
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$9,798,255	\$11,222,316	\$303.49	\$327.62	349	356	\$10,445.90	\$11,045.59
IP - Psych	\$1,053,043	\$1,239,338	\$32.62	\$36.18	392	432	\$999.09	\$1,004.33
Lab	\$446,873	\$435,410	\$13.84	\$12.71	9,684	8,813	\$17.15	\$17.31
OP - Emergency Room & Related	\$1,299,042	\$1,596,890	\$40.24	\$46.62	1,182	1,319	\$408.63	\$424.03
OP - Other	\$4,081,968	\$4,977,612	\$126.44	\$145.31	3,256	3,554	\$465.92	\$490.70
Pharmacy	\$13,045,406	\$14,284,530	\$404.07	\$417.02	78,083	77,271	\$62.10	\$64.76
Prof - Anesthesia	\$98,329	\$97,843	\$3.05	\$2.86	245	239	\$149.21	\$143.26
Prof - Child EPSDT	\$23,235	\$27,590	\$0.72	\$0.81	802	733	\$10.77	\$13.19
Prof - Evaluation & Management	\$2,339,792	\$2,718,837	\$72.47	\$79.37	12,472	13,612	\$69.73	\$69.97
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,603,744	\$1,491,356	\$49.67	\$43.54	6,789	7,167	\$87.80	\$72.89
Prof - Psych	\$129,436	\$152,326	\$4.01	\$4.45	499	558	\$96.38	\$95.56
Prof - Specialist	\$875,062	\$1,000,826	\$27.10	\$29.22	3,181	3,153	\$102.24	\$111.20
Prof - Vision	\$143,249	\$158,482	\$4.44	\$4.63	668	682	\$79.72	\$81.36
Radiology	\$561,269	\$616,595	\$17.38	\$18.00	4,787	5,172	\$43.58	\$41.76
Transportation/Ambulance	\$801,916	\$902,003	\$24.84	\$26.33	12,095	12,336	\$24.64	\$25.62
<b>Total</b>	<b>\$37,874,042</b>	<b>\$42,347,583</b>	<b>\$1,173.12</b>	<b>\$1,236.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Other MSA	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	76,298	78,242						
<b>Service Type</b>								
DME/Supplies	\$1,926,901	\$1,845,581	\$25.25	\$23.59	2,805	2,746	\$108.04	\$103.09
FQHC / RHC	\$467,051	\$343,262	\$6.12	\$4.39	1,514	1,031	\$48.52	\$51.05
Home Health	\$244,594	\$239,001	\$3.21	\$3.05	114	113	\$338.77	\$323.85
IP - Maternity	\$296,421	\$240,654	\$3.89	\$3.08	15	11	\$3,153.42	\$3,487.74
IP - Newborn	\$0	\$27,449	\$0.00	\$0.35	0	0	-	\$27,449.46
IP - Other	\$16,421,701	\$16,655,307	\$215.23	\$212.87	226	236	\$11,451.67	\$10,829.20
IP - Psych	\$2,686,160	\$3,015,674	\$35.21	\$38.54	455	491	\$929.15	\$941.81
Lab	\$746,414	\$700,563	\$9.78	\$8.95	6,705	6,076	\$17.51	\$17.68
OP - Emergency Room & Related	\$2,514,986	\$3,004,007	\$32.96	\$38.39	1,208	1,323	\$327.43	\$348.13
OP - Other	\$6,941,560	\$7,853,063	\$90.98	\$100.37	2,298	2,513	\$474.99	\$479.37
Pharmacy	\$22,872,045	\$24,584,263	\$299.77	\$314.21	49,039	49,602	\$73.36	\$76.01
Prof - Anesthesia	\$177,476	\$174,160	\$2.33	\$2.23	187	184	\$149.27	\$145.38
Prof - Child EPSDT	\$39,681	\$43,027	\$0.52	\$0.55	545	487	\$11.45	\$13.55
Prof - Evaluation & Management	\$4,308,303	\$4,884,223	\$56.47	\$62.42	9,614	10,614	\$70.48	\$70.57
Prof - Maternity	\$118,440	\$84,331	\$1.55	\$1.08	40	30	\$470.00	\$434.70
Prof - Other	\$4,166,016	\$4,491,999	\$54.60	\$57.41	5,360	5,870	\$122.25	\$117.37
Prof - Psych	\$404,001	\$504,939	\$5.30	\$6.45	826	966	\$76.89	\$80.19
Prof - Specialist	\$1,309,930	\$1,438,060	\$17.17	\$18.38	1,982	1,975	\$103.94	\$111.68
Prof - Vision	\$256,717	\$280,455	\$3.36	\$3.58	463	464	\$87.20	\$92.65
Radiology	\$854,762	\$909,018	\$11.20	\$11.62	3,238	3,483	\$41.52	\$40.02
Transportation/Ambulance	\$1,461,067	\$1,615,160	\$19.15	\$20.64	9,024	9,153	\$25.46	\$27.06
<b>Total</b>	<b>\$68,214,226</b>	<b>\$72,934,196</b>	<b>\$894.05</b>	<b>\$932.16</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	102	172						
<b>Service Type</b>								
DME/Supplies	\$6,420	\$7,506	\$62.94	\$43.64	7,059	9,209	\$107.00	\$56.86
FQHC / RHC	\$83	\$0	\$0.82	\$0.00	118	0	\$83.28	-
Home Health	\$0	\$48	\$0.00	\$0.28	0	279	-	\$11.88
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$2,378	\$0	\$23.31	\$0.00	235	0	\$1,188.89	-
IP - Other	\$30,459	\$30,917	\$298.62	\$179.75	235	279	\$15,229.71	\$7,729.22
IP - Psych	\$2,161	\$2,801	\$21.19	\$16.29	0	0	-	-
Lab	\$190	\$324	\$1.87	\$1.89	2,824	1,395	\$7.93	\$16.22
OP - Emergency Room & Related	\$1,280	\$2,931	\$12.55	\$17.04	1,529	907	\$98.50	\$225.47
OP - Other	\$3,514	\$20,719	\$34.45	\$120.46	3,882	4,884	\$106.49	\$295.98
Pharmacy	\$6,849	\$23,263	\$67.15	\$135.25	8,706	6,349	\$92.56	\$255.64
Prof - Anesthesia	\$971	\$764	\$9.52	\$4.44	941	349	\$121.33	\$152.85
Prof - Child EPSDT	\$504	\$103	\$4.94	\$0.60	4,471	767	\$13.27	\$9.38
Prof - Evaluation & Management	\$8,469	\$30,112	\$83.03	\$175.07	14,353	17,372	\$69.42	\$120.93
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$61,006	\$7,185	\$598.10	\$41.78	21,647	3,767	\$331.56	\$133.06
Prof - Psych	\$316	\$414	\$3.10	\$2.41	0	70	-	\$414.17
Prof - Specialist	\$1,899	\$3,140	\$18.62	\$18.26	1,176	767	\$189.91	\$285.48
Prof - Vision	\$519	\$412	\$5.09	\$2.40	824	349	\$74.16	\$82.45
Radiology	\$174	\$512	\$1.70	\$2.97	1,647	3,000	\$12.40	\$11.90
Transportation/Ambulance	\$475	\$975	\$4.66	\$5.67	5,882	1,744	\$9.51	\$39.02
<b>Total</b>	<b>\$127,670</b>	<b>\$132,127</b>	<b>\$1,251.66</b>	<b>\$768.18</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	4,473	3,958						
<b>Service Type</b>								
DME/Supplies	\$411,950	\$385,442	\$92.10	\$97.38	7,447	8,241	\$148.40	\$141.81
FQHC / RHC	\$620	\$639	\$0.14	\$0.16	32	39	\$51.68	\$49.15
Home Health	\$769,853	\$365,396	\$172.11	\$92.32	507	376	\$4,073.30	\$2,946.74
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$539,729	\$1,201,691	\$120.66	\$303.61	182	209	\$7,937.19	\$17,415.81
IP - Psych	\$104,438	\$63,666	\$23.35	\$16.09	48	15	\$5,802.12	\$12,733.24
Lab	\$13,227	\$14,840	\$2.96	\$3.75	2,511	2,425	\$14.13	\$18.55
OP - Emergency Room & Related	\$111,193	\$103,132	\$24.86	\$26.06	1,253	1,328	\$238.10	\$235.46
OP - Other	\$815,101	\$810,726	\$182.23	\$204.83	5,873	5,858	\$372.36	\$419.63
Pharmacy	\$571,585	\$451,666	\$127.79	\$114.11	13,234	14,289	\$115.87	\$95.83
Prof - Anesthesia	\$22,057	\$18,652	\$4.93	\$4.71	362	391	\$163.38	\$144.59
Prof - Child EPSDT	\$5,278	\$3,704	\$1.18	\$0.94	1,127	916	\$12.57	\$12.26
Prof - Evaluation & Management	\$265,843	\$240,785	\$59.43	\$60.84	9,596	10,257	\$74.32	\$71.18
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$784,655	\$778,171	\$175.42	\$196.61	8,818	10,608	\$238.71	\$222.40
Prof - Psych	\$22,109	\$21,551	\$4.94	\$5.44	496	658	\$119.51	\$99.31
Prof - Specialist	\$61,541	\$68,216	\$13.76	\$17.24	842	916	\$195.99	\$225.88
Prof - Vision	\$13,167	\$12,393	\$2.94	\$3.13	295	367	\$119.70	\$102.42
Radiology	\$13,306	\$10,471	\$2.97	\$2.65	1,679	1,504	\$21.26	\$21.11
Transportation/Ambulance	\$49,745	\$35,457	\$11.12	\$8.96	3,294	2,001	\$40.51	\$53.72
<b>Total</b>	<b>\$4,575,398</b>	<b>\$4,586,599</b>	<b>\$1,022.89</b>	<b>\$1,158.82</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	51,513	49,489						
<b>Service Type</b>								
DME/Supplies	\$802,089	\$699,192	\$15.57	\$14.13	1,345	1,347	\$138.96	\$125.82
FQHC / RHC	\$14,796	\$15,562	\$0.29	\$0.31	73	95	\$47.42	\$39.90
Home Health	\$153,079	\$49,297	\$2.97	\$1.00	21	16	\$1,682.19	\$770.27
IP - Maternity	\$162,458	\$136,197	\$3.15	\$2.75	12	11	\$3,065.25	\$2,960.80
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,845,173	\$2,327,961	\$74.64	\$47.04	64	64	\$13,982.45	\$8,784.76
IP - Psych	\$1,735,147	\$1,786,735	\$33.68	\$36.10	405	408	\$998.93	\$1,061.01
Lab	\$121,490	\$132,054	\$2.36	\$2.67	1,897	1,674	\$14.92	\$19.13
OP - Emergency Room & Related	\$1,081,479	\$1,063,515	\$20.99	\$21.49	844	910	\$298.50	\$283.30
OP - Other	\$2,472,927	\$2,423,687	\$48.01	\$48.97	1,439	1,518	\$400.21	\$387.11
Pharmacy	\$6,960,339	\$6,751,108	\$135.12	\$136.42	14,067	14,724	\$115.27	\$111.18
Prof - Anesthesia	\$77,612	\$54,857	\$1.51	\$1.11	102	105	\$176.39	\$126.98
Prof - Child EPSDT	\$13,438	\$6,870	\$0.26	\$0.14	181	108	\$17.32	\$15.44
Prof - Evaluation & Management	\$1,565,156	\$1,589,563	\$30.38	\$32.12	5,279	5,591	\$69.07	\$68.94
Prof - Maternity	\$87,829	\$66,242	\$1.70	\$1.34	24	19	\$852.70	\$849.25
Prof - Other	\$1,612,427	\$2,355,002	\$31.30	\$47.59	2,545	2,867	\$147.56	\$199.15
Prof - Psych	\$324,902	\$345,220	\$6.31	\$6.98	1,153	1,277	\$65.65	\$65.56
Prof - Specialist	\$318,165	\$240,029	\$6.18	\$4.85	403	363	\$183.80	\$160.13
Prof - Vision	\$96,112	\$91,684	\$1.87	\$1.85	247	201	\$90.76	\$110.46
Radiology	\$115,592	\$105,151	\$2.24	\$2.12	990	968	\$27.20	\$26.35
Transportation/Ambulance	\$277,169	\$264,291	\$5.38	\$5.34	2,032	1,633	\$31.77	\$39.24
<b>Total</b>	<b>\$21,837,381</b>	<b>\$20,504,218</b>	<b>\$423.92</b>	<b>\$414.32</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 21-44 Female</b>								
<b>Richmond/Charlottesville</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	28,588	28,350						
<b>Service Type</b>								
DME/Supplies	\$491,525	\$397,998	\$17.19	\$14.04	1,586	1,457	\$130.10	\$115.66
FQHC / RHC	\$52,653	\$32,672	\$1.84	\$1.15	359	291	\$61.58	\$47.56
Home Health	\$58,847	\$72,943	\$2.06	\$2.57	110	85	\$225.47	\$364.71
IP - Maternity	\$623,190	\$504,988	\$21.80	\$17.81	75	63	\$3,501.07	\$3,366.59
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$7,181,022	\$5,176,587	\$251.19	\$182.60	251	224	\$11,988.35	\$9,785.61
IP - Psych	\$1,911,483	\$1,803,148	\$66.86	\$63.60	1,228	999	\$653.27	\$764.37
Lab	\$240,847	\$278,649	\$8.42	\$9.83	6,183	5,810	\$16.35	\$20.30
OP - Emergency Room & Related	\$2,433,967	\$2,464,057	\$85.14	\$86.92	2,809	2,893	\$363.77	\$360.51
OP - Other	\$2,689,819	\$2,741,675	\$94.09	\$96.71	2,435	2,508	\$463.60	\$462.65
Pharmacy	\$7,141,151	\$7,479,066	\$249.80	\$263.81	42,420	41,040	\$70.66	\$77.14
Prof - Anesthesia	\$102,107	\$85,233	\$3.57	\$3.01	274	304	\$156.37	\$118.71
Prof - Child EPSDT	\$15,310	\$13,849	\$0.54	\$0.49	264	280	\$24.34	\$20.92
Prof - Evaluation & Management	\$2,127,096	\$2,029,914	\$74.41	\$71.60	13,480	13,159	\$66.24	\$65.30
Prof - Maternity	\$249,604	\$221,112	\$8.73	\$7.80	155	133	\$676.43	\$704.18
Prof - Other	\$840,424	\$858,332	\$29.40	\$30.28	3,885	4,124	\$90.80	\$88.10
Prof - Psych	\$201,792	\$221,738	\$7.06	\$7.82	1,506	1,462	\$56.26	\$64.18
Prof - Specialist	\$545,555	\$460,249	\$19.08	\$16.23	1,381	1,295	\$165.77	\$150.41
Prof - Vision	\$58,033	\$51,437	\$2.03	\$1.81	222	217	\$109.91	\$100.46
Radiology	\$340,470	\$339,513	\$11.91	\$11.98	4,206	3,981	\$33.98	\$36.10
Transportation/Ambulance	\$542,026	\$437,217	\$18.96	\$15.42	10,273	7,909	\$22.15	\$23.40
<b>Total</b>	<b>\$27,846,919</b>	<b>\$25,670,377</b>	<b>\$974.08</b>	<b>\$905.48</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	25,451	27,105						
<b>Service Type</b>								
DME/Supplies	\$390,115	\$394,279	\$15.33	\$14.55	1,567	1,378	\$117.40	\$126.70
FQHC / RHC	\$33,069	\$27,449	\$1.30	\$1.01	185	150	\$84.36	\$80.97
Home Health	\$50,163	\$48,900	\$1.97	\$1.80	91	81	\$259.91	\$267.21
IP - Maternity	\$7,304	\$0	\$0.29	\$0.00	0	0	\$7,303.66	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,954,522	\$4,855,060	\$155.38	\$179.12	187	168	\$9,986.17	\$12,810.18
IP - Psych	\$1,302,049	\$1,709,832	\$51.16	\$63.08	1,095	1,107	\$560.74	\$683.66
Lab	\$64,797	\$70,443	\$2.55	\$2.60	2,541	2,257	\$12.02	\$13.82
OP - Emergency Room & Related	\$1,263,836	\$1,311,636	\$49.66	\$48.39	1,523	1,603	\$391.28	\$362.33
OP - Other	\$1,910,017	\$1,829,727	\$75.05	\$67.51	1,485	1,570	\$606.55	\$515.85
Pharmacy	\$5,399,759	\$6,137,468	\$212.16	\$226.43	24,899	24,902	\$102.25	\$109.12
Prof - Anesthesia	\$34,910	\$38,389	\$1.37	\$1.42	110	143	\$149.83	\$119.22
Prof - Child EPSDT	\$13,789	\$2,048	\$0.54	\$0.08	254	118	\$25.63	\$7.67
Prof - Evaluation & Management	\$1,055,616	\$1,175,630	\$41.48	\$43.37	7,632	7,972	\$65.21	\$65.29
Prof - Maternity	\$1,475	\$0	\$0.06	\$0.00	1	0	\$491.58	-
Prof - Other	\$1,139,818	\$992,225	\$44.78	\$36.61	2,250	2,389	\$238.86	\$183.85
Prof - Psych	\$124,241	\$142,740	\$4.88	\$5.27	803	926	\$72.95	\$68.26
Prof - Specialist	\$301,012	\$288,578	\$11.83	\$10.65	824	765	\$172.30	\$166.90
Prof - Vision	\$39,261	\$45,886	\$1.54	\$1.69	160	154	\$115.81	\$131.86
Radiology	\$132,680	\$138,461	\$5.21	\$5.11	2,051	2,119	\$30.49	\$28.93
Transportation/Ambulance	\$358,320	\$387,195	\$14.08	\$14.29	11,156	8,466	\$15.14	\$20.25
<b>Total</b>	<b>\$17,576,752</b>	<b>\$19,595,947</b>	<b>\$690.61</b>	<b>\$722.96</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Richmond/Charlottesville</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	75,505	79,884						
<b>Service Type</b>								
DME/Supplies	\$2,052,162	\$1,936,414	\$27.18	\$24.24	3,362	3,008	\$97.00	\$96.69
FQHC / RHC	\$238,847	\$200,441	\$3.16	\$2.51	665	581	\$57.11	\$51.82
Home Health	\$406,914	\$484,179	\$5.39	\$6.06	255	249	\$254.00	\$291.85
IP - Maternity	\$4,804	\$0	\$0.06	\$0.00	0	0	\$4,804.06	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$30,879,457	\$33,225,483	\$408.97	\$415.92	386	394	\$12,702.37	\$12,671.81
IP - Psych	\$3,994,151	\$4,867,147	\$52.90	\$60.93	878	860	\$722.66	\$850.31
Lab	\$532,491	\$563,246	\$7.05	\$7.05	6,427	5,888	\$13.17	\$14.37
OP - Emergency Room & Related	\$4,685,381	\$5,143,867	\$62.05	\$64.39	1,526	1,586	\$487.86	\$487.06
OP - Other	\$11,780,816	\$14,075,436	\$156.03	\$176.20	4,038	4,095	\$463.72	\$516.36
Pharmacy	\$30,556,849	\$34,200,298	\$404.70	\$428.12	72,221	70,555	\$67.24	\$72.82
Prof - Anesthesia	\$276,700	\$288,208	\$3.66	\$3.61	292	343	\$150.63	\$126.13
Prof - Child EPSDT	\$31,957	\$25,885	\$0.42	\$0.32	472	471	\$10.75	\$8.26
Prof - Evaluation & Management	\$6,216,127	\$6,634,117	\$82.33	\$83.05	14,504	14,752	\$68.11	\$67.56
Prof - Maternity	\$1,458	\$0	\$0.02	\$0.00	0	0	\$729.25	-
Prof - Other	\$3,113,951	\$4,222,144	\$41.24	\$52.85	4,842	5,658	\$102.21	\$112.10
Prof - Psych	\$369,163	\$385,753	\$4.89	\$4.83	795	837	\$73.79	\$69.23
Prof - Specialist	\$2,335,325	\$2,511,629	\$30.93	\$31.44	2,162	2,143	\$171.65	\$176.07
Prof - Vision	\$304,188	\$322,765	\$4.03	\$4.04	610	613	\$79.26	\$79.11
Radiology	\$1,071,416	\$1,255,899	\$14.19	\$15.72	4,943	5,240	\$34.45	\$36.00
Transportation/Ambulance	\$1,519,894	\$1,617,061	\$20.13	\$20.24	17,651	14,323	\$13.69	\$16.96
<b>Total</b>	<b>\$100,372,051</b>	<b>\$111,959,972</b>	<b>\$1,329.34</b>	<b>\$1,401.53</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Richmond/Charlottesville	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	185,632	188,958						
<b>Service Type</b>								
DME/Supplies	\$4,154,261	\$3,820,832	\$22.38	\$20.22	2,383	2,222	\$112.69	\$109.21
FQHC / RHC	\$340,069	\$276,763	\$1.83	\$1.46	372	336	\$59.10	\$52.25
Home Health	\$1,438,856	\$1,020,762	\$7.75	\$5.40	151	142	\$615.95	\$456.92
IP - Maternity	\$797,756	\$641,185	\$4.30	\$3.39	15	12	\$3,423.85	\$3,271.35
IP - Newborn	\$2,378	\$0	\$0.01	\$0.00	0	0	\$1,188.89	-
IP - Other	\$46,430,362	\$46,817,698	\$250.12	\$247.77	244	246	\$12,312.48	\$12,103.85
IP - Psych	\$9,049,430	\$10,233,330	\$48.75	\$54.16	810	779	\$722.22	\$833.81
Lab	\$973,041	\$1,059,556	\$5.24	\$5.61	4,503	4,175	\$13.97	\$16.12
OP - Emergency Room & Related	\$9,577,136	\$10,089,139	\$51.59	\$53.39	1,527	1,602	\$405.33	\$400.03
OP - Other	\$19,672,194	\$21,901,969	\$105.97	\$115.91	2,764	2,857	\$460.09	\$486.76
Pharmacy	\$50,636,533	\$55,042,869	\$272.78	\$291.30	43,549	43,718	\$75.16	\$79.96
Prof - Anesthesia	\$514,358	\$486,105	\$2.77	\$2.57	214	247	\$155.58	\$124.93
Prof - Child EPSDT	\$80,277	\$52,459	\$0.43	\$0.28	347	306	\$14.94	\$10.88
Prof - Evaluation & Management	\$11,238,307	\$11,700,123	\$60.54	\$61.92	10,726	11,049	\$67.73	\$67.25
Prof - Maternity	\$340,366	\$287,354	\$1.83	\$1.52	31	25	\$713.55	\$733.05
Prof - Other	\$7,552,282	\$9,213,059	\$40.68	\$48.76	3,807	4,330	\$128.24	\$135.13
Prof - Psych	\$1,042,522	\$1,117,416	\$5.62	\$5.91	997	1,054	\$67.58	\$67.31
Prof - Specialist	\$3,563,497	\$3,571,842	\$19.20	\$18.90	1,338	1,325	\$172.17	\$171.18
Prof - Vision	\$511,280	\$524,577	\$2.75	\$2.78	380	374	\$86.94	\$88.97
Radiology	\$1,673,637	\$1,850,007	\$9.02	\$9.79	3,256	3,404	\$33.23	\$34.51
Transportation/Ambulance	\$2,747,629	\$2,742,197	\$14.80	\$14.51	10,938	8,927	\$16.24	\$19.51
<b>Total</b>	<b>\$172,336,171</b>	<b>\$182,449,241</b>	<b>\$928.38</b>	<b>\$965.55</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	57	57						
<b>Service Type</b>								
DME/Supplies	\$5,976	\$5,383	\$104.85	\$94.44	16,000	19,579	\$78.63	\$57.88
FQHC / RHC	\$0	\$59	\$0.00	\$1.04	0	211	-	\$59.16
Home Health	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$156,586	\$15,741	\$2,747.12	\$276.16	211	211	\$156,586.02	\$15,741.09
IP - Other	\$160,464	\$31,719	\$2,815.16	\$556.48	421	421	\$80,232.11	\$15,859.54
IP - Psych	\$553	\$1,766	\$9.70	\$30.99	0	0	-	-
Lab	\$126	\$95	\$2.21	\$1.67	1,895	2,105	\$14.01	\$9.54
OP - Emergency Room & Related	\$812	\$4,445	\$14.25	\$77.97	842	2,947	\$203.01	\$317.47
OP - Other	\$7,066	\$45,035	\$123.96	\$790.09	12,632	13,474	\$117.76	\$703.67
Pharmacy	\$37,936	\$23,639	\$665.55	\$414.71	14,737	23,789	\$541.95	\$209.19
Prof - Anesthesia	\$3,257	\$1,773	\$57.15	\$31.10	1,895	1,263	\$361.92	\$295.47
Prof - Child EPSDT	\$294	\$173	\$5.16	\$3.03	4,632	2,947	\$13.38	\$12.33
Prof - Evaluation & Management	\$16,331	\$36,483	\$286.50	\$640.06	43,579	54,105	\$78.89	\$141.96
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$26,171	\$50,889	\$459.14	\$892.79	26,105	31,789	\$211.05	\$337.01
Prof - Psych	\$81	\$258	\$1.42	\$4.53	0	0	-	-
Prof - Specialist	\$7,617	\$5,256	\$133.64	\$92.21	4,632	3,789	\$346.24	\$292.00
Prof - Vision	\$966	\$441	\$16.95	\$7.74	3,368	1,895	\$60.39	\$49.05
Radiology	\$1,185	\$1,209	\$20.79	\$21.21	10,947	20,421	\$22.79	\$12.46
Transportation/Ambulance	\$154	\$1,313	\$2.71	\$23.04	1,684	14,316	\$19.31	\$19.31
<b>Total</b>	<b>\$425,577</b>	<b>\$225,678</b>	<b>\$7,466.26</b>	<b>\$3,959.26</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	2,982	2,431						
<b>Service Type</b>								
DME/Supplies	\$245,147	\$148,676	\$82.21	\$61.16	6,475	5,756	\$152.36	\$127.51
FQHC / RHC	\$8,827	\$6,778	\$2.96	\$2.79	664	508	\$53.50	\$65.80
Home Health	\$32,794	\$13,011	\$11.00	\$5.35	109	64	\$1,214.58	\$1,000.84
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$812,752	\$350,698	\$272.55	\$144.26	342	242	\$9,561.78	\$7,157.10
IP - Psych	\$63,525	\$49,420	\$21.30	\$20.33	20	0	\$12,704.95	-
Lab	\$13,445	\$6,404	\$4.51	\$2.63	3,352	2,285	\$16.14	\$13.83
OP - Emergency Room & Related	\$87,356	\$84,023	\$29.29	\$34.56	1,231	1,343	\$285.48	\$308.91
OP - Other	\$494,606	\$276,065	\$165.86	\$113.56	3,775	3,115	\$527.30	\$437.50
Pharmacy	\$481,235	\$341,863	\$161.38	\$140.63	15,497	12,918	\$124.96	\$130.63
Prof - Anesthesia	\$24,503	\$10,627	\$8.22	\$4.37	616	336	\$160.15	\$156.28
Prof - Child EPSDT	\$6,841	\$3,410	\$2.29	\$1.40	1,501	1,071	\$18.34	\$15.71
Prof - Evaluation & Management	\$201,184	\$151,955	\$67.47	\$62.51	10,889	9,971	\$74.35	\$75.23
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$312,715	\$317,302	\$104.87	\$130.52	6,861	6,299	\$183.41	\$248.67
Prof - Psych	\$13,082	\$7,739	\$4.39	\$3.18	499	444	\$105.50	\$85.98
Prof - Specialist	\$46,918	\$19,330	\$15.73	\$7.95	1,151	696	\$164.05	\$137.09
Prof - Vision	\$8,428	\$6,564	\$2.83	\$2.70	334	257	\$101.54	\$126.22
Radiology	\$45,162	\$12,340	\$15.14	\$5.08	2,624	1,713	\$69.27	\$35.56
Transportation/Ambulance	\$25,383	\$35,028	\$8.51	\$14.41	5,493	4,645	\$18.60	\$37.22
<b>Total</b>	<b>\$2,923,902</b>	<b>\$1,841,233</b>	<b>\$980.52</b>	<b>\$757.40</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	24,486	23,813						
<b>Service Type</b>								
DME/Supplies	\$388,455	\$392,784	\$15.86	\$16.49	1,232	1,279	\$154.58	\$154.76
FQHC / RHC	\$55,642	\$80,995	\$2.27	\$3.40	351	429	\$77.71	\$95.06
Home Health	\$56,271	\$144,990	\$2.30	\$6.09	22	47	\$1,278.89	\$1,542.44
IP - Maternity	\$55,434	\$79,282	\$2.26	\$3.33	11	5	\$2,519.74	\$7,928.15
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$715,647	\$1,366,853	\$29.23	\$57.40	54	72	\$6,505.88	\$9,625.72
IP - Psych	\$643,061	\$795,793	\$26.26	\$33.42	162	335	\$1,942.78	\$1,198.48
Lab	\$60,483	\$55,957	\$2.47	\$2.35	1,962	1,682	\$15.11	\$16.77
OP - Emergency Room & Related	\$407,999	\$386,755	\$16.66	\$16.24	785	798	\$254.68	\$244.16
OP - Other	\$1,250,396	\$988,463	\$51.07	\$41.51	1,414	1,345	\$433.41	\$370.35
Pharmacy	\$4,671,985	\$5,446,687	\$190.80	\$228.73	16,734	17,381	\$136.83	\$157.91
Prof - Anesthesia	\$35,631	\$27,010	\$1.46	\$1.13	103	98	\$168.87	\$139.22
Prof - Child EPSDT	\$7,999	\$4,930	\$0.33	\$0.21	252	161	\$15.53	\$15.46
Prof - Evaluation & Management	\$709,851	\$752,589	\$28.99	\$31.60	5,050	5,477	\$68.88	\$69.25
Prof - Maternity	\$36,055	\$16,038	\$1.47	\$0.67	34	12	\$522.54	\$668.25
Prof - Other	\$365,533	\$487,291	\$14.93	\$20.46	2,181	2,448	\$82.12	\$100.33
Prof - Psych	\$158,588	\$150,703	\$6.48	\$6.33	1,160	1,126	\$67.00	\$67.46
Prof - Specialist	\$106,973	\$105,315	\$4.37	\$4.42	448	414	\$117.04	\$128.12
Prof - Vision	\$52,340	\$54,082	\$2.14	\$2.27	250	209	\$102.43	\$130.63
Radiology	\$58,585	\$47,785	\$2.39	\$2.01	966	888	\$29.71	\$27.10
Transportation/Ambulance	\$192,369	\$172,771	\$7.86	\$7.26	3,657	3,180	\$25.78	\$27.38
<b>Total</b>	<b>\$10,029,299</b>	<b>\$11,557,072</b>	<b>\$409.59</b>	<b>\$485.33</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Female								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	14,350	14,442						
<b>Service Type</b>								
DME/Supplies	\$231,101	\$222,567	\$16.10	\$15.41	1,911	1,974	\$101.14	\$93.67
FQHC / RHC	\$189,117	\$145,704	\$13.18	\$10.09	2,010	1,916	\$78.67	\$63.18
Home Health	\$61,803	\$68,793	\$4.31	\$4.76	160	77	\$323.58	\$739.71
IP - Maternity	\$212,650	\$194,691	\$14.82	\$13.48	63	54	\$2,835.33	\$2,995.24
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,992,087	\$2,746,849	\$138.82	\$190.20	184	212	\$9,054.94	\$10,771.96
IP - Psych	\$561,269	\$788,296	\$39.11	\$54.58	550	863	\$852.99	\$758.71
Lab	\$127,134	\$138,293	\$8.86	\$9.58	6,379	6,210	\$16.67	\$18.50
OP - Emergency Room & Related	\$901,243	\$966,257	\$62.80	\$66.91	2,661	2,651	\$283.23	\$302.81
OP - Other	\$1,445,393	\$1,606,001	\$100.72	\$111.20	2,879	3,055	\$419.81	\$436.77
Pharmacy	\$3,740,033	\$3,587,137	\$260.63	\$248.38	43,912	42,670	\$71.22	\$69.85
Prof - Anesthesia	\$47,076	\$42,749	\$3.28	\$2.96	246	266	\$160.12	\$133.59
Prof - Child EPSDT	\$97,075	\$6,734	\$6.76	\$0.47	590	448	\$137.70	\$12.49
Prof - Evaluation & Management	\$861,062	\$907,564	\$60.00	\$62.84	10,885	11,665	\$66.15	\$64.65
Prof - Maternity	\$88,505	\$97,733	\$6.17	\$6.77	210	177	\$352.61	\$458.84
Prof - Other	\$397,974	\$362,597	\$27.73	\$25.11	4,084	3,864	\$81.49	\$77.98
Prof - Psych	\$97,796	\$101,137	\$6.82	\$7.00	1,336	1,394	\$61.20	\$60.27
Prof - Specialist	\$240,805	\$242,597	\$16.78	\$16.80	1,686	1,678	\$119.45	\$120.16
Prof - Vision	\$25,097	\$29,918	\$1.75	\$2.07	190	263	\$110.56	\$94.68
Radiology	\$147,334	\$157,688	\$10.27	\$10.92	3,284	3,560	\$37.52	\$36.81
Transportation/Ambulance	\$232,978	\$240,711	\$16.24	\$16.67	12,787	10,084	\$15.24	\$19.83
<b>Total</b>	<b>\$11,697,534</b>	<b>\$12,654,016</b>	<b>\$815.16</b>	<b>\$876.20</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	13,126	13,598						
<b>Service Type</b>								
DME/Supplies	\$276,713	\$159,135	\$21.08	\$11.70	1,295	1,023	\$195.28	\$137.30
FQHC / RHC	\$85,332	\$61,711	\$6.50	\$4.54	793	614	\$98.42	\$88.67
Home Health	\$54,352	\$21,776	\$4.14	\$1.60	108	66	\$460.61	\$290.35
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,108,251	\$2,291,171	\$160.62	\$168.49	155	170	\$12,474.86	\$11,871.35
IP - Psych	\$559,081	\$568,142	\$42.59	\$41.78	653	728	\$783.03	\$688.66
Lab	\$41,321	\$41,064	\$3.15	\$3.02	2,541	2,596	\$14.87	\$13.96
OP - Emergency Room & Related	\$488,923	\$531,987	\$37.25	\$39.12	1,315	1,366	\$340.00	\$343.66
OP - Other	\$899,790	\$1,095,775	\$68.55	\$80.58	1,774	1,904	\$463.81	\$508.01
Pharmacy	\$2,449,132	\$2,543,235	\$186.59	\$187.03	26,676	25,784	\$83.93	\$87.04
Prof - Anesthesia	\$15,426	\$21,038	\$1.18	\$1.55	96	130	\$146.91	\$143.11
Prof - Child EPSDT	\$5,117	\$2,923	\$0.39	\$0.21	172	146	\$27.22	\$17.72
Prof - Evaluation & Management	\$487,336	\$505,028	\$37.13	\$37.14	6,656	6,708	\$66.93	\$66.44
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$655,479	\$712,064	\$49.94	\$52.37	3,085	2,912	\$194.27	\$215.78
Prof - Psych	\$64,574	\$70,038	\$4.92	\$5.15	689	667	\$85.64	\$92.64
Prof - Specialist	\$110,612	\$146,588	\$8.43	\$10.78	1,018	1,110	\$99.29	\$116.52
Prof - Vision	\$22,095	\$22,334	\$1.68	\$1.64	166	167	\$121.40	\$118.17
Radiology	\$62,127	\$67,299	\$4.73	\$4.95	1,889	2,024	\$30.07	\$29.35
Transportation/Ambulance	\$219,492	\$213,748	\$16.72	\$15.72	10,649	9,941	\$18.84	\$18.97
<b>Total</b>	<b>\$8,605,155</b>	<b>\$9,075,058</b>	<b>\$655.58</b>	<b>\$667.38</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Rural</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	44,079	45,713						
<b>Service Type</b>								
DME/Supplies	\$1,339,627	\$1,051,302	\$30.39	\$23.00	4,076	3,556	\$89.46	\$77.62
FQHC / RHC	\$429,887	\$397,463	\$9.75	\$8.69	1,811	1,635	\$64.63	\$63.81
Home Health	\$350,369	\$255,611	\$7.95	\$5.59	255	146	\$374.73	\$460.56
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$15,456,862	\$14,768,406	\$350.66	\$323.07	365	320	\$11,543.59	\$12,125.13
IP - Psych	\$1,517,041	\$1,592,316	\$34.42	\$34.83	392	483	\$1,052.77	\$865.86
Lab	\$329,712	\$331,356	\$7.48	\$7.25	6,222	5,966	\$14.43	\$14.58
OP - Emergency Room & Related	\$2,128,981	\$2,212,975	\$48.30	\$48.41	1,469	1,511	\$394.47	\$384.46
OP - Other	\$8,050,627	\$8,679,730	\$182.64	\$189.87	4,336	4,316	\$505.44	\$527.87
Pharmacy	\$16,396,376	\$16,952,098	\$371.98	\$370.84	73,174	72,113	\$61.00	\$61.71
Prof - Anesthesia	\$180,715	\$155,568	\$4.10	\$3.40	323	302	\$152.37	\$135.04
Prof - Child EPSDT	\$23,307	\$23,460	\$0.53	\$0.51	697	662	\$9.10	\$9.31
Prof - Evaluation & Management	\$3,156,559	\$3,184,592	\$71.61	\$69.66	12,488	12,265	\$68.81	\$68.16
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,113,252	\$1,774,568	\$47.94	\$38.82	4,808	5,076	\$119.66	\$91.78
Prof - Psych	\$197,052	\$206,729	\$4.47	\$4.52	643	683	\$83.46	\$79.45
Prof - Specialist	\$1,321,201	\$1,307,547	\$29.97	\$28.60	2,889	2,685	\$124.49	\$127.85
Prof - Vision	\$167,845	\$184,055	\$3.81	\$4.03	547	587	\$83.50	\$82.35
Radiology	\$595,001	\$716,558	\$13.50	\$15.68	4,693	4,696	\$34.52	\$40.06
Transportation/Ambulance	\$1,127,840	\$991,811	\$25.59	\$21.70	13,994	11,845	\$21.94	\$21.98
<b>Total</b>	<b>\$54,882,253</b>	<b>\$54,786,144</b>	<b>\$1,245.09</b>	<b>\$1,198.48</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Rural	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	99,080	100,054						
<b>Service Type</b>								
DME/Supplies	\$2,487,019	\$1,979,846	\$25.10	\$19.79	2,770	2,504	\$108.73	\$94.83
FQHC / RHC	\$768,806	\$692,710	\$7.76	\$6.92	1,308	1,222	\$71.17	\$68.00
Home Health	\$555,589	\$504,181	\$5.61	\$5.04	159	100	\$422.50	\$607.45
IP - Maternity	\$268,084	\$273,972	\$2.71	\$2.74	12	9	\$2,763.75	\$3,652.97
IP - Newborn	\$156,586	\$15,741	\$1.58	\$0.16	0	0	\$156,586.02	\$15,741.09
IP - Other	\$21,246,063	\$21,555,695	\$214.43	\$215.44	233	223	\$11,036.92	\$11,595.32
IP - Psych	\$3,344,529	\$3,795,733	\$33.76	\$37.94	381	524	\$1,062.09	\$869.19
Lab	\$572,222	\$573,170	\$5.78	\$5.73	4,615	4,432	\$15.02	\$15.51
OP - Emergency Room & Related	\$4,015,315	\$4,186,442	\$40.53	\$41.84	1,445	1,483	\$336.60	\$338.57
OP - Other	\$12,147,878	\$12,691,070	\$122.61	\$126.84	3,051	3,075	\$482.17	\$494.95
Pharmacy	\$27,776,698	\$28,894,658	\$280.35	\$288.79	47,058	47,075	\$71.49	\$73.62
Prof - Anesthesia	\$306,608	\$258,764	\$3.09	\$2.59	237	226	\$156.59	\$137.13
Prof - Child EPSDT	\$140,635	\$41,631	\$1.42	\$0.42	529	453	\$32.22	\$11.03
Prof - Evaluation & Management	\$5,432,324	\$5,538,211	\$54.83	\$55.35	9,615	9,776	\$68.43	\$67.95
Prof - Maternity	\$124,560	\$113,771	\$1.26	\$1.14	39	28	\$389.25	\$480.05
Prof - Other	\$3,871,124	\$3,704,712	\$39.07	\$37.03	3,900	4,026	\$120.22	\$110.36
Prof - Psych	\$531,172	\$536,604	\$5.36	\$5.36	873	883	\$73.73	\$72.91
Prof - Specialist	\$1,834,126	\$1,826,634	\$18.51	\$18.26	1,812	1,737	\$122.56	\$126.11
Prof - Vision	\$276,771	\$297,393	\$2.79	\$2.97	367	386	\$91.37	\$92.50
Radiology	\$909,394	\$1,002,880	\$9.18	\$10.02	3,138	3,199	\$35.10	\$37.60
Transportation/Ambulance	\$1,798,217	\$1,655,383	\$18.15	\$16.54	10,558	9,096	\$20.63	\$21.83
<b>Total</b>	<b>\$88,563,721</b>	<b>\$90,139,201</b>	<b>\$893.86</b>	<b>\$900.91</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	204	147						
<b>Service Type</b>								
DME/Supplies	\$3,449	\$10,700	\$16.91	\$72.79	2,529	3,755	\$80.21	\$232.62
FQHC / RHC	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Home Health	\$33,028	\$669	\$161.90	\$4.55	3,824	163	\$508.12	\$334.35
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$728	\$69,802	\$3.57	\$474.84	59	163	\$727.83	\$34,901.04
IP - Other	\$5,434	\$13,243	\$26.64	\$90.09	118	163	\$2,716.78	\$6,621.49
IP - Psych	\$3,868	\$2,446	\$18.96	\$16.64	0	0	-	-
Lab	\$596	\$314	\$2.92	\$2.13	2,176	1,061	\$16.11	\$24.13
OP - Emergency Room & Related	\$10,597	\$2,914	\$51.95	\$19.82	1,941	1,306	\$321.12	\$182.12
OP - Other	\$44,465	\$22,955	\$217.97	\$156.16	2,882	3,592	\$907.46	\$521.70
Pharmacy	\$268,161	\$3,250	\$1,314.52	\$22.11	15,824	4,408	\$996.88	\$60.19
Prof - Anesthesia	\$1,957	\$1,038	\$9.59	\$7.06	647	408	\$177.93	\$207.55
Prof - Child EPSDT	\$1,307	\$669	\$6.41	\$4.55	5,294	4,245	\$14.52	\$12.87
Prof - Evaluation & Management	\$33,059	\$27,600	\$162.05	\$187.76	22,000	20,327	\$88.39	\$110.84
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$61,775	\$38,356	\$302.82	\$260.93	17,294	12,571	\$210.12	\$249.07
Prof - Psych	\$565	\$357	\$2.77	\$2.43	0	0	-	-
Prof - Specialist	\$6,255	\$1,850	\$30.66	\$12.59	2,294	1,388	\$160.38	\$108.83
Prof - Vision	\$1,393	\$580	\$6.83	\$3.95	1,706	980	\$48.03	\$48.34
Radiology	\$748	\$715	\$3.67	\$4.86	1,824	4,735	\$24.13	\$12.32
Transportation/Ambulance	\$778	\$454	\$3.81	\$3.09	1,176	1,224	\$38.90	\$30.27
<b>Total</b>	<b>\$478,163</b>	<b>\$197,913</b>	<b>\$2,343.94</b>	<b>\$1,346.35</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	5,642	4,688						
<b>Service Type</b>								
DME/Supplies	\$399,899	\$331,754	\$70.88	\$70.77	5,028	4,544	\$169.16	\$186.90
FQHC / RHC	\$388	\$998	\$0.07	\$0.21	43	77	\$19.42	\$33.28
Home Health	\$161,409	\$179,984	\$28.61	\$38.39	747	701	\$459.85	\$656.88
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,447,104	\$1,354,739	\$256.49	\$288.98	119	187	\$25,841.14	\$18,558.06
IP - Psych	\$111,018	\$96,695	\$19.68	\$20.63	0	0	-	-
Lab	\$19,600	\$18,981	\$3.47	\$4.05	1,629	1,618	\$25.59	\$30.03
OP - Emergency Room & Related	\$173,112	\$149,593	\$30.68	\$31.91	1,057	1,275	\$348.31	\$300.39
OP - Other	\$1,424,568	\$998,050	\$252.49	\$212.89	4,760	4,267	\$636.54	\$598.71
Pharmacy	\$635,693	\$625,226	\$112.67	\$133.37	12,613	14,560	\$107.20	\$109.92
Prof - Anesthesia	\$45,969	\$33,285	\$8.15	\$7.10	434	376	\$225.34	\$226.43
Prof - Child EPSDT	\$6,788	\$4,002	\$1.20	\$0.85	1,106	886	\$13.05	\$11.57
Prof - Evaluation & Management	\$341,906	\$352,596	\$60.60	\$75.21	9,346	10,390	\$77.81	\$86.87
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,104,449	\$1,195,662	\$195.75	\$255.05	12,925	16,541	\$181.74	\$185.03
Prof - Psych	\$18,516	\$16,659	\$3.28	\$3.55	151	159	\$260.79	\$268.69
Prof - Specialist	\$107,106	\$78,441	\$18.98	\$16.73	981	1,029	\$232.33	\$195.13
Prof - Vision	\$17,402	\$14,520	\$3.08	\$3.10	425	392	\$87.01	\$94.90
Radiology	\$16,988	\$14,688	\$3.01	\$3.13	1,608	1,838	\$22.47	\$20.46
Transportation/Ambulance	\$29,265	\$27,817	\$5.19	\$5.93	2,729	2,032	\$22.81	\$35.03
<b>Total</b>	<b>\$6,061,180</b>	<b>\$5,493,689</b>	<b>\$1,074.30</b>	<b>\$1,171.86</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	53,915	50,189						
<b>Service Type</b>								
DME/Supplies	\$914,575	\$930,574	\$16.96	\$18.54	1,237	1,198	\$164.55	\$185.71
FQHC / RHC	\$12,649	\$14,154	\$0.23	\$0.28	64	68	\$44.23	\$49.66
Home Health	\$165,675	\$218,571	\$3.07	\$4.35	33	68	\$1,111.91	\$769.62
IP - Maternity	\$134,996	\$79,778	\$2.50	\$1.59	9	6	\$3,374.89	\$2,954.74
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,952,797	\$2,903,511	\$36.22	\$57.85	47	59	\$9,168.06	\$11,802.89
IP - Psych	\$1,615,049	\$1,585,366	\$29.96	\$31.59	360	414	\$997.56	\$914.81
Lab	\$123,758	\$127,866	\$2.30	\$2.55	1,428	1,349	\$19.29	\$22.67
OP - Emergency Room & Related	\$1,194,277	\$1,120,889	\$22.15	\$22.33	686	766	\$387.37	\$349.84
OP - Other	\$3,268,304	\$2,845,041	\$60.62	\$56.69	1,139	1,159	\$638.47	\$587.09
Pharmacy	\$7,582,720	\$9,344,652	\$140.64	\$186.19	14,100	14,599	\$119.70	\$153.04
Prof - Anesthesia	\$85,393	\$77,912	\$1.58	\$1.55	94	109	\$202.35	\$170.86
Prof - Child EPSDT	\$15,691	\$12,485	\$0.29	\$0.25	237	197	\$14.75	\$15.17
Prof - Evaluation & Management	\$1,601,546	\$1,638,847	\$29.71	\$32.65	4,839	5,237	\$73.66	\$74.83
Prof - Maternity	\$44,191	\$43,080	\$0.82	\$0.86	15	20	\$659.56	\$512.86
Prof - Other	\$2,597,561	\$2,575,310	\$48.18	\$51.31	3,335	3,912	\$173.37	\$157.41
Prof - Psych	\$340,431	\$336,435	\$6.31	\$6.70	1,343	1,406	\$56.43	\$57.23
Prof - Specialist	\$262,026	\$302,252	\$4.86	\$6.02	452	499	\$129.01	\$144.96
Prof - Vision	\$99,529	\$94,207	\$1.85	\$1.88	220	124	\$100.74	\$181.87
Radiology	\$111,539	\$115,169	\$2.07	\$2.29	862	1,001	\$28.81	\$27.52
Transportation/Ambulance	\$247,144	\$270,423	\$4.58	\$5.39	1,775	1,275	\$30.98	\$50.72
<b>Total</b>	<b>\$22,369,850</b>	<b>\$24,636,522</b>	<b>\$414.91</b>	<b>\$490.87</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 21-44 Female</b>								
<b>Tidewater</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	28,935	29,295						
<b>Service Type</b>								
DME/Supplies	\$628,717	\$686,304	\$21.73	\$23.43	1,914	1,820	\$136.23	\$154.47
FQHC / RHC	\$125,521	\$126,229	\$4.34	\$4.31	693	660	\$75.07	\$78.31
Home Health	\$65,018	\$95,522	\$2.25	\$3.26	59	86	\$457.87	\$454.87
IP - Maternity	\$648,092	\$575,736	\$22.40	\$19.65	76	66	\$3,522.24	\$3,553.92
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,777,446	\$4,827,267	\$130.55	\$164.78	189	239	\$8,283.87	\$8,280.05
IP - Psych	\$1,066,742	\$1,455,443	\$36.87	\$49.68	650	1,057	\$680.32	\$564.13
Lab	\$144,103	\$182,059	\$4.98	\$6.21	4,736	3,982	\$12.62	\$18.73
OP - Emergency Room & Related	\$2,975,891	\$2,763,913	\$102.85	\$94.35	2,488	2,585	\$496.15	\$437.95
OP - Other	\$3,265,787	\$2,794,401	\$112.87	\$95.39	1,573	1,539	\$860.78	\$743.79
Pharmacy	\$7,550,892	\$7,857,903	\$260.96	\$268.23	37,193	37,446	\$84.20	\$85.96
Prof - Anesthesia	\$110,539	\$106,858	\$3.82	\$3.65	341	348	\$134.48	\$125.72
Prof - Child EPSDT	\$28,061	\$27,108	\$0.97	\$0.93	573	560	\$20.32	\$19.82
Prof - Evaluation & Management	\$1,844,375	\$2,009,411	\$63.74	\$68.59	11,167	12,170	\$68.50	\$67.63
Prof - Maternity	\$278,918	\$219,040	\$9.64	\$7.48	183	169	\$632.47	\$531.65
Prof - Other	\$1,482,903	\$1,456,658	\$51.25	\$49.72	4,119	3,887	\$149.29	\$153.51
Prof - Psych	\$203,003	\$238,568	\$7.02	\$8.14	1,594	1,908	\$52.81	\$51.23
Prof - Specialist	\$543,882	\$527,225	\$18.80	\$18.00	1,787	1,647	\$126.22	\$131.12
Prof - Vision	\$55,737	\$56,961	\$1.93	\$1.94	211	221	\$109.50	\$105.48
Radiology	\$335,364	\$344,370	\$11.59	\$11.76	3,437	3,508	\$40.46	\$40.22
Transportation/Ambulance	\$315,201	\$338,930	\$10.89	\$11.57	10,995	8,123	\$11.89	\$17.09
<b>Total</b>	<b>\$25,446,193</b>	<b>\$26,689,907</b>	<b>\$879.43</b>	<b>\$911.07</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	25,991	27,862						
<b>Service Type</b>								
DME/Supplies	\$562,326	\$652,016	\$21.64	\$23.40	1,574	1,476	\$164.95	\$190.31
FQHC / RHC	\$46,713	\$50,815	\$1.80	\$1.82	341	373	\$63.21	\$58.68
Home Health	\$102,338	\$60,077	\$3.94	\$2.16	77	59	\$616.49	\$441.74
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,469,991	\$5,106,077	\$133.51	\$183.26	177	182	\$9,060.03	\$12,099.71
IP - Psych	\$1,294,245	\$1,662,706	\$49.80	\$59.68	1,206	1,309	\$495.50	\$547.12
Lab	\$65,845	\$85,316	\$2.53	\$3.06	1,926	1,648	\$15.79	\$22.30
OP - Emergency Room & Related	\$1,583,950	\$1,515,786	\$60.94	\$54.40	1,460	1,516	\$500.93	\$430.62
OP - Other	\$1,951,627	\$1,911,646	\$75.09	\$68.61	993	1,003	\$907.73	\$821.15
Pharmacy	\$6,383,758	\$7,782,705	\$245.61	\$279.33	24,274	24,082	\$121.42	\$139.19
Prof - Anesthesia	\$48,029	\$51,041	\$1.85	\$1.83	148	174	\$149.62	\$126.03
Prof - Child EPSDT	\$6,287	\$6,014	\$0.24	\$0.22	217	205	\$13.40	\$12.63
Prof - Evaluation & Management	\$1,073,444	\$1,252,224	\$41.30	\$44.94	7,335	8,129	\$67.57	\$66.34
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,484,236	\$2,570,841	\$95.58	\$92.27	3,665	3,450	\$312.95	\$320.91
Prof - Psych	\$136,552	\$154,317	\$5.25	\$5.54	996	972	\$63.31	\$68.40
Prof - Specialist	\$299,750	\$334,507	\$11.53	\$12.01	1,035	1,042	\$133.76	\$138.23
Prof - Vision	\$36,893	\$45,352	\$1.42	\$1.63	145	163	\$117.87	\$119.98
Radiology	\$116,523	\$169,277	\$4.48	\$6.08	1,709	1,968	\$31.48	\$37.04
Transportation/Ambulance	\$239,504	\$277,139	\$9.21	\$9.95	12,481	8,093	\$8.86	\$14.75
<b>Total</b>	<b>\$19,902,010</b>	<b>\$23,687,856</b>	<b>\$765.73</b>	<b>\$850.19</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Tidewater</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	84,892	88,671						
<b>Service Type</b>								
DME/Supplies	\$3,056,554	\$2,883,029	\$36.01	\$32.51	4,017	3,565	\$107.55	\$109.46
FQHC / RHC	\$839,968	\$724,769	\$9.89	\$8.17	1,422	1,298	\$83.49	\$75.54
Home Health	\$731,405	\$677,527	\$8.62	\$7.64	206	191	\$501.31	\$478.82
IP - Maternity	\$0	\$7,715	\$0.00	\$0.09	0	0	-	\$3,857.38
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$27,365,238	\$30,829,905	\$322.35	\$347.69	398	382	\$9,714.32	\$10,909.38
IP - Psych	\$2,880,743	\$3,338,097	\$33.93	\$37.65	637	730	\$639.74	\$618.85
Lab	\$430,694	\$630,708	\$5.07	\$7.11	5,063	4,624	\$12.02	\$18.46
OP - Emergency Room & Related	\$7,212,385	\$6,544,239	\$84.96	\$73.80	1,614	1,600	\$631.67	\$553.38
OP - Other	\$14,828,316	\$14,158,454	\$174.67	\$159.67	2,785	2,772	\$752.59	\$691.13
Pharmacy	\$37,170,716	\$39,395,917	\$437.86	\$444.29	69,747	67,802	\$75.33	\$78.63
Prof - Anesthesia	\$457,678	\$426,919	\$5.39	\$4.81	449	500	\$143.97	\$115.45
Prof - Child EPSDT	\$66,558	\$82,626	\$0.78	\$0.93	870	793	\$10.82	\$14.10
Prof - Evaluation & Management	\$7,419,842	\$7,648,176	\$87.40	\$86.25	15,076	15,042	\$69.57	\$68.81
Prof - Maternity	\$0	\$5,009	\$0.00	\$0.06	0	1	-	\$455.40
Prof - Other	\$6,291,461	\$5,974,898	\$74.11	\$67.38	6,310	6,229	\$140.95	\$129.81
Prof - Psych	\$427,558	\$455,979	\$5.04	\$5.14	852	852	\$70.93	\$72.46
Prof - Specialist	\$3,041,496	\$3,101,193	\$35.83	\$34.97	3,109	2,933	\$138.27	\$143.11
Prof - Vision	\$333,753	\$371,736	\$3.93	\$4.19	592	612	\$79.73	\$82.15
Radiology	\$1,451,550	\$1,522,215	\$17.10	\$17.17	5,211	5,296	\$39.37	\$38.90
Transportation/Ambulance	\$1,185,869	\$1,188,610	\$13.97	\$13.40	16,363	11,104	\$10.24	\$14.49
<b>Total</b>	<b>\$115,191,783</b>	<b>\$119,967,721</b>	<b>\$1,356.92</b>	<b>\$1,352.95</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Tidewater	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	199,579	200,852						
<b>Service Type</b>								
DME/Supplies	\$5,565,520	\$5,494,377	\$27.89	\$27.36	2,670	2,452	\$125.32	\$133.88
FQHC / RHC	\$1,025,239	\$916,965	\$5.14	\$4.57	768	740	\$80.23	\$74.03
Home Health	\$1,258,871	\$1,232,349	\$6.31	\$6.14	140	139	\$539.82	\$530.96
IP - Maternity	\$783,088	\$663,228	\$3.92	\$3.30	13	11	\$3,495.93	\$3,472.40
IP - Newborn	\$728	\$69,802	\$0.00	\$0.35	0	0	\$727.83	\$34,901.04
IP - Other	\$38,018,009	\$45,034,741	\$190.49	\$224.22	236	248	\$9,681.18	\$10,846.52
IP - Psych	\$6,971,665	\$8,140,753	\$34.93	\$40.53	619	762	\$676.73	\$638.69
Lab	\$784,596	\$1,045,244	\$3.93	\$5.20	3,525	3,226	\$13.38	\$19.36
OP - Emergency Room & Related	\$13,150,211	\$12,097,333	\$65.89	\$60.23	1,455	1,516	\$543.60	\$476.74
OP - Other	\$24,783,067	\$22,730,547	\$124.18	\$113.17	1,987	1,979	\$749.80	\$686.14
Pharmacy	\$59,591,940	\$65,009,654	\$298.59	\$323.67	42,402	42,726	\$84.50	\$90.91
Prof - Anesthesia	\$749,565	\$697,052	\$3.76	\$3.47	298	332	\$151.15	\$125.35
Prof - Child EPSDT	\$124,692	\$132,903	\$0.62	\$0.66	582	533	\$12.89	\$14.89
Prof - Evaluation & Management	\$12,314,173	\$12,928,855	\$61.70	\$64.37	10,581	11,109	\$69.98	\$69.53
Prof - Maternity	\$323,109	\$267,130	\$1.62	\$1.33	31	30	\$636.04	\$526.88
Prof - Other	\$14,022,384	\$13,811,725	\$70.26	\$68.77	5,042	5,168	\$167.21	\$159.66
Prof - Psych	\$1,126,625	\$1,202,316	\$5.65	\$5.99	1,090	1,144	\$62.13	\$62.79
Prof - Specialist	\$4,260,514	\$4,345,468	\$21.35	\$21.64	1,869	1,829	\$137.09	\$141.94
Prof - Vision	\$544,707	\$583,357	\$2.73	\$2.90	374	366	\$87.50	\$95.23
Radiology	\$2,032,712	\$2,166,434	\$10.18	\$10.79	3,218	3,419	\$37.98	\$37.86
Transportation/Ambulance	\$2,017,762	\$2,103,372	\$10.11	\$10.47	10,737	7,576	\$11.30	\$16.59
<b>Total</b>	<b>\$189,449,178</b>	<b>\$200,673,607</b>	<b>\$949.24</b>	<b>\$999.11</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	153	143						
<b>Service Type</b>								
DME/Supplies	\$13,198	\$13,127	\$86.26	\$91.80	4,706	6,378	\$219.96	\$172.72
FQHC / RHC	\$138	\$671	\$0.90	\$4.69	157	1,343	\$68.95	\$41.94
Home Health	\$2,431	\$2,454	\$15.89	\$17.16	1,098	587	\$173.66	\$350.58
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$58,590	\$51,904	\$382.94	\$362.96	157	168	\$29,294.99	\$25,951.80
IP - Other	\$5,889	\$10,269	\$38.49	\$71.81	157	84	\$2,944.25	\$10,269.15
IP - Psych	\$892	\$701	\$5.83	\$4.90	0	0	-	-
Lab	\$674	\$576	\$4.41	\$4.03	4,314	5,287	\$12.26	\$9.14
OP - Emergency Room & Related	\$2,560	\$2,703	\$16.73	\$18.90	2,039	1,343	\$98.47	\$168.96
OP - Other	\$3,387	\$4,016	\$22.13	\$28.08	1,804	2,853	\$147.25	\$118.12
Pharmacy	\$89,087	\$87,587	\$582.26	\$612.50	13,804	15,357	\$506.17	\$478.62
Prof - Anesthesia	\$394	\$1,166	\$2.58	\$8.15	235	336	\$131.38	\$291.45
Prof - Child EPSDT	\$919	\$504	\$6.00	\$3.52	5,804	3,524	\$12.41	\$12.00
Prof - Evaluation & Management	\$29,735	\$17,098	\$194.35	\$119.57	26,510	17,538	\$87.97	\$81.81
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$81,558	\$58,786	\$533.06	\$411.09	26,745	14,769	\$239.17	\$334.01
Prof - Psych	\$130	\$102	\$0.85	\$0.72	0	0	-	-
Prof - Specialist	\$106	\$5,763	\$0.69	\$40.30	392	1,343	\$21.18	\$360.19
Prof - Vision	\$2,431	\$1,407	\$15.89	\$9.84	2,039	1,091	\$93.51	\$108.26
Radiology	\$914	\$358	\$5.97	\$2.51	3,216	2,266	\$22.29	\$13.27
Transportation/Ambulance	\$2,188	\$1,495	\$14.30	\$10.46	4,314	1,175	\$39.79	\$106.82
<b>Total</b>	<b>\$295,220</b>	<b>\$260,688</b>	<b>\$1,929.54</b>	<b>\$1,822.99</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	4,876	4,266						
<b>Service Type</b>								
DME/Supplies	\$238,316	\$274,461	\$48.88	\$64.34	4,189	4,113	\$140.02	\$187.73
FQHC / RHC	\$2,906	\$2,588	\$0.60	\$0.61	185	180	\$38.74	\$40.44
Home Health	\$16,299	\$13,073	\$3.34	\$3.06	322	135	\$124.42	\$272.35
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$916,813	\$628,992	\$188.03	\$147.44	239	281	\$9,451.68	\$6,289.92
IP - Psych	\$51,427	\$22,337	\$10.55	\$5.24	96	8	\$1,318.63	\$7,445.64
Lab	\$22,240	\$17,872	\$4.56	\$4.19	3,854	3,626	\$14.20	\$13.87
OP - Emergency Room & Related	\$66,027	\$70,394	\$13.54	\$16.50	997	1,207	\$163.03	\$164.09
OP - Other	\$397,637	\$286,891	\$81.55	\$67.25	2,756	2,295	\$355.03	\$351.58
Pharmacy	\$494,264	\$516,812	\$101.37	\$121.15	12,778	14,470	\$95.20	\$100.47
Prof - Anesthesia	\$18,759	\$17,855	\$3.85	\$4.19	342	368	\$134.96	\$136.30
Prof - Child EPSDT	\$5,248	\$3,984	\$1.08	\$0.93	1,036	886	\$12.47	\$12.65
Prof - Evaluation & Management	\$295,697	\$288,860	\$60.64	\$67.71	9,529	10,194	\$76.37	\$79.71
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$448,719	\$1,862,597	\$92.03	\$436.61	9,495	12,911	\$116.31	\$405.79
Prof - Psych	\$14,102	\$14,367	\$2.89	\$3.37	431	473	\$80.58	\$85.52
Prof - Specialist	\$53,817	\$50,129	\$11.04	\$11.75	839	813	\$157.82	\$173.46
Prof - Vision	\$25,124	\$24,083	\$5.15	\$5.65	608	622	\$101.72	\$108.97
Radiology	\$11,060	\$10,673	\$2.27	\$2.50	1,371	1,482	\$19.86	\$20.25
Transportation/Ambulance	\$45,565	\$37,732	\$9.34	\$8.84	1,336	1,356	\$83.91	\$78.28
<b>Total</b>	<b>\$3,124,021</b>	<b>\$4,143,700</b>	<b>\$640.69</b>	<b>\$971.33</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	23,918	23,717						
<b>Service Type</b>								
DME/Supplies	\$436,483	\$383,148	\$18.25	\$16.15	1,401	1,308	\$156.33	\$148.16
FQHC / RHC	\$22,903	\$21,117	\$0.96	\$0.89	265	237	\$43.38	\$45.12
Home Health	\$12,213	\$14,241	\$0.51	\$0.60	26	19	\$234.87	\$384.89
IP - Maternity	\$43,182	\$35,392	\$1.81	\$1.49	9	6	\$2,398.98	\$3,217.42
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,561,859	\$1,937,349	\$65.30	\$81.69	70	69	\$11,156.14	\$14,141.23
IP - Psych	\$656,052	\$682,086	\$27.43	\$28.76	453	524	\$727.33	\$659.02
Lab	\$109,419	\$86,160	\$4.57	\$3.63	3,310	3,038	\$16.58	\$14.35
OP - Emergency Room & Related	\$254,777	\$331,926	\$10.65	\$14.00	793	841	\$161.15	\$199.59
OP - Other	\$963,074	\$905,799	\$40.27	\$38.19	1,366	895	\$353.68	\$512.04
Pharmacy	\$7,013,231	\$6,921,886	\$293.22	\$291.85	20,220	21,482	\$174.02	\$163.03
Prof - Anesthesia	\$30,019	\$36,808	\$1.26	\$1.55	100	127	\$150.85	\$146.65
Prof - Child EPSDT	\$7,268	\$5,079	\$0.30	\$0.21	256	165	\$14.22	\$15.58
Prof - Evaluation & Management	\$951,168	\$1,078,697	\$39.77	\$45.48	6,259	6,895	\$76.24	\$79.16
Prof - Maternity	\$25,420	\$21,463	\$1.06	\$0.90	29	19	\$438.28	\$564.81
Prof - Other	\$3,708,435	\$5,837,626	\$155.05	\$246.14	4,060	5,177	\$458.28	\$570.53
Prof - Psych	\$172,101	\$201,715	\$7.20	\$8.51	1,264	1,370	\$68.29	\$74.52
Prof - Specialist	\$131,582	\$164,780	\$5.50	\$6.95	624	654	\$105.86	\$127.44
Prof - Vision	\$61,949	\$66,303	\$2.59	\$2.80	281	246	\$110.62	\$136.15
Radiology	\$51,817	\$54,540	\$2.17	\$2.30	1,007	1,103	\$25.82	\$25.03
Transportation/Ambulance	\$164,094	\$181,642	\$6.86	\$7.66	1,078	1,517	\$76.36	\$60.57
<b>Total</b>	<b>\$16,377,047</b>	<b>\$18,967,756</b>	<b>\$684.72</b>	<b>\$799.75</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Female								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	17,788	17,424						
<b>Service Type</b>								
DME/Supplies	\$351,526	\$260,774	\$19.76	\$14.97	1,971	1,706	\$120.30	\$105.28
FQHC / RHC	\$47,462	\$38,089	\$2.67	\$2.19	828	715	\$38.68	\$36.69
Home Health	\$94,462	\$49,227	\$5.31	\$2.83	352	126	\$180.96	\$269.00
IP - Maternity	\$277,260	\$258,297	\$15.59	\$14.82	90	74	\$2,084.66	\$2,391.64
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,679,832	\$3,199,228	\$206.87	\$183.61	545	233	\$4,554.25	\$9,465.17
IP - Psych	\$732,145	\$1,088,338	\$41.16	\$62.46	757	1,107	\$652.54	\$677.25
Lab	\$348,584	\$275,999	\$19.60	\$15.84	11,757	10,070	\$20.00	\$18.88
OP - Emergency Room & Related	\$843,484	\$923,215	\$47.42	\$52.99	2,652	2,535	\$214.57	\$250.81
OP - Other	\$1,557,485	\$1,632,425	\$87.56	\$93.69	5,033	2,583	\$208.75	\$435.31
Pharmacy	\$5,545,623	\$5,869,710	\$311.76	\$336.88	55,253	56,556	\$67.71	\$71.48
Prof - Anesthesia	\$48,062	\$46,053	\$2.70	\$2.64	266	289	\$121.98	\$109.91
Prof - Child EPSDT	\$28,042	\$19,298	\$1.58	\$1.11	896	830	\$21.12	\$16.01
Prof - Evaluation & Management	\$1,410,579	\$1,428,365	\$79.30	\$81.98	13,601	13,981	\$69.97	\$70.36
Prof - Maternity	\$126,409	\$115,519	\$7.11	\$6.63	220	171	\$387.76	\$463.93
Prof - Other	\$470,538	\$410,878	\$26.45	\$23.58	4,328	4,415	\$73.34	\$64.10
Prof - Psych	\$172,290	\$189,474	\$9.69	\$10.87	1,894	1,928	\$61.36	\$67.67
Prof - Specialist	\$350,506	\$356,950	\$19.70	\$20.49	2,311	2,345	\$102.31	\$104.83
Prof - Vision	\$47,967	\$46,417	\$2.70	\$2.66	319	222	\$101.41	\$143.71
Radiology	\$211,448	\$215,185	\$11.89	\$12.35	4,236	4,406	\$33.68	\$33.63
Transportation/Ambulance	\$408,638	\$387,594	\$22.97	\$22.24	6,450	6,452	\$42.74	\$41.37
<b>Total</b>	<b>\$16,752,340</b>	<b>\$16,811,038</b>	<b>\$941.78</b>	<b>\$964.82</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Male								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	13,659	14,100						
<b>Service Type</b>								
DME/Supplies	\$278,086	\$244,954	\$20.36	\$17.37	1,467	1,418	\$166.52	\$147.03
FQHC / RHC	\$18,420	\$17,501	\$1.35	\$1.24	398	356	\$40.66	\$41.87
Home Health	\$19,596	\$40,148	\$1.43	\$2.85	104	100	\$166.07	\$343.14
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,142,663	\$1,853,935	\$156.87	\$131.48	538	211	\$3,501.08	\$7,475.54
IP - Psych	\$549,282	\$604,353	\$40.21	\$42.86	795	774	\$606.94	\$664.12
Lab	\$103,904	\$85,453	\$7.61	\$6.06	4,857	4,275	\$18.80	\$17.01
OP - Emergency Room & Related	\$434,894	\$403,922	\$31.84	\$28.65	1,683	1,376	\$226.98	\$249.80
OP - Other	\$666,008	\$774,390	\$48.76	\$54.92	2,459	1,140	\$237.94	\$578.33
Pharmacy	\$4,179,651	\$3,823,334	\$306.00	\$271.16	33,163	32,992	\$110.73	\$98.63
Prof - Anesthesia	\$17,649	\$19,510	\$1.29	\$1.38	128	122	\$120.88	\$136.43
Prof - Child EPSDT	\$4,032	\$2,443	\$0.30	\$0.17	271	185	\$13.09	\$11.26
Prof - Evaluation & Management	\$636,212	\$667,311	\$46.58	\$47.33	7,806	7,805	\$71.61	\$72.76
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$366,332	\$353,590	\$26.82	\$25.08	2,831	3,157	\$113.70	\$95.31
Prof - Psych	\$81,058	\$69,649	\$5.93	\$4.94	1,022	890	\$69.70	\$66.59
Prof - Specialist	\$158,715	\$166,548	\$11.62	\$11.81	1,313	1,289	\$106.16	\$109.93
Prof - Vision	\$30,526	\$31,375	\$2.23	\$2.23	183	168	\$146.76	\$159.26
Radiology	\$72,635	\$75,971	\$5.32	\$5.39	2,343	2,187	\$27.23	\$29.56
Transportation/Ambulance	\$190,378	\$244,115	\$13.94	\$17.31	4,650	5,810	\$35.97	\$35.76
<b>Total</b>	<b>\$9,950,041</b>	<b>\$9,478,501</b>	<b>\$728.46</b>	<b>\$672.23</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Roanoke/Alleghany</b>	<b>Total Claims FY14</b>	<b>Total Claims FY15</b>	<b>Unadjusted PMPM FY14</b>	<b>Unadjusted PMPM FY15</b>	<b>Units/1000 FY14</b>	<b>Units/1000 FY15</b>	<b>Cost/Unit FY14</b>	<b>Cost/Unit FY15</b>
Member Months	48,943	50,772						
<b>Service Type</b>								
DME/Supplies	\$1,790,620	\$1,241,116	\$36.59	\$24.44	4,604	4,026	\$95.36	\$72.85
FQHC / RHC	\$117,119	\$120,948	\$2.39	\$2.38	744	701	\$38.60	\$40.81
Home Health	\$575,635	\$527,518	\$11.76	\$10.39	621	356	\$227.25	\$350.05
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$19,820,238	\$19,973,170	\$404.97	\$393.39	1,128	656	\$4,308.75	\$7,194.95
IP - Psych	\$1,628,778	\$1,880,493	\$33.28	\$37.04	585	630	\$682.93	\$705.36
Lab	\$831,374	\$726,651	\$16.99	\$14.31	11,665	10,202	\$17.47	\$16.83
OP - Emergency Room & Related	\$1,688,748	\$1,674,622	\$34.50	\$32.98	1,481	1,273	\$279.64	\$310.81
OP - Other	\$5,419,611	\$6,117,122	\$110.73	\$120.48	5,328	3,122	\$249.42	\$463.14
Pharmacy	\$21,029,708	\$22,984,894	\$429.68	\$452.71	82,263	80,864	\$62.68	\$67.18
Prof - Anesthesia	\$160,168	\$145,406	\$3.27	\$2.86	317	301	\$123.87	\$114.13
Prof - Child EPSDT	\$32,627	\$29,899	\$0.67	\$0.59	782	639	\$10.23	\$11.06
Prof - Evaluation & Management	\$4,060,690	\$4,188,589	\$82.97	\$82.50	13,813	13,779	\$72.08	\$71.85
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$2,893,082	\$2,850,909	\$59.11	\$56.15	5,824	5,741	\$121.80	\$117.36
Prof - Psych	\$245,558	\$250,037	\$5.02	\$4.92	825	807	\$72.95	\$73.24
Prof - Specialist	\$1,635,813	\$1,550,930	\$33.42	\$30.55	3,335	3,194	\$120.26	\$114.76
Prof - Vision	\$173,063	\$186,814	\$3.54	\$3.68	456	433	\$93.09	\$101.86
Radiology	\$648,181	\$738,644	\$13.24	\$14.55	5,025	4,917	\$31.63	\$35.50
Transportation/Ambulance	\$1,095,919	\$1,215,772	\$22.39	\$23.95	6,728	7,050	\$39.94	\$40.76
<b>Total</b>	<b>\$63,846,934</b>	<b>\$66,403,534</b>	<b>\$1,304.52</b>	<b>\$1,307.88</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Roanoke/Alleghany	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	109,337	110,422						
<b>Service Type</b>								
DME/Supplies	\$3,108,228	\$2,417,579	\$28.43	\$21.89	3,065	2,750	\$111.31	\$95.55
FQHC / RHC	\$208,947	\$200,915	\$1.91	\$1.82	584	540	\$39.28	\$40.44
Home Health	\$720,637	\$646,661	\$6.59	\$5.86	370	206	\$213.84	\$340.53
IP - Maternity	\$320,441	\$293,689	\$2.93	\$2.66	17	13	\$2,122.13	\$2,467.97
IP - Newborn	\$58,590	\$51,904	\$0.54	\$0.47	0	0	\$29,294.99	\$25,951.80
IP - Other	\$28,127,295	\$27,602,942	\$257.25	\$249.98	687	391	\$4,493.90	\$7,667.48
IP - Psych	\$3,618,575	\$4,278,307	\$33.10	\$38.75	588	676	\$675.99	\$687.72
Lab	\$1,416,195	\$1,192,711	\$12.95	\$10.80	8,643	7,625	\$17.98	\$17.00
OP - Emergency Room & Related	\$3,290,491	\$3,406,783	\$30.09	\$30.85	1,525	1,390	\$236.76	\$266.28
OP - Other	\$9,007,202	\$9,720,644	\$82.38	\$88.03	3,935	2,273	\$251.21	\$464.75
Pharmacy	\$38,351,563	\$40,204,224	\$350.76	\$364.10	54,968	55,511	\$76.58	\$78.71
Prof - Anesthesia	\$275,052	\$266,798	\$2.52	\$2.42	239	241	\$126.52	\$120.07
Prof - Child EPSDT	\$78,135	\$61,206	\$0.71	\$0.55	640	523	\$13.40	\$12.73
Prof - Evaluation & Management	\$7,384,082	\$7,668,921	\$67.54	\$69.45	11,202	11,436	\$72.34	\$72.88
Prof - Maternity	\$151,830	\$136,982	\$1.39	\$1.24	42	31	\$395.39	\$477.29
Prof - Other	\$7,968,664	\$11,374,386	\$72.88	\$103.01	5,014	5,370	\$174.44	\$230.20
Prof - Psych	\$685,240	\$725,345	\$6.27	\$6.57	1,101	1,101	\$68.31	\$71.57
Prof - Specialist	\$2,330,539	\$2,295,100	\$21.32	\$20.78	2,207	2,177	\$115.88	\$114.57
Prof - Vision	\$341,060	\$356,399	\$3.12	\$3.23	370	334	\$101.11	\$115.90
Radiology	\$996,055	\$1,095,371	\$9.11	\$9.92	3,517	3,532	\$31.08	\$33.70
Transportation/Ambulance	\$1,906,783	\$2,068,351	\$17.44	\$18.73	4,943	5,382	\$42.34	\$41.77
<b>Total</b>	<b>\$110,345,603</b>	<b>\$116,065,218</b>	<b>\$1,009.22</b>	<b>\$1,051.11</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age Under 1								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	41	36						
<b>Service Type</b>								
DME/Supplies	\$6,321	\$305	\$154.16	\$8.47	20,488	1,333	\$90.29	\$76.20
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	\$725	\$0.00	\$20.15	0	333	-	\$725.44
IP - Other	\$5,444	\$10,838	\$132.79	\$301.06	4,683	667	\$340.27	\$5,419.01
IP - Psych	\$685	\$507	\$16.70	\$14.08	0	0	-	-
Lab	\$174	\$88	\$4.25	\$2.46	4,098	3,333	\$12.43	\$8.85
OP - Emergency Room & Related	\$2,057	\$1,550	\$50.18	\$43.06	1,756	1,667	\$342.87	\$310.06
OP - Other	\$29,615	\$0	\$722.31	\$0.00	26,634	0	\$325.44	-
Pharmacy	\$2,688	\$1,084	\$65.56	\$30.12	36,000	10,000	\$21.85	\$36.14
Prof - Anesthesia	\$472	\$0	\$11.52	\$0.00	585	0	\$236.19	-
Prof - Child EPSDT	\$279	\$136	\$6.80	\$3.79	5,854	3,333	\$13.94	\$13.64
Prof - Evaluation & Management	\$11,819	\$3,013	\$288.28	\$83.69	26,927	13,000	\$128.47	\$77.26
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$13,893	\$809	\$338.87	\$22.48	30,732	7,000	\$132.32	\$38.53
Prof - Psych	\$100	\$74	\$2.44	\$2.06	0	0	-	-
Prof - Specialist	\$2,834	\$106	\$69.11	\$2.93	5,561	333	\$149.13	\$105.53
Prof - Vision	\$156	\$32	\$3.82	\$0.89	585	0	\$78.21	-
Radiology	\$1,475	\$31	\$35.97	\$0.85	7,902	1,000	\$54.62	\$10.19
Transportation/Ambulance	\$536	\$104	\$13.09	\$2.88	4,098	667	\$38.32	\$51.93
<b>Total</b>	<b>\$78,549</b>	<b>\$19,403</b>	<b>\$1,915.82</b>	<b>\$538.96</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 1-5								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	1,762	1,678						
<b>Service Type</b>								
DME/Supplies	\$119,623	\$106,623	\$67.89	\$63.54	4,958	6,114	\$164.32	\$124.71
FQHC / RHC	\$703	\$835	\$0.40	\$0.50	82	93	\$58.62	\$64.21
Home Health	\$269	\$3,472	\$0.15	\$2.07	20	122	\$89.74	\$204.23
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$435,860	\$199,009	\$247.37	\$118.60	2,356	493	\$1,259.71	\$2,884.19
IP - Psych	\$17,477	\$12,454	\$9.92	\$7.42	14	0	\$8,738.42	-
Lab	\$8,312	\$6,932	\$4.72	\$4.13	3,610	3,976	\$15.68	\$12.47
OP - Emergency Room & Related	\$31,973	\$30,641	\$18.15	\$18.26	1,662	1,273	\$131.04	\$172.14
OP - Other	\$238,586	\$153,562	\$135.41	\$91.52	10,570	4,205	\$153.73	\$261.16
Pharmacy	\$150,044	\$308,402	\$85.16	\$183.79	16,284	17,735	\$62.75	\$124.36
Prof - Anesthesia	\$9,582	\$7,113	\$5.44	\$4.24	415	365	\$157.09	\$139.48
Prof - Child EPSDT	\$1,890	\$1,690	\$1.07	\$1.01	1,008	973	\$12.77	\$12.42
Prof - Evaluation & Management	\$121,897	\$118,306	\$69.18	\$70.50	11,230	11,464	\$73.92	\$73.80
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$212,669	\$200,959	\$120.70	\$119.76	10,032	10,813	\$144.38	\$132.91
Prof - Psych	\$3,511	\$3,028	\$1.99	\$1.80	225	150	\$106.40	\$144.19
Prof - Specialist	\$27,151	\$21,480	\$15.41	\$12.80	1,022	937	\$181.01	\$163.97
Prof - Vision	\$6,639	\$7,294	\$3.77	\$4.35	518	522	\$87.35	\$99.92
Radiology	\$8,002	\$6,067	\$4.54	\$3.62	2,030	1,716	\$26.85	\$25.28
Transportation/Ambulance	\$15,279	\$12,062	\$8.67	\$7.19	2,023	1,709	\$51.44	\$50.47
<b>Total</b>	<b>\$1,409,467</b>	<b>\$1,199,930</b>	<b>\$799.92</b>	<b>\$715.10</b>				



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 6-20								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	13,173	12,592						
<b>Service Type</b>								
DME/Supplies	\$328,990	\$169,876	\$24.97	\$13.49	1,898	1,730	\$157.86	\$93.60
FQHC / RHC	\$10,484	\$8,952	\$0.80	\$0.71	204	173	\$46.80	\$49.19
Home Health	\$26,010	\$13,313	\$1.97	\$1.06	169	45	\$139.84	\$283.25
IP - Maternity	\$4,604	\$14,372	\$0.35	\$1.14	15	6	\$270.82	\$2,395.36
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$418,774	\$683,292	\$31.79	\$54.26	156	174	\$2,448.97	\$3,733.84
IP - Psych	\$206,040	\$152,300	\$15.64	\$12.09	150	182	\$1,248.73	\$797.38
Lab	\$55,075	\$48,976	\$4.18	\$3.89	3,489	3,158	\$14.38	\$14.78
OP - Emergency Room & Related	\$206,182	\$231,412	\$15.65	\$18.38	1,108	1,079	\$169.56	\$204.43
OP - Other	\$515,694	\$420,761	\$39.15	\$33.41	2,319	1,602	\$202.55	\$250.30
Pharmacy	\$4,000,806	\$4,532,301	\$303.71	\$359.93	24,028	24,952	\$151.68	\$173.10
Prof - Anesthesia	\$16,018	\$13,825	\$1.22	\$1.10	128	119	\$114.41	\$110.60
Prof - Child EPSDT	\$3,468	\$4,280	\$0.26	\$0.34	268	347	\$11.79	\$11.76
Prof - Evaluation & Management	\$566,630	\$568,923	\$43.01	\$45.18	7,467	7,903	\$69.13	\$68.60
Prof - Maternity	\$4,577	\$7,564	\$0.35	\$0.60	9	24	\$457.69	\$302.58
Prof - Other	\$372,734	\$1,032,938	\$28.30	\$82.03	4,348	4,496	\$78.09	\$218.94
Prof - Psych	\$111,444	\$119,386	\$8.46	\$9.48	1,620	1,537	\$62.68	\$74.02
Prof - Specialist	\$71,818	\$71,003	\$5.45	\$5.64	696	720	\$94.00	\$94.04
Prof - Vision	\$31,299	\$31,975	\$2.38	\$2.54	455	352	\$62.60	\$86.65
Radiology	\$36,790	\$38,593	\$2.79	\$3.06	1,375	1,329	\$24.38	\$27.67
Transportation/Ambulance	\$107,385	\$106,372	\$8.15	\$8.45	2,461	2,676	\$39.74	\$37.88
<b>Total</b>	<b>\$7,094,821</b>	<b>\$8,270,415</b>	<b>\$538.59</b>	<b>\$656.80</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

Age 21-44 Female								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	19,093	17,972						
<b>Service Type</b>								
DME/Supplies	\$394,456	\$314,416	\$20.66	\$17.49	2,430	2,397	\$102.01	\$87.58
FQHC / RHC	\$42,390	\$43,815	\$2.22	\$2.44	732	745	\$36.42	\$39.26
Home Health	\$91,296	\$81,448	\$4.78	\$4.53	258	166	\$222.67	\$328.42
IP - Maternity	\$146,421	\$116,877	\$7.67	\$6.50	94	27	\$976.14	\$2,921.92
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,248,986	\$3,248,568	\$170.17	\$180.76	1,024	335	\$1,994.47	\$6,484.17
IP - Psych	\$560,381	\$503,022	\$29.35	\$27.99	505	464	\$696.99	\$723.77
Lab	\$321,665	\$289,775	\$16.85	\$16.12	10,825	9,521	\$18.68	\$20.32
OP - Emergency Room & Related	\$1,130,478	\$1,200,866	\$59.21	\$66.82	3,310	2,845	\$214.63	\$281.83
OP - Other	\$1,728,389	\$1,751,358	\$90.52	\$97.45	8,277	3,337	\$131.24	\$350.41
Pharmacy	\$5,989,477	\$5,873,091	\$313.70	\$326.79	70,267	69,037	\$53.57	\$56.80
Prof - Anesthesia	\$49,153	\$45,136	\$2.57	\$2.51	288	277	\$107.09	\$108.76
Prof - Child EPSDT	\$12,213	\$10,355	\$0.64	\$0.58	814	691	\$9.43	\$10.00
Prof - Evaluation & Management	\$1,479,390	\$1,354,274	\$77.48	\$75.35	13,726	13,653	\$67.74	\$66.23
Prof - Maternity	\$70,735	\$64,307	\$3.70	\$3.58	106	79	\$421.04	\$540.40
Prof - Other	\$332,195	\$350,898	\$17.40	\$19.52	3,521	3,884	\$59.30	\$60.32
Prof - Psych	\$103,187	\$98,042	\$5.40	\$5.46	1,109	1,002	\$58.46	\$65.32
Prof - Specialist	\$359,708	\$325,690	\$18.84	\$18.12	2,003	1,974	\$112.87	\$110.14
Prof - Vision	\$47,911	\$45,090	\$2.51	\$2.51	393	348	\$76.66	\$86.54
Radiology	\$248,417	\$249,138	\$13.01	\$13.86	4,538	4,824	\$34.40	\$34.48
Transportation/Ambulance	\$369,458	\$371,847	\$19.35	\$20.69	5,357	5,019	\$43.34	\$49.47
<b>Total</b>	<b>\$16,726,306</b>	<b>\$16,338,011</b>	<b>\$876.04</b>	<b>\$909.08</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 21-44 Male</b>								
<b>Far Southwest</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	12,904	12,915						
<b>Service Type</b>								
DME/Supplies	\$301,182	\$335,270	\$23.34	\$25.96	1,924	2,021	\$145.57	\$154.15
FQHC / RHC	\$14,763	\$14,988	\$1.14	\$1.16	316	335	\$43.42	\$41.52
Home Health	\$51,828	\$56,146	\$4.02	\$4.35	140	123	\$343.24	\$425.35
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,841,712	\$2,042,106	\$142.72	\$158.12	990	287	\$1,729.31	\$6,608.76
IP - Psych	\$325,592	\$382,964	\$25.23	\$29.65	379	377	\$798.02	\$943.26
Lab	\$132,789	\$106,635	\$10.29	\$8.26	6,611	5,512	\$18.68	\$17.98
OP - Emergency Room & Related	\$460,091	\$566,173	\$35.65	\$43.84	2,144	1,973	\$199.61	\$266.69
OP - Other	\$704,782	\$824,655	\$54.62	\$63.85	6,893	2,442	\$95.09	\$313.80
Pharmacy	\$2,969,697	\$3,160,726	\$230.14	\$244.73	44,188	43,574	\$62.50	\$67.40
Prof - Anesthesia	\$15,234	\$17,358	\$1.18	\$1.34	128	153	\$110.39	\$105.20
Prof - Child EPSDT	\$3,538	\$3,726	\$0.27	\$0.29	409	337	\$8.04	\$10.26
Prof - Evaluation & Management	\$675,082	\$683,660	\$52.32	\$52.94	9,206	9,582	\$68.19	\$66.29
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$223,963	\$355,462	\$17.36	\$27.52	2,309	2,898	\$90.20	\$113.97
Prof - Psych	\$47,162	\$46,907	\$3.65	\$3.63	495	603	\$88.65	\$72.28
Prof - Specialist	\$135,023	\$134,197	\$10.46	\$10.39	1,232	1,305	\$101.90	\$95.51
Prof - Vision	\$22,135	\$28,509	\$1.72	\$2.21	224	270	\$91.84	\$97.97
Radiology	\$85,822	\$96,953	\$6.65	\$7.51	2,540	2,992	\$31.43	\$30.11
Transportation/Ambulance	\$170,007	\$207,956	\$13.17	\$16.10	4,722	4,685	\$33.48	\$41.24
<b>Total</b>	<b>\$8,180,401</b>	<b>\$9,064,391</b>	<b>\$633.94</b>	<b>\$701.85</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

<b>Age 45 and Over</b>								
<b>Far Southwest</b>	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	65,327	65,981						
<b>Service Type</b>								
DME/Supplies	\$2,317,066	\$1,899,115	\$35.47	\$28.78	5,362	4,830	\$79.37	\$71.52
FQHC / RHC	\$140,085	\$232,601	\$2.14	\$3.53	654	862	\$39.35	\$49.09
Home Health	\$802,830	\$681,702	\$12.29	\$10.33	777	396	\$189.84	\$313.43
IP - Maternity	\$0	\$2,351	\$0.00	\$0.04	0	0	-	\$2,351.10
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$18,862,077	\$18,885,913	\$288.73	\$286.23	1,399	562	\$2,476.31	\$6,113.92
IP - Psych	\$1,319,638	\$1,442,951	\$20.20	\$21.87	262	289	\$923.47	\$909.23
Lab	\$995,485	\$1,065,946	\$15.24	\$16.16	10,665	9,811	\$17.15	\$19.76
OP - Emergency Room & Related	\$2,476,208	\$3,008,038	\$37.90	\$45.59	1,763	1,678	\$258.07	\$325.93
OP - Other	\$7,287,341	\$7,197,952	\$111.55	\$109.09	8,028	3,798	\$166.75	\$344.66
Pharmacy	\$25,506,520	\$26,340,453	\$390.44	\$399.21	95,752	95,236	\$48.93	\$50.30
Prof - Anesthesia	\$161,080	\$155,946	\$2.47	\$2.36	276	259	\$107.10	\$109.59
Prof - Child EPSDT	\$36,617	\$40,577	\$0.56	\$0.61	1,014	915	\$6.63	\$8.07
Prof - Evaluation & Management	\$5,158,669	\$5,152,241	\$78.97	\$78.09	13,613	13,771	\$69.61	\$68.05
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,424,773	\$1,418,931	\$21.81	\$21.51	4,310	4,711	\$60.73	\$54.78
Prof - Psych	\$196,140	\$204,870	\$3.00	\$3.10	414	484	\$86.98	\$77.05
Prof - Specialist	\$1,604,370	\$1,604,038	\$24.56	\$24.31	2,589	2,662	\$113.85	\$109.58
Prof - Vision	\$236,676	\$245,522	\$3.62	\$3.72	595	554	\$73.05	\$80.60
Radiology	\$822,252	\$883,838	\$12.59	\$13.40	4,673	5,037	\$32.32	\$31.91
Transportation/Ambulance	\$1,186,053	\$1,442,202	\$18.16	\$21.86	6,025	6,149	\$36.16	\$42.66
<b>Total</b>	<b>\$70,533,880</b>	<b>\$71,905,188</b>	<b>\$1,079.70</b>	<b>\$1,089.79</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
Far Southwest	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	112,300	111,174						
<b>Service Type</b>								
DME/Supplies	\$3,467,637	\$2,825,605	\$30.88	\$25.42	4,062	3,777	\$91.23	\$80.75
FQHC / RHC	\$208,426	\$301,190	\$1.86	\$2.71	566	692	\$39.33	\$46.99
Home Health	\$972,234	\$836,080	\$8.66	\$7.52	532	283	\$195.27	\$319.24
IP - Maternity	\$151,025	\$133,600	\$1.34	\$1.20	18	5	\$904.34	\$2,842.56
IP - Newborn	\$0	\$725	\$0.00	\$0.01	0	0	-	\$725.44
IP - Other	\$24,812,853	\$25,069,727	\$220.95	\$225.50	1,159	448	\$2,288.16	\$6,036.53
IP - Psych	\$2,429,812	\$2,494,198	\$21.64	\$22.44	300	311	\$865.32	\$866.34
Lab	\$1,513,500	\$1,518,351	\$13.48	\$13.66	9,272	8,421	\$17.44	\$19.46
OP - Emergency Room & Related	\$4,306,989	\$5,038,681	\$38.35	\$45.32	1,991	1,827	\$231.15	\$297.65
OP - Other	\$10,504,407	\$10,348,289	\$93.54	\$93.08	7,317	3,322	\$153.41	\$336.21
Pharmacy	\$38,619,232	\$40,216,057	\$343.89	\$361.74	75,812	75,841	\$54.43	\$57.24
Prof - Anesthesia	\$251,540	\$239,378	\$2.24	\$2.15	246	235	\$109.18	\$109.86
Prof - Child EPSDT	\$58,005	\$60,764	\$0.52	\$0.55	825	749	\$7.52	\$8.76
Prof - Evaluation & Management	\$8,013,487	\$7,880,417	\$71.36	\$70.88	12,373	12,565	\$69.21	\$67.69
Prof - Maternity	\$75,312	\$71,872	\$0.67	\$0.65	19	16	\$423.10	\$499.11
Prof - Other	\$2,580,227	\$3,359,996	\$22.98	\$30.22	4,050	4,435	\$68.09	\$81.77
Prof - Psych	\$461,543	\$472,307	\$4.11	\$4.25	680	695	\$72.54	\$73.31
Prof - Specialist	\$2,200,904	\$2,156,514	\$19.60	\$19.40	2,088	2,147	\$112.65	\$108.44
Prof - Vision	\$344,816	\$358,422	\$3.07	\$3.22	501	464	\$73.62	\$83.35
Radiology	\$1,202,757	\$1,274,619	\$10.71	\$11.47	3,978	4,294	\$32.31	\$32.04
Transportation/Ambulance	\$1,848,718	\$2,140,542	\$16.46	\$19.25	5,280	5,334	\$37.41	\$43.32
<b>Total</b>	<b>\$104,023,424</b>	<b>\$106,797,337</b>	<b>\$926.30</b>	<b>\$960.63</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

**Exhibit 1b**

All Age Categories								
All Regions	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	880,595	894,412						
<b>Service Type</b>								
DME/Supplies	\$22,983,912	\$20,580,749	\$26.10	\$23.01	2,787	2,566	\$112.39	\$107.59
FQHC / RHC	\$3,021,521	\$2,741,364	\$3.43	\$3.06	677	619	\$60.85	\$59.45
Home Health	\$5,724,475	\$5,049,529	\$6.50	\$5.65	221	158	\$352.69	\$428.25
IP - Maternity	\$2,875,843	\$2,485,294	\$3.27	\$2.78	14	10	\$2,781.28	\$3,244.51
IP - Newborn	\$218,282	\$177,452	\$0.25	\$0.20	0	0	\$36,380.27	\$17,745.17
IP - Other	\$199,935,192	\$209,621,925	\$227.05	\$234.37	412	285	\$6,619.06	\$9,878.97
IP - Psych	\$31,467,864	\$35,882,550	\$35.73	\$40.12	569	632	\$754.10	\$761.69
Lab	\$6,528,842	\$6,874,084	\$7.41	\$7.69	5,714	5,293	\$15.57	\$17.42
OP - Emergency Room & Related	\$41,521,384	\$42,252,848	\$47.15	\$47.24	1,520	1,515	\$372.24	\$374.17
OP - Other	\$92,662,761	\$95,892,364	\$105.23	\$107.21	3,191	2,517	\$395.70	\$511.14
Pharmacy	\$269,468,268	\$289,557,542	\$306.01	\$323.74	49,722	49,733	\$73.85	\$78.12
Prof - Anesthesia	\$2,655,852	\$2,484,943	\$3.02	\$2.78	252	267	\$143.38	\$124.65
Prof - Child EPSDT	\$570,104	\$461,998	\$0.65	\$0.52	547	498	\$14.20	\$12.46
Prof - Evaluation & Management	\$55,783,142	\$58,165,126	\$63.35	\$65.03	10,912	11,302	\$69.67	\$69.05
Prof - Maternity	\$1,235,642	\$1,085,420	\$1.40	\$1.21	32	27	\$530.55	\$532.85
Prof - Other	\$45,722,512	\$51,681,741	\$51.92	\$57.78	4,555	4,918	\$136.78	\$141.00
Prof - Psych	\$4,666,124	\$4,962,405	\$5.30	\$5.55	941	972	\$67.58	\$68.53
Prof - Specialist	\$17,611,036	\$17,832,084	\$20.00	\$19.94	1,837	1,812	\$130.64	\$132.01
Prof - Vision	\$2,713,274	\$2,873,382	\$3.08	\$3.21	434	422	\$85.27	\$91.41
Radiology	\$9,050,737	\$9,807,538	\$10.28	\$10.97	3,376	3,525	\$36.53	\$37.33
Transportation/Ambulance	\$12,895,828	\$13,408,281	\$14.64	\$14.99	8,467	6,907	\$20.76	\$26.05
<b>Total</b>	<b>\$829,312,594</b>	<b>\$873,878,620</b>	<b>\$941.76</b>	<b>\$977.04</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Pharmacy Adjustment**

**Exhibit 2a**

	LIFC	ABAD	Source
1. Health Plan Total Drug Cost PMPM	\$38.07	\$314.94	FY14-15 Health Plan Encounter Data
2. Health Plan Drug Ingredient Cost PMPM	\$37.19	\$309.73	Health Plan Encounter Analysis
3. Change in Average Managed Care Discount	0.3%	0.3%	From Plan Data
4. Current Average Managed Care Rebate	1.9%	1.9%	From Plan Data
4b. Average Managed Care Rebate Reduction for FY17	0.0%	0.0%	From DMAS
4c. FY17 Effective Managed Care Rebate	1.9%	1.9%	= (4) *(1- (4b.))
5. FY17 Managed Care Dispensing Fee PMPM	\$0.87	\$5.32	From Plan Data
6. Average PBM Admin Cost PMPM	\$0.41	\$2.67	From Plan Data
7. Adjusted PMPM with FY17 Pharmacy Pricing Arrangements	\$37.67	\$311.04	= (2.) * (1 - (3.)) * (1 - (4.)) + (5.) + (6.)
<b>8. Pharmacy Adjustment</b>	<b>-1.1%</b>	<b>-1.2%</b>	= (7.) / (1.) - 1

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Exempt Infant Formula Carveout Adjustment**

**Exhibit 2b**

	LIFC Age 0-5	LIFC Age 6-20	ABAD Age 0-5	ABAD Age 6-20	Source
1. Claims Associated with Exempt Infant Formula	\$128,781	\$112,468	\$89,809	\$90,057	FY14-15 Health Plan Encounter Data
2. Total Claims in DME/Supplies Service Category	\$9,530,826	\$9,040,866	\$3,748,825	\$6,769,061	FY14-15 Health Plan Encounter Data
<b>3. Exempt Infant Formula Carveout Adjustment</b>	<b>-1.4%</b>	<b>-1.2%</b>	<b>-2.4%</b>	<b>-1.3%</b>	<b>= (1.) / (2.)</b>



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Inpatient Adjustments**

**Exhibit 2c.1**

	<u>LIFC and ABAD</u>		<u>Source</u>
	<u>IP - Med/Surg</u>	<u>IP - Psych</u>	
1a. FY14 Total Claims in IP Service Categories	\$491,087,596	\$50,476,751	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in IP Service Categories	\$535,063,209	\$58,248,927	FY15 Health Plan Encounter Data
1c. FY14 Children's Hospital of The King's Daughters IP Claims	\$12,270,236	\$0	FY14 Health Plan Encounter Data
1d. FY15 Children's Hospital of The King's Daughters IP Claims	\$12,696,908	\$0	FY15 Health Plan Encounter Data
2. FY14-15 Hospital Capital Percentage	8.9%	8.9%	Provided by DMAS
3a. FY16 Capital Reimbursement Decrease	-4.5%	-4.5%	= ((4a.)-(2.))/(2.)
3b. FY17 Capital Reimbursement Decrease	0.0%	0.0%	= ((4b.)-(4a.))/(4a.)
4a. FY16 Hospital Capital Percentage	8.5%	8.5%	Provided by DMAS
4b. FY17 Hospital Capital Percentage	8.5%	8.5%	Provided by DMAS
5. % Excluded Claims from Freestanding Psych Hospitals	0.00%	12.23%	FY14-15 Health Plan Encounter Data
6a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	Provided by DMAS
6b. Dollar Change	\$9,618,872	\$916,801	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (6a.)
7a. FY17 Hospital Rate Change - Rebasing	-2.65%	27.00%	Provided by DMAS
7b. Dollar Change	(\$24,276,201)	\$23,574,874	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (7a.)
<b>8. Hospital Inpatient Adjustment</b>	<b>-1.43%</b>	<b>22.53%</b>	= ((6b.) + (7b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Inpatient Adjustments for Children's Hospital of The King's Daughters**

**Exhibit 2c.2**

	<u>LIFC</u>	<u>ABAD</u>	<u>Source</u>
	IP - Med/Surg	IP - Med/Surg	
1a. FY14-15 Total Claims in IP Service Categories (for age 0-20)			
Rural	\$37,410,832	\$3,745,176	FY14-15 Health Plan Encounter Data
Tidewater	\$81,751,657	\$7,962,130	FY14-15 Health Plan Encounter Data
2. FY14-15 Children Hospital King's Daughter IP Claims			
Rural	\$1,861,439	\$379,888	FY14-15 Health Plan Encounter Data
Tidewater	\$19,689,667	\$3,036,149	FY14-15 Health Plan Encounter Data
3. FY14-15 Hospital Capital Percentage	10.3%	10.3%	Provided by DMAS
4a. FY16 Capital Reimbursement Increase	1.9%	1.9%	= ((5a.)-(3.))/(3.)
4b. FY17 Capital Reimbursement Increase	0.0%	0.0%	= ((5b.)-(5a.))/(5a.)
5a. FY16 Hospital Capital Percentage	10.5%	10.5%	Provided by DMAS
5b. FY17 Hospital Capital Percentage	10.5%	10.5%	Provided by DMAS
6. % Excluded Claims from Freestanding Psych Hospitals	0.00%	0.00%	FY14-15 Health Plan Encounter Data
7a. FY17 Hospital Rate Change - Unit Cost	2.10%	2.10%	Provided by DMAS
7b. Dollar Change			
Rural	\$34,986	\$7,140	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (7a.))
Tidewater	\$370,067	\$57,064	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (7a.))
8a. FY17 Hospital Rate Change - Rebasing	-2.65%	-2.65%	Provided by DMAS
8b. Dollar Change			
Rural	(\$44,149)	(\$9,010)	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (8a.))
Tidewater	(\$466,990)	(\$72,010)	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (8a.))
<b>9. Hospital Inpatient Adjustment</b>			
Rural	<b>-0.024%</b>	<b>-0.050%</b>	= ((7b.) + (8b.)) / (1a.)
Tidewater	<b>-0.119%</b>	<b>-0.188%</b>	= ((7b.) + (8b.)) / (1a.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Freestanding Psychiatric Hospital Rate Adjustment**

**Exhibit 2d**

	LIFC and ABAD	Source
1a. FY14 Total Claims in IP Service Categories	\$50,476,751	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in IP Service Categories	\$58,248,927	FY15 Health Plan Encounter Data
2. FY14-15 Hospital Capital Percentage	3.90%	Provided by DMAS
3. % Claims from Freestanding Psych Hospitals	12.23%	FY14-15 Health Plan Encounter Data
4a. FY17 Hospital Rate Change - Unit Cost	1.05%	Provided by DMAS
4b. Dollar Change	\$134,205	$= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (4a.)$
5a. FY17 Hospital Rate Change - Rebasing	2.50%	Provided by DMAS
5b. Dollar Change	\$319,536	$= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)$
<b>6. Freestanding Psychiatric Hospital Rate Adjustment</b>	<b>0.42%</b>	$= ((4b.) + (5b.)) / ((1a.) + (1b.))$

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Outpatient Adjustments**

**Exhibit 2e.1**

	<u>LIFC and ABAD</u>		Source
	OP - Emergency Room & Related	OP - Other	
1a. FY14 Total Claims in OP Service Categories	\$149,535,432	\$231,284,121	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in OP Service Categories	\$158,338,708	\$247,428,955	FY15 Health Plan Encounter Data
1c. FY14 Children's Hospital of The King's Daughters OP Claims	\$2,634,529	\$10,786,068	FY14 Health Plan Encounter Data
1d. FY15 Children's Hospital of The King's Daughters OP Claims	\$2,779,486	\$11,267,642	FY15 Health Plan Encounter Data
2a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	Provided by DMAS
2b. Dollar Change	\$3,175,831	\$4,794,923	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (2a.)
3a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	Provided by DMAS
3b. Dollar Change	\$302,460	\$456,659	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (3a.)
<b>4. Hospital Outpatient Adjustment</b>	<b>1.13%</b>	<b>1.10%</b>	= ((2b.) + (3b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Outpatient Adjustments for Children's Hospital of The King's Daughters**

**Exhibit 2e.2**

	<u>LIFC</u>		<u>ABAD</u>		Source
	OP - Emergency Room & Related	OP - Other	OP - Emergency Room & Related	OP - Other	
1. FY14 Total Claims in OP Service Categories (For Age 0-20)					
Rural	\$11,640,351	\$19,148,333	\$971,390	\$3,061,631	FY14-15 Health Plan Encounter Data
Tidewater	\$33,698,049	\$46,186,717	\$2,651,383	\$8,603,383	FY14-15 Health Plan Encounter Data
2. FY14-15 Children Hospital King's Daughter OP Claims					
Rural	\$112,437	\$1,157,454	\$20,510	\$184,650	FY14-15 Health Plan Encounter Data
Tidewater	\$4,967,090	\$17,676,970	\$313,978	\$3,034,635	FY14-15 Health Plan Encounter Data
3a. FY17 Hospital Rate Change - Unit Cost	2.1%	2.1%	2.1%	2.1%	Provided by DMAS
3b. Dollar Change					
Rural	\$2,361	\$24,307	\$431	\$3,878	= ((2.) * (3a.))
Tidewater	\$104,309	\$371,216	\$6,594	\$63,727	= ((2.) * (3a.))
4a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	0.1%	0.1%	Provided by DMAS
4b. Dollar Change					
Rural	\$112	\$1,157	\$21	\$185	= ((2.) * (4a.))
Tidewater	\$4,967	\$17,677	\$314	\$3,035	= ((2.) * (4a.))
5. Hospital Outpatient Adjustment					
Rural	<b>0.02%</b>	<b>0.13%</b>	<b>0.05%</b>	<b>0.13%</b>	= ((3b.)+(4b.))/ (1.)
Tidewater	<b>0.32%</b>	<b>0.84%</b>	<b>0.26%</b>	<b>0.78%</b>	= ((3b.)+(4b.))/ (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**DME Fee Adjustment**

**Exhibit 2f**

	LIFC	ABAD	Source
1. Claims Associated with DME/Supplies Service Category	\$29,606,667	\$43,564,661	FY14-15 Health Plan Encounter Data
2. FY14 Claims subject to DME Fee Adjustment	\$1,608,133	\$6,277,388	Provided by DMAS
3a. FY15 DME Fee Change	-24.3%	-20.6%	Provided by DMAS
3b. Dollar Change	(\$389,975)	(\$1,295,898)	= (2.) * (3a.)
<b>4. DME Fee Adjustment</b>	<b>-1.3%</b>	<b>-3.0%</b>	= (3b.) / (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hepatitis C Treatment Adjustment**

**Exhibit 2g**

	LIFC Child	LIFC Adult	ABAD	Source
1. Total Claims in Pharmacy Service Categories	\$305,951,204	\$216,617,210	\$559,025,810	FY14-15 Health Plan Encounter Data
2. Unique Individuals in Base Period	737,971	198,699	122,079	FY14-15 Health Plan Encounter Data
3a. Proportion of Population Being Tested for Hepatitis C	0.4%	3.9%	3.9%	FY14-15 Health Plan Encounter Data
3b. Number of Individuals Being Tested	3,192	7,676	4,740	FY14-15 Health Plan Encounter Data
3c. Projected Testing Change in FY17	15%	35%	35%	Estimate
3d. Additional Number of People Being Tested	479	2,687	1,659	= (3b.) * (3c.)
3e. Average Cost Per Test Per Person	\$23.17	\$23.17	\$23.17	FY14-15 Health Plan Encounter Data
4a. Proportion of Population Diagnosed With Hepatitis C	0.04%	1.4%	4.5%	FY14-15 Health Plan Encounter Data
4b. Number of Individuals Diagnosed With Hepatitis C	294	2,854	5,460	FY14-15 Health Plan Encounter Data
4c. Projected Increase in People Diagnosed With Hepatitis C	5%	5%	5%	Estimate
4d. Projected Number of People With Hepatitis C	309	2,997	5,733	= (4b.) * (1 + (4c.))
5a. Proportion of People With Hepatitis C With Drug Therapy	2.0%	3.5%	4.2%	FY14-15 Health Plan Encounter Data
5b. Number of Individuals With Hepatitis C With Drug Therapy in Base Period	6	101	232	FY14-15 Health Plan Encounter Data
5c. Expected Percentage Increase of Hepatitis C Receiving Drug Therapy - Current Protocols	0%	0%	58%	Estimate
5d. Expected Percentage Increase of Hepatitis C Receiving Drug Therapy - New Protocols	100%	87%	60%	Estimate
5e. Projected Number of Additional People Going Through Drug Therapy	7	98	384	= (4d.) * (5a.) * (1 + (5c.)) * (1 + (5d.)) - (5b.)
5f. Average Cost of Current Drug Therapy	\$76,477	\$76,477	\$76,477	FY14-15 Health Plan Encounter Data
5g. Average Cost of New Drug Therapy	\$90,000	\$90,000	\$90,000	Estimate
6. Additional Cost of Hepatitis C Treatment	\$686,236	\$10,204,412	\$37,709,599	= ((3d.) * (3e.)) + ((5g.) - (5f.)) * (5b.) + (5e.) * (5g.)
<b>7. Hepatitis C Treatment Adjustment</b>	<b>0.2%</b>	<b>4.7%</b>	<b>6.7%</b>	= (6.) / (1.)

Note: Based on analysis of FY14 - FY15 base data experience

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Provider Incentive Payment Adjustment**

**Exhibit 2h**

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**LIFC and ABAD**

**Source**

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**Provider Incentive Payment Adjustment**

**0.16%**

From Plan Data

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**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Emergency Room Triage Adjustment**

**Exhibit 2i**

	LIFC	ABAD	Source
1. Total Claims in Prof - Evaluation & Management	\$433,630,975	\$113,948,267	FY14-15 Health Plan Encounter Data
2. FY14-15 Number of Claims in ER Triage Level 3	122,000	20,253	FY14-15 Health Plan Encounter Data
3. ER Cost No Triage Level 3	\$43.65	\$43.65	FY14-15 Health Plan Encounter Data
4. ER Triage Cost	\$22.06	\$22.06	Provided by DMAS
5. FY16 ER Triage Financial Impact (2 years)	\$2,634,018	\$437,269	= (2.) * ((3.) - (4.))
<b>6. FY16 ER Triage Adjustment</b>	<b>0.6%</b>	<b>0.4%</b>	= (5.) / (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Resource Based Relative Value Scale Adjustment**

**Exhibit 2j**

	<b>ABAD</b>	<b>LIFC</b>	<b>Source</b>
1. Professional Fee Adjustment - Effective FY17	-0.17%	-0.17%	Provided by DMAS
2. Proportion of claims subject to fee adjustment	81.94%	92.34%	FY14-15 Health Plan Encounter Data
3. <b>Final Professional Fee Adjustment</b>	<b>-0.14%</b>	<b>-0.16%</b>	= (1.) * (2.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Administrative Cost Adjustment**

**Exhibit 2k**

	LIFC Child	LIFC Adult	ABAD	Source
1. Claims Adjustment Expense PMPM	\$4.32	\$12.89	\$29.25	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
2. General Admin Expense PMPM	\$7.53	\$22.47	\$50.97	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
3. Claims Adjustment Expense Increase %	0.7%	0.7%	0.7%	BLS CPI-U
4. General Admin Expense Increase %	2.2%	2.2%	2.2%	Weighted average of BLS Compensation Trend and CPI
5a. Administrative PMPM*	\$12.14	\$36.25	\$82.22	= (1.) * (1+ (3.)) ^ (18 months/12) + (2.) * (1+ (4.)) ^ (18 months/12)
5b. Administrative PMPM Weighted by Claims	\$14.14	\$39.04	\$69.66	Reallocation of administrative costs weighted by claims
6. Adjusted and Trended Base PMPM	\$162.73	\$485.90	\$1,102.18	Weighted average of medical component of FY2017 Med3.0 Base Rates
7. Administrative allowance as % of Base Capitation Rate	7.87%	7.33%	5.86%	= (5b.) / (((5b.) + (6.)) / (1 - 8.))
8. Contribution to Reserves as % of Base Capitation Rate	1.50%	1.50%	1.50%	Provided by DMAS
<b>9. Administrative Factor as % of Base Capitation Rate</b>	<b>9.4%</b>	<b>8.8%</b>	<b>7.4%</b>	<b>= (7.) + (8.)</b>

\*Note:  
Administrative increases are applied from midpoint of CY2015 to the midpoint of the contract period (18 months) using compound interest calculations

# Virginia Medicaid

# Exhibit 3a

## FY 2017 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								
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	2.1%	-1.5%	0.7%	10.3%	1.5%	11.9%	6.5%	1.2303
Inpatient Psychiatric	0.8%	22.9%	23.9%	4.2%	14.6%	19.4%	15.0%	1.4725
Outpatient Hospital	1.3%	1.3%	2.6%	3.8%	5.8%	9.8%	2.4%	1.1380
Practitioner	0.8%	0.2%	1.0%	-2.0%	3.5%	1.5%	0.8%	1.0269
Prescription Drug	0.0%	-0.8%	-0.8%	3.4%	2.4%	5.9%	5.0%	1.1392
Other	1.1%	-0.5%	0.6%	-5.6%	16.0%	9.4%	1.7%	1.1227
<b>Weighted Average<sup>2</sup></b>	<b>1.0%</b>	<b>0.2%</b>	<b>1.2%</b>	<b>2.5%</b>	<b>4.3%</b>	<b>6.8%</b>	<b>3.4%</b>	<b>1.1259</b>

  

<b>Months of Trend Applied</b>	12	12	12	18
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<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4b.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 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 FY14-15 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

# Virginia Medicaid

# Exhibit 3b

## FY 2017 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									
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor	
	IBNR	Policy/Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend			
Inpatient Medical/Surgical	0.7%	-1.4%	-0.8%	4.6%	-4.0%	0.3%	2.4%	1.0398	
Inpatient Psychiatric	0.5%	22.9%	23.5%	4.3%	7.7%	12.3%	3.8%	1.1877	
Outpatient Hospital	1.7%	1.1%	2.8%	0.8%	-3.3%	-2.6%	0.0%	0.9745	
Practitioner	1.0%	0.1%	1.1%	-1.7%	0.8%	-0.9%	0.3%	0.9955	
Prescription Drug	0.0%	3.7%	3.7%	5.7%	-6.6%	-1.3%	1.6%	1.0113	
Other	0.8%	-0.2%	0.6%	-7.7%	13.1%	4.4%	2.2%	1.0790	
<b>Weighted Average<sup>2</sup></b>	<b>0.8%</b>	<b>0.9%</b>	<b>1.8%</b>	<b>1.6%</b>	<b>-1.8%</b>	<b>-0.5%</b>	<b>1.2%</b>	<b>1.0135</b>	

  

<b>Months of Trend Applied</b>	12	12	12	18
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<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4b.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 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 FY14-15 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ABAD**

**Exhibit 3c**

ABAD All Age Categories									
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor	
	IBNR	Policy/ Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend			
Inpatient Medical/Surgical	1.0%	-1.4%	-0.5%	5.3%	-0.5%	4.8%	1.7%	1.0740	
Inpatient Psychiatric	0.9%	22.9%	24.1%	7.4%	12.7%	21.1%	10.6%	1.4080	
Outpatient Hospital	1.5%	1.1%	2.6%	0.6%	2.6%	3.3%	2.0%	1.0644	
Practitioner	1.2%	0.0%	1.2%	2.1%	4.8%	7.0%	5.3%	1.1567	
Prescription Drug	0.0%	5.5%	5.5%	4.7%	-1.2%	3.4%	4.8%	1.1093	
Other	1.2%	-1.4%	-0.2%	-9.8%	9.0%	-1.8%	0.0%	0.9824	
<b>Weighted Average<sup>2</sup></b>	<b>0.8%</b>	<b>2.5%</b>	<b>3.3%</b>	<b>3.0%</b>	<b>1.8%</b>	<b>4.8%</b>	<b>3.7%</b>	<b>1.1079</b>	

  

<b>Months of Trend Applied</b>	12	12	12	18
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<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4a - 4b.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 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 FY14-15 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

<b>Age Under 1</b>									
<b>Northern Virginia</b>	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$760,123		\$760,123	\$8,037.45	(\$20,498)	\$747,663	1.123	\$839,419	\$3.35
FQHC / RHC	\$3,545		\$3,545	\$27.04		\$3,572	1.027	\$3,668	\$0.01
Home Health	\$62,568		\$62,568	\$800.40		\$63,368	1.138	\$72,111	\$0.29
IP - Maternity	\$819	\$3	\$822	\$18	(\$12)	\$827	1.230	\$1,018	\$0.00
IP - Newborn	\$36,153,907	\$112,203	\$36,266,111	\$774,554.64	(\$529,081)	\$36,511,584	1.230	\$44,920,499	\$179.00
IP - Other	\$6,485,198	\$18,850	\$6,504,048	\$138,937.69	(\$94,887)	\$6,548,099	1.230	\$8,056,179	\$32.10
IP - Psych	\$338		\$338	\$0.00	\$78	\$415	1.473	\$612	\$0.00
Lab	\$701,807		\$701,807	\$6,021.37		\$707,828	1.123	\$794,695	\$3.17
OP - Emergency Room & Related	\$3,380,864		\$3,380,864	\$43,250.07	\$38,685	\$3,462,799	1.138	\$3,940,550	\$15.70
OP - Other	\$2,526,756		\$2,526,756	\$32,323.80	\$28,074	\$2,587,154	1.138	\$2,944,094	\$11.73
Pharmacy	\$5,288,039		\$5,288,039	\$28.99	(\$44,147)	\$5,243,920	1.139	\$5,973,905	\$23.81
Prof - Anesthesia	\$228,504		\$228,504	\$1,742.78		\$230,246	1.027	\$236,448	\$0.94
Prof - Child EPSDT	\$1,860,542		\$1,860,542	\$14,190.19	(\$2,924)	\$1,871,807	1.027	\$1,922,225	\$7.66
Prof - Evaluation & Management	\$21,327,433		\$21,327,433	\$161,496.71	\$97,012	\$21,585,942	1.027	\$22,167,363	\$88.33
Prof - Maternity	\$141,120		\$141,120	\$1,076	(\$222)	\$141,975	1.027	\$145,799	\$0.58
Prof - Other	\$5,844,472		\$5,844,472	\$44,552.36	(\$9,186)	\$5,879,839	1.027	\$6,038,213	\$24.06
Prof - Psych	\$15,518		\$15,518	\$116.37	(\$24)	\$15,610	1.027	\$16,030	\$0.06
Prof - Specialist	\$1,154,055		\$1,154,055	\$8,801.88	(\$1,814)	\$1,161,043	1.027	\$1,192,316	\$4.75
Prof - Vision	\$403,769		\$403,769	\$1,051.94	(\$631)	\$404,189	1.027	\$415,076	\$1.65
Radiology	\$424,082		\$424,082	\$4,390.55		\$428,472	1.123	\$481,055	\$1.92
Transportation/Ambulance	\$929,501		\$929,501	\$3,008.76		\$932,509	1.123	\$1,046,950	\$4.17
Provider Incentive Payment Adjustment									\$0.65
<b>Total</b>	<b>\$87,692,960</b>	<b>\$131,056</b>	<b>\$87,824,016</b>	<b>\$1,244,427</b>	<b>(\$539,578)</b>	<b>\$88,528,864</b>		<b>\$101,208,226</b>	<b>\$403.95</b>
Admin Cost Adjustment									\$41.77
<b>Medallion 3.0 Capitation Rate</b>									<b>\$445.72</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,392,658		\$1,392,658	\$14,725.79	(\$37,555)	\$1,369,829	1.123	\$1,537,939	\$1.70
FQHC / RHC	\$13,314		\$13,314	\$101.55		\$13,416	1.027	\$13,777	\$0.02
Home Health	\$24,498		\$24,498	\$313.39		\$24,811	1.138	\$28,234	\$0.03
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$9,281,583	(\$245,158)	\$9,036,424	\$198,846.91	(\$131,915)	\$9,103,356	1.230	\$11,199,933	\$12.35
IP - Psych	\$55,419		\$55,419	\$431.28	\$12,814	\$68,665	1.473	\$101,111	\$0.11
Lab	\$2,239,966		\$2,239,966	\$18,399.58		\$2,258,366	1.123	\$2,535,519	\$2.80
OP - Emergency Room & Related	\$8,447,302		\$8,447,302	\$108,063.03	\$96,657	\$8,652,022	1.138	\$9,845,711	\$10.86
OP - Other	\$9,244,870		\$9,244,870	\$118,266.01	\$102,716	\$9,465,852	1.138	\$10,771,823	\$11.88
Pharmacy	\$13,363,482		\$13,363,482	\$73.26	(\$111,565)	\$13,251,990	1.139	\$15,096,747	\$16.65
Prof - Anesthesia	\$583,452		\$583,452	\$4,449.94		\$587,902	1.027	\$603,738	\$0.67
Prof - Child EPSDT	\$1,544,955		\$1,544,955	\$11,783.24	(\$2,428)	\$1,554,310	1.027	\$1,596,175	\$1.76
Prof - Evaluation & Management	\$29,100,261		\$29,100,261	\$217,621.31	\$132,356	\$29,450,238	1.027	\$30,243,485	\$33.35
Prof - Maternity	\$73,657		\$73,657	\$562	(\$116)	\$74,103	1.027	\$76,099	\$0.08
Prof - Other	\$8,887,675		\$8,887,675	\$67,696.21	(\$13,969)	\$8,941,402	1.027	\$9,182,240	\$10.13
Prof - Psych	\$206,059		\$206,059	\$1,568.93	(\$324)	\$207,304	1.027	\$212,888	\$0.23
Prof - Specialist	\$1,993,106		\$1,993,106	\$15,201.24	(\$3,133)	\$2,005,174	1.027	\$2,059,184	\$2.27
Prof - Vision	\$1,718,116		\$1,718,116	\$5,546.82	(\$2,689)	\$1,720,974	1.027	\$1,767,329	\$1.95
Radiology	\$551,106		\$551,106	\$5,479.05		\$556,585	1.123	\$624,890	\$0.69
Transportation/Ambulance	\$2,850,088		\$2,850,088	\$5,024.53		\$2,855,113	1.123	\$3,205,500	\$3.54
Provider Incentive Payment Adjustment									\$0.18
Total	\$91,571,567	(\$245,158)	\$91,326,409	\$794,154	\$40,850	\$92,161,413		\$100,702,324	\$111.23
Admin Cost Adjustment									\$11.50
<b>Medallion 3.0 Capitation Rate</b>									<b>\$122.74</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,091,492		\$1,091,492	\$11,541.30	(\$28,251)	\$1,074,783	1.123	\$1,206,683	\$0.93
FQHC / RHC	\$8,065		\$8,065	\$61.51		\$8,126	1.027	\$8,345	\$0.01
Home Health	\$315,052		\$315,052	\$4,030.34		\$319,083	1.138	\$363,105	\$0.28
IP - Maternity	\$24,908	(\$2,028)	\$22,880	\$534	(\$334)	\$23,079	1.230	\$28,395	\$0.02
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$8,546,408	(\$695,288)	\$7,851,119	\$183,096.66	(\$114,759)	\$7,919,457	1.230	\$9,743,372	\$7.52
IP - Psych	\$2,199,954		\$2,199,954	\$17,257.64	\$508,705	\$2,725,917	1.473	\$4,014,000	\$3.10
Lab	\$2,616,591		\$2,616,591	\$19,515.98		\$2,636,107	1.123	\$2,959,618	\$2.28
OP - Emergency Room & Related	\$8,583,621		\$8,583,621	\$109,806.91	\$98,216	\$8,791,645	1.138	\$10,004,597	\$7.72
OP - Other	\$9,240,357		\$9,240,357	\$118,208.26	\$102,665	\$9,461,230	1.138	\$10,766,563	\$8.31
Pharmacy	\$29,153,326		\$29,153,326	\$159.83	(\$243,387)	\$28,910,099	1.139	\$32,934,558	\$25.42
Prof - Anesthesia	\$484,682		\$484,682	\$3,696.63		\$488,378	1.027	\$501,533	\$0.39
Prof - Child EPSDT	\$408,482		\$408,482	\$3,115.45	(\$642)	\$410,955	1.027	\$422,024	\$0.33
Prof - Evaluation & Management	\$27,633,345		\$27,633,345	\$205,637.14	\$125,680	\$27,964,661	1.027	\$28,717,894	\$22.16
Prof - Maternity	\$75,420		\$75,420	\$575	(\$119)	\$75,876	1.027	\$77,920	\$0.06
Prof - Other	\$10,554,697		\$10,554,697	\$80,358.68	(\$16,589)	\$10,618,467	1.027	\$10,904,478	\$8.42
Prof - Psych	\$1,940,695		\$1,940,695	\$14,798.75	(\$3,050)	\$1,952,443	1.027	\$2,005,033	\$1.55
Prof - Specialist	\$2,699,137		\$2,699,137	\$20,586.08	(\$4,242)	\$2,715,481	1.027	\$2,788,623	\$2.15
Prof - Vision	\$3,135,075		\$3,135,075	\$12,856.89	(\$4,910)	\$3,143,022	1.027	\$3,227,680	\$2.49
Radiology	\$1,088,671		\$1,088,671	\$11,110.00		\$1,099,781	1.123	\$1,234,749	\$0.95
Transportation/Ambulance	\$3,987,143		\$3,987,143	\$5,990.78		\$3,993,134	1.123	\$4,483,183	\$3.46
Provider Incentive Payment Adjustment									\$0.16
Total	\$113,787,120	(\$697,317)	\$113,089,803	\$822,938	\$418,983	\$114,331,724		\$126,392,353	\$97.70
Admin Cost Adjustment									\$10.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$107.80</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$164,405		\$164,405	\$1,738.40	(\$4,255)	\$161,888	1.123	\$181,756	\$0.98
FQHC / RHC	\$1,196		\$1,196	\$9.12		\$1,205	1.027	\$1,238	\$0.01
Home Health	\$8,198		\$8,198	\$104.87		\$8,302	1.138	\$9,448	\$0.05
IP - Maternity	\$3,824,855	\$189,601	\$4,014,456	\$81,943	(\$58,512)	\$4,037,887	1.230	\$4,967,845	\$26.67
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,672,117	\$82,250	\$1,754,367	\$35,823.13	(\$25,571)	\$1,764,620	1.230	\$2,171,026	\$11.66
IP - Psych	\$1,004,201		\$1,004,201	\$7,878.47	\$232,206	\$1,244,286	1.473	\$1,832,251	\$9.84
Lab	\$683,285		\$683,285	\$6,055.41		\$689,340	1.123	\$773,938	\$4.16
OP - Emergency Room & Related	\$3,046,212		\$3,046,212	\$38,968.99	\$34,856	\$3,120,036	1.138	\$3,550,497	\$19.06
OP - Other	\$2,443,368		\$2,443,368	\$31,257.05	\$27,147	\$2,501,772	1.138	\$2,846,933	\$15.29
Pharmacy	\$5,049,635		\$5,049,635	\$27.68	(\$42,157)	\$5,007,506	1.139	\$5,704,581	\$30.63
Prof - Anesthesia	\$283,612		\$283,612	\$2,163.08		\$285,775	1.027	\$293,472	\$1.58
Prof - Child EPSDT	\$72,008		\$72,008	\$549.20	(\$113)	\$72,444	1.027	\$74,396	\$0.40
Prof - Evaluation & Management	\$4,840,588		\$4,840,588	\$36,202.04	\$22,016	\$4,898,806	1.027	\$5,030,756	\$27.01
Prof - Maternity	\$1,786,181		\$1,786,181	\$13,623	(\$2,807)	\$1,796,997	1.027	\$1,845,399	\$9.91
Prof - Other	\$1,470,256		\$1,470,256	\$11,191.54	(\$2,311)	\$1,479,137	1.027	\$1,518,978	\$8.16
Prof - Psych	\$526,330		\$526,330	\$4,013.74	(\$827)	\$529,516	1.027	\$543,779	\$2.92
Prof - Specialist	\$569,894		\$569,894	\$4,346.53	(\$896)	\$573,344	1.027	\$588,787	\$3.16
Prof - Vision	\$430,243		\$430,243	\$1,696.24	(\$674)	\$431,266	1.027	\$442,882	\$2.38
Radiology	\$843,095		\$843,095	\$8,858.93		\$851,954	1.123	\$956,508	\$5.14
Transportation/Ambulance	\$730,690		\$730,690	\$2,553.34		\$733,243	1.123	\$823,229	\$4.42
Provider Incentive Payment Adjustment									\$0.29
<b>Total</b>	<b>\$29,450,368</b>	<b>\$271,851</b>	<b>\$29,722,219</b>	<b>\$289,004</b>	<b>\$178,102</b>	<b>\$30,189,325</b>		<b>\$34,157,697</b>	<b>\$183.69</b>
Admin Cost Adjustment									\$19.00
<b>Medallion 3.0 Capitation Rate</b>									<b>\$202.69</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,113,335		\$1,113,335	\$9,318.88	(\$14,787)	\$1,107,866	1.079	\$1,195,430	\$4.48
FQHC / RHC	\$6,912		\$6,912	\$67.72		\$6,979	0.996	\$6,948	\$0.03
Home Health	\$107,304		\$107,304	\$1,796.71		\$109,100	0.974	\$106,316	\$0.40
IP - Maternity	\$28,432,065	\$122,068	\$28,554,133	\$186,183	(\$410,521)	\$28,329,795	1.040	\$29,456,928	\$110.37
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$13,492,004	\$57,982	\$13,549,986	\$88,350.43	(\$194,807)	\$13,443,530	1.040	\$13,978,395	\$52.37
IP - Psych	\$1,305,639		\$1,305,639	\$6,272.62	\$300,998	\$1,612,910	1.188	\$1,915,627	\$7.18
Lab	\$2,434,705		\$2,434,705	\$19,052.15		\$2,453,757	1.079	\$2,647,698	\$9.92
OP - Emergency Room & Related	\$12,969,847		\$12,969,847	\$217,169.22	\$148,984	\$13,336,001	0.974	\$12,995,690	\$48.69
OP - Other	\$13,939,326		\$13,939,326	\$233,402.32	\$155,478	\$14,328,206	0.974	\$13,962,576	\$52.32
Pharmacy	\$21,280,066	\$168,576	\$21,448,642	\$68.20	\$783,234	\$22,231,944	1.011	\$22,481,943	\$84.24
Prof - Anesthesia	\$1,856,355		\$1,856,355	\$18,187.53		\$1,874,543	0.996	\$1,866,155	\$6.99
Prof - Child EPSDT	\$160,569		\$160,569	\$1,573.17	(\$253)	\$161,889	0.996	\$161,165	\$0.60
Prof - Evaluation & Management	\$13,582,617		\$13,582,617	\$131,861.37	\$61,914	\$13,776,393	0.996	\$13,714,752	\$51.39
Prof - Maternity	\$12,741,732		\$12,741,732	\$124,836	(\$20,069)	\$12,846,499	0.996	\$12,789,018	\$47.92
Prof - Other	\$4,843,243		\$4,843,243	\$47,394.22	(\$7,628)	\$4,883,008	0.996	\$4,861,160	\$18.21
Prof - Psych	\$624,727		\$624,727	\$6,118.64	(\$984)	\$629,861	0.996	\$627,043	\$2.35
Prof - Specialist	\$3,311,354		\$3,311,354	\$32,442.79	(\$5,216)	\$3,338,581	0.996	\$3,323,643	\$12.45
Prof - Vision	\$452,367		\$452,367	\$2,367.47	(\$709)	\$454,026	0.996	\$451,994	\$1.69
Radiology	\$5,610,478		\$5,610,478	\$46,904.76		\$5,657,383	1.079	\$6,104,534	\$22.87
Transportation/Ambulance	\$1,428,202		\$1,428,202	\$6,191.29		\$1,434,393	1.079	\$1,547,765	\$5.80
Provider Incentive Payment Adjustment									\$0.87
<b>Total</b>	<b>\$139,692,846</b>	<b>\$348,626</b>	<b>\$140,041,471</b>	<b>\$1,179,559</b>	<b>\$795,633</b>	<b>\$142,016,663</b>		<b>\$144,194,781</b>	<b>\$541.14</b>
Admin Cost Adjustment									\$52.38
<b>Medallion 3.0 Capitation Rate</b>									<b>\$593.52</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$196,576		\$196,576	\$2,078.57	(\$5,088)	\$193,567	1.123	\$217,322	\$1.24
FQHC / RHC	\$1,274		\$1,274	\$9.72		\$1,284	1.027	\$1,319	\$0.01
Home Health	\$6,371		\$6,371	\$81.50		\$6,452	1.138	\$7,343	\$0.04
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,650,625	(\$239,657)	\$2,410,968	\$56,786.50	(\$35,249)	\$2,432,505	1.230	\$2,992,731	\$17.09
IP - Psych	\$768,871		\$768,871	\$6,032.24	\$177,790	\$952,693	1.473	\$1,402,871	\$8.01
Lab	\$306,159		\$306,159	\$2,143.63		\$308,303	1.123	\$346,139	\$1.98
OP - Emergency Room & Related	\$1,737,592		\$1,737,592	\$22,228.34	\$19,882	\$1,779,703	1.138	\$2,025,242	\$11.57
OP - Other	\$1,920,832		\$1,920,832	\$24,572.45	\$21,341	\$1,966,745	1.138	\$2,238,090	\$12.78
Pharmacy	\$4,580,951		\$4,580,951	\$25.11	(\$38,244)	\$4,542,732	1.139	\$5,175,108	\$29.56
Prof - Anesthesia	\$95,688		\$95,688	\$729.80		\$96,418	1.027	\$99,015	\$0.57
Prof - Child EPSDT	\$182,268		\$182,268	\$1,390.14	(\$286)	\$183,372	1.027	\$188,311	\$1.08
Prof - Evaluation & Management	\$3,128,942		\$3,128,942	\$23,183.38	\$14,230	\$3,166,355	1.027	\$3,251,642	\$18.57
Prof - Maternity	\$9,277		\$9,277	\$71	(\$15)	\$9,333	1.027	\$9,584	\$0.05
Prof - Other	\$5,324,971		\$5,324,971	\$40,592.53	(\$8,369)	\$5,357,194	1.027	\$5,501,491	\$31.42
Prof - Psych	\$295,577		\$295,577	\$2,253.97	(\$465)	\$297,366	1.027	\$305,376	\$1.74
Prof - Specialist	\$625,561		\$625,561	\$4,771.10	(\$983)	\$629,349	1.027	\$646,301	\$3.69
Prof - Vision	\$354,072		\$354,072	\$1,214.33	(\$554)	\$354,732	1.027	\$364,287	\$2.08
Radiology	\$255,143		\$255,143	\$2,644.71		\$257,787	1.123	\$289,424	\$1.65
Transportation/Ambulance	\$608,077		\$608,077	\$1,572.43		\$609,649	1.123	\$684,467	\$3.91
Provider Incentive Payment Adjustment									\$0.24
Total	\$23,048,826	(\$239,657)	\$22,809,169	\$192,381	\$143,990	\$23,145,541		\$25,746,061	\$147.29
Admin Cost Adjustment									\$15.23
<b>Medallion 3.0 Capitation Rate</b>									<b>\$162.52</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$119,907		\$119,907	\$1,003.65	(\$1,593)	\$119,318	1.079	\$128,748	\$3.52
FQHC / RHC	\$431		\$431	\$4.22		\$435	0.996	\$433	\$0.01
Home Health	\$19,129		\$19,129	\$320.30		\$19,449	0.974	\$18,953	\$0.52
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$2,475,031	\$10,641	\$2,485,672	\$16,207.38	(\$35,736)	\$2,466,143	1.040	\$2,564,261	\$70.17
IP - Psych	\$200,331		\$200,331	\$962.35	\$46,184	\$247,477	1.188	\$293,924	\$8.04
Lab	\$107,155		\$107,155	\$723.74		\$107,879	1.079	\$116,405	\$3.19
OP - Emergency Room & Related	\$1,003,425		\$1,003,425	\$16,801.51	\$11,526	\$1,031,753	0.974	\$1,005,424	\$27.51
OP - Other	\$1,098,784		\$1,098,784	\$18,398.22	\$12,256	\$1,129,438	0.974	\$1,100,617	\$30.12
Pharmacy	\$2,720,039	\$21,548	\$2,741,586	\$8.72	\$100,114	\$2,841,709	1.011	\$2,873,664	\$78.63
Prof - Anesthesia	\$55,471		\$55,471	\$543.48		\$56,015	0.996	\$55,764	\$1.53
Prof - Child EPSDT	\$12,338		\$12,338	\$120.88	(\$19)	\$12,439	0.996	\$12,384	\$0.34
Prof - Evaluation & Management	\$1,075,056		\$1,075,056	\$10,357.26	\$4,900	\$1,090,313	0.996	\$1,085,435	\$29.70
Prof - Maternity	\$14,659		\$14,659	\$144	(\$23)	\$14,779	0.996	\$14,713	\$0.40
Prof - Other	\$569,058		\$569,058	\$5,566.25	(\$896)	\$573,728	0.996	\$571,161	\$15.63
Prof - Psych	\$43,505		\$43,505	\$425.77	(\$69)	\$43,862	0.996	\$43,666	\$1.19
Prof - Specialist	\$352,949		\$352,949	\$3,458.00	(\$556)	\$355,852	0.996	\$354,259	\$9.69
Prof - Vision	\$64,270		\$64,270	\$345.06	(\$101)	\$64,514	0.996	\$64,226	\$1.76
Radiology	\$223,862		\$223,862	\$1,865.58		\$225,727	1.079	\$243,568	\$6.66
Transportation/Ambulance	\$156,756		\$156,756	\$537.89		\$157,294	1.079	\$169,726	\$4.64
Provider Incentive Payment Adjustment									\$0.47
<b>Total</b>	<b>\$10,312,156</b>	<b>\$32,189</b>	<b>\$10,344,344</b>	<b>\$77,794</b>	<b>\$135,986</b>	<b>\$10,558,125</b>		<b>\$10,717,333</b>	<b>\$293.73</b>
Admin Cost Adjustment									\$28.43
<b>Medallion 3.0 Capitation Rate</b>									<b>\$322.17</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$326,130		\$326,130	\$2,729.79	(\$4,332)	\$324,528	1.079	\$350,179	\$7.03
FQHC / RHC	\$1,293		\$1,293	\$12.66		\$1,305	0.996	\$1,299	\$0.03
Home Health	\$50,929		\$50,929	\$852.76		\$51,781	0.974	\$50,460	\$1.01
IP - Maternity	\$80,411	\$346	\$80,757	\$527	(\$1,161)	\$80,122	1.040	\$83,310	\$1.67
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$5,095,205	\$21,906	\$5,117,111	\$33,365.21	(\$73,568)	\$5,076,908	1.040	\$5,278,899	\$106.05
IP - Psych	\$199,428		\$199,428	\$958.21	\$45,975	\$246,361	1.188	\$292,599	\$5.88
Lab	\$354,123		\$354,123	\$2,718.75		\$356,841	1.079	\$385,046	\$7.74
OP - Emergency Room & Related	\$1,781,374		\$1,781,374	\$29,827.61	\$20,463	\$1,831,664	0.974	\$1,784,923	\$35.86
OP - Other	\$3,704,865		\$3,704,865	\$62,034.86	\$41,324	\$3,808,224	0.974	\$3,711,045	\$74.55
Pharmacy	\$8,166,238	\$64,691	\$8,230,929	\$26.17	\$300,567	\$8,531,522	1.011	\$8,627,459	\$173.32
Prof - Anesthesia	\$166,141		\$166,141	\$1,627.76		\$167,769	0.996	\$167,018	\$3.36
Prof - Child EPSDT	\$27,806		\$27,806	\$272.42	(\$44)	\$28,034	0.996	\$27,909	\$0.56
Prof - Evaluation & Management	\$2,766,356		\$2,766,356	\$26,877.05	\$12,610	\$2,805,843	0.996	\$2,793,289	\$56.11
Prof - Maternity	\$78,729		\$78,729	\$771	(\$124)	\$79,376	0.996	\$79,021	\$1.59
Prof - Other	\$1,169,221		\$1,169,221	\$11,447.32	(\$1,842)	\$1,178,826	0.996	\$1,173,552	\$23.58
Prof - Psych	\$148,791		\$148,791	\$1,457.62	(\$234)	\$150,014	0.996	\$149,343	\$3.00
Prof - Specialist	\$1,091,352		\$1,091,352	\$10,692.45	(\$1,719)	\$1,100,325	0.996	\$1,095,402	\$22.01
Prof - Vision	\$192,526		\$192,526	\$1,515.05	(\$303)	\$193,738	0.996	\$192,871	\$3.87
Radiology	\$818,092		\$818,092	\$6,836.85		\$824,929	1.079	\$890,130	\$17.88
Transportation/Ambulance	\$273,041		\$273,041	\$1,203.77		\$274,245	1.079	\$295,921	\$5.94
Provider Incentive Payment Adjustment									\$0.88
<b>Total</b>	<b>\$26,492,049</b>	<b>\$86,943</b>	<b>\$26,578,992</b>	<b>\$195,754</b>	<b>\$337,612</b>	<b>\$27,112,358</b>		<b>\$27,429,674</b>	<b>\$551.92</b>
Admin Cost Adjustment									\$53.42
<b>Medallion 3.0 Capitation Rate</b>									<b>\$605.35</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$262,878		\$262,878	\$2,779.64	(\$7,089)	\$258,569	1.123	\$290,301	\$4.07
FQHC / RHC	\$780,824		\$780,824	\$5,955.28		\$786,779	1.027	\$807,971	\$11.33
Home Health	\$6,238		\$6,238	\$79.80		\$6,318	1.138	\$7,189	\$0.10
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$14,841,444	(\$410,536)	\$14,430,908	\$317,960.36	(\$210,670)	\$14,538,198	1.230	\$17,886,464	\$250.72
IP - Other	\$3,208,119	(\$88,741)	\$3,119,378	\$68,730.16	(\$45,538)	\$3,142,570	1.230	\$3,866,329	\$54.20
IP - Psych	\$96,309		\$96,309	\$0.00	\$22,097	\$118,406	1.473	\$174,356	\$2.44
Lab	\$115,125		\$115,125	\$938.12		\$116,063	1.123	\$130,306	\$1.83
OP - Emergency Room & Related	\$791,786		\$791,786	\$10,129.01	\$9,060	\$810,975	1.138	\$922,863	\$12.94
OP - Other	\$1,212,590		\$1,212,590	\$15,512.18	\$13,473	\$1,241,574	1.138	\$1,412,870	\$19.80
Pharmacy	\$1,366,897		\$1,366,897	\$7.49	(\$11,412)	\$1,355,493	1.139	\$1,544,185	\$21.65
Prof - Anesthesia	\$76,155		\$76,155	\$580.83		\$76,736	1.027	\$78,803	\$1.10
Prof - Child EPSDT	\$312,456		\$312,456	\$2,383.07	(\$491)	\$314,348	1.027	\$322,815	\$4.53
Prof - Evaluation & Management	\$6,507,185		\$6,507,185	\$49,508.16	\$29,600	\$6,586,293	1.027	\$6,763,696	\$94.81
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$1,318,251		\$1,318,251	\$10,048.40	(\$2,072)	\$1,326,227	1.027	\$1,361,949	\$19.09
Prof - Psych	\$74,565		\$74,565	\$2.33	(\$116)	\$74,451	1.027	\$76,456	\$1.07
Prof - Specialist	\$453,308		\$453,308	\$3,457.34	(\$712)	\$456,053	1.027	\$468,337	\$6.56
Prof - Vision	\$128,342		\$128,342	\$220.82	(\$201)	\$128,362	1.027	\$131,819	\$1.85
Radiology	\$131,475		\$131,475	\$1,388.23		\$132,863	1.123	\$149,168	\$2.09
Transportation/Ambulance	\$381,799		\$381,799	\$2,002.89		\$383,802	1.123	\$430,903	\$6.04
Provider Incentive Payment Adjustment									\$0.83
<b>Total</b>	<b>\$32,065,744</b>	<b>(\$499,278)</b>	<b>\$31,566,466</b>	<b>\$491,684</b>	<b>(\$204,071)</b>	<b>\$31,854,079</b>		<b>\$36,826,782</b>	<b>\$517.04</b>
Admin Cost Adjustment									\$53.47
<b>Medallion 3.0 Capitation Rate</b>									<b>\$570.51</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$367,062		\$367,062	\$3,881.27	(\$9,898)	\$361,045	1.123	\$405,353	\$1.53
FQHC / RHC	\$1,016,524		\$1,016,524	\$7,752.94		\$1,024,277	1.027	\$1,051,866	\$3.96
Home Health	\$3,112		\$3,112	\$39.81		\$3,151	1.138	\$3,586	\$0.01
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$4,158,347	(\$527,002)	\$3,631,346	\$89,087.67	(\$53,142)	\$3,667,291	1.230	\$4,511,898	\$16.99
IP - Psych	\$414,502		\$414,502	\$235.72	\$95,155	\$509,893	1.473	\$750,834	\$2.83
Lab	\$495,772		\$495,772	\$4,250.91		\$500,023	1.123	\$561,387	\$2.11
OP - Emergency Room & Related	\$2,035,799		\$2,035,799	\$26,043.18	\$23,294	\$2,085,136	1.138	\$2,372,815	\$8.94
OP - Other	\$3,724,962		\$3,724,962	\$47,651.98	\$41,386	\$3,814,000	1.138	\$4,340,205	\$16.35
Pharmacy	\$4,063,341		\$4,063,341	\$22.28	(\$33,923)	\$4,029,440	1.139	\$4,590,362	\$17.29
Prof - Anesthesia	\$211,078		\$211,078	\$1,609.88		\$212,688	1.027	\$218,417	\$0.82
Prof - Child EPSDT	\$263,525		\$263,525	\$2,009.88	(\$414)	\$265,120	1.027	\$272,262	\$1.03
Prof - Evaluation & Management	\$6,723,760		\$6,723,760	\$50,851.12	\$30,584	\$6,805,195	1.027	\$6,988,494	\$26.32
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$1,779,866		\$1,779,866	\$13,555.89	(\$2,797)	\$1,790,625	1.027	\$1,838,856	\$6.93
Prof - Psych	\$385,934		\$385,934	\$682.59	(\$603)	\$386,014	1.027	\$396,411	\$1.49
Prof - Specialist	\$659,657		\$659,657	\$5,031.14	(\$1,037)	\$663,651	1.027	\$681,526	\$2.57
Prof - Vision	\$487,224		\$487,224	\$866.97	(\$761)	\$487,330	1.027	\$500,456	\$1.88
Radiology	\$167,349		\$167,349	\$1,765.75		\$169,115	1.123	\$189,869	\$0.72
Transportation/Ambulance	\$1,082,128		\$1,082,128	\$3,889.32		\$1,086,018	1.123	\$1,219,297	\$4.59
Provider Incentive Payment Adjustment									\$0.19
<b>Total</b>	<b>\$28,039,942</b>	<b>(\$527,002)</b>	<b>\$27,512,940</b>	<b>\$259,228</b>	<b>\$87,844</b>	<b>\$27,860,012</b>		<b>\$30,893,895</b>	<b>\$116.55</b>
Admin Cost Adjustment									\$12.05
<b>Medallion 3.0 Capitation Rate</b>									<b>\$128.60</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$468,476		\$468,476	\$4,953.61	(\$12,125)	\$461,304	1.123	\$517,917	\$1.29
FQHC / RHC	\$810,462		\$810,462	\$6,181.32		\$816,643	1.027	\$838,639	\$2.09
Home Health	\$5,851		\$5,851	\$74.85		\$5,926	1.138	\$6,744	\$0.02
IP - Maternity	\$16,389	\$813	\$17,201	\$351	(\$251)	\$17,302	1.230	\$21,286	\$0.05
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,579,869	\$127,931	\$2,707,800	\$55,270.64	(\$39,467)	\$2,723,604	1.230	\$3,350,872	\$8.33
IP - Psych	\$1,358,994		\$1,358,994	\$6,046.49	\$313,187	\$1,678,228	1.473	\$2,471,245	\$6.15
Lab	\$627,212		\$627,212	\$5,144.77		\$632,356	1.123	\$709,961	\$1.77
OP - Emergency Room & Related	\$2,160,470		\$2,160,470	\$27,638.05	\$24,721	\$2,212,829	1.138	\$2,518,125	\$6.26
OP - Other	\$3,336,492		\$3,336,492	\$42,682.44	\$37,070	\$3,416,245	1.138	\$3,887,572	\$9.67
Pharmacy	\$13,107,869		\$13,107,869	\$71.86	(\$109,431)	\$12,998,510	1.139	\$14,807,980	\$36.83
Prof - Anesthesia	\$134,318		\$134,318	\$1,024.43		\$135,343	1.027	\$138,988	\$0.35
Prof - Child EPSDT	\$56,348		\$56,348	\$429.76	(\$89)	\$56,690	1.027	\$58,216	\$0.14
Prof - Evaluation & Management	\$7,220,632		\$7,220,632	\$54,431.99	\$32,843	\$7,307,907	1.027	\$7,504,747	\$18.67
Prof - Maternity	\$13,689		\$13,689	\$104	(\$22)	\$13,772	1.027	\$14,143	\$0.04
Prof - Other	\$1,819,229		\$1,819,229	\$13,855.00	(\$2,859)	\$1,830,225	1.027	\$1,879,522	\$4.67
Prof - Psych	\$1,569,671		\$1,569,671	\$8,511.71	(\$2,462)	\$1,575,721	1.027	\$1,618,163	\$4.02
Prof - Specialist	\$873,101		\$873,101	\$6,659.07	(\$1,372)	\$878,388	1.027	\$902,047	\$2.24
Prof - Vision	\$880,421		\$880,421	\$2,354.26	(\$1,377)	\$881,399	1.027	\$905,139	\$2.25
Radiology	\$422,829		\$422,829	\$4,466.69		\$427,295	1.123	\$479,734	\$1.19
Transportation/Ambulance	\$1,605,324		\$1,605,324	\$5,493.29		\$1,610,818	1.123	\$1,808,502	\$4.50
Provider Incentive Payment Adjustment									\$0.18
<b>Total</b>	<b>\$39,067,646</b>	<b>\$128,744</b>	<b>\$39,196,390</b>	<b>\$245,746</b>	<b>\$238,367</b>	<b>\$39,680,503</b>		<b>\$44,439,544</b>	<b>\$110.71</b>
Admin Cost Adjustment									\$11.45
<b>Medallion 3.0 Capitation Rate</b>									<b>\$122.16</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

<b>Age 15-20 Female</b>									
<b>Other MSA</b>	<b>Total Base Claims FY14-15</b>	<b>Base Claims Redistribution and Adjustments FY14-15</b>	<b>Total Redistributed Base Claims FY14-15</b>	<b>Completion Factor Adjustments<sup>1</sup></b>	<b>Policy and Program Adjustments<sup>2</sup></b>	<b>Completed and Adjusted Claims FY14-15</b>	<b>Trend Adjustment</b>	<b>Completed &amp; Trended Claims FY17</b>	<b>PMPM FY17</b>
<b>Service Type</b>									
DME/Supplies	\$106,416		\$106,416	\$1,125.23	(\$2,754)	\$104,787	1.123	\$117,646	\$1.66
FQHC / RHC	\$267,794		\$267,794	\$2,042.44		\$269,836	1.027	\$277,104	\$3.90
Home Health	\$3,122		\$3,122	\$39.93		\$3,162	1.138	\$3,598	\$0.05
IP - Maternity	\$1,924,270	\$95,421	\$2,019,691	\$41,225	(\$29,438)	\$2,031,479	1.230	\$2,499,345	\$35.18
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$758,702	\$37,623	\$796,325	\$16,254.29	(\$11,607)	\$800,972	1.230	\$985,443	\$13.87
IP - Psych	\$422,333		\$422,333	\$2,469.30	\$97,464	\$522,267	1.473	\$769,055	\$10.82
Lab	\$494,339		\$494,339	\$4,971.17		\$499,310	1.123	\$560,587	\$7.89
OP - Emergency Room & Related	\$1,085,351		\$1,085,351	\$13,884.47	\$12,419	\$1,111,654	1.138	\$1,265,025	\$17.80
OP - Other	\$1,521,456		\$1,521,456	\$19,463.40	\$16,904	\$1,557,824	1.138	\$1,772,752	\$24.95
Pharmacy	\$2,671,227		\$2,671,227	\$14.64	(\$22,301)	\$2,648,941	1.139	\$3,017,689	\$42.47
Prof - Anesthesia	\$142,895		\$142,895	\$1,089.85		\$143,985	1.027	\$147,863	\$2.08
Prof - Child EPSDT	\$32,625		\$32,625	\$248.83	(\$51)	\$32,823	1.027	\$33,707	\$0.47
Prof - Evaluation & Management	\$2,099,497		\$2,099,497	\$15,901.97	\$9,550	\$2,124,949	1.027	\$2,182,185	\$30.71
Prof - Maternity	\$1,217,195		\$1,217,195	\$9,283	(\$1,913)	\$1,224,565	1.027	\$1,257,549	\$17.70
Prof - Other	\$650,759		\$650,759	\$4,963.82	(\$1,023)	\$654,700	1.027	\$672,334	\$9.46
Prof - Psych	\$275,421		\$275,421	\$1,467.72	(\$432)	\$276,457	1.027	\$283,903	\$4.00
Prof - Specialist	\$266,351		\$266,351	\$2,031.44	(\$419)	\$267,964	1.027	\$275,181	\$3.87
Prof - Vision	\$169,197		\$169,197	\$527.41	(\$265)	\$169,459	1.027	\$174,024	\$2.45
Radiology	\$424,778		\$424,778	\$4,490.61		\$429,269	1.123	\$481,950	\$6.78
Transportation/Ambulance	\$373,533		\$373,533	\$1,888.49		\$375,421	1.123	\$421,494	\$5.93
Provider Incentive Payment Adjustment									\$0.39
<b>Total</b>	<b>\$14,907,259</b>	<b>\$133,044</b>	<b>\$15,040,303</b>	<b>\$143,384</b>	<b>\$66,136</b>	<b>\$15,249,822</b>		<b>\$17,198,433</b>	<b>\$242.44</b>
Admin Cost Adjustment									\$25.07
<b>Medallion 3.0 Capitation Rate</b>									<b>\$267.51</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

<b>Age 21-44 Female</b>									
<b>Other MSA</b>	<b>Total Base Claims FY14-15</b>	<b>Base Claims Redistribution and Adjustments FY14-15</b>	<b>Total Redistributed Base Claims FY14-15</b>	<b>Completion Factor Adjustments<sup>1</sup></b>	<b>Policy and Program Adjustments<sup>2</sup></b>	<b>Completed and Adjusted Claims FY14-15</b>	<b>Trend Adjustment</b>	<b>Completed &amp; Trended Claims FY17</b>	<b>PMPM FY17</b>
<b>Service Type</b>									
DME/Supplies	\$583,513		\$583,513	\$4,884.15	(\$7,750)	\$580,647	1.079	\$626,540	\$4.55
FQHC / RHC	\$588,319		\$588,319	\$5,764.02		\$594,083	0.996	\$591,425	\$4.30
Home Health	\$34,428		\$34,428	\$576.47		\$35,004	0.974	\$34,111	\$0.25
IP - Maternity	\$9,123,036	\$39,223	\$9,162,259	\$59,741	(\$131,725)	\$9,090,275	1.040	\$9,451,942	\$68.67
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$6,005,688	\$25,820	\$6,031,508	\$39,327.37	(\$86,715)	\$5,984,121	1.040	\$6,222,206	\$45.20
IP - Psych	\$735,424		\$735,424	\$2,503.77	\$169,306	\$907,234	1.188	\$1,077,507	\$7.83
Lab	\$1,866,660		\$1,866,660	\$15,237.14		\$1,881,897	1.079	\$2,030,640	\$14.75
OP - Emergency Room & Related	\$4,734,501		\$4,734,501	\$79,275.25	\$54,385	\$4,868,162	0.974	\$4,743,935	\$34.46
OP - Other	\$6,769,871		\$6,769,871	\$113,355.81	\$75,510	\$6,958,737	0.974	\$6,781,163	\$49.26
Pharmacy	\$11,994,551	\$95,018	\$12,089,569	\$38.44	\$441,472	\$12,531,079	1.011	\$12,671,991	\$92.06
Prof - Anesthesia	\$629,730		\$629,730	\$6,169.75		\$635,900	0.996	\$633,055	\$4.60
Prof - Child EPSDT	\$80,977		\$80,977	\$793.37	(\$128)	\$81,643	0.996	\$81,277	\$0.59
Prof - Evaluation & Management	\$6,264,471		\$6,264,471	\$61,107.75	\$28,557	\$6,354,135	0.996	\$6,325,704	\$45.95
Prof - Maternity	\$5,047,528		\$5,047,528	\$49,453	(\$7,950)	\$5,089,030	0.996	\$5,066,260	\$36.80
Prof - Other	\$2,227,221		\$2,227,221	\$21,832.16	(\$3,508)	\$2,245,545	0.996	\$2,235,497	\$16.24
Prof - Psych	\$422,266		\$422,266	\$2,517.66	(\$663)	\$424,121	0.996	\$422,223	\$3.07
Prof - Specialist	\$1,665,234		\$1,665,234	\$16,315.03	(\$2,623)	\$1,678,926	0.996	\$1,671,414	\$12.14
Prof - Vision	\$276,186		\$276,186	\$1,343.44	(\$433)	\$277,096	0.996	\$275,857	\$2.00
Radiology	\$2,051,562		\$2,051,562	\$17,170.35		\$2,068,732	1.079	\$2,232,242	\$16.22
Transportation/Ambulance	\$1,149,086		\$1,149,086	\$6,409.79		\$1,155,496	1.079	\$1,246,825	\$9.06
Provider Incentive Payment Adjustment									\$0.75
<b>Total</b>	<b>\$62,250,251</b>	<b>\$160,062</b>	<b>\$62,410,313</b>	<b>\$503,815</b>	<b>\$527,736</b>	<b>\$63,441,864</b>		<b>\$64,421,814</b>	<b>\$468.75</b>
Admin Cost Adjustment									\$45.37
<b>Medallion 3.0 Capitation Rate</b>									<b>\$514.13</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$137,704		\$137,704	\$1,456.07	(\$3,564)	\$135,596	1.123	\$152,237	\$2.59
FQHC / RHC	\$113,611		\$113,611	\$866.50		\$114,478	1.027	\$117,561	\$2.00
Home Health	\$2,060		\$2,060	\$26.35		\$2,086	1.138	\$2,374	\$0.04
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,309,024	\$64,912	\$1,373,936	\$28,044.28	(\$20,026)	\$1,381,955	1.230	\$1,700,230	\$28.88
IP - Psych	\$257,313		\$257,313	\$1,340.32	\$59,344	\$317,997	1.473	\$468,261	\$7.95
Lab	\$105,000		\$105,000	\$891.88		\$105,892	1.123	\$118,887	\$2.02
OP - Emergency Room & Related	\$494,061		\$494,061	\$6,320.33	\$5,653	\$506,034	1.138	\$575,850	\$9.78
OP - Other	\$862,843		\$862,843	\$11,038.02	\$9,587	\$883,468	1.138	\$1,005,357	\$17.07
Pharmacy	\$1,937,514		\$1,937,514	\$10.62	(\$16,175)	\$1,921,350	1.139	\$2,188,813	\$37.17
Prof - Anesthesia	\$28,518		\$28,518	\$217.51		\$28,736	1.027	\$29,510	\$0.50
Prof - Child EPSDT	\$8,767		\$8,767	\$66.86	(\$14)	\$8,820	1.027	\$9,057	\$0.15
Prof - Evaluation & Management	\$1,021,464		\$1,021,464	\$7,698.76	\$4,646	\$1,033,809	1.027	\$1,061,655	\$18.03
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$331,110		\$331,110	\$2,523.37	(\$520)	\$333,113	1.027	\$342,085	\$5.81
Prof - Psych	\$202,729		\$202,729	\$1,037.58	(\$318)	\$203,449	1.027	\$208,929	\$3.55
Prof - Specialist	\$225,547		\$225,547	\$1,720.22	(\$354)	\$226,912	1.027	\$233,024	\$3.96
Prof - Vision	\$120,444		\$120,444	\$277.41	(\$188)	\$120,533	1.027	\$123,780	\$2.10
Radiology	\$125,829		\$125,829	\$1,330.00		\$127,159	1.123	\$142,765	\$2.42
Transportation/Ambulance	\$276,547		\$276,547	\$1,237.04		\$277,784	1.123	\$311,875	\$5.30
Provider Incentive Payment Adjustment									\$0.24
<b>Total</b>	<b>\$7,560,085</b>	<b>\$64,912</b>	<b>\$7,624,997</b>	<b>\$66,103</b>	<b>\$38,070</b>	<b>\$7,729,170</b>		<b>\$8,792,249</b>	<b>\$149.56</b>
Admin Cost Adjustment									\$15.47
<b>Medallion 3.0 Capitation Rate</b>									<b>\$165.03</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$114,230		\$114,230	\$956.14	(\$1,517)	\$113,669	1.079	\$122,654	\$6.97
FQHC / RHC	\$29,523		\$29,523	\$289.25		\$29,812	0.996	\$29,679	\$1.69
Home Health	\$11,519		\$11,519	\$192.87		\$11,711	0.974	\$11,413	\$0.65
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$996,644	\$4,285	\$1,000,929	\$6,526.38	(\$14,390)	\$993,065	1.040	\$1,032,575	\$58.71
IP - Psych	\$201,381		\$201,381	\$851.54	\$46,399	\$248,631	1.188	\$295,295	\$16.79
Lab	\$88,198		\$88,198	\$684.60		\$88,882	1.079	\$95,907	\$5.45
OP - Emergency Room & Related	\$484,114		\$484,114	\$8,106.09	\$5,561	\$497,781	0.974	\$485,079	\$27.58
OP - Other	\$696,602		\$696,602	\$11,664.01	\$7,770	\$716,036	0.974	\$697,764	\$39.67
Pharmacy	\$1,557,838	\$12,341	\$1,570,179	\$4.99	\$57,338	\$1,627,522	1.011	\$1,645,824	\$93.58
Prof - Anesthesia	\$17,573		\$17,573	\$172.17		\$17,745	0.996	\$17,666	\$1.00
Prof - Child EPSDT	\$6,130		\$6,130	\$60.06	(\$10)	\$6,181	0.996	\$6,153	\$0.35
Prof - Evaluation & Management	\$575,635		\$575,635	\$5,602.30	\$2,624	\$583,861	0.996	\$581,249	\$33.05
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$225,464		\$225,464	\$2,207.88	(\$355)	\$227,317	0.996	\$226,300	\$12.87
Prof - Psych	\$39,191		\$39,191	\$201.38	(\$61)	\$39,330	0.996	\$39,154	\$2.23
Prof - Specialist	\$176,543		\$176,543	\$1,729.67	(\$278)	\$177,995	0.996	\$177,198	\$10.08
Prof - Vision	\$30,560		\$30,560	\$117.26	(\$48)	\$30,629	0.996	\$30,492	\$1.73
Radiology	\$111,930		\$111,930	\$936.58		\$112,867	1.079	\$121,788	\$6.92
Transportation/Ambulance	\$124,534		\$124,534	\$644.17		\$125,178	1.079	\$135,072	\$7.68
Provider Incentive Payment Adjustment									\$0.52
<b>Total</b>	<b>\$5,487,609</b>	<b>\$16,626</b>	<b>\$5,504,234</b>	<b>\$40,947</b>	<b>\$103,032</b>	<b>\$5,648,214</b>		<b>\$5,751,261</b>	<b>\$327.54</b>
Admin Cost Adjustment									\$31.70
<b>Medallion 3.0 Capitation Rate</b>									<b>\$359.25</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$220,359		\$220,359	\$1,844.46	(\$2,927)	\$219,277	1.079	\$236,608	\$15.56
FQHC / RHC	\$44,258		\$44,258	\$433.62		\$44,692	0.996	\$44,492	\$2.93
Home Health	\$31,886		\$31,886	\$533.91		\$32,420	0.974	\$31,593	\$2.08
IP - Maternity	\$6,686	\$29	\$6,715	\$44	(\$97)	\$6,662	1.040	\$6,927	\$0.46
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$1,781,572	\$7,660	\$1,789,232	\$11,666.37	(\$25,724)	\$1,775,174	1.040	\$1,845,802	\$121.39
IP - Psych	\$123,641		\$123,641	\$488.15	\$28,479	\$152,608	1.188	\$181,250	\$11.92
Lab	\$167,943		\$167,943	\$1,360.27		\$169,303	1.079	\$182,684	\$12.01
OP - Emergency Room & Related	\$481,596		\$481,596	\$8,063.93	\$5,532	\$495,192	0.974	\$482,556	\$31.73
OP - Other	\$1,328,361		\$1,328,361	\$22,242.29	\$14,816	\$1,365,420	0.974	\$1,330,577	\$87.50
Pharmacy	\$2,981,104	\$23,616	\$3,004,720	\$9.55	\$109,723	\$3,114,452	1.011	\$3,149,474	\$207.12
Prof - Anesthesia	\$36,588		\$36,588	\$358.47		\$36,947	0.996	\$36,781	\$2.42
Prof - Child EPSDT	\$9,792		\$9,792	\$95.93	(\$15)	\$9,872	0.996	\$9,828	\$0.65
Prof - Evaluation & Management	\$821,907		\$821,907	\$8,022.45	\$3,747	\$833,676	0.996	\$829,946	\$54.58
Prof - Maternity	\$4,039		\$4,039	\$40	(\$6)	\$4,073	0.996	\$4,054	\$0.27
Prof - Other	\$659,793		\$659,793	\$6,464.04	(\$1,039)	\$665,218	0.996	\$662,242	\$43.55
Prof - Psych	\$55,586		\$55,586	\$378.00	(\$87)	\$55,877	0.996	\$55,627	\$3.66
Prof - Specialist	\$358,661		\$358,661	\$3,513.96	(\$565)	\$361,610	0.996	\$359,992	\$23.67
Prof - Vision	\$50,061		\$50,061	\$336.38	(\$79)	\$50,318	0.996	\$50,093	\$3.29
Radiology	\$228,887		\$228,887	\$1,915.67		\$230,803	1.079	\$249,045	\$16.38
Transportation/Ambulance	\$150,239		\$150,239	\$908.91		\$151,148	1.079	\$163,094	\$10.73
Provider Incentive Payment Adjustment									\$1.04
<b>Total</b>	<b>\$9,542,959</b>	<b>\$31,304</b>	<b>\$9,574,263</b>	<b>\$68,720</b>	<b>\$131,758</b>	<b>\$9,774,741</b>		<b>\$9,912,665</b>	<b>\$652.94</b>
Admin Cost Adjustment									\$63.20
<b>Medallion 3.0 Capitation Rate</b>									<b>\$716.14</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$984,694		\$984,694	\$10,412.03	(\$26,553)	\$968,552	1.123	\$1,087,416	\$6.13
FQHC / RHC	\$125,782		\$125,782	\$959.33		\$126,742	1.027	\$130,156	\$0.73
Home Health	\$334,516		\$334,516	\$4,279.34		\$338,796	1.138	\$385,538	\$2.17
IP - Maternity	\$24,700	\$306	\$25,006	\$529	(\$365)	\$25,170	1.230	\$30,967	\$0.17
IP - Newborn	\$40,127,051	\$496,651	\$40,623,702	\$859,674.54	(\$592,540)	\$40,890,837	1.230	\$50,308,329	\$283.74
IP - Other	\$6,562,481	\$81,225	\$6,643,706	\$140,593.39	(\$96,906)	\$6,687,394	1.230	\$8,227,555	\$46.40
IP - Psych	\$250,548		\$250,548	\$5.97	\$57,486	\$308,040	1.473	\$453,599	\$2.56
Lab	\$326,255		\$326,255	\$2,642.33		\$328,897	1.123	\$369,261	\$2.08
OP - Emergency Room & Related	\$3,317,391		\$3,317,391	\$42,438.08	\$37,959	\$3,397,788	1.138	\$3,866,569	\$21.81
OP - Other	\$4,209,054		\$4,209,054	\$53,844.78	\$46,765	\$4,309,664	1.138	\$4,904,253	\$27.66
Pharmacy	\$3,015,592		\$3,015,592	\$16.53	(\$25,176)	\$2,990,433	1.139	\$3,406,719	\$19.21
Prof - Anesthesia	\$180,543		\$180,543	\$1,376.99		\$181,920	1.027	\$186,820	\$1.05
Prof - Child EPSDT	\$1,156,760		\$1,156,760	\$8,822.51	(\$1,818)	\$1,163,764	1.027	\$1,195,111	\$6.74
Prof - Evaluation & Management	\$17,560,985		\$17,560,985	\$133,793.90	\$79,883	\$17,774,662	1.027	\$18,253,426	\$102.95
Prof - Maternity	\$1,779		\$1,779	\$14	(\$3)	\$1,790	1.027	\$1,838	\$0.01
Prof - Other	\$3,112,731		\$3,112,731	\$23,762.43	(\$4,892)	\$3,131,601	1.027	\$3,215,951	\$18.14
Prof - Psych	\$193,181		\$193,181	\$4.45	(\$301)	\$192,884	1.027	\$198,080	\$1.12
Prof - Specialist	\$1,342,947		\$1,342,947	\$10,242.54	(\$2,111)	\$1,351,079	1.027	\$1,387,471	\$7.83
Prof - Vision	\$268,079		\$268,079	\$460.96	(\$419)	\$268,121	1.027	\$275,343	\$1.55
Radiology	\$298,354		\$298,354	\$3,154.71		\$301,508	1.123	\$338,511	\$1.91
Transportation/Ambulance	\$770,328		\$770,328	\$2,568.05		\$772,896	1.123	\$867,748	\$4.89
Provider Incentive Payment Adjustment									\$0.90
<b>Total</b>	<b>\$84,163,753</b>	<b>\$578,181</b>	<b>\$84,741,934</b>	<b>\$1,299,596</b>	<b>(\$528,991)</b>	<b>\$85,512,539</b>		<b>\$99,090,659</b>	<b>\$559.77</b>
Admin Cost Adjustment									\$57.89
<b>Medallion 3.0 Capitation Rate</b>									<b>\$617.66</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,583,804		\$1,583,804	\$16,746.94	(\$42,709)	\$1,557,842	1.123	\$1,749,024	\$2.45
FQHC / RHC	\$206,749		\$206,749	\$1,576.85		\$208,325	1.027	\$213,937	\$0.30
Home Health	\$743,052		\$743,052	\$9,505.58		\$752,558	1.138	\$856,386	\$1.20
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$8,477,610	\$403,023	\$8,880,633	\$181,622.76	(\$129,443)	\$8,932,813	1.230	\$10,990,112	\$15.42
IP - Psych	\$1,074,930		\$1,074,930	\$347.33	\$246,706	\$1,321,983	1.473	\$1,946,662	\$2.73
Lab	\$1,347,955		\$1,347,955	\$11,041.76		\$1,358,997	1.123	\$1,525,777	\$2.14
OP - Emergency Room & Related	\$8,673,201		\$8,673,201	\$110,952.86	\$99,241	\$8,883,395	1.138	\$10,109,006	\$14.19
OP - Other	\$14,200,216		\$14,200,216	\$181,657.80	\$157,772	\$14,539,646	1.138	\$16,545,631	\$23.22
Pharmacy	\$11,488,454		\$11,488,454	\$62.98	(\$95,912)	\$11,392,605	1.139	\$12,978,524	\$18.21
Prof - Anesthesia	\$555,269		\$555,269	\$4,234.99		\$559,504	1.027	\$574,575	\$0.81
Prof - Child EPSDT	\$1,039,145		\$1,039,145	\$7,925.47	(\$1,633)	\$1,045,437	1.027	\$1,073,596	\$1.51
Prof - Evaluation & Management	\$19,753,368		\$19,753,368	\$150,094.57	\$89,855	\$19,993,317	1.027	\$20,531,840	\$28.81
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$5,037,017		\$5,037,017	\$38,510.45	(\$7,917)	\$5,067,610	1.027	\$5,204,107	\$7.30
Prof - Psych	\$1,068,335		\$1,068,335	\$2,087.06	(\$1,670)	\$1,068,752	1.027	\$1,097,539	\$1.54
Prof - Specialist	\$2,062,989		\$2,062,989	\$15,734.24	(\$3,242)	\$2,075,481	1.027	\$2,131,384	\$2.99
Prof - Vision	\$1,102,530		\$1,102,530	\$2,128.36	(\$1,723)	\$1,102,935	1.027	\$1,132,643	\$1.59
Radiology	\$398,973		\$398,973	\$4,218.62		\$403,191	1.123	\$452,672	\$0.64
Transportation/Ambulance	\$2,591,529		\$2,591,529	\$4,914.24		\$2,596,443	1.123	\$2,915,086	\$4.09
Provider Incentive Payment Adjustment									\$0.21
<b>Total</b>	<b>\$81,405,124</b>	<b>\$403,023</b>	<b>\$81,808,147</b>	<b>\$743,363</b>	<b>\$309,325</b>	<b>\$82,860,835</b>		<b>\$92,028,502</b>	<b>\$129.36</b>
Admin Cost Adjustment									\$13.38
<b>Medallion 3.0 Capitation Rate</b>									<b>\$142.74</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,393,740		\$1,393,740	\$14,737.24	(\$36,074)	\$1,372,404	1.123	\$1,540,829	\$1.45
FQHC / RHC	\$267,858		\$267,858	\$2,042.93		\$269,901	1.027	\$277,171	\$0.26
Home Health	\$38,146		\$38,146	\$487.99		\$38,634	1.138	\$43,964	\$0.04
IP - Maternity	\$48,185	\$1,092	\$49,278	\$1,032	(\$719)	\$49,591	1.230	\$61,013	\$0.06
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$9,615,394	\$217,995	\$9,833,389	\$205,998.42	(\$143,401)	\$9,895,986	1.230	\$12,175,113	\$11.44
IP - Psych	\$3,936,852		\$3,936,852	\$19,010.19	\$907,611	\$4,863,473	1.473	\$7,161,621	\$6.73
Lab	\$1,562,791		\$1,562,791	\$11,673.86		\$1,574,465	1.123	\$1,767,688	\$1.66
OP - Emergency Room & Related	\$9,097,511		\$9,097,511	\$116,380.90	\$104,096	\$9,317,988	1.138	\$10,603,559	\$9.97
OP - Other	\$12,399,991		\$12,399,991	\$158,628.23	\$137,771	\$12,696,390	1.138	\$14,448,067	\$13.58
Pharmacy	\$32,681,279		\$32,681,279	\$179.17	(\$272,840)	\$32,408,619	1.139	\$36,920,093	\$34.70
Prof - Anesthesia	\$387,091		\$387,091	\$2,952.31		\$390,043	1.027	\$400,549	\$0.38
Prof - Child EPSDT	\$179,306		\$179,306	\$1,367.55	(\$282)	\$180,391	1.027	\$185,250	\$0.17
Prof - Evaluation & Management	\$19,478,103		\$19,478,103	\$147,730.52	\$88,601	\$19,714,435	1.027	\$20,245,446	\$19.03
Prof - Maternity	\$24,534		\$24,534	\$187	(\$39)	\$24,682	1.027	\$25,347	\$0.02
Prof - Other	\$7,567,912		\$7,567,912	\$57,872.43	(\$11,895)	\$7,613,890	1.027	\$7,818,971	\$7.35
Prof - Psych	\$3,126,426		\$3,126,426	\$14,941.55	(\$4,900)	\$3,136,467	1.027	\$3,220,949	\$3.03
Prof - Specialist	\$2,416,485		\$2,416,485	\$18,430.32	(\$3,798)	\$2,431,117	1.027	\$2,496,600	\$2.35
Prof - Vision	\$1,809,355		\$1,809,355	\$4,358.48	(\$2,829)	\$1,810,884	1.027	\$1,859,661	\$1.75
Radiology	\$847,084		\$847,084	\$8,956.89		\$856,040	1.123	\$961,096	\$0.90
Transportation/Ambulance	\$3,680,083		\$3,680,083	\$5,293.70		\$3,685,377	1.123	\$4,137,657	\$3.89
Provider Incentive Payment Adjustment									\$0.19
<b>Total</b>	<b>\$110,558,126</b>	<b>\$219,087</b>	<b>\$110,777,213</b>	<b>\$792,262</b>	<b>\$761,304</b>	<b>\$112,330,780</b>		<b>\$126,350,643</b>	<b>\$118.95</b>
Admin Cost Adjustment									\$12.30
<b>Medallion 3.0 Capitation Rate</b>									<b>\$131.25</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$303,448		\$303,448	\$3,208.62	(\$7,854)	\$298,803	1.123	\$335,473	\$1.80
FQHC / RHC	\$129,422		\$129,422	\$987.09		\$130,409	1.027	\$133,922	\$0.72
Home Health	\$31,912		\$31,912	\$408.24		\$32,320	1.138	\$36,780	\$0.20
IP - Maternity	\$4,549,097	\$225,582	\$4,774,678	\$97,459	(\$69,593)	\$4,802,544	1.230	\$5,908,610	\$31.70
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,290,375	\$113,576	\$2,403,951	\$49,068.57	(\$35,038)	\$2,417,981	1.230	\$2,974,861	\$15.96
IP - Psych	\$1,696,874		\$1,696,874	\$11,414.37	\$391,940	\$2,100,229	1.473	\$3,092,654	\$16.59
Lab	\$979,020		\$979,020	\$9,449.57		\$988,470	1.123	\$1,109,778	\$5.95
OP - Emergency Room & Related	\$4,573,450		\$4,573,450	\$58,506.35	\$52,331	\$4,684,287	1.138	\$5,330,562	\$28.59
OP - Other	\$4,581,939		\$4,581,939	\$58,614.96	\$50,908	\$4,691,462	1.138	\$5,338,727	\$28.64
Pharmacy	\$6,245,416		\$6,245,416	\$34.24	(\$52,140)	\$6,193,310	1.139	\$7,055,456	\$37.85
Prof - Anesthesia	\$331,051		\$331,051	\$2,524.90		\$333,576	1.027	\$342,561	\$1.84
Prof - Child EPSDT	\$55,508		\$55,508	\$423.35	(\$87)	\$55,844	1.027	\$57,348	\$0.31
Prof - Evaluation & Management	\$4,976,913		\$4,976,913	\$37,814.00	\$22,639	\$5,037,366	1.027	\$5,173,049	\$27.75
Prof - Maternity	\$2,387,590		\$2,387,590	\$18,210	(\$3,753)	\$2,402,047	1.027	\$2,466,747	\$13.23
Prof - Other	\$1,693,623		\$1,693,623	\$12,940.04	(\$2,662)	\$1,703,902	1.027	\$1,749,796	\$9.39
Prof - Psych	\$641,816		\$641,816	\$3,471.28	(\$1,007)	\$644,281	1.027	\$661,635	\$3.55
Prof - Specialist	\$730,255		\$730,255	\$5,569.59	(\$1,148)	\$734,677	1.027	\$754,466	\$4.05
Prof - Vision	\$320,927		\$320,927	\$770.98	(\$502)	\$321,196	1.027	\$329,848	\$1.77
Radiology	\$831,701		\$831,701	\$8,794.28		\$840,496	1.123	\$943,644	\$5.06
Transportation/Ambulance	\$870,434		\$870,434	\$3,362.90		\$873,797	1.123	\$981,032	\$5.26
Provider Incentive Payment Adjustment									\$0.38
<b>Total</b>	<b>\$38,220,773</b>	<b>\$339,157</b>	<b>\$38,559,930</b>	<b>\$383,032</b>	<b>\$344,035</b>	<b>\$39,286,998</b>		<b>\$44,776,947</b>	<b>\$240.58</b>
Admin Cost Adjustment									\$24.88
<b>Medallion 3.0 Capitation Rate</b>									<b>\$265.46</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,454,574		\$1,454,574	\$12,175.14	(\$19,320)	\$1,447,429	1.079	\$1,561,832	\$3.93
FQHC / RHC	\$582,472		\$582,472	\$5,706.73		\$588,178	0.996	\$585,547	\$1.47
Home Health	\$150,727		\$150,727	\$2,523.79		\$153,251	0.974	\$149,340	\$0.38
IP - Maternity	\$25,815,059	(\$45,503)	\$25,769,556	\$169,046	(\$370,502)	\$25,568,101	1.040	\$26,585,356	\$66.85
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$20,854,364	(\$36,759)	\$20,817,605	\$136,561.78	(\$299,305)	\$20,654,862	1.040	\$21,476,638	\$54.00
IP - Psych	\$2,281,108		\$2,281,108	\$8,527.59	\$525,321	\$2,814,956	1.188	\$3,343,278	\$8.41
Lab	\$3,726,629		\$3,726,629	\$29,638.00		\$3,756,267	1.079	\$4,053,157	\$10.19
OP - Emergency Room & Related	\$21,212,574		\$21,212,574	\$355,186.76	\$243,668	\$21,811,428	0.974	\$21,254,840	\$53.44
OP - Other	\$24,644,538		\$24,644,538	\$412,652.12	\$274,883	\$25,332,073	0.974	\$24,685,644	\$62.07
Pharmacy	\$33,169,333	\$262,760	\$33,432,093	\$106.30	\$1,220,831	\$34,653,030	1.011	\$35,042,704	\$88.11
Prof - Anesthesia	\$1,844,190		\$1,844,190	\$18,068.34		\$1,862,259	0.996	\$1,853,926	\$4.66
Prof - Child EPSDT	\$120,434		\$120,434	\$1,179.94	(\$190)	\$121,424	0.996	\$120,881	\$0.30
Prof - Evaluation & Management	\$16,682,442		\$16,682,442	\$163,059.32	\$76,049	\$16,921,551	0.996	\$16,845,837	\$42.36
Prof - Maternity	\$12,790,232		\$12,790,232	\$125,312	(\$20,146)	\$12,895,398	0.996	\$12,837,698	\$32.28
Prof - Other	\$5,986,226		\$5,986,226	\$58,705.15	(\$9,429)	\$6,035,502	0.996	\$6,008,497	\$15.11
Prof - Psych	\$1,229,339		\$1,229,339	\$8,218.32	(\$1,930)	\$1,235,627	0.996	\$1,230,098	\$3.09
Prof - Specialist	\$4,780,009		\$4,780,009	\$46,831.85	(\$7,529)	\$4,819,312	0.996	\$4,797,748	\$12.06
Prof - Vision	\$531,583		\$531,583	\$2,183.17	(\$833)	\$532,933	0.996	\$530,549	\$1.33
Radiology	\$5,183,754		\$5,183,754	\$43,389.26		\$5,227,143	1.079	\$5,640,289	\$14.18
Transportation/Ambulance	\$2,494,866		\$2,494,866	\$11,025.95		\$2,505,892	1.079	\$2,703,954	\$6.80
Provider Incentive Payment Adjustment									\$0.77
<b>Total</b>	<b>\$185,534,452</b>	<b>\$180,497</b>	<b>\$185,714,949</b>	<b>\$1,610,097</b>	<b>\$1,611,569</b>	<b>\$188,936,615</b>		<b>\$191,307,814</b>	<b>\$481.80</b>
Admin Cost Adjustment									\$46.64
<b>Medallion 3.0 Capitation Rate</b>									<b>\$528.44</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$342,639		\$342,639	\$3,623.02	(\$8,868)	\$337,394	1.123	\$378,800	\$2.38
FQHC / RHC	\$52,388		\$52,388	\$399.56		\$52,787	1.027	\$54,209	\$0.34
Home Health	\$7,025		\$7,025	\$89.87		\$7,115	1.138	\$8,097	\$0.05
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,894,319	(\$548,177)	\$2,346,143	\$62,007.36	(\$34,398)	\$2,373,753	1.230	\$2,920,447	\$18.32
IP - Psych	\$905,365		\$905,365	\$5,433.06	\$208,968	\$1,119,767	1.473	\$1,648,892	\$10.34
Lab	\$228,258		\$228,258	\$1,657.55		\$229,916	1.123	\$258,132	\$1.62
OP - Emergency Room & Related	\$2,210,449		\$2,210,449	\$28,277.41	\$25,293	\$2,264,019	1.138	\$2,576,378	\$16.16
OP - Other	\$2,618,154		\$2,618,154	\$33,493.02	\$29,089	\$2,680,736	1.138	\$3,050,588	\$19.13
Pharmacy	\$5,000,311		\$5,000,311	\$27.41	(\$41,745)	\$4,958,593	1.139	\$5,648,859	\$35.43
Prof - Anesthesia	\$85,330		\$85,330	\$650.81		\$85,981	1.027	\$88,297	\$0.55
Prof - Child EPSDT	\$22,693		\$22,693	\$173.08	(\$36)	\$22,831	1.027	\$23,446	\$0.15
Prof - Evaluation & Management	\$2,557,475		\$2,557,475	\$19,378.72	\$11,633	\$2,588,487	1.027	\$2,658,208	\$16.67
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$2,860,866		\$2,860,866	\$21,839.20	(\$4,496)	\$2,878,208	1.027	\$2,955,733	\$18.54
Prof - Psych	\$486,076		\$486,076	\$2,455.13	(\$762)	\$487,769	1.027	\$500,907	\$3.14
Prof - Specialist	\$604,096		\$604,096	\$4,607.39	(\$949)	\$607,754	1.027	\$624,124	\$3.91
Prof - Vision	\$252,878		\$252,878	\$489.14	(\$395)	\$252,972	1.027	\$259,786	\$1.63
Radiology	\$250,215		\$250,215	\$2,645.73		\$252,860	1.123	\$283,892	\$1.78
Transportation/Ambulance	\$596,694		\$596,694	\$1,316.44		\$598,010	1.123	\$671,400	\$4.21
Provider Incentive Payment Adjustment									\$0.25
Total	\$21,975,231	(\$548,177)	\$21,427,055	\$188,564	\$183,334	\$21,798,952		\$24,610,195	\$154.62
Admin Cost Adjustment									\$15.99
<b>Medallion 3.0 Capitation Rate</b>									<b>\$170.60</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$216,519		\$216,519	\$1,812.32	(\$2,876)	\$215,456	1.079	\$232,485	\$5.10
FQHC / RHC	\$25,850		\$25,850	\$253.27		\$26,103	0.996	\$25,987	\$0.57
Home Health	\$26,302		\$26,302	\$440.41		\$26,743	0.974	\$26,060	\$0.57
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$3,163,279	\$13,600	\$3,176,879	\$20,714.27	(\$45,674)	\$3,151,920	1.040	\$3,277,322	\$71.91
IP - Psych	\$368,850		\$368,850	\$1,480.53	\$84,966	\$455,297	1.188	\$540,748	\$11.86
Lab	\$112,707		\$112,707	\$770.85		\$113,478	1.079	\$122,447	\$2.69
OP - Emergency Room & Related	\$1,615,337		\$1,615,337	\$27,047.47	\$18,555	\$1,660,940	0.974	\$1,618,556	\$35.51
OP - Other	\$1,734,995		\$1,734,995	\$29,051.03	\$19,352	\$1,783,398	0.974	\$1,737,889	\$38.13
Pharmacy	\$3,367,064	\$26,673	\$3,393,738	\$10.79	\$123,928	\$3,517,677	1.011	\$3,557,233	\$78.05
Prof - Anesthesia	\$61,587		\$61,587	\$603.40		\$62,191	0.996	\$61,912	\$1.36
Prof - Child EPSDT	\$7,779		\$7,779	\$76.21	(\$12)	\$7,843	0.996	\$7,808	\$0.17
Prof - Evaluation & Management	\$1,295,586		\$1,295,586	\$12,652.44	\$5,906	\$1,314,144	0.996	\$1,308,264	\$28.70
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$457,558		\$457,558	\$4,493.07	(\$721)	\$461,330	0.996	\$459,266	\$10.08
Prof - Psych	\$108,602		\$108,602	\$605.15	(\$170)	\$109,037	0.996	\$108,549	\$2.38
Prof - Specialist	\$391,695		\$391,695	\$3,837.61	(\$617)	\$394,916	0.996	\$393,149	\$8.63
Prof - Vision	\$56,169		\$56,169	\$212.14	(\$88)	\$56,294	0.996	\$56,042	\$1.23
Radiology	\$225,332		\$225,332	\$1,886.07		\$227,218	1.079	\$245,177	\$5.38
Transportation/Ambulance	\$240,727		\$240,727	\$867.22		\$241,594	1.079	\$260,689	\$5.72
Provider Incentive Payment Adjustment									\$0.49
<b>Total</b>	<b>\$13,475,940</b>	<b>\$40,273</b>	<b>\$13,516,213</b>	<b>\$106,814</b>	<b>\$202,550</b>	<b>\$13,825,577</b>		<b>\$14,039,584</b>	<b>\$308.53</b>
Admin Cost Adjustment									\$29.86
<b>Medallion 3.0 Capitation Rate</b>									<b>\$338.40</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$454,100		\$454,100	\$3,800.93	(\$6,031)	\$451,870	1.079	\$487,585	\$9.76
FQHC / RHC	\$79,218		\$79,218	\$776.13		\$79,994	0.996	\$79,636	\$1.59
Home Health	\$97,551		\$97,551	\$1,633.41		\$99,184	0.974	\$96,653	\$1.94
IP - Maternity	\$25,344	\$63	\$25,407	\$166	(\$365)	\$25,208	1.040	\$26,211	\$0.52
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$8,275,638	\$20,574	\$8,296,212	\$54,191.81	(\$119,275)	\$8,231,128	1.040	\$8,558,613	\$171.38
IP - Psych	\$545,475		\$545,475	\$2,326.50	\$125,685	\$673,486	1.188	\$799,889	\$16.02
Lab	\$318,729		\$318,729	\$2,469.12		\$321,198	1.079	\$346,585	\$6.94
OP - Emergency Room & Related	\$2,253,610		\$2,253,610	\$37,734.81	\$25,887	\$2,317,232	0.974	\$2,258,100	\$45.22
OP - Other	\$5,011,604		\$5,011,604	\$83,915.10	\$55,899	\$5,151,418	0.974	\$5,019,963	\$100.52
Pharmacy	\$9,248,686	\$73,266	\$9,321,952	\$29.64	\$340,407	\$9,662,389	1.011	\$9,771,043	\$195.66
Prof - Anesthesia	\$156,789		\$156,789	\$1,536.13		\$158,325	0.996	\$157,617	\$3.16
Prof - Child EPSDT	\$16,632		\$16,632	\$162.95	(\$26)	\$16,769	0.996	\$16,694	\$0.33
Prof - Evaluation & Management	\$2,684,542		\$2,684,542	\$26,254.15	\$12,238	\$2,723,034	0.996	\$2,710,850	\$54.28
Prof - Maternity	\$9,175		\$9,175	\$90	(\$14)	\$9,250	0.996	\$9,209	\$0.18
Prof - Other	\$1,177,788		\$1,177,788	\$11,547.03	(\$1,855)	\$1,187,480	0.996	\$1,182,167	\$23.67
Prof - Psych	\$232,480		\$232,480	\$1,814.49	(\$365)	\$233,929	0.996	\$232,883	\$4.66
Prof - Specialist	\$1,127,628		\$1,127,628	\$11,047.87	(\$1,776)	\$1,136,900	0.996	\$1,131,813	\$22.66
Prof - Vision	\$123,214		\$123,214	\$826.05	(\$193)	\$123,847	0.996	\$123,293	\$2.47
Radiology	\$597,209		\$597,209	\$4,998.78		\$602,208	1.079	\$649,805	\$13.01
Transportation/Ambulance	\$377,111		\$377,111	\$1,918.78		\$379,030	1.079	\$408,988	\$8.19
Provider Incentive Payment Adjustment									\$1.09
<b>Total</b>	<b>\$32,812,523</b>	<b>\$93,903</b>	<b>\$32,906,426</b>	<b>\$247,240</b>	<b>\$430,213</b>	<b>\$33,583,879</b>		<b>\$34,067,595</b>	<b>\$683.28</b>
Admin Cost Adjustment									\$66.14
<b>Medallion 3.0 Capitation Rate</b>									<b>\$749.41</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$321,409		\$321,409	\$3,398.54	(\$8,667)	\$316,140	1.123	\$354,938	\$3.96
FQHC / RHC	\$231,634		\$231,634	\$1,766.65		\$233,401	1.027	\$239,687	\$2.68
Home Health	\$23,746		\$23,746	\$303.78		\$24,050	1.138	\$27,368	\$0.31
IP - Maternity	\$2,550	(\$30)	\$2,520	\$55	(\$37)	\$2,537	1.230	\$3,121	\$0.03
IP - Newborn	\$20,873,136	(\$247,192)	\$20,625,944	\$447,182.22	(\$306,166)	\$20,766,961	1.230	\$25,549,761	\$285.22
IP - Other	\$3,464,674	(\$41,126)	\$3,423,548	\$74,226.53	(\$50,818)	\$3,446,956	1.230	\$4,240,818	\$47.34
IP - Psych	\$122,779		\$122,779	\$35.24	\$28,178	\$150,992	1.473	\$222,341	\$2.48
Lab	\$159,750		\$159,750	\$1,335.29		\$161,086	1.123	\$180,855	\$2.02
OP - Emergency Room & Related	\$1,365,828		\$1,365,828	\$17,472.51	\$15,922	\$1,399,223	1.138	\$1,592,269	\$17.78
OP - Other	\$1,971,178		\$1,971,178	\$25,216.51	\$24,556	\$2,020,951	1.138	\$2,299,774	\$25.67
Pharmacy	\$1,600,380		\$1,600,380	\$8.77	(\$13,361)	\$1,587,028	1.139	\$1,807,952	\$20.18
Prof - Anesthesia	\$116,752		\$116,752	\$890.46		\$117,642	1.027	\$120,811	\$1.35
Prof - Child EPSDT	\$470,377		\$470,377	\$3,587.52	(\$739)	\$473,225	1.027	\$485,971	\$5.43
Prof - Evaluation & Management	\$9,166,589		\$9,166,589	\$69,720.53	\$41,698	\$9,278,007	1.027	\$9,527,912	\$106.36
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$1,334,112		\$1,334,112	\$10,202.26	(\$2,097)	\$1,342,217	1.027	\$1,378,370	\$15.39
Prof - Psych	\$91,206		\$91,206	\$0.00	(\$142)	\$91,064	1.027	\$93,516	\$1.04
Prof - Specialist	\$674,197		\$674,197	\$5,142.04	(\$1,060)	\$678,279	1.027	\$696,549	\$7.78
Prof - Vision	\$155,529		\$155,529	\$304.69	(\$243)	\$155,591	1.027	\$159,782	\$1.78
Radiology	\$166,981		\$166,981	\$1,755.51		\$168,737	1.123	\$189,445	\$2.11
Transportation/Ambulance	\$538,366		\$538,366	\$2,930.54		\$541,297	1.123	\$607,726	\$6.78
Provider Incentive Payment Adjustment									\$0.89
Total	\$42,851,175	(\$288,348)	\$42,562,827	\$665,534	(\$272,977)	\$42,955,385		\$49,778,968	\$556.59
Admin Cost Adjustment									\$57.56
<b>Medallion 3.0 Capitation Rate</b>									<b>\$614.15</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$515,483		\$515,483	\$5,450.65	(\$13,901)	\$507,033	1.123	\$569,258	\$1.71
FQHC / RHC	\$294,320		\$294,320	\$2,244.75		\$296,565	1.027	\$304,553	\$0.91
Home Health	\$55,107		\$55,107	\$704.96		\$55,812	1.138	\$63,512	\$0.19
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$3,990,879	\$189,180	\$4,180,059	\$85,499.86	(\$61,973)	\$4,203,586	1.230	\$5,171,706	\$15.52
IP - Psych	\$479,183		\$479,183	\$128.17	\$109,971	\$589,282	1.473	\$867,737	\$2.60
Lab	\$585,462		\$585,462	\$4,936.20		\$590,398	1.123	\$662,853	\$1.99
OP - Emergency Room & Related	\$3,325,768		\$3,325,768	\$42,545.25	\$38,770	\$3,407,083	1.138	\$3,877,147	\$11.64
OP - Other	\$6,535,906		\$6,535,906	\$83,611.28	\$81,420	\$6,700,937	1.138	\$7,625,443	\$22.89
Pharmacy	\$5,436,479		\$5,436,479	\$29.80	(\$45,387)	\$5,391,122	1.139	\$6,141,598	\$18.43
Prof - Anesthesia	\$347,366		\$347,366	\$2,649.33		\$350,015	1.027	\$359,443	\$1.08
Prof - Child EPSDT	\$417,081		\$417,081	\$3,181.04	(\$656)	\$419,606	1.027	\$430,908	\$1.29
Prof - Evaluation & Management	\$9,261,511		\$9,261,511	\$69,901.99	\$42,127	\$9,373,540	1.027	\$9,626,018	\$28.89
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$2,551,264		\$2,551,264	\$19,581.99	(\$4,010)	\$2,566,836	1.027	\$2,635,974	\$7.91
Prof - Psych	\$496,085		\$496,085	\$1,061.72	(\$775)	\$496,371	1.027	\$509,741	\$1.53
Prof - Specialist	\$869,585		\$869,585	\$6,632.25	(\$1,367)	\$874,851	1.027	\$898,415	\$2.70
Prof - Vision	\$553,529		\$553,529	\$966.05	(\$865)	\$553,630	1.027	\$568,542	\$1.71
Radiology	\$183,046		\$183,046	\$1,894.96		\$184,941	1.123	\$207,637	\$0.62
Transportation/Ambulance	\$1,405,717		\$1,405,717	\$4,489.60		\$1,410,206	1.123	\$1,583,271	\$4.75
Provider Incentive Payment Adjustment									\$0.20
<b>Total</b>	<b>\$37,303,769</b>	<b>\$189,180</b>	<b>\$37,492,949</b>	<b>\$335,510</b>	<b>\$143,355</b>	<b>\$37,971,814</b>		<b>\$42,103,755</b>	<b>\$126.57</b>
Admin Cost Adjustment									\$13.09
<b>Medallion 3.0 Capitation Rate</b>									<b>\$139.66</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$508,333		\$508,333	\$5,375.05	(\$13,157)	\$500,551	1.123	\$561,980	\$1.06
FQHC / RHC	\$386,761		\$386,761	\$2,949.80		\$389,711	1.027	\$400,208	\$0.76
Home Health	\$78,695		\$78,695	\$1,006.71		\$79,701	1.138	\$90,697	\$0.17
IP - Maternity	\$28,821	(\$1,789)	\$27,032	\$617	(\$402)	\$27,248	1.230	\$33,523	\$0.06
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$4,451,452	(\$276,154)	\$4,175,298	\$95,367.08	(\$62,047)	\$4,208,618	1.230	\$5,177,897	\$9.79
IP - Psych	\$1,302,465		\$1,302,465	\$4,114.43	\$299,774	\$1,606,354	1.473	\$2,365,408	\$4.47
Lab	\$736,270		\$736,270	\$5,882.51		\$742,152	1.123	\$833,231	\$1.58
OP - Emergency Room & Related	\$3,940,357		\$3,940,357	\$50,407.45	\$45,935	\$4,036,699	1.138	\$4,593,629	\$8.69
OP - Other	\$6,739,147		\$6,739,147	\$86,211.26	\$83,952	\$6,909,310	1.138	\$7,862,564	\$14.87
Pharmacy	\$18,260,120		\$18,260,120	\$100.11	(\$152,445)	\$18,107,775	1.139	\$20,628,487	\$39.02
Prof - Anesthesia	\$210,614		\$210,614	\$1,606.34		\$212,221	1.027	\$217,937	\$0.41
Prof - Child EPSDT	\$84,070		\$84,070	\$641.20	(\$132)	\$84,579	1.027	\$86,857	\$0.16
Prof - Evaluation & Management	\$9,687,221		\$9,687,221	\$72,745.20	\$44,062	\$9,804,028	1.027	\$10,068,101	\$19.04
Prof - Maternity	\$11,270		\$11,270	\$86	(\$18)	\$11,339	1.027	\$11,644	\$0.02
Prof - Other	\$3,154,031		\$3,154,031	\$24,280.73	(\$4,958)	\$3,173,354	1.027	\$3,258,829	\$6.16
Prof - Psych	\$1,470,670		\$1,470,670	\$6,641.00	(\$2,304)	\$1,475,007	1.027	\$1,514,737	\$2.87
Prof - Specialist	\$1,142,127		\$1,142,127	\$8,710.90	(\$1,795)	\$1,149,043	1.027	\$1,179,993	\$2.23
Prof - Vision	\$976,973		\$976,973	\$2,272.62	(\$1,527)	\$977,718	1.027	\$1,004,053	\$1.90
Radiology	\$418,855		\$418,855	\$4,366.22		\$423,221	1.123	\$475,160	\$0.90
Transportation/Ambulance	\$2,167,088		\$2,167,088	\$6,251.43		\$2,173,340	1.123	\$2,440,058	\$4.62
Provider Incentive Payment Adjustment									\$0.19
<b>Total</b>	<b>\$55,755,341</b>	<b>(\$277,943)</b>	<b>\$55,477,398</b>	<b>\$379,633</b>	<b>\$234,938</b>	<b>\$56,091,970</b>		<b>\$62,804,993</b>	<b>\$118.98</b>
Admin Cost Adjustment									\$12.30
<b>Medallion 3.0 Capitation Rate</b>									<b>\$131.29</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$158,885		\$158,885	\$1,680.03	(\$4,112)	\$156,453	1.123	\$175,653	\$1.85
FQHC / RHC	\$218,444		\$218,444	\$1,666.06		\$220,110	1.027	\$226,039	\$2.38
Home Health	\$33,338		\$33,338	\$426.48		\$33,765	1.138	\$38,423	\$0.40
IP - Maternity	\$2,464,454	\$122,186	\$2,586,639	\$52,798	(\$38,348)	\$2,601,090	1.230	\$3,200,142	\$33.68
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,215,460	\$60,272	\$1,275,733	\$26,039.80	(\$18,913)	\$1,282,860	1.230	\$1,578,313	\$16.61
IP - Psych	\$464,711		\$464,711	\$2,524.43	\$107,200	\$574,435	1.473	\$845,875	\$8.90
Lab	\$529,419		\$529,419	\$5,252.19		\$534,671	1.123	\$600,287	\$6.32
OP - Emergency Room & Related	\$2,066,856		\$2,066,856	\$26,440.48	\$24,094	\$2,117,391	1.138	\$2,409,520	\$25.36
OP - Other	\$2,499,252		\$2,499,252	\$31,971.96	\$31,134	\$2,562,359	1.138	\$2,915,878	\$30.69
Pharmacy	\$3,338,990		\$3,338,990	\$18.31	(\$27,876)	\$3,311,133	1.139	\$3,772,062	\$39.70
Prof - Anesthesia	\$171,987		\$171,987	\$1,311.73		\$173,299	1.027	\$177,967	\$1.87
Prof - Child EPSDT	\$54,178		\$54,178	\$413.21	(\$85)	\$54,506	1.027	\$55,974	\$0.59
Prof - Evaluation & Management	\$2,651,351		\$2,651,351	\$20,039.25	\$12,060	\$2,683,450	1.027	\$2,755,729	\$29.00
Prof - Maternity	\$1,443,117		\$1,443,117	\$11,007	(\$2,268)	\$1,451,856	1.027	\$1,490,962	\$15.69
Prof - Other	\$809,730		\$809,730	\$6,218.75	(\$1,273)	\$814,676	1.027	\$836,619	\$8.80
Prof - Psych	\$336,215		\$336,215	\$1,723.50	(\$527)	\$337,411	1.027	\$346,499	\$3.65
Prof - Specialist	\$392,678		\$392,678	\$2,994.92	(\$617)	\$395,056	1.027	\$405,697	\$4.27
Prof - Vision	\$185,729		\$185,729	\$481.44	(\$290)	\$185,920	1.027	\$190,928	\$2.01
Radiology	\$475,193		\$475,193	\$5,015.31		\$480,208	1.123	\$539,141	\$5.67
Transportation/Ambulance	\$514,979		\$514,979	\$2,431.00		\$517,410	1.123	\$580,909	\$6.11
Provider Incentive Payment Adjustment									\$0.39
<b>Total</b>	<b>\$20,024,967</b>	<b>\$182,458</b>	<b>\$20,207,426</b>	<b>\$200,453</b>	<b>\$80,179</b>	<b>\$20,488,058</b>		<b>\$23,142,617</b>	<b>\$243.95</b>
Admin Cost Adjustment									\$25.23
<b>Medallion 3.0 Capitation Rate</b>									<b>\$269.18</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$659,892		\$659,892	\$5,523.46	(\$8,765)	\$656,651	1.079	\$708,552	\$3.83
FQHC / RHC	\$894,383		\$894,383	\$8,762.66		\$903,145	0.996	\$899,104	\$4.86
Home Health	\$321,845		\$321,845	\$5,389.02		\$327,234	0.974	\$318,883	\$1.73
IP - Maternity	\$13,090,603	\$56,257	\$13,146,860	\$85,722	(\$189,012)	\$13,043,571	1.040	\$13,562,524	\$73.38
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$8,585,619	\$36,912	\$8,622,532	\$56,221.68	(\$123,966)	\$8,554,788	1.040	\$8,895,150	\$48.12
IP - Psych	\$896,003		\$896,003	\$3,075.01	\$206,280	\$1,105,358	1.188	\$1,312,816	\$7.10
Lab	\$1,820,262		\$1,820,262	\$14,664.20		\$1,834,926	1.079	\$1,979,956	\$10.71
OP - Emergency Room & Related	\$7,976,175		\$7,976,175	\$133,554.35	\$91,622	\$8,201,351	0.974	\$7,992,067	\$43.24
OP - Other	\$12,397,292		\$12,397,292	\$207,582.26	\$138,278	\$12,743,153	0.974	\$12,417,970	\$67.18
Pharmacy	\$15,746,436	\$124,740	\$15,871,176	\$50.46	\$579,563	\$16,450,790	1.011	\$16,635,779	\$90.00
Prof - Anesthesia	\$881,362		\$881,362	\$8,635.09		\$889,997	0.996	\$886,015	\$4.79
Prof - Child EPSDT	\$111,323		\$111,323	\$1,090.68	(\$175)	\$112,238	0.996	\$111,736	\$0.60
Prof - Evaluation & Management	\$7,586,055		\$7,586,055	\$73,859.25	\$34,581	\$7,694,495	0.996	\$7,660,067	\$41.44
Prof - Maternity	\$6,904,605		\$6,904,605	\$67,647	(\$10,875)	\$6,961,377	0.996	\$6,930,229	\$37.49
Prof - Other	\$2,617,622		\$2,617,622	\$25,730.43	(\$4,123)	\$2,639,229	0.996	\$2,627,420	\$14.21
Prof - Psych	\$570,534		\$570,534	\$3,655.28	(\$896)	\$573,294	0.996	\$570,729	\$3.09
Prof - Specialist	\$2,332,638		\$2,332,638	\$22,853.88	(\$3,674)	\$2,351,818	0.996	\$2,341,295	\$12.67
Prof - Vision	\$284,725		\$284,725	\$1,267.41	(\$446)	\$285,546	0.996	\$284,269	\$1.54
Radiology	\$2,379,601		\$2,379,601	\$19,903.44		\$2,399,505	1.079	\$2,589,158	\$14.01
Transportation/Ambulance	\$1,488,147		\$1,488,147	\$7,893.77		\$1,496,040	1.079	\$1,614,285	\$8.73
Provider Incentive Payment Adjustment									\$0.78
<b>Total</b>	<b>\$87,545,123</b>	<b>\$217,909</b>	<b>\$87,763,032</b>	<b>\$753,082</b>	<b>\$708,392</b>	<b>\$89,224,506</b>		<b>\$90,338,004</b>	<b>\$489.53</b>
Admin Cost Adjustment									\$47.38
<b>Medallion 3.0 Capitation Rate</b>									<b>\$536.91</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$150,662		\$150,662	\$1,593.08	(\$3,900)	\$148,355	1.123	\$166,562	\$2.04
FQHC / RHC	\$66,845		\$66,845	\$509.82		\$67,354	1.027	\$69,169	\$0.85
Home Health	\$19,488		\$19,488	\$249.30		\$19,737	1.138	\$22,460	\$0.27
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$919,406	\$45,592	\$964,997	\$19,697.18	(\$14,306)	\$970,388	1.230	\$1,193,877	\$14.60
IP - Psych	\$282,230		\$282,230	\$1,197.81	\$65,028	\$348,456	1.473	\$513,112	\$6.27
Lab	\$106,344		\$106,344	\$835.02		\$107,179	1.123	\$120,333	\$1.47
OP - Emergency Room & Related	\$941,541		\$941,541	\$12,044.77	\$10,976	\$964,562	1.138	\$1,097,639	\$13.42
OP - Other	\$1,402,850		\$1,402,850	\$17,946.11	\$17,476	\$1,438,272	1.138	\$1,636,705	\$20.01
Pharmacy	\$3,064,358		\$3,064,358	\$16.80	(\$25,583)	\$3,038,792	1.139	\$3,461,811	\$42.32
Prof - Anesthesia	\$40,082		\$40,082	\$305.70		\$40,388	1.027	\$41,475	\$0.51
Prof - Child EPSDT	\$11,721		\$11,721	\$89.40	(\$18)	\$11,792	1.027	\$12,110	\$0.15
Prof - Evaluation & Management	\$1,294,024		\$1,294,024	\$9,723.40	\$5,886	\$1,309,633	1.027	\$1,344,909	\$16.44
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$555,169		\$555,169	\$4,276.55	(\$873)	\$558,573	1.027	\$573,618	\$7.01
Prof - Psych	\$213,309		\$213,309	\$864.94	(\$334)	\$213,840	1.027	\$219,600	\$2.68
Prof - Specialist	\$267,596		\$267,596	\$2,040.93	(\$421)	\$269,217	1.027	\$276,468	\$3.38
Prof - Vision	\$139,926		\$139,926	\$268.44	(\$219)	\$139,976	1.027	\$143,746	\$1.76
Radiology	\$116,970		\$116,970	\$1,229.40		\$118,199	1.123	\$132,705	\$1.62
Transportation/Ambulance	\$354,379		\$354,379	\$1,109.27		\$355,488	1.123	\$399,114	\$4.88
Provider Incentive Payment Adjustment									\$0.22
<b>Total</b>	<b>\$9,946,900</b>	<b>\$45,592</b>	<b>\$9,992,492</b>	<b>\$73,998</b>	<b>\$53,713</b>	<b>\$10,120,202</b>		<b>\$11,425,413</b>	<b>\$139.90</b>
Admin Cost Adjustment									\$14.47
<b>Medallion 3.0 Capitation Rate</b>									<b>\$154.37</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$119,946		\$119,946	\$1,003.98	(\$1,593)	\$119,357	1.079	\$128,791	\$4.95
FQHC / RHC	\$26,840		\$26,840	\$262.96		\$27,103	0.996	\$26,982	\$1.04
Home Health	\$35,921		\$35,921	\$601.46		\$36,522	0.974	\$35,590	\$1.37
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$1,607,734	\$6,912	\$1,614,646	\$10,528.01	(\$23,214)	\$1,601,960	1.040	\$1,665,696	\$64.03
IP - Psych	\$188,842		\$188,842	\$752.36	\$43,499	\$233,094	1.188	\$276,841	\$10.64
Lab	\$63,759		\$63,759	\$448.29		\$64,208	1.079	\$69,282	\$2.66
OP - Emergency Room & Related	\$985,802		\$985,802	\$16,506.43	\$11,324	\$1,013,633	0.974	\$987,767	\$37.97
OP - Other	\$1,402,030		\$1,402,030	\$23,475.81	\$15,638	\$1,441,144	0.974	\$1,404,368	\$53.99
Pharmacy	\$2,004,800	\$15,882	\$2,020,682	\$6.43	\$73,789	\$2,094,477	1.011	\$2,118,029	\$81.42
Prof - Anesthesia	\$41,770		\$41,770	\$409.24		\$42,179	0.996	\$41,990	\$1.61
Prof - Child EPSDT	\$9,793		\$9,793	\$95.95	(\$15)	\$9,874	0.996	\$9,829	\$0.38
Prof - Evaluation & Management	\$767,634		\$767,634	\$7,449.91	\$3,499	\$778,583	0.996	\$775,099	\$29.80
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$181,231		\$181,231	\$1,782.23	(\$285)	\$182,728	0.996	\$181,910	\$6.99
Prof - Psych	\$62,806		\$62,806	\$371.55	(\$99)	\$63,079	0.996	\$62,797	\$2.41
Prof - Specialist	\$274,997		\$274,997	\$2,694.27	(\$433)	\$277,259	0.996	\$276,018	\$10.61
Prof - Vision	\$37,273		\$37,273	\$139.30	(\$58)	\$37,354	0.996	\$37,186	\$1.43
Radiology	\$141,149		\$141,149	\$1,179.28		\$142,328	1.079	\$153,577	\$5.90
Transportation/Ambulance	\$183,964		\$183,964	\$917.13		\$184,881	1.079	\$199,494	\$7.67
Provider Incentive Payment Adjustment									\$0.52
<b>Total</b>	<b>\$8,136,291</b>	<b>\$22,794</b>	<b>\$8,159,085</b>	<b>\$68,625</b>	<b>\$122,051</b>	<b>\$8,349,761</b>		<b>\$8,451,249</b>	<b>\$325.41</b>
Admin Cost Adjustment									\$31.50
<b>Medallion 3.0 Capitation Rate</b>									<b>\$356.90</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$304,111		\$304,111	\$2,545.48	(\$4,039)	\$302,617	1.079	\$326,536	\$14.13
FQHC / RHC	\$124,462		\$124,462	\$1,219.41		\$125,681	0.996	\$125,119	\$5.41
Home Health	\$93,385		\$93,385	\$1,563.66		\$94,949	0.974	\$92,526	\$4.00
IP - Maternity	\$5,844	(\$260)	\$5,584	\$38	(\$80)	\$5,542	1.040	\$5,762	\$0.25
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$4,254,305	(\$189,324)	\$4,064,980	\$27,858.70	(\$58,461)	\$4,034,378	1.040	\$4,194,890	\$181.47
IP - Psych	\$130,671		\$130,671	\$478.69	\$30,090	\$161,240	1.188	\$191,502	\$8.28
Lab	\$140,600		\$140,600	\$1,102.18		\$141,702	1.079	\$152,902	\$6.61
OP - Emergency Room & Related	\$857,782		\$857,782	\$14,362.83	\$9,853	\$881,998	0.974	\$859,491	\$37.18
OP - Other	\$2,766,834		\$2,766,834	\$46,328.32	\$30,861	\$2,844,023	0.974	\$2,771,449	\$119.89
Pharmacy	\$4,295,656	\$34,029	\$4,329,685	\$13.77	\$158,106	\$4,487,805	1.011	\$4,538,270	\$196.33
Prof - Anesthesia	\$84,379		\$84,379	\$826.70		\$85,206	0.996	\$84,825	\$3.67
Prof - Child EPSDT	\$9,831		\$9,831	\$96.31	(\$15)	\$9,911	0.996	\$9,867	\$0.43
Prof - Evaluation & Management	\$1,178,990		\$1,178,990	\$11,496.43	\$5,374	\$1,195,860	0.996	\$1,190,510	\$51.50
Prof - Maternity	\$4,196		\$4,196	\$41	(\$7)	\$4,231	0.996	\$4,212	\$0.18
Prof - Other	\$366,880		\$366,880	\$3,605.41	(\$578)	\$369,908	0.996	\$368,252	\$15.93
Prof - Psych	\$65,723		\$65,723	\$409.33	(\$103)	\$66,030	0.996	\$65,734	\$2.84
Prof - Specialist	\$563,719		\$563,719	\$5,523.01	(\$888)	\$568,354	0.996	\$565,811	\$24.48
Prof - Vision	\$59,671		\$59,671	\$397.99	(\$94)	\$59,975	0.996	\$59,707	\$2.58
Radiology	\$274,579		\$274,579	\$2,296.59		\$276,875	1.079	\$298,759	\$12.92
Transportation/Ambulance	\$226,583		\$226,583	\$1,323.45		\$227,906	1.079	\$245,919	\$10.64
Provider Incentive Payment Adjustment									\$1.12
Total	\$15,808,200	(\$155,555)	\$15,652,645	\$121,528	\$170,019	\$15,944,192		\$16,152,044	\$699.86
Admin Cost Adjustment									\$67.74
<b>Medallion 3.0 Capitation Rate</b>									<b>\$767.60</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$459,056		\$459,056	\$4,854.00	(\$12,379)	\$451,531	1.123	\$506,944	\$2.52
FQHC / RHC	\$58,501		\$58,501	\$446.18		\$58,947	1.027	\$60,534	\$0.30
Home Health	\$174,281		\$174,281	\$2,229.51		\$176,510	1.138	\$200,863	\$1.00
IP - Maternity	\$2,783	(\$33)	\$2,750	\$60	(\$43)	\$2,766	1.230	\$3,403	\$0.02
IP - Newborn	\$51,611,174	(\$617,841)	\$50,993,334	\$1,105,708.27	(\$805,939)	\$51,293,103	1.230	\$63,106,321	\$313.67
IP - Other	\$5,455,436	(\$65,307)	\$5,390,128	\$116,876.25	(\$85,190)	\$5,421,815	1.230	\$6,670,503	\$33.16
IP - Psych	\$301,862		\$301,862	\$0.00	\$69,258	\$371,120	1.473	\$546,486	\$2.72
Lab	\$408,389		\$408,389	\$2,053.51		\$410,443	1.123	\$460,814	\$2.29
OP - Emergency Room & Related	\$4,005,855		\$4,005,855	\$51,245.34	\$58,993	\$4,116,093	1.138	\$4,683,976	\$23.28
OP - Other	\$5,356,261		\$5,356,261	\$68,520.55	\$105,188	\$5,529,970	1.138	\$6,292,920	\$31.28
Pharmacy	\$3,003,348		\$3,003,348	\$16.47	(\$25,073)	\$2,978,291	1.139	\$3,392,887	\$16.86
Prof - Anesthesia	\$363,665		\$363,665	\$2,773.64		\$366,438	1.027	\$376,309	\$1.87
Prof - Child EPSDT	\$1,324,871		\$1,324,871	\$10,104.67	(\$2,082)	\$1,332,893	1.027	\$1,368,795	\$6.80
Prof - Evaluation & Management	\$21,055,960		\$21,055,960	\$160,466.10	\$95,782	\$21,312,208	1.027	\$21,886,256	\$108.79
Prof - Maternity	\$3,146		\$3,146	\$24	(\$5)	\$3,165	1.027	\$3,251	\$0.02
Prof - Other	\$3,611,219		\$3,611,219	\$27,799.30	(\$5,676)	\$3,633,342	1.027	\$3,731,206	\$18.55
Prof - Psych	\$233,543		\$233,543	\$6.05	(\$364)	\$233,185	1.027	\$239,466	\$1.19
Prof - Specialist	\$1,822,566		\$1,822,566	\$13,900.55	(\$2,865)	\$1,833,602	1.027	\$1,882,990	\$9.36
Prof - Vision	\$363,128		\$363,128	\$772.62	(\$568)	\$363,333	1.027	\$373,119	\$1.85
Radiology	\$301,359		\$301,359	\$3,186.51		\$304,545	1.123	\$341,920	\$1.70
Transportation/Ambulance	\$832,929		\$832,929	\$2,126.72		\$835,055	1.123	\$937,536	\$4.66
Provider Incentive Payment Adjustment									\$0.93
Total	\$100,749,332	(\$683,181)	\$100,066,150	\$1,573,170	(\$610,965)	\$101,028,355		\$117,066,499	\$582.82
Admin Cost Adjustment									\$60.27
<b>Medallion 3.0 Capitation Rate</b>									<b>\$643.09</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,447,375		\$1,447,375	\$15,304.36	(\$39,030)	\$1,423,649	1.123	\$1,598,363	\$2.06
FQHC / RHC	\$123,702		\$123,702	\$943.46		\$124,645	1.027	\$128,002	\$0.16
Home Health	\$471,065		\$471,065	\$6,026.15		\$477,091	1.138	\$542,914	\$0.70
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$7,709,927	(\$511,565)	\$7,198,362	\$165,176.06	(\$113,909)	\$7,249,629	1.230	\$8,919,277	\$11.48
IP - Psych	\$1,262,847		\$1,262,847	\$221.39	\$289,791	\$1,552,860	1.473	\$2,286,636	\$2.94
Lab	\$1,682,718		\$1,682,718	\$8,876.80		\$1,691,595	1.123	\$1,899,192	\$2.44
OP - Emergency Room & Related	\$10,548,172		\$10,548,172	\$134,938.63	\$155,339	\$10,838,449	1.138	\$12,333,792	\$15.87
OP - Other	\$15,659,582		\$15,659,582	\$200,326.90	\$307,527	\$16,167,436	1.138	\$18,398,002	\$23.67
Pharmacy	\$12,086,417		\$12,086,417	\$66.26	(\$100,904)	\$11,985,579	1.139	\$13,654,044	\$17.57
Prof - Anesthesia	\$735,717		\$735,717	\$5,611.25		\$741,328	1.027	\$761,296	\$0.98
Prof - Child EPSDT	\$1,036,627		\$1,036,627	\$7,906.26	(\$1,629)	\$1,042,904	1.027	\$1,070,995	\$1.38
Prof - Evaluation & Management	\$19,774,919		\$19,774,919	\$150,356.72	\$89,953	\$20,015,229	1.027	\$20,554,342	\$26.45
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$5,814,392		\$5,814,392	\$45,429.06	(\$9,140)	\$5,850,681	1.027	\$6,008,270	\$7.73
Prof - Psych	\$1,170,398		\$1,170,398	\$1,666.01	(\$1,828)	\$1,170,236	1.027	\$1,201,757	\$1.55
Prof - Specialist	\$2,026,964		\$2,026,964	\$15,459.48	(\$3,186)	\$2,039,238	1.027	\$2,094,165	\$2.69
Prof - Vision	\$1,223,865		\$1,223,865	\$1,639.88	(\$1,912)	\$1,223,594	1.027	\$1,256,551	\$1.62
Radiology	\$393,788		\$393,788	\$4,163.82		\$397,952	1.123	\$446,790	\$0.57
Transportation/Ambulance	\$2,822,330		\$2,822,330	\$3,720.49		\$2,826,051	1.123	\$3,172,872	\$4.08
Provider Incentive Payment Adjustment									\$0.20
<b>Total</b>	<b>\$85,990,805</b>	<b>(\$511,565)</b>	<b>\$85,479,240</b>	<b>\$767,833</b>	<b>\$571,072</b>	<b>\$86,818,146</b>		<b>\$96,327,261</b>	<b>\$124.15</b>
Admin Cost Adjustment									\$12.84
<b>Medallion 3.0 Capitation Rate</b>									<b>\$136.99</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,563,134		\$1,563,134	\$16,528.38	(\$40,458)	\$1,539,204	1.123	\$1,728,100	\$1.49
FQHC / RHC	\$141,847		\$141,847	\$1,081.85		\$142,929	1.027	\$146,778	\$0.13
Home Health	\$41,097		\$41,097	\$525.74		\$41,623	1.138	\$47,365	\$0.04
IP - Maternity	\$58,572	\$1,072	\$59,644	\$1,255	(\$942)	\$59,956	1.230	\$73,765	\$0.06
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$7,096,629	\$129,871	\$7,226,500	\$152,036.87	(\$114,141)	\$7,264,396	1.230	\$8,937,445	\$7.68
IP - Psych	\$3,295,445		\$3,295,445	\$10,035.29	\$758,391	\$4,063,871	1.473	\$5,984,181	\$5.14
Lab	\$2,182,715		\$2,182,715	\$9,327.99		\$2,192,043	1.123	\$2,461,057	\$2.12
OP - Emergency Room & Related	\$10,997,747		\$10,997,747	\$140,689.87	\$161,959	\$11,300,396	1.138	\$12,859,473	\$11.05
OP - Other	\$15,878,989		\$15,878,989	\$203,133.69	\$311,836	\$16,393,959	1.138	\$18,655,777	\$16.04
Pharmacy	\$41,229,042		\$41,229,042	\$226.03	(\$344,201)	\$40,885,067	1.139	\$46,576,514	\$40.04
Prof - Anesthesia	\$561,200		\$561,200	\$4,280.22		\$565,480	1.027	\$580,712	\$0.50
Prof - Child EPSDT	\$209,321		\$209,321	\$1,596.48	(\$329)	\$210,589	1.027	\$216,261	\$0.19
Prof - Evaluation & Management	\$20,156,245		\$20,156,245	\$153,111.49	\$91,687	\$20,401,044	1.027	\$20,950,549	\$18.01
Prof - Maternity	\$30,774		\$30,774	\$235	(\$48)	\$30,961	1.027	\$31,795	\$0.03
Prof - Other	\$7,913,728		\$7,913,728	\$62,186.17	(\$12,441)	\$7,963,473	1.027	\$8,177,970	\$7.03
Prof - Psych	\$3,166,838		\$3,166,838	\$12,295.04	(\$4,959)	\$3,174,174	1.027	\$3,259,671	\$2.80
Prof - Specialist	\$2,726,136		\$2,726,136	\$20,792.00	(\$4,285)	\$2,742,643	1.027	\$2,816,517	\$2.42
Prof - Vision	\$1,830,351		\$1,830,351	\$2,499.52	(\$2,859)	\$1,829,991	1.027	\$1,879,282	\$1.62
Radiology	\$762,288		\$762,288	\$8,060.30		\$770,349	1.123	\$864,888	\$0.74
Transportation/Ambulance	\$4,142,548		\$4,142,548	\$3,798.35		\$4,146,347	1.123	\$4,655,199	\$4.00
Provider Incentive Payment Adjustment									\$0.19
<b>Total</b>	<b>\$123,984,647</b>	<b>\$130,943</b>	<b>\$124,115,590</b>	<b>\$803,695</b>	<b>\$799,210</b>	<b>\$125,718,495</b>		<b>\$140,903,298</b>	<b>\$121.32</b>
Admin Cost Adjustment									\$12.55
<b>Medallion 3.0 Capitation Rate</b>									<b>\$133.87</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$474,251		\$474,251	\$5,014.68	(\$12,275)	\$466,991	1.123	\$524,302	\$2.49
FQHC / RHC	\$106,566		\$106,566	\$812.77		\$107,379	1.027	\$110,271	\$0.52
Home Health	\$23,619		\$23,619	\$302.15		\$23,922	1.138	\$27,222	\$0.13
IP - Maternity	\$5,438,807	\$269,701	\$5,708,508	\$116,520	(\$90,109)	\$5,734,918	1.230	\$7,055,717	\$33.45
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,350,248	\$116,545	\$2,466,792	\$50,351.27	(\$38,939)	\$2,478,205	1.230	\$3,048,956	\$14.46
IP - Psych	\$1,046,980		\$1,046,980	\$5,255.61	\$241,419	\$1,293,655	1.473	\$1,904,948	\$9.03
Lab	\$753,769		\$753,769	\$5,445.16		\$759,214	1.123	\$852,387	\$4.04
OP - Emergency Room & Related	\$5,679,173		\$5,679,173	\$72,651.44	\$83,635	\$5,835,459	1.138	\$6,640,557	\$31.48
OP - Other	\$5,250,507		\$5,250,507	\$67,167.68	\$103,111	\$5,420,785	1.138	\$6,168,672	\$29.25
Pharmacy	\$8,267,482		\$8,267,482	\$45.33	(\$69,021)	\$8,198,506	1.139	\$9,339,788	\$44.28
Prof - Anesthesia	\$468,777		\$468,777	\$3,575.32		\$472,352	1.027	\$485,075	\$2.30
Prof - Child EPSDT	\$141,523		\$141,523	\$1,079.38	(\$222)	\$142,380	1.027	\$146,215	\$0.69
Prof - Evaluation & Management	\$5,119,436		\$5,119,436	\$38,942.25	\$23,288	\$5,181,666	1.027	\$5,321,235	\$25.23
Prof - Maternity	\$3,113,794		\$3,113,794	\$23,749	(\$4,894)	\$3,132,649	1.027	\$3,217,027	\$15.25
Prof - Other	\$2,140,122		\$2,140,122	\$16,670.42	(\$3,364)	\$2,153,428	1.027	\$2,211,431	\$10.48
Prof - Psych	\$675,395		\$675,395	\$2,933.26	(\$1,058)	\$677,271	1.027	\$695,513	\$3.30
Prof - Specialist	\$987,927		\$987,927	\$7,534.83	(\$1,553)	\$993,909	1.027	\$1,020,680	\$4.84
Prof - Vision	\$341,582		\$341,582	\$535.44	(\$534)	\$341,584	1.027	\$350,785	\$1.66
Radiology	\$1,007,064		\$1,007,064	\$10,648.57		\$1,017,713	1.123	\$1,142,610	\$5.42
Transportation/Ambulance	\$927,494		\$927,494	\$2,472.76		\$929,966	1.123	\$1,044,094	\$4.95
Provider Incentive Payment Adjustment									\$0.39
<b>Total</b>	<b>\$44,314,517</b>	<b>\$386,245</b>	<b>\$44,700,762</b>	<b>\$431,707</b>	<b>\$229,483</b>	<b>\$45,361,952</b>		<b>\$51,307,484</b>	<b>\$243.65</b>
Admin Cost Adjustment									\$25.20
<b>Medallion 3.0 Capitation Rate</b>									<b>\$268.85</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,509,549		\$2,509,549	\$21,005.54	(\$33,332)	\$2,497,223	1.079	\$2,694,600	\$5.48
FQHC / RHC	\$1,645,694		\$1,645,694	\$16,123.59		\$1,661,818	0.996	\$1,654,382	\$3.36
Home Health	\$303,962		\$303,962	\$5,089.59		\$309,052	0.974	\$301,165	\$0.61
IP - Maternity	\$32,417,078	\$139,372	\$32,556,450	\$212,279	(\$468,062)	\$32,300,667	1.040	\$33,585,785	\$68.31
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$18,399,918	\$79,107	\$18,479,026	\$120,489.19	(\$265,672)	\$18,333,843	1.040	\$19,063,276	\$38.77
IP - Psych	\$1,834,792		\$1,834,792	\$4,997.36	\$422,111	\$2,261,900	1.188	\$2,686,423	\$5.46
Lab	\$2,942,717		\$2,942,717	\$20,130.74		\$2,962,847	1.079	\$3,197,027	\$6.50
OP - Emergency Room & Related	\$27,722,164		\$27,722,164	\$464,184.39	\$318,443	\$28,504,792	0.974	\$27,777,401	\$56.50
OP - Other	\$22,433,353		\$22,433,353	\$375,627.67	\$250,219	\$23,059,200	0.974	\$22,470,771	\$45.70
Pharmacy	\$37,280,016	\$295,324	\$37,575,340	\$119.48	\$1,372,129	\$38,947,588	1.011	\$39,385,555	\$80.11
Prof - Anesthesia	\$2,673,511		\$2,673,511	\$26,193.56		\$2,699,704	0.996	\$2,687,625	\$5.47
Prof - Child EPSDT	\$345,686		\$345,686	\$3,386.84	(\$544)	\$348,528	0.996	\$346,969	\$0.71
Prof - Evaluation & Management	\$18,475,467		\$18,475,467	\$180,664.65	\$84,223	\$18,740,356	0.996	\$18,656,503	\$37.95
Prof - Maternity	\$17,619,588		\$17,619,588	\$172,627	(\$27,753)	\$17,764,463	0.996	\$17,684,977	\$35.97
Prof - Other	\$8,827,503		\$8,827,503	\$87,394.80	(\$13,906)	\$8,900,992	0.996	\$8,861,165	\$18.02
Prof - Psych	\$1,498,946		\$1,498,946	\$8,681.55	(\$2,352)	\$1,505,276	0.996	\$1,498,541	\$3.05
Prof - Specialist	\$6,836,918		\$6,836,918	\$66,984.29	(\$10,769)	\$6,893,134	0.996	\$6,862,291	\$13.96
Prof - Vision	\$574,038		\$574,038	\$2,247.99	(\$899)	\$575,387	0.996	\$572,813	\$1.17
Radiology	\$6,715,978		\$6,715,978	\$56,214.37		\$6,772,192	1.079	\$7,307,457	\$14.86
Transportation/Ambulance	\$2,649,381		\$2,649,381	\$8,967.90		\$2,658,349	1.079	\$2,868,461	\$5.83
Provider Incentive Payment Adjustment									\$0.72
<b>Total</b>	<b>\$213,706,260</b>	<b>\$513,803</b>	<b>\$214,220,063</b>	<b>\$1,853,409</b>	<b>\$1,623,838</b>	<b>\$217,697,310</b>		<b>\$220,163,185</b>	<b>\$448.50</b>
Admin Cost Adjustment									\$43.41
<b>Medallion 3.0 Capitation Rate</b>									<b>\$491.92</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$391,418		\$391,418	\$4,138.81	(\$10,131)	\$385,426	1.123	\$432,727	\$2.45
FQHC / RHC	\$27,691		\$27,691	\$211.20		\$27,902	1.027	\$28,654	\$0.16
Home Health	\$34,229		\$34,229	\$437.88		\$34,667	1.138	\$39,450	\$0.22
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,028,081	\$100,569	\$2,128,650	\$43,449.24	(\$33,601)	\$2,138,498	1.230	\$2,631,012	\$14.92
IP - Psych	\$676,074		\$676,074	\$2,863.11	\$155,772	\$834,709	1.473	\$1,229,136	\$6.97
Lab	\$310,301		\$310,301	\$1,177.19		\$311,478	1.123	\$349,703	\$1.98
OP - Emergency Room & Related	\$2,467,102		\$2,467,102	\$31,560.66	\$36,332	\$2,534,994	1.138	\$2,884,739	\$16.35
OP - Other	\$4,041,377		\$4,041,377	\$51,699.75	\$79,366	\$4,172,443	1.138	\$4,748,100	\$26.92
Pharmacy	\$7,447,716		\$7,447,716	\$40.83	(\$62,177)	\$7,385,579	1.139	\$8,413,696	\$47.70
Prof - Anesthesia	\$115,938		\$115,938	\$884.25		\$116,822	1.027	\$119,969	\$0.68
Prof - Child EPSDT	\$31,462		\$31,462	\$239.96	(\$49)	\$31,653	1.027	\$32,505	\$0.18
Prof - Evaluation & Management	\$2,665,015		\$2,665,015	\$20,239.87	\$12,123	\$2,697,377	1.027	\$2,770,032	\$15.70
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$2,380,267		\$2,380,267	\$18,441.41	(\$3,742)	\$2,394,967	1.027	\$2,459,476	\$13.94
Prof - Psych	\$484,467		\$484,467	\$1,865.08	(\$759)	\$485,574	1.027	\$498,653	\$2.83
Prof - Specialist	\$714,843		\$714,843	\$5,452.04	(\$1,124)	\$719,171	1.027	\$738,542	\$4.19
Prof - Vision	\$279,834		\$279,834	\$404.84	(\$437)	\$279,801	1.027	\$287,338	\$1.63
Radiology	\$220,082		\$220,082	\$2,327.11		\$222,409	1.123	\$249,704	\$1.42
Transportation/Ambulance	\$682,691		\$682,691	\$1,097.46		\$683,789	1.123	\$767,705	\$4.35
Provider Incentive Payment Adjustment									\$0.26
<b>Total</b>	<b>\$24,998,588</b>	<b>\$100,569</b>	<b>\$25,099,157</b>	<b>\$186,531</b>	<b>\$171,572</b>	<b>\$25,457,260</b>		<b>\$28,681,140</b>	<b>\$162.86</b>
Admin Cost Adjustment									\$16.84
<b>Medallion 3.0 Capitation Rate</b>									<b>\$179.70</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$308,092		\$308,092	\$2,578.81	(\$4,092)	\$306,579	1.079	\$330,811	\$7.83
FQHC / RHC	\$161,796		\$161,796	\$1,585.19		\$163,381	0.996	\$162,650	\$3.85
Home Health	\$19,125		\$19,125	\$320.22		\$19,445	0.974	\$18,949	\$0.45
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$3,220,024	(\$285,642)	\$2,934,382	\$21,085.86	(\$42,215)	\$2,913,253	1.040	\$3,029,160	\$71.67
IP - Psych	\$135,869		\$135,869	\$343.00	\$31,252	\$167,463	1.188	\$198,893	\$4.71
Lab	\$103,493		\$103,493	\$486.57		\$103,980	1.079	\$112,198	\$2.65
OP - Emergency Room & Related	\$1,563,216		\$1,563,216	\$26,174.73	\$17,957	\$1,607,347	0.974	\$1,566,330	\$37.06
OP - Other	\$1,790,449		\$1,790,449	\$29,979.56	\$19,970	\$1,840,399	0.974	\$1,793,435	\$42.43
Pharmacy	\$3,103,984	\$24,589	\$3,128,573	\$9.95	\$114,245	\$3,242,828	1.011	\$3,279,294	\$77.59
Prof - Anesthesia	\$72,084		\$72,084	\$706.24		\$72,790	0.996	\$72,465	\$1.71
Prof - Child EPSDT	\$9,736		\$9,736	\$95.39	(\$15)	\$9,816	0.996	\$9,772	\$0.23
Prof - Evaluation & Management	\$1,145,111		\$1,145,111	\$11,188.58	\$5,220	\$1,161,520	0.996	\$1,156,322	\$27.36
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$398,347		\$398,347	\$3,974.41	(\$628)	\$401,694	0.996	\$399,897	\$9.46
Prof - Psych	\$111,025		\$111,025	\$600.59	(\$174)	\$111,451	0.996	\$110,952	\$2.63
Prof - Specialist	\$507,733		\$507,733	\$4,974.48	(\$800)	\$511,907	0.996	\$509,617	\$12.06
Prof - Vision	\$48,175		\$48,175	\$175.49	(\$75)	\$48,275	0.996	\$48,059	\$1.14
Radiology	\$211,749		\$211,749	\$1,772.39		\$213,521	1.079	\$230,398	\$5.45
Transportation/Ambulance	\$193,461		\$193,461	\$495.61		\$193,957	1.079	\$209,287	\$4.95
Provider Incentive Payment Adjustment									\$0.50
<b>Total</b>	\$13,103,468	(\$261,053)	\$12,842,415	\$106,547	\$140,645	\$13,089,606		\$13,238,489	\$313.71
Admin Cost Adjustment									\$30.37
<b>Medallion 3.0 Capitation Rate</b>									<b>\$344.08</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$710,510		\$710,510	\$5,947.14	(\$9,437)	\$707,020	1.079	\$762,902	\$15.41
FQHC / RHC	\$237,666		\$237,666	\$2,328.52		\$239,995	0.996	\$238,921	\$4.82
Home Health	\$122,583		\$122,583	\$2,052.56		\$124,636	0.974	\$121,456	\$2.45
IP - Maternity	\$42,132	(\$1,098)	\$41,034	\$276	(\$590)	\$40,720	1.040	\$42,340	\$0.85
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$6,250,764	(\$162,829)	\$6,087,935	\$40,932.22	(\$87,543)	\$6,041,323	1.040	\$6,281,684	\$126.85
IP - Psych	\$241,726		\$241,726	\$756.43	\$55,634	\$298,117	1.188	\$354,068	\$7.15
Lab	\$257,325		\$257,325	\$1,690.98		\$259,016	1.079	\$279,488	\$5.64
OP - Emergency Room & Related	\$2,468,833		\$2,468,833	\$41,338.54	\$28,359	\$2,538,531	0.974	\$2,473,753	\$49.95
OP - Other	\$5,568,883		\$5,568,883	\$93,246.27	\$62,115	\$5,724,244	0.974	\$5,578,171	\$112.64
Pharmacy	\$8,832,528	\$69,969	\$8,902,498	\$28.31	\$325,090	\$9,227,616	1.011	\$9,331,381	\$188.43
Prof - Anesthesia	\$208,097		\$208,097	\$2,038.82		\$210,136	0.996	\$209,195	\$4.22
Prof - Child EPSDT	\$35,039		\$35,039	\$343.30	(\$55)	\$35,328	0.996	\$35,169	\$0.71
Prof - Evaluation & Management	\$2,723,510		\$2,723,510	\$26,653.95	\$12,416	\$2,762,579	0.996	\$2,750,218	\$55.54
Prof - Maternity	\$6,925		\$6,925	\$68	(\$11)	\$6,982	0.996	\$6,951	\$0.14
Prof - Other	\$1,554,547		\$1,554,547	\$15,329.91	(\$2,449)	\$1,567,428	0.996	\$1,560,415	\$31.51
Prof - Psych	\$187,361		\$187,361	\$1,198.76	(\$294)	\$188,266	0.996	\$187,423	\$3.78
Prof - Specialist	\$1,371,939		\$1,371,939	\$13,441.49	(\$2,161)	\$1,383,220	0.996	\$1,377,031	\$27.81
Prof - Vision	\$120,258		\$120,258	\$855.07	(\$189)	\$120,924	0.996	\$120,383	\$2.43
Radiology	\$699,899		\$699,899	\$5,858.32		\$705,757	1.079	\$761,539	\$15.38
Transportation/Ambulance	\$270,846		\$270,846	\$908.61		\$271,754	1.079	\$293,233	\$5.92
Provider Incentive Payment Adjustment									\$1.06
Total	\$31,911,371	(\$93,957)	\$31,817,414	\$255,293	\$380,884	\$32,453,591		\$32,765,722	\$662.71
Admin Cost Adjustment									\$64.15
<b>Medallion 3.0 Capitation Rate</b>									<b>\$726.86</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$364,878		\$364,878	\$3,858.17	(\$9,839)	\$358,897	1.123	\$402,942	\$4.41
FQHC / RHC	\$204,177		\$204,177	\$1,557.24		\$205,735	1.027	\$211,276	\$2.31
Home Health	\$57,021		\$57,021	\$729.45		\$57,751	1.138	\$65,718	\$0.72
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$19,446,005	\$413,236	\$19,859,241	\$416,607.62	(\$289,616)	\$19,986,232	1.230	\$24,589,224	\$268.83
IP - Other	\$2,340,140	\$49,739	\$2,389,879	\$50,134.73	(\$34,853)	\$2,405,161	1.230	\$2,959,089	\$32.35
IP - Psych	\$59,554		\$59,554	\$18.34	\$13,668	\$73,240	1.473	\$107,849	\$1.18
Lab	\$203,971		\$203,971	\$1,741.58		\$205,712	1.123	\$230,958	\$2.53
OP - Emergency Room & Related	\$969,916		\$969,916	\$12,407.75	\$11,098	\$993,422	1.138	\$1,130,481	\$12.36
OP - Other	\$912,338		\$912,338	\$11,671.19	\$10,137	\$934,146	1.138	\$1,063,027	\$11.62
Pharmacy	\$1,958,839		\$1,958,839	\$10.74	(\$16,353)	\$1,942,496	1.139	\$2,212,904	\$24.19
Prof - Anesthesia	\$92,068		\$92,068	\$702.20		\$92,770	1.027	\$95,269	\$1.04
Prof - Child EPSDT	\$486,473		\$486,473	\$3,710.29	(\$765)	\$489,418	1.027	\$502,601	\$5.49
Prof - Evaluation & Management	\$9,191,345		\$9,191,345	\$68,466.41	\$41,804	\$9,301,615	1.027	\$9,552,156	\$104.43
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$2,221,489		\$2,221,489	\$16,868.06	(\$3,491)	\$2,234,866	1.027	\$2,295,062	\$25.09
Prof - Psych	\$44,550		\$44,550	\$3.31	(\$69)	\$44,484	1.027	\$45,682	\$0.50
Prof - Specialist	\$607,341		\$607,341	\$4,632.14	(\$955)	\$611,018	1.027	\$627,476	\$6.86
Prof - Vision	\$178,348		\$178,348	\$355.53	(\$279)	\$178,425	1.027	\$183,231	\$2.00
Radiology	\$135,113		\$135,113	\$1,421.07		\$136,534	1.123	\$153,290	\$1.68
Transportation/Ambulance	\$481,817		\$481,817	\$2,868.04		\$484,685	1.123	\$544,167	\$5.95
Provider Incentive Payment Adjustment									\$0.82
<b>Total</b>	<b>\$39,955,383</b>	<b>\$462,975</b>	<b>\$40,418,358</b>	<b>\$597,764</b>	<b>(\$279,514)</b>	<b>\$40,736,607</b>		<b>\$46,972,400</b>	<b>\$514.36</b>
Admin Cost Adjustment									\$53.19
<b>Medallion 3.0 Capitation Rate</b>									<b>\$567.55</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$564,122		\$564,122	\$5,964.95	(\$15,212)	\$554,875	1.123	\$622,970	\$1.85
FQHC / RHC	\$254,947		\$254,947	\$1,944.46		\$256,891	1.027	\$263,811	\$0.78
Home Health	\$31,366		\$31,366	\$401.25		\$31,767	1.138	\$36,150	\$0.11
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$4,795,140	(\$597,183)	\$4,197,957	\$102,730.18	(\$61,430)	\$4,239,257	1.230	\$5,215,592	\$15.46
IP - Psych	\$217,404		\$217,404	\$313.49	\$49,952	\$267,670	1.473	\$394,152	\$1.17
Lab	\$769,189		\$769,189	\$6,527.73		\$775,716	1.123	\$870,915	\$2.58
OP - Emergency Room & Related	\$2,704,411		\$2,704,411	\$34,596.47	\$30,945	\$2,769,952	1.138	\$3,152,112	\$9.34
OP - Other	\$3,786,289		\$3,786,289	\$48,436.51	\$42,068	\$3,876,793	1.138	\$4,411,661	\$13.08
Pharmacy	\$5,724,829		\$5,724,829	\$31.39	(\$47,794)	\$5,677,066	1.139	\$6,467,348	\$19.17
Prof - Anesthesia	\$235,286		\$235,286	\$1,794.51		\$237,081	1.027	\$243,467	\$0.72
Prof - Child EPSDT	\$403,153		\$403,153	\$3,074.82	(\$634)	\$405,595	1.027	\$416,519	\$1.23
Prof - Evaluation & Management	\$10,369,403		\$10,369,403	\$72,552.40	\$47,140	\$10,489,096	1.027	\$10,771,621	\$31.93
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$3,639,663		\$3,639,663	\$27,435.99	(\$5,720)	\$3,661,379	1.027	\$3,759,998	\$11.15
Prof - Psych	\$431,405		\$431,405	\$2,246.75	(\$676)	\$432,975	1.027	\$444,637	\$1.32
Prof - Specialist	\$990,162		\$990,162	\$7,551.88	(\$1,556)	\$996,157	1.027	\$1,022,989	\$3.03
Prof - Vision	\$662,593		\$662,593	\$1,258.51	(\$1,035)	\$662,816	1.027	\$680,669	\$2.02
Radiology	\$179,254		\$179,254	\$1,869.66		\$181,124	1.123	\$203,352	\$0.60
Transportation/Ambulance	\$1,059,899		\$1,059,899	\$3,394.03		\$1,063,293	1.123	\$1,193,784	\$3.54
Provider Incentive Payment Adjustment									\$0.19
<b>Total</b>	<b>\$36,818,513</b>	<b>(\$597,183)</b>	<b>\$36,221,330</b>	<b>\$322,125</b>	<b>\$36,047</b>	<b>\$36,579,502</b>		<b>\$40,171,748</b>	<b>\$119.27</b>
Admin Cost Adjustment									\$12.33
<b>Medallion 3.0 Capitation Rate</b>									<b>\$131.60</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$579,445		\$579,445	\$6,126.98	(\$14,998)	\$570,575	1.123	\$640,597	\$1.25
FQHC / RHC	\$323,709		\$323,709	\$2,468.90		\$326,177	1.027	\$334,963	\$0.65
Home Health	\$26,538		\$26,538	\$339.49		\$26,878	1.138	\$30,586	\$0.06
IP - Maternity	\$21,408	\$1,062	\$22,470	\$459	(\$328)	\$22,601	1.230	\$27,806	\$0.05
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$3,297,947	\$163,539	\$3,461,486	\$70,654.61	(\$50,452)	\$3,481,689	1.230	\$4,283,550	\$8.36
IP - Psych	\$2,244,745		\$2,244,745	\$16,093.31	\$518,714	\$2,779,553	1.473	\$4,092,981	\$7.99
Lab	\$1,074,494		\$1,074,494	\$8,706.63		\$1,083,201	1.123	\$1,216,135	\$2.37
OP - Emergency Room & Related	\$3,010,282		\$3,010,282	\$38,509.36	\$34,445	\$3,083,236	1.138	\$3,508,619	\$6.85
OP - Other	\$3,671,981		\$3,671,981	\$46,974.21	\$40,798	\$3,759,753	1.138	\$4,278,473	\$8.35
Pharmacy	\$22,463,781		\$22,463,781	\$123.15	(\$187,539)	\$22,276,365	1.139	\$25,377,368	\$49.54
Prof - Anesthesia	\$161,757		\$161,757	\$1,233.70		\$162,990	1.027	\$167,380	\$0.33
Prof - Child EPSDT	\$88,374		\$88,374	\$674.02	(\$139)	\$88,910	1.027	\$91,304	\$0.18
Prof - Evaluation & Management	\$12,242,981		\$12,242,981	\$82,019.00	\$55,641	\$12,380,641	1.027	\$12,714,116	\$24.82
Prof - Maternity	\$11,830		\$11,830	\$90	(\$19)	\$11,902	1.027	\$12,222	\$0.02
Prof - Other	\$2,555,031		\$2,555,031	\$18,889.09	(\$4,015)	\$2,569,905	1.027	\$2,639,126	\$5.15
Prof - Psych	\$1,893,349		\$1,893,349	\$13,301.59	(\$2,974)	\$1,903,676	1.027	\$1,954,952	\$3.82
Prof - Specialist	\$1,254,670		\$1,254,670	\$9,569.26	(\$1,972)	\$1,262,267	1.027	\$1,296,267	\$2.53
Prof - Vision	\$1,062,370		\$1,062,370	\$2,080.04	(\$1,660)	\$1,062,789	1.027	\$1,091,416	\$2.13
Radiology	\$451,539		\$451,539	\$4,748.60		\$456,287	1.123	\$512,284	\$1.00
Transportation/Ambulance	\$1,615,772		\$1,615,772	\$6,104.78		\$1,621,876	1.123	\$1,820,918	\$3.55
Provider Incentive Payment Adjustment									\$0.21
<b>Total</b>	<b>\$58,052,002</b>	<b>\$164,601</b>	<b>\$58,216,602</b>	<b>\$329,166</b>	<b>\$385,503</b>	<b>\$58,931,271</b>		<b>\$66,091,063</b>	<b>\$129.24</b>
Admin Cost Adjustment									\$13.36
<b>Medallion 3.0 Capitation Rate</b>									<b>\$142.60</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$201,833		\$201,833	\$2,134.16	(\$5,224)	\$198,743	1.123	\$223,133	\$2.29
FQHC / RHC	\$122,953		\$122,953	\$937.75		\$123,891	1.027	\$127,228	\$1.31
Home Health	\$39,032		\$39,032	\$499.32		\$39,531	1.138	\$44,985	\$0.46
IP - Maternity	\$3,142,041	\$155,808	\$3,297,849	\$67,315	(\$48,067)	\$3,317,096	1.230	\$4,081,051	\$41.89
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,326,615	\$65,784	\$1,392,399	\$28,421.15	(\$20,295)	\$1,400,526	1.230	\$1,723,078	\$17.69
IP - Psych	\$897,463		\$897,463	\$6,717.38	\$207,450	\$1,111,630	1.473	\$1,636,911	\$16.80
Lab	\$829,252		\$829,252	\$8,282.16		\$837,535	1.123	\$940,319	\$9.65
OP - Emergency Room & Related	\$1,625,906		\$1,625,906	\$20,799.58	\$18,604	\$1,665,310	1.138	\$1,895,066	\$19.45
OP - Other	\$2,116,117		\$2,116,117	\$27,070.66	\$23,511	\$2,166,699	1.138	\$2,465,631	\$25.31
Pharmacy	\$5,253,539		\$5,253,539	\$28.80	(\$43,859)	\$5,209,708	1.139	\$5,934,931	\$60.91
Prof - Anesthesia	\$196,856		\$196,856	\$1,501.40		\$198,357	1.027	\$203,700	\$2.09
Prof - Child EPSDT	\$67,927		\$67,927	\$518.08	(\$107)	\$68,339	1.027	\$70,179	\$0.72
Prof - Evaluation & Management	\$3,402,287		\$3,402,287	\$23,939.35	\$15,468	\$3,441,694	1.027	\$3,534,396	\$36.28
Prof - Maternity	\$1,870,079		\$1,870,079	\$14,263	(\$2,939)	\$1,881,402	1.027	\$1,932,078	\$19.83
Prof - Other	\$1,086,119		\$1,086,119	\$8,181.79	(\$1,707)	\$1,092,594	1.027	\$1,122,023	\$11.52
Prof - Psych	\$372,426		\$372,426	\$2,597.40	(\$585)	\$374,438	1.027	\$384,524	\$3.95
Prof - Specialist	\$431,784		\$431,784	\$3,293.18	(\$679)	\$434,398	1.027	\$446,099	\$4.58
Prof - Vision	\$194,259		\$194,259	\$364.13	(\$304)	\$194,320	1.027	\$199,554	\$2.05
Radiology	\$587,158		\$587,158	\$6,201.48		\$593,359	1.123	\$666,178	\$6.84
Transportation/Ambulance	\$423,112		\$423,112	\$2,288.81		\$425,401	1.123	\$477,607	\$4.90
Provider Incentive Payment Adjustment									\$0.46
<b>Total</b>	<b>\$24,186,757</b>	<b>\$221,593</b>	<b>\$24,408,350</b>	<b>\$225,354</b>	<b>\$141,268</b>	<b>\$24,774,971</b>		<b>\$28,108,673</b>	<b>\$288.96</b>
Admin Cost Adjustment									\$29.88
<b>Medallion 3.0 Capitation Rate</b>									<b>\$318.84</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$729,866		\$729,866	\$6,109.16	(\$9,694)	\$726,281	1.079	\$783,685	\$4.14
FQHC / RHC	\$282,337		\$282,337	\$2,766.18		\$285,103	0.996	\$283,827	\$1.50
Home Health	\$175,365		\$175,365	\$2,936.34		\$178,301	0.974	\$173,751	\$0.92
IP - Maternity	\$13,571,700	\$39,670	\$13,611,370	\$88,872	(\$195,691)	\$13,504,551	1.040	\$14,041,845	\$74.24
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$9,639,501	\$28,196	\$9,667,697	\$63,122.87	(\$138,993)	\$9,591,827	1.040	\$9,973,448	\$52.73
IP - Psych	\$1,350,890		\$1,350,890	\$6,026.84	\$311,324	\$1,668,241	1.188	\$1,981,343	\$10.48
Lab	\$3,151,154		\$3,151,154	\$25,659.55		\$3,176,814	1.079	\$3,427,905	\$18.12
OP - Emergency Room & Related	\$5,658,973		\$5,658,973	\$94,754.75	\$65,004	\$5,818,732	0.974	\$5,670,248	\$29.98
OP - Other	\$11,090,054		\$11,090,054	\$185,693.64	\$123,697	\$11,399,445	0.974	\$11,108,551	\$58.73
Pharmacy	\$19,635,823	\$155,551	\$19,791,374	\$62.93	\$722,716	\$20,514,153	1.011	\$20,744,835	\$109.68
Prof - Anesthesia	\$838,750		\$838,750	\$8,217.61		\$846,968	0.996	\$843,178	\$4.46
Prof - Child EPSDT	\$162,333		\$162,333	\$1,590.45	(\$256)	\$163,668	0.996	\$162,935	\$0.86
Prof - Evaluation & Management	\$9,121,959		\$9,121,959	\$84,574.12	\$41,563	\$9,248,096	0.996	\$9,206,716	\$48.68
Prof - Maternity	\$7,422,588		\$7,422,588	\$72,722	(\$11,691)	\$7,483,619	0.996	\$7,450,135	\$39.39
Prof - Other	\$2,923,320		\$2,923,320	\$28,407.22	(\$4,604)	\$2,947,123	0.996	\$2,933,936	\$15.51
Prof - Psych	\$784,691		\$784,691	\$6,957.64	(\$1,235)	\$790,414	0.996	\$786,877	\$4.16
Prof - Specialist	\$2,769,072		\$2,769,072	\$27,129.81	(\$4,362)	\$2,791,840	0.996	\$2,779,348	\$14.69
Prof - Vision	\$360,978		\$360,978	\$999.26	(\$565)	\$361,413	0.996	\$359,796	\$1.90
Radiology	\$2,601,893		\$2,601,893	\$21,767.17		\$2,623,660	1.079	\$2,831,030	\$14.97
Transportation/Ambulance	\$1,342,932		\$1,342,932	\$7,771.99		\$1,350,704	1.079	\$1,457,461	\$7.71
Provider Incentive Payment Adjustment									\$0.82
<b>Total</b>	<b>\$93,614,178</b>	<b>\$223,417</b>	<b>\$93,837,595</b>	<b>\$736,142</b>	<b>\$897,214</b>	<b>\$95,470,950</b>		<b>\$97,000,852</b>	<b>\$513.68</b>
Admin Cost Adjustment									\$49.72
<b>Medallion 3.0 Capitation Rate</b>									<b>\$563.40</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$155,740		\$155,740	\$1,646.77	(\$4,031)	\$153,356	1.123	\$172,176	\$2.10
FQHC / RHC	\$47,728		\$47,728	\$364.02		\$48,092	1.027	\$49,387	\$0.60
Home Health	\$12,851		\$12,851	\$164.40		\$13,015	1.138	\$14,811	\$0.18
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,470,643	\$72,927	\$1,543,570	\$31,506.79	(\$22,498)	\$1,552,578	1.230	\$1,910,150	\$23.33
IP - Psych	\$632,081		\$632,081	\$4,633.80	\$146,084	\$782,799	1.473	\$1,152,697	\$14.08
Lab	\$184,264		\$184,264	\$1,546.25		\$185,810	1.123	\$208,613	\$2.55
OP - Emergency Room & Related	\$761,547		\$761,547	\$9,742.17	\$8,714	\$780,003	1.138	\$887,617	\$10.84
OP - Other	\$1,229,721		\$1,229,721	\$15,731.34	\$13,663	\$1,259,115	1.138	\$1,432,831	\$17.50
Pharmacy	\$3,956,450		\$3,956,450	\$21.69	(\$33,030)	\$3,923,441	1.139	\$4,469,608	\$54.59
Prof - Anesthesia	\$35,142		\$35,142	\$268.02		\$35,410	1.027	\$36,364	\$0.44
Prof - Child EPSDT	\$15,792		\$15,792	\$120.44	(\$25)	\$15,887	1.027	\$16,315	\$0.20
Prof - Evaluation & Management	\$1,831,997		\$1,831,997	\$12,321.13	\$8,326	\$1,852,644	1.027	\$1,902,545	\$23.24
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$524,560		\$524,560	\$3,919.36	(\$824)	\$527,655	1.027	\$541,868	\$6.62
Prof - Psych	\$259,332		\$259,332	\$1,733.83	(\$407)	\$260,659	1.027	\$267,680	\$3.27
Prof - Specialist	\$365,384		\$365,384	\$2,786.75	(\$574)	\$367,597	1.027	\$377,498	\$4.61
Prof - Vision	\$155,458		\$155,458	\$255.98	(\$243)	\$155,471	1.027	\$159,658	\$1.95
Radiology	\$138,118		\$138,118	\$1,455.22		\$139,573	1.123	\$156,702	\$1.91
Transportation/Ambulance	\$285,843		\$285,843	\$1,150.84		\$286,994	1.123	\$322,215	\$3.94
Provider Incentive Payment Adjustment									\$0.28
<b>Total</b>	<b>\$12,062,651</b>	<b>\$72,927</b>	<b>\$12,135,577</b>	<b>\$89,369</b>	<b>\$115,154</b>	<b>\$12,340,100</b>		<b>\$14,078,736</b>	<b>\$172.23</b>
Admin Cost Adjustment									\$17.81
<b>Medallion 3.0 Capitation Rate</b>									<b>\$190.04</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$143,788		\$143,788	\$1,203.54	(\$1,910)	\$143,082	1.079	\$154,391	\$4.99
FQHC / RHC	\$35,701		\$35,701	\$349.78		\$36,051	0.996	\$35,890	\$1.16
Home Health	\$27,194		\$27,194	\$455.35		\$27,650	0.974	\$26,944	\$0.87
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$2,100,706	\$9,032	\$2,109,738	\$13,756.17	(\$30,332)	\$2,093,162	1.040	\$2,176,441	\$70.38
IP - Psych	\$247,562		\$247,562	\$1,118.32	\$57,056	\$305,736	1.188	\$363,118	\$11.74
Lab	\$228,004		\$228,004	\$1,789.18		\$229,793	1.079	\$247,956	\$8.02
OP - Emergency Room & Related	\$784,981		\$784,981	\$13,143.85	\$9,017	\$807,142	0.974	\$786,545	\$25.44
OP - Other	\$1,363,510		\$1,363,510	\$22,830.83	\$15,208	\$1,401,549	0.974	\$1,365,784	\$44.17
Pharmacy	\$2,917,340	\$23,111	\$2,940,451	\$9.35	\$107,376	\$3,047,836	1.011	\$3,082,109	\$99.67
Prof - Anesthesia	\$38,355		\$38,355	\$375.78		\$38,730	0.996	\$38,557	\$1.25
Prof - Child EPSDT	\$8,413		\$8,413	\$82.43	(\$13)	\$8,483	0.996	\$8,445	\$0.27
Prof - Evaluation & Management	\$1,137,429		\$1,137,429	\$10,348.86	\$5,182	\$1,152,960	0.996	\$1,147,801	\$37.12
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$357,248		\$357,248	\$3,461.99	(\$563)	\$360,148	0.996	\$358,536	\$11.59
Prof - Psych	\$87,878		\$87,878	\$748.91	(\$138)	\$88,489	0.996	\$88,093	\$2.85
Prof - Specialist	\$410,517		\$410,517	\$4,022.02	(\$647)	\$413,893	0.996	\$412,041	\$13.32
Prof - Vision	\$58,655		\$58,655	\$161.02	(\$92)	\$58,724	0.996	\$58,461	\$1.89
Radiology	\$167,852		\$167,852	\$1,403.06		\$169,255	1.079	\$182,632	\$5.91
Transportation/Ambulance	\$187,936		\$187,936	\$1,006.75		\$188,943	1.079	\$203,876	\$6.59
Provider Incentive Payment Adjustment									\$0.56
<b>Total</b>	<b>\$10,303,070</b>	<b>\$32,142</b>	<b>\$10,335,212</b>	<b>\$76,267</b>	<b>\$160,145</b>	<b>\$10,571,624</b>		<b>\$10,737,620</b>	<b>\$347.79</b>
Admin Cost Adjustment									\$33.66
<b>Medallion 3.0 Capitation Rate</b>									<b>\$381.46</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$181,807		\$181,807	\$1,521.77	(\$2,415)	\$180,914	1.079	\$195,213	\$9.06
FQHC / RHC	\$65,019		\$65,019	\$637.02		\$65,656	0.996	\$65,363	\$3.03
Home Health	\$74,976		\$74,976	\$1,255.42		\$76,232	0.974	\$74,287	\$3.45
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$3,264,378	\$14,035	\$3,278,413	\$21,376.31	(\$47,134)	\$3,252,656	1.040	\$3,382,066	\$156.93
IP - Psych	\$249,015		\$249,015	\$1,148.99	\$57,396	\$307,560	1.188	\$365,284	\$16.95
Lab	\$281,826		\$281,826	\$2,275.01		\$284,101	1.079	\$306,556	\$14.22
OP - Emergency Room & Related	\$521,003		\$521,003	\$8,723.75	\$5,985	\$535,711	0.974	\$522,041	\$24.22
OP - Other	\$1,802,195		\$1,802,195	\$30,176.24	\$20,101	\$1,852,472	0.974	\$1,805,201	\$83.76
Pharmacy	\$4,546,257	\$36,014	\$4,582,271	\$14.57	\$167,330	\$4,749,615	1.011	\$4,803,025	\$222.87
Prof - Anesthesia	\$53,685		\$53,685	\$525.98		\$54,211	0.996	\$53,969	\$2.50
Prof - Child EPSDT	\$10,668		\$10,668	\$104.52	(\$17)	\$10,755	0.996	\$10,707	\$0.50
Prof - Evaluation & Management	\$1,223,696		\$1,223,696	\$11,435.21	\$5,576	\$1,240,707	0.996	\$1,235,156	\$57.31
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$446,782		\$446,782	\$4,350.55	(\$704)	\$450,429	0.996	\$448,414	\$20.81
Prof - Psych	\$85,227		\$85,227	\$760.18	(\$134)	\$85,853	0.996	\$85,468	\$3.97
Prof - Specialist	\$540,203		\$540,203	\$5,292.61	(\$851)	\$544,645	0.996	\$542,208	\$25.16
Prof - Vision	\$64,675		\$64,675	\$342.17	(\$101)	\$64,916	0.996	\$64,626	\$3.00
Radiology	\$215,903		\$215,903	\$1,806.06		\$217,709	1.079	\$234,917	\$10.90
Transportation/Ambulance	\$216,677		\$216,677	\$1,419.39		\$218,097	1.079	\$235,335	\$10.92
Provider Incentive Payment Adjustment									\$1.07
<b>Total</b>	<b>\$13,843,992</b>	<b>\$50,049</b>	<b>\$13,894,041</b>	<b>\$93,166</b>	<b>\$205,033</b>	<b>\$14,192,240</b>		<b>\$14,429,833</b>	<b>\$670.64</b>
Admin Cost Adjustment									\$64.91
<b>Medallion 3.0 Capitation Rate</b>									<b>\$735.55</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age Under 1									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$232,301		\$232,301	\$2,456.32	(\$6,264)	\$228,493	1.123	\$256,535	\$4.72
FQHC / RHC	\$32,290		\$32,290	\$246.28		\$32,537	1.027	\$33,413	\$0.61
Home Health	\$31,669		\$31,669	\$405.14		\$32,075	1.138	\$36,500	\$0.67
IP - Maternity	\$3,971	\$177	\$4,149	\$85	(\$60)	\$4,173	1.230	\$5,135	\$0.09
IP - Newborn	\$11,219,683	\$499,872	\$11,719,555	\$240,368.41	(\$170,833)	\$11,789,090	1.230	\$14,504,214	\$266.66
IP - Other	\$2,141,734	\$95,624	\$2,237,359	\$45,884.11	(\$32,613)	\$2,250,629	1.230	\$2,768,967	\$50.91
IP - Psych	\$44,255		\$44,255	\$5.52	\$10,155	\$54,415	1.473	\$80,128	\$1.47
Lab	\$150,370		\$150,370	\$1,392.21		\$151,763	1.123	\$170,387	\$3.13
OP - Emergency Room & Related	\$769,303		\$769,303	\$9,841.39	\$8,803	\$787,947	1.138	\$896,658	\$16.49
OP - Other	\$680,727		\$680,727	\$8,708.28	\$7,563	\$696,999	1.138	\$793,161	\$14.58
Pharmacy	\$1,202,985		\$1,202,985	\$6.60	(\$10,043)	\$1,192,948	1.139	\$1,359,014	\$24.99
Prof - Anesthesia	\$45,649		\$45,649	\$348.16		\$45,997	1.027	\$47,236	\$0.87
Prof - Child EPSDT	\$239,104		\$239,104	\$1,823.63	(\$376)	\$240,552	1.027	\$247,032	\$4.54
Prof - Evaluation & Management	\$5,677,078		\$5,677,078	\$43,108.24	\$25,824	\$5,746,010	1.027	\$5,900,779	\$108.49
Prof - Maternity	\$2,342		\$2,342	\$18	(\$4)	\$2,356	1.027	\$2,419	\$0.04
Prof - Other	\$1,447,689		\$1,447,689	\$11,020.16	(\$2,275)	\$1,456,434	1.027	\$1,495,663	\$27.50
Prof - Psych	\$33,580		\$33,580	\$0.00	(\$52)	\$33,528	1.027	\$34,431	\$0.63
Prof - Specialist	\$407,608		\$407,608	\$3,108.79	(\$641)	\$410,077	1.027	\$421,122	\$7.74
Prof - Vision	\$87,948		\$87,948	\$143.65	(\$137)	\$87,954	1.027	\$90,323	\$1.66
Radiology	\$93,714		\$93,714	\$979.51		\$94,694	1.123	\$106,315	\$1.95
Transportation/Ambulance	\$357,795		\$357,795	\$2,273.80		\$360,069	1.123	\$404,257	\$7.43
Provider Incentive Payment Adjustment									\$0.87
<b>Total</b>	<b>\$24,901,797</b>	<b>\$595,674</b>	<b>\$25,497,471</b>	<b>\$372,223</b>	<b>(\$170,955)</b>	<b>\$25,698,739</b>		<b>\$29,653,689</b>	<b>\$546.06</b>
Admin Cost Adjustment									\$56.47
<b>Medallion 3.0 Capitation Rate</b>									<b>\$602.53</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 1-5									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$274,983		\$274,983	\$2,907.64	(\$7,415)	\$270,476	1.123	\$303,669	\$1.51
FQHC / RHC	\$86,289		\$86,289	\$658.12		\$86,947	1.027	\$89,289	\$0.45
Home Health	\$11,138		\$11,138	\$142.48		\$11,280	1.138	\$12,837	\$0.06
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,052,850	\$101,759	\$2,154,609	\$43,979.88	(\$31,404)	\$2,167,185	1.230	\$2,666,305	\$13.30
IP - Psych	\$154,538		\$154,538	\$0.00	\$35,456	\$189,994	1.473	\$279,772	\$1.40
Lab	\$563,193		\$563,193	\$5,221.46		\$568,414	1.123	\$638,172	\$3.18
OP - Emergency Room & Related	\$2,235,194		\$2,235,194	\$28,593.96	\$25,576	\$2,289,364	1.138	\$2,605,220	\$12.99
OP - Other	\$2,617,432		\$2,617,432	\$33,483.78	\$29,081	\$2,679,997	1.138	\$3,049,747	\$15.21
Pharmacy	\$3,875,962		\$3,875,962	\$21.25	(\$32,359)	\$3,843,625	1.139	\$4,378,680	\$21.84
Prof - Anesthesia	\$186,752		\$186,752	\$1,424.34		\$188,177	1.027	\$193,245	\$0.96
Prof - Child EPSDT	\$227,693		\$227,693	\$1,736.60	(\$358)	\$229,072	1.027	\$235,242	\$1.17
Prof - Evaluation & Management	\$6,875,236		\$6,875,236	\$51,714.47	\$31,272	\$6,958,223	1.027	\$7,145,644	\$35.64
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$1,711,602		\$1,711,602	\$12,968.90	(\$2,690)	\$1,721,881	1.027	\$1,768,260	\$8.82
Prof - Psych	\$255,181		\$255,181	\$1,037.45	(\$400)	\$255,818	1.027	\$262,709	\$1.31
Prof - Specialist	\$751,123		\$751,123	\$5,728.75	(\$1,181)	\$755,671	1.027	\$776,025	\$3.87
Prof - Vision	\$381,270		\$381,270	\$973.70	(\$596)	\$381,648	1.027	\$391,928	\$1.95
Radiology	\$157,601		\$157,601	\$1,622.86		\$159,224	1.123	\$178,764	\$0.89
Transportation/Ambulance	\$807,563		\$807,563	\$3,037.36		\$810,601	1.123	\$910,080	\$4.54
Provider Incentive Payment Adjustment									\$0.21
<b>Total</b>	<b>\$23,225,600</b>	<b>\$101,759</b>	<b>\$23,327,359</b>	<b>\$195,253</b>	<b>\$44,983</b>	<b>\$23,567,595</b>		<b>\$25,885,587</b>	<b>\$129.30</b>
Admin Cost Adjustment									\$13.37
<b>Medallion 3.0 Capitation Rate</b>									<b>\$142.67</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 6-14									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$430,828		\$430,828	\$4,555.52	(\$11,151)	\$424,232	1.123	\$476,295	\$1.46
FQHC / RHC	\$179,035		\$179,035	\$1,365.49		\$180,401	1.027	\$185,260	\$0.57
Home Health	\$23,299		\$23,299	\$298.05		\$23,597	1.138	\$26,852	\$0.08
IP - Maternity	\$20,200	\$746	\$20,946	\$433	(\$305)	\$21,074	1.230	\$25,927	\$0.08
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$2,467,863	\$91,105	\$2,558,969	\$52,871.05	(\$37,307)	\$2,574,533	1.230	\$3,167,469	\$9.69
IP - Psych	\$623,590		\$623,590	\$2,943.61	\$143,748	\$770,282	1.473	\$1,134,265	\$3.47
Lab	\$817,038		\$817,038	\$7,416.97		\$824,455	1.123	\$925,634	\$2.83
OP - Emergency Room & Related	\$2,976,636		\$2,976,636	\$38,078.93	\$34,060	\$3,048,774	1.138	\$3,469,403	\$10.61
OP - Other	\$3,266,150		\$3,266,150	\$41,782.58	\$36,289	\$3,344,221	1.138	\$3,805,612	\$11.64
Pharmacy	\$13,848,990		\$13,848,990	\$75.93	(\$115,618)	\$13,733,448	1.139	\$15,645,226	\$47.86
Prof - Anesthesia	\$139,912		\$139,912	\$1,067.10		\$140,979	1.027	\$144,776	\$0.44
Prof - Child EPSDT	\$47,919		\$47,919	\$365.47	(\$75)	\$48,209	1.027	\$49,508	\$0.15
Prof - Evaluation & Management	\$8,548,000		\$8,548,000	\$64,009.03	\$38,879	\$8,650,888	1.027	\$8,883,901	\$27.17
Prof - Maternity	\$11,266		\$11,266	\$86	(\$18)	\$11,334	1.027	\$11,640	\$0.04
Prof - Other	\$3,287,957		\$3,287,957	\$24,932.43	(\$5,167)	\$3,307,722	1.027	\$3,396,816	\$10.39
Prof - Psych	\$1,223,922		\$1,223,922	\$7,873.81	(\$1,921)	\$1,229,874	1.027	\$1,263,001	\$3.86
Prof - Specialist	\$974,588		\$974,588	\$7,433.10	(\$1,532)	\$980,489	1.027	\$1,006,899	\$3.08
Prof - Vision	\$737,676		\$737,676	\$2,478.46	(\$1,155)	\$739,000	1.027	\$758,905	\$2.32
Radiology	\$448,178		\$448,178	\$4,667.66		\$452,846	1.123	\$508,420	\$1.56
Transportation/Ambulance	\$1,267,397		\$1,267,397	\$4,487.30		\$1,271,885	1.123	\$1,427,974	\$4.37
Provider Incentive Payment Adjustment									\$0.23
<b>Total</b>	<b>\$41,340,445</b>	<b>\$91,852</b>	<b>\$41,432,296</b>	<b>\$267,221</b>	<b>\$78,726</b>	<b>\$41,778,243</b>		<b>\$46,313,784</b>	<b>\$141.90</b>
Admin Cost Adjustment									\$14.67
<b>Medallion 3.0 Capitation Rate</b>									<b>\$156.57</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Female									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$102,490		\$102,490	\$1,083.71	(\$2,653)	\$100,921	1.123	\$113,306	\$1.65
FQHC / RHC	\$59,874		\$59,874	\$456.65		\$60,330	1.027	\$61,955	\$0.90
Home Health	\$27,112		\$27,112	\$346.84		\$27,459	1.138	\$31,248	\$0.45
IP - Maternity	\$2,293,786	\$32,875	\$2,326,661	\$49,142	(\$33,935)	\$2,341,867	1.230	\$2,881,218	\$41.84
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$1,883,502	\$27,061	\$1,910,562	\$40,351.79	(\$27,866)	\$1,923,047	1.230	\$2,365,941	\$34.35
IP - Psych	\$274,917		\$274,917	\$1,739.95	\$63,475	\$340,131	1.473	\$500,854	\$7.27
Lab	\$500,112		\$500,112	\$5,031.96		\$505,144	1.123	\$567,136	\$8.23
OP - Emergency Room & Related	\$1,681,241		\$1,681,241	\$21,507.45	\$19,237	\$1,721,985	1.138	\$1,959,562	\$28.45
OP - Other	\$1,985,706		\$1,985,706	\$25,402.35	\$22,062	\$2,033,170	1.138	\$2,313,680	\$33.59
Pharmacy	\$2,581,733		\$2,581,733	\$14.15	(\$21,554)	\$2,560,193	1.139	\$2,916,588	\$42.35
Prof - Anesthesia	\$153,963		\$153,963	\$1,174.26		\$155,137	1.027	\$159,316	\$2.31
Prof - Child EPSDT	\$32,835		\$32,835	\$250.43	(\$52)	\$33,034	1.027	\$33,923	\$0.49
Prof - Evaluation & Management	\$2,466,001		\$2,466,001	\$18,568.94	\$11,217	\$2,495,786	1.027	\$2,563,010	\$37.22
Prof - Maternity	\$1,437,829		\$1,437,829	\$10,966	(\$2,260)	\$1,446,536	1.027	\$1,485,498	\$21.57
Prof - Other	\$726,207		\$726,207	\$5,510.98	(\$1,141)	\$730,577	1.027	\$750,255	\$10.89
Prof - Psych	\$253,369		\$253,369	\$1,619.80	(\$398)	\$254,591	1.027	\$261,448	\$3.80
Prof - Specialist	\$350,590		\$350,590	\$2,673.92	(\$551)	\$352,713	1.027	\$362,213	\$5.26
Prof - Vision	\$158,870		\$158,870	\$547.34	(\$249)	\$159,169	1.027	\$163,456	\$2.37
Radiology	\$572,396		\$572,396	\$6,038.08		\$578,434	1.123	\$649,421	\$9.43
Transportation/Ambulance	\$352,929		\$352,929	\$1,828.14		\$354,757	1.123	\$398,294	\$5.78
Provider Incentive Payment Adjustment									\$0.48
<b>Total</b>	<b>\$17,895,459</b>	<b>\$59,936</b>	<b>\$17,955,395</b>	<b>\$194,255</b>	<b>\$25,332</b>	<b>\$18,174,981</b>		<b>\$20,538,323</b>	<b>\$298.70</b>
Admin Cost Adjustment									\$30.89
<b>Medallion 3.0 Capitation Rate</b>									<b>\$329.59</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Female									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$451,516		\$451,516	\$3,779.30	(\$5,997)	\$449,298	1.079	\$484,810	\$3.68
FQHC / RHC	\$217,358		\$217,358	\$2,129.55		\$219,487	0.996	\$218,505	\$1.66
Home Health	\$108,550		\$108,550	\$1,817.58		\$110,368	0.974	\$107,552	\$0.82
IP - Maternity	\$7,496,930	(\$13,233)	\$7,483,697	\$49,093	(\$107,597)	\$7,425,193	1.040	\$7,720,613	\$58.63
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$7,893,530	(\$13,935)	\$7,879,595	\$51,689.64	(\$113,289)	\$7,817,996	1.040	\$8,129,044	\$61.73
IP - Psych	\$765,210		\$765,210	\$3,195.87	\$176,299	\$944,705	1.188	\$1,122,011	\$8.52
Lab	\$1,932,058		\$1,932,058	\$15,786.51		\$1,947,844	1.079	\$2,101,799	\$15.96
OP - Emergency Room & Related	\$4,951,091		\$4,951,091	\$82,901.87	\$56,873	\$5,090,866	0.974	\$4,960,956	\$37.67
OP - Other	\$7,444,572		\$7,444,572	\$124,653.11	\$83,036	\$7,652,261	0.974	\$7,456,989	\$56.63
Pharmacy	\$16,512,239	\$130,806	\$16,643,045	\$52.92	\$607,750	\$17,250,847	1.011	\$17,444,834	\$132.47
Prof - Anesthesia	\$529,784		\$529,784	\$5,190.53		\$534,975	0.996	\$532,581	\$4.04
Prof - Child EPSDT	\$57,591		\$57,591	\$564.24	(\$91)	\$58,064	0.996	\$57,805	\$0.44
Prof - Evaluation & Management	\$5,803,964		\$5,803,964	\$56,263.12	\$26,456	\$5,886,683	0.996	\$5,860,344	\$44.50
Prof - Maternity	\$4,216,680		\$4,216,680	\$41,313	(\$6,642)	\$4,251,351	0.996	\$4,232,329	\$32.14
Prof - Other	\$1,511,220		\$1,511,220	\$14,735.37	(\$2,380)	\$1,523,576	0.996	\$1,516,758	\$11.52
Prof - Psych	\$356,400		\$356,400	\$2,735.36	(\$560)	\$358,575	0.996	\$356,971	\$2.71
Prof - Specialist	\$1,711,334		\$1,711,334	\$16,766.70	(\$2,696)	\$1,725,406	0.996	\$1,717,685	\$13.04
Prof - Vision	\$246,697		\$246,697	\$992.59	(\$386)	\$247,303	0.996	\$246,197	\$1.87
Radiology	\$1,850,965		\$1,850,965	\$15,470.69		\$1,866,436	1.079	\$2,013,956	\$15.29
Transportation/Ambulance	\$935,283		\$935,283	\$4,961.54		\$940,244	1.079	\$1,014,560	\$7.70
Provider Incentive Payment Adjustment									\$0.82
<b>Total</b>	<b>\$64,992,973</b>	<b>\$103,638</b>	<b>\$65,096,612</b>	<b>\$494,092</b>	<b>\$710,776</b>	<b>\$66,301,479</b>		<b>\$67,296,298</b>	<b>\$511.85</b>
Admin Cost Adjustment									\$49.54
<b>Medallion 3.0 Capitation Rate</b>									<b>\$561.39</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 15-20 Male									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$118,950		\$118,950	\$1,257.77	(\$3,079)	\$117,129	1.123	\$131,504	\$2.19
FQHC / RHC	\$37,194		\$37,194	\$283.68		\$37,478	1.027	\$38,488	\$0.64
Home Health	\$8,539		\$8,539	\$109.24		\$8,649	1.138	\$9,842	\$0.16
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.230	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.230	\$0	\$0.00
IP - Other	\$795,577	\$39,451	\$835,028	\$17,044.30	(\$12,171)	\$839,902	1.230	\$1,033,338	\$17.19
IP - Psych	\$203,814		\$203,814	\$1,227.92	\$47,044	\$252,085	1.473	\$371,203	\$6.17
Lab	\$127,205		\$127,205	\$1,123.25		\$128,328	1.123	\$144,077	\$2.40
OP - Emergency Room & Related	\$874,960		\$874,960	\$11,193.02	\$10,012	\$896,165	1.138	\$1,019,806	\$16.96
OP - Other	\$829,577		\$829,577	\$10,612.46	\$9,217	\$849,407	1.138	\$966,597	\$16.08
Pharmacy	\$2,336,431		\$2,336,431	\$12.81	(\$19,506)	\$2,316,939	1.139	\$2,639,470	\$43.90
Prof - Anesthesia	\$30,887		\$30,887	\$235.57		\$31,122	1.027	\$31,961	\$0.53
Prof - Child EPSDT	\$8,135		\$8,135	\$62.05	(\$13)	\$8,184	1.027	\$8,405	\$0.14
Prof - Evaluation & Management	\$1,374,206		\$1,374,206	\$10,266.47	\$6,250	\$1,390,723	1.027	\$1,428,183	\$23.76
Prof - Maternity	\$0		\$0	\$0		\$0	1.027	\$0	\$0.00
Prof - Other	\$347,706		\$347,706	\$2,626.53	(\$546)	\$349,786	1.027	\$359,207	\$5.97
Prof - Psych	\$194,297		\$194,297	\$1,203.64	(\$305)	\$195,195	1.027	\$200,453	\$3.33
Prof - Specialist	\$266,447		\$266,447	\$2,032.17	(\$419)	\$268,060	1.027	\$275,281	\$4.58
Prof - Vision	\$118,186		\$118,186	\$325.13	(\$185)	\$118,326	1.027	\$121,513	\$2.02
Radiology	\$141,398		\$141,398	\$1,482.21		\$142,880	1.123	\$160,415	\$2.67
Transportation/Ambulance	\$257,895		\$257,895	\$1,075.68		\$258,970	1.123	\$290,752	\$4.84
Provider Incentive Payment Adjustment									\$0.25
<b>Total</b>	<b>\$8,071,405</b>	<b>\$39,451</b>	<b>\$8,110,856</b>	<b>\$62,174</b>	<b>\$36,299</b>	<b>\$8,209,330</b>		<b>\$9,230,493</b>	<b>\$153.78</b>
Admin Cost Adjustment									\$15.90
<b>Medallion 3.0 Capitation Rate</b>									<b>\$169.68</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 21-44 Male									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$145,076		\$145,076	\$1,214.32	(\$1,927)	\$144,363	1.079	\$155,773	\$4.97
FQHC / RHC	\$41,995		\$41,995	\$411.45		\$42,407	0.996	\$42,217	\$1.35
Home Health	\$49,992		\$49,992	\$837.07		\$50,829	0.974	\$49,532	\$1.58
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$1,591,650	\$6,833	\$1,598,483	\$10,422.69	(\$22,981)	\$1,585,924	1.040	\$1,649,022	\$52.65
IP - Psych	\$257,141		\$257,141	\$1,120.17	\$59,254	\$317,516	1.188	\$377,108	\$12.04
Lab	\$256,188		\$256,188	\$2,053.66		\$258,242	1.079	\$278,653	\$8.90
OP - Emergency Room & Related	\$1,015,037		\$1,015,037	\$16,995.94	\$11,660	\$1,043,692	0.974	\$1,017,059	\$32.47
OP - Other	\$1,321,732		\$1,321,732	\$22,131.29	\$14,742	\$1,358,606	0.974	\$1,323,937	\$42.27
Pharmacy	\$3,915,450	\$31,017	\$3,946,467	\$12.55	\$144,112	\$4,090,592	1.011	\$4,136,591	\$132.06
Prof - Anesthesia	\$33,011		\$33,011	\$323.42		\$33,334	0.996	\$33,185	\$1.06
Prof - Child EPSDT	\$7,039		\$7,039	\$68.97	(\$11)	\$7,097	0.996	\$7,065	\$0.23
Prof - Evaluation & Management	\$1,145,601		\$1,145,601	\$11,079.93	\$5,222	\$1,161,903	0.996	\$1,156,704	\$36.93
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$211,375		\$211,375	\$2,055.19	(\$333)	\$213,097	0.996	\$212,143	\$6.77
Prof - Psych	\$82,588		\$82,588	\$627.64	(\$130)	\$83,086	0.996	\$82,715	\$2.64
Prof - Specialist	\$311,803		\$311,803	\$3,054.87	(\$491)	\$314,367	0.996	\$312,960	\$9.99
Prof - Vision	\$52,592		\$52,592	\$180.64	(\$82)	\$52,690	0.996	\$52,454	\$1.67
Radiology	\$199,012		\$199,012	\$1,660.34		\$200,673	1.079	\$216,533	\$6.91
Transportation/Ambulance	\$205,461		\$205,461	\$1,032.91		\$206,494	1.079	\$222,815	\$7.11
Provider Incentive Payment Adjustment									\$0.58
<b>Total</b>	<b>\$10,842,743</b>	<b>\$37,850</b>	<b>\$10,880,593</b>	<b>\$75,283</b>	<b>\$209,035</b>	<b>\$11,164,910</b>		<b>\$11,326,466</b>	<b>\$362.18</b>
Admin Cost Adjustment									\$35.06
<b>Medallion 3.0 Capitation Rate</b>									<b>\$397.24</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

Age 45 and Over									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$168,154		\$168,154	\$1,407.49	(\$2,233)	\$167,328	1.079	\$180,554	\$11.79
FQHC / RHC	\$45,582		\$45,582	\$446.58		\$46,028	0.996	\$45,822	\$2.99
Home Health	\$36,627		\$36,627	\$613.29		\$37,240	0.974	\$36,290	\$2.37
IP - Maternity	\$0	\$0	\$0	\$0		\$0	1.040	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0	\$0.00		\$0	1.040	\$0	\$0.00
IP - Other	\$1,874,980	\$8,061	\$1,883,041	\$12,278.03	(\$27,072)	\$1,868,246	1.040	\$1,942,577	\$126.88
IP - Psych	\$86,526		\$86,526	\$366.28	\$19,936	\$106,828	1.188	\$126,878	\$8.29
Lab	\$213,407		\$213,407	\$1,740.83		\$215,148	1.079	\$232,153	\$15.16
OP - Emergency Room & Related	\$475,618		\$475,618	\$7,963.82	\$5,463	\$489,045	0.974	\$476,565	\$31.13
OP - Other	\$1,373,133		\$1,373,133	\$22,991.96	\$15,316	\$1,411,441	0.974	\$1,375,423	\$89.84
Pharmacy	\$3,341,760	\$26,473	\$3,368,233	\$10.71	\$122,997	\$3,491,240	1.011	\$3,530,499	\$230.60
Prof - Anesthesia	\$40,988		\$40,988	\$401.58		\$41,390	0.996	\$41,204	\$2.69
Prof - Child EPSDT	\$7,129		\$7,129	\$69.84	(\$11)	\$7,187	0.996	\$7,155	\$0.47
Prof - Evaluation & Management	\$832,194		\$832,194	\$8,080.89	\$3,793	\$844,068	0.996	\$840,291	\$54.89
Prof - Maternity	\$0		\$0	\$0		\$0	0.996	\$0	\$0.00
Prof - Other	\$215,791		\$215,791	\$2,104.20	(\$340)	\$217,555	0.996	\$216,582	\$14.15
Prof - Psych	\$56,645		\$56,645	\$477.16	(\$89)	\$57,033	0.996	\$56,778	\$3.71
Prof - Specialist	\$333,087		\$333,087	\$3,263.40	(\$525)	\$335,826	0.996	\$334,324	\$21.84
Prof - Vision	\$42,283		\$42,283	\$241.09	(\$66)	\$42,458	0.996	\$42,268	\$2.76
Radiology	\$164,786		\$164,786	\$1,376.66		\$166,162	1.079	\$179,296	\$11.71
Transportation/Ambulance	\$161,592		\$161,592	\$1,027.13		\$162,619	1.079	\$175,472	\$11.46
Provider Incentive Payment Adjustment									\$1.03
<b>Total</b>	<b>\$9,470,281</b>	<b>\$34,534</b>	<b>\$9,504,815</b>	<b>\$64,861</b>	<b>\$137,168</b>	<b>\$9,706,844</b>		<b>\$9,840,131</b>	<b>\$643.76</b>
Admin Cost Adjustment									\$62.31
<b>Medallion 3.0 Capitation Rate</b>									<b>\$706.07</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$5,164,626	\$0	\$5,164,626	\$51,174	(\$116,358)	\$5,099,442	1.109	\$5,657,475	\$1.79
FQHC / RHC	\$36,029	\$0	\$36,029	\$294		\$36,323	1.019	\$37,027	\$0.01
Home Health	\$594,048	\$0	\$594,048	\$8,300		\$602,348	1.089	\$655,970	\$0.21
IP - Maternity	\$32,363,059	\$309,988	\$32,673,047	\$269,204	(\$470,540)	\$32,471,711	1.064	\$34,537,495	\$10.90
IP - Newborn	\$36,153,907	\$112,203	\$36,266,111	\$774,555	(\$529,081)	\$36,511,584	1.230	\$44,920,499	\$14.18
IP - Other	\$49,698,172	(\$988,475)	\$48,709,697	\$751,414	(\$706,492)	\$48,754,618	1.148	\$55,984,798	\$17.67
IP - Psych	\$5,734,182	\$0	\$5,734,182	\$39,793	\$1,324,749	\$7,098,723	1.388	\$9,852,995	\$3.11
Lab	\$9,443,790	\$0	\$9,443,790	\$74,631		\$9,518,421	1.109	\$10,559,058	\$3.33
OP - Emergency Room & Related	\$40,950,238	\$0	\$40,950,238	\$586,116	\$469,268	\$42,005,622	1.075	\$45,152,634	\$14.25
OP - Other	\$44,119,158	\$0	\$44,119,158	\$638,463	\$491,000	\$45,248,621	1.068	\$48,341,741	\$15.26
Pharmacy	\$89,601,775	\$254,815	\$89,856,590	\$418	\$704,414	\$90,561,422	1.092	\$98,867,964	\$31.21
Prof - Anesthesia	\$3,753,905	\$0	\$3,753,905	\$33,141		\$3,787,046	1.010	\$3,823,143	\$1.21
Prof - Child EPSDT	\$4,268,967	\$0	\$4,268,967	\$32,995	(\$6,710)	\$4,295,251	1.025	\$4,404,588	\$1.39
Prof - Evaluation & Management	\$103,454,597	\$0	\$103,454,597	\$813,236	\$470,719	\$104,738,553	1.022	\$107,004,615	\$33.78
Prof - Maternity	\$14,920,774	\$0	\$14,920,774	\$141,658	(\$23,495)	\$15,038,938	1.000	\$15,037,553	\$4.75
Prof - Other	\$38,663,593	\$0	\$38,663,593	\$308,799	(\$60,790)	\$38,911,603	1.022	\$39,751,273	\$12.55
Prof - Psych	\$3,801,201	\$0	\$3,801,201	\$30,754	(\$5,977)	\$3,825,977	1.020	\$3,903,157	\$1.23
Prof - Specialist	\$11,797,408	\$0	\$11,797,408	\$100,300	(\$18,558)	\$11,879,150	1.014	\$12,048,515	\$3.80
Prof - Vision	\$6,750,438	\$0	\$6,750,438	\$26,594	(\$10,571)	\$6,766,461	1.024	\$6,926,345	\$2.19
Radiology	\$9,814,527	\$0	\$9,814,527	\$88,090		\$9,902,617	1.093	\$10,824,859	\$3.42
Transportation/Ambulance	\$10,963,498	\$0	\$10,963,498	\$26,083		\$10,989,580	1.115	\$12,256,742	\$3.87
Provider Incentive Payment Adjustment									\$0.29
<b>Total</b>	<b>\$522,047,891</b>	<b>(\$311,468)</b>	<b>\$521,736,423</b>	<b>\$4,796,011</b>	<b>\$1,511,578</b>	<b>\$528,044,011</b>		<b>\$570,548,449</b>	<b>\$180.38</b>
Admin Cost Adjustment									\$18.27
<b>Medallion 3.0 Capitation Rate</b>									<b>\$198.65</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,260,638	\$0	\$2,260,638	\$21,881	(\$47,625)	\$2,234,893	1.105	\$2,469,256	\$2.38
FQHC / RHC	\$3,651,314	\$0	\$3,651,314	\$29,285		\$3,680,600	1.021	\$3,758,737	\$3.62
Home Health	\$98,215	\$0	\$98,215	\$1,564		\$99,779	1.008	\$100,607	\$0.10
IP - Maternity	\$11,070,381	\$135,486	\$11,205,866	\$101,361	(\$161,510)	\$11,145,717	1.075	\$11,979,500	\$11.53
IP - Newborn	\$14,841,444	(\$410,536)	\$14,430,908	\$317,960	(\$210,670)	\$14,538,198	1.230	\$17,886,464	\$17.21
IP - Other	\$20,797,965	(\$347,512)	\$20,450,453	\$314,907	(\$296,608)	\$20,468,752	1.149	\$23,515,355	\$22.63
IP - Psych	\$3,609,897	\$0	\$3,609,897	\$13,935	\$831,432	\$4,455,264	1.389	\$6,187,804	\$5.95
Lab	\$3,960,248	\$0	\$3,960,248	\$33,479		\$3,993,727	1.099	\$4,390,360	\$4.22
OP - Emergency Room & Related	\$12,267,679	\$0	\$12,267,679	\$179,460	\$140,625	\$12,587,764	1.062	\$13,366,248	\$12.86
OP - Other	\$19,453,177	\$0	\$19,453,177	\$283,610	\$216,517	\$19,953,304	1.064	\$21,228,259	\$20.43
Pharmacy	\$39,680,342	\$130,975	\$39,811,316	\$180	\$415,290	\$40,226,786	1.084	\$43,616,320	\$41.97
Prof - Anesthesia	\$1,276,856	\$0	\$1,276,856	\$11,223		\$1,288,079	1.010	\$1,301,083	\$1.25
Prof - Child EPSDT	\$770,619	\$0	\$770,619	\$6,088	(\$1,212)	\$775,495	1.023	\$793,315	\$0.76
Prof - Evaluation & Management	\$31,234,550	\$0	\$31,234,550	\$253,124	\$142,152	\$31,629,826	1.019	\$32,237,676	\$31.02
Prof - Maternity	\$6,282,451	\$0	\$6,282,451	\$58,880	(\$9,891)	\$6,331,440	1.002	\$6,342,006	\$6.10
Prof - Other	\$9,011,693	\$0	\$9,011,693	\$75,451	(\$14,174)	\$9,072,969	1.016	\$9,218,785	\$8.87
Prof - Psych	\$3,025,362	\$0	\$3,025,362	\$14,799	(\$4,742)	\$3,035,419	1.022	\$3,100,866	\$2.98
Prof - Specialist	\$4,678,401	\$0	\$4,678,401	\$40,458	(\$7,361)	\$4,711,498	1.012	\$4,768,720	\$4.59
Prof - Vision	\$2,142,434	\$0	\$2,142,434	\$6,044	(\$3,351)	\$2,145,127	1.022	\$2,191,660	\$2.11
Radiology	\$3,664,639	\$0	\$3,664,639	\$33,464		\$3,698,103	1.094	\$4,046,561	\$3.89
Transportation/Ambulance	\$5,143,190	\$0	\$5,143,190	\$22,474		\$5,165,664	1.111	\$5,737,061	\$5.52
Provider Incentive Payment Adjustment									\$0.34
<b>Total</b>	<b>\$198,921,495</b>	<b>(\$491,589)</b>	<b>\$198,429,906</b>	<b>\$1,819,627</b>	<b>\$988,871</b>	<b>\$201,238,405</b>		<b>\$218,236,643</b>	<b>\$210.33</b>
Admin Cost Adjustment									\$21.24
<b>Medallion 3.0 Capitation Rate</b>									<b>\$231.57</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Capitation Rate Calculations - Health Plan Encounter Data  
Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$6,733,519	\$0	\$6,733,519	\$66,516	(\$150,286)	\$6,649,749	1.109	\$7,373,444	\$2.64
FQHC / RHC	\$1,469,738	\$0	\$1,469,738	\$12,702		\$1,482,440	1.012	\$1,500,563	\$0.54
Home Health	\$1,429,232	\$0	\$1,429,232	\$19,369		\$1,448,601	1.106	\$1,602,818	\$0.57
IP - Maternity	\$30,462,385	\$181,539	\$30,643,925	\$268,233	(\$441,543)	\$30,470,614	1.070	\$32,612,156	\$11.68
IP - Newborn	\$40,127,051	\$496,651	\$40,623,702	\$859,675	(\$592,540)	\$40,890,837	1.230	\$50,308,329	\$18.01
IP - Other	\$62,133,461	\$265,056	\$62,398,517	\$850,758	(\$903,440)	\$62,345,836	1.132	\$70,600,662	\$25.28
IP - Psych	\$11,060,001	\$0	\$11,060,001	\$48,546	\$2,548,683	\$13,657,230	1.390	\$18,987,344	\$6.80
Lab	\$8,602,344	\$0	\$8,602,344	\$69,343		\$8,671,687	1.102	\$9,552,824	\$3.42
OP - Emergency Room & Related	\$52,953,523	\$0	\$52,953,523	\$776,525	\$607,030	\$54,337,077	1.060	\$57,617,570	\$20.63
OP - Other	\$69,400,492	\$0	\$69,400,492	\$1,011,857	\$772,438	\$71,184,787	1.064	\$75,730,761	\$27.12
Pharmacy	\$104,216,135	\$362,699	\$104,578,835	\$467	\$1,197,354	\$105,776,655	1.081	\$114,380,631	\$40.95
Prof - Anesthesia	\$3,601,851	\$0	\$3,601,851	\$31,948		\$3,633,799	1.009	\$3,666,257	\$1.31
Prof - Child EPSDT	\$2,598,256	\$0	\$2,598,256	\$20,131	(\$4,084)	\$2,614,303	1.025	\$2,680,133	\$0.96
Prof - Evaluation & Management	\$84,989,414	\$0	\$84,989,414	\$690,778	\$386,805	\$86,066,996	1.019	\$87,726,919	\$31.41
Prof - Maternity	\$15,213,310	\$0	\$15,213,310	\$143,812	(\$23,954)	\$15,333,168	1.001	\$15,340,840	\$5.49
Prof - Other	\$27,893,721	\$0	\$27,893,721	\$229,670	(\$43,867)	\$28,079,524	1.018	\$28,594,489	\$10.24
Prof - Psych	\$7,086,256	\$0	\$7,086,256	\$33,597	(\$11,106)	\$7,108,748	1.020	\$7,250,640	\$2.60
Prof - Specialist	\$13,456,105	\$0	\$13,456,105	\$116,301	(\$21,170)	\$13,551,236	1.012	\$13,716,755	\$4.91
Prof - Vision	\$4,464,735	\$0	\$4,464,735	\$11,429	(\$6,982)	\$4,469,183	1.022	\$4,567,163	\$1.64
Radiology	\$8,632,621	\$0	\$8,632,621	\$78,044		\$8,710,665	1.092	\$9,515,086	\$3.41
Transportation/Ambulance	\$11,621,772	\$0	\$11,621,772	\$31,267		\$11,653,039	1.111	\$12,946,554	\$4.64
Provider Incentive Payment Adjustment									\$0.36
<b>Total</b>	<b>\$568,145,922</b>	<b>\$1,305,946</b>	<b>\$569,451,868</b>	<b>\$5,370,968</b>	<b>\$3,313,338</b>	<b>\$578,136,173</b>		<b>\$626,271,938</b>	<b>\$224.60</b>
Admin Cost Adjustment									\$22.66
<b>Medallion 3.0 Capitation Rate</b>									<b>\$247.26</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,738,721	\$0	\$2,738,721	\$26,570	(\$58,134)	\$2,707,158	1.105	\$2,992,269	\$2.20
FQHC / RHC	\$2,243,689	\$0	\$2,243,689	\$19,382		\$2,263,071	1.012	\$2,290,861	\$1.68
Home Health	\$661,524	\$0	\$661,524	\$10,245		\$671,770	1.026	\$689,460	\$0.51
IP - Maternity	\$15,592,272	\$176,364	\$15,768,636	\$139,230	(\$227,879)	\$15,679,987	1.072	\$16,805,073	\$12.34
IP - Newborn	\$20,873,136	(\$247,192)	\$20,625,944	\$447,182	(\$306,166)	\$20,766,961	1.230	\$25,549,761	\$18.76
IP - Other	\$28,489,529	(\$167,735)	\$28,321,793	\$395,439	(\$413,699)	\$28,303,534	1.135	\$32,118,346	\$23.58
IP - Psych	\$3,866,884	\$0	\$3,866,884	\$12,306	\$890,020	\$4,769,210	1.383	\$6,595,632	\$4.84
Lab	\$4,141,866	\$0	\$4,141,866	\$34,456		\$4,176,322	1.101	\$4,599,700	\$3.38
OP - Emergency Room & Related	\$21,460,109	\$0	\$21,460,109	\$313,334	\$248,497	\$22,021,940	1.063	\$23,409,529	\$17.18
OP - Other	\$35,714,489	\$0	\$35,714,489	\$522,344	\$423,315	\$36,660,148	1.062	\$38,934,151	\$28.58
Pharmacy	\$53,747,220	\$174,651	\$53,921,870	\$244	\$546,807	\$54,468,922	1.085	\$59,103,989	\$43.39
Prof - Anesthesia	\$1,894,313	\$0	\$1,894,313	\$16,635		\$1,910,947	1.010	\$1,930,464	\$1.42
Prof - Child EPSDT	\$1,168,373	\$0	\$1,168,373	\$9,195	(\$1,837)	\$1,175,731	1.023	\$1,203,253	\$0.88
Prof - Evaluation & Management	\$41,593,375	\$0	\$41,593,375	\$334,936	\$189,286	\$42,117,597	1.020	\$42,948,344	\$31.53
Prof - Maternity	\$8,363,189	\$0	\$8,363,189	\$78,781	(\$13,168)	\$8,428,802	1.001	\$8,437,047	\$6.19
Prof - Other	\$11,570,037	\$0	\$11,570,037	\$95,678	(\$18,196)	\$11,647,519	1.018	\$11,860,992	\$8.71
Prof - Psych	\$3,306,550	\$0	\$3,306,550	\$14,727	(\$5,181)	\$3,316,097	1.020	\$3,383,354	\$2.48
Prof - Specialist	\$6,517,538	\$0	\$6,517,538	\$56,592	(\$10,254)	\$6,563,876	1.012	\$6,640,245	\$4.87
Prof - Vision	\$2,393,355	\$0	\$2,393,355	\$6,098	(\$3,743)	\$2,395,710	1.022	\$2,448,213	\$1.80
Radiology	\$4,156,373	\$0	\$4,156,373	\$37,641		\$4,194,014	1.093	\$4,585,582	\$3.37
Transportation/Ambulance	\$6,879,222	\$0	\$6,879,222	\$27,346		\$6,906,568	1.111	\$7,670,777	\$5.63
Provider Incentive Payment Adjustment									\$0.36
<b>Total</b>	<b>\$277,371,766</b>	<b>(\$63,913)</b>	<b>\$277,307,853</b>	<b>\$2,598,363</b>	<b>\$1,239,670</b>	<b>\$281,145,886</b>		<b>\$304,197,041</b>	<b>\$223.66</b>
Admin Cost Adjustment									\$22.57
<b>Medallion 3.0 Capitation Rate</b>									<b>\$246.23</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$7,863,385	\$0	\$7,863,385	\$75,372	(\$161,134)	\$7,777,623	1.103	\$8,578,748	\$2.76
FQHC / RHC	\$2,503,462	\$0	\$2,503,462	\$23,533		\$2,526,995	1.001	\$2,530,193	\$0.81
Home Health	\$1,189,962	\$0	\$1,189,962	\$16,984		\$1,206,946	1.077	\$1,299,384	\$0.42
IP - Maternity	\$37,959,373	\$409,014	\$38,368,386	\$330,389	(\$559,747)	\$38,139,028	1.069	\$40,761,011	\$13.10
IP - Newborn	\$51,611,174	(\$617,841)	\$50,993,334	\$1,105,708	(\$805,939)	\$51,293,103	1.230	\$63,106,321	\$20.28
IP - Other	\$52,511,027	(\$599,252)	\$51,911,775	\$710,397	(\$781,211)	\$51,840,961	1.130	\$58,581,312	\$18.82
IP - Psych	\$8,795,595	\$0	\$8,795,595	\$24,472	\$2,023,627	\$10,843,695	1.401	\$15,190,772	\$4.88
Lab	\$8,641,426	\$0	\$8,641,426	\$49,189		\$8,690,615	1.106	\$9,611,866	\$3.09
OP - Emergency Room & Related	\$65,452,263	\$0	\$65,452,263	\$962,784	\$861,016	\$67,276,062	1.059	\$71,220,021	\$22.88
OP - Other	\$75,979,401	\$0	\$75,979,401	\$1,089,702	\$1,239,332	\$78,308,436	1.074	\$84,105,848	\$27.02
Pharmacy	\$121,250,533	\$389,882	\$121,640,416	\$553	\$1,210,087	\$122,851,055	1.086	\$133,373,158	\$42.85
Prof - Anesthesia	\$5,198,988	\$0	\$5,198,988	\$46,063		\$5,245,052	1.009	\$5,292,645	\$1.70
Prof - Child EPSDT	\$3,134,266	\$0	\$3,134,266	\$24,752	(\$4,927)	\$3,154,091	1.023	\$3,226,681	\$1.04
Prof - Evaluation & Management	\$91,115,663	\$0	\$91,115,663	\$741,624	\$414,692	\$92,271,978	1.019	\$94,045,458	\$30.22
Prof - Maternity	\$20,774,229	\$0	\$20,774,229	\$196,702	(\$32,711)	\$20,938,220	1.000	\$20,944,001	\$6.73
Prof - Other	\$32,640,124	\$0	\$32,640,124	\$277,225	(\$51,345)	\$32,866,005	1.017	\$33,409,830	\$10.73
Prof - Psych	\$7,527,974	\$0	\$7,527,974	\$29,246	(\$11,788)	\$7,545,432	1.019	\$7,691,976	\$2.47
Prof - Specialist	\$16,995,025	\$0	\$16,995,025	\$148,539	(\$26,741)	\$17,116,824	1.011	\$17,301,833	\$5.56
Prof - Vision	\$4,781,230	\$0	\$4,781,230	\$9,131	(\$7,472)	\$4,782,889	1.022	\$4,888,330	\$1.57
Radiology	\$10,312,206	\$0	\$10,312,206	\$92,231		\$10,404,438	1.090	\$11,345,304	\$3.65
Transportation/Ambulance	\$12,521,680	\$0	\$12,521,680	\$23,588		\$12,545,268	1.112	\$13,948,387	\$4.48
Provider Incentive Payment Adjustment									\$0.36
<b>Total</b>	<b>\$638,758,988</b>	<b>(\$418,197)</b>	<b>\$638,340,791</b>	<b>\$5,978,184</b>	<b>\$3,305,740</b>	<b>\$647,624,715</b>		<b>\$700,453,078</b>	<b>\$225.42</b>
Admin Cost Adjustment									\$22.74
<b>Medallion 3.0 Capitation Rate</b>									<b>\$248.16</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,921,478	\$0	\$2,921,478	\$28,566	(\$63,323)	\$2,886,721	1.107	\$3,195,107	\$2.35
FQHC / RHC	\$1,336,571	\$0	\$1,336,571	\$11,025		\$1,347,597	1.018	\$1,371,745	\$1.01
Home Health	\$444,344	\$0	\$444,344	\$6,781		\$451,125	1.036	\$467,233	\$0.34
IP - Maternity	\$16,735,150	\$196,540	\$16,931,690	\$156,645	(\$244,086)	\$16,844,249	1.078	\$18,150,702	\$13.33
IP - Newborn	\$19,446,005	\$413,236	\$19,859,241	\$416,608	(\$289,616)	\$19,986,232	1.230	\$24,589,224	\$18.05
IP - Other	\$28,235,070	(\$193,931)	\$28,041,138	\$381,703	(\$405,986)	\$28,016,855	1.129	\$31,623,415	\$23.22
IP - Psych	\$5,898,714	\$0	\$5,898,714	\$36,070	\$1,361,644	\$7,296,429	1.383	\$10,094,335	\$7.41
Lab	\$6,722,154	\$0	\$6,722,154	\$56,528		\$6,778,682	1.099	\$7,449,356	\$5.47
OP - Emergency Room & Related	\$16,037,018	\$0	\$16,037,018	\$232,678	\$183,811	\$16,453,507	1.067	\$17,552,730	\$12.89
OP - Other	\$25,972,205	\$0	\$25,972,205	\$388,585	\$289,183	\$26,649,973	1.048	\$27,931,159	\$20.51
Pharmacy	\$66,456,858	\$214,675	\$66,671,533	\$303	\$668,845	\$67,340,681	1.085	\$73,092,127	\$53.67
Prof - Anesthesia	\$1,651,899	\$0	\$1,651,899	\$14,619		\$1,666,518	1.009	\$1,681,884	\$1.23
Prof - Child EPSDT	\$1,243,134	\$0	\$1,243,134	\$9,875	(\$1,954)	\$1,251,054	1.022	\$1,279,007	\$0.94
Prof - Evaluation & Management	\$48,521,096	\$0	\$48,521,096	\$365,656	\$220,700	\$49,107,453	1.019	\$50,064,507	\$36.76
Prof - Maternity	\$9,304,497	\$0	\$9,304,497	\$87,076	(\$14,649)	\$9,376,923	1.002	\$9,394,435	\$6.90
Prof - Other	\$13,754,212	\$0	\$13,754,212	\$111,514	(\$21,628)	\$13,844,098	1.018	\$14,098,963	\$10.35
Prof - Psych	\$3,958,857	\$0	\$3,958,857	\$28,350	(\$6,219)	\$3,980,987	1.019	\$4,057,913	\$2.98
Prof - Specialist	\$7,369,133	\$0	\$7,369,133	\$64,278	(\$11,595)	\$7,421,816	1.011	\$7,503,926	\$5.51
Prof - Vision	\$2,737,336	\$0	\$2,737,336	\$5,817	(\$4,279)	\$2,738,874	1.021	\$2,797,411	\$2.05
Radiology	\$4,476,829	\$0	\$4,476,829	\$40,672		\$4,517,501	1.094	\$4,940,385	\$3.63
Transportation/Ambulance	\$5,613,987	\$0	\$5,613,987	\$26,005		\$5,639,992	1.109	\$6,255,362	\$4.59
Provider Incentive Payment Adjustment									\$0.37
<b>Total</b>	<b>\$288,836,546</b>	<b>\$630,520</b>	<b>\$289,467,066</b>	<b>\$2,469,352</b>	<b>\$1,660,849</b>	<b>\$293,597,267</b>		<b>\$317,590,926</b>	<b>\$233.56</b>
Admin Cost Adjustment									\$23.56
<b>Medallion 3.0 Capitation Rate</b>									<b>\$257.12</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Low Income Families with Children (LIFC)**

**Exhibit 4a**

All Age Categories									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,924,299	\$0	\$1,924,299	\$18,662	(\$40,719)	\$1,902,241	1.105	\$2,102,447	\$2.36
FQHC / RHC	\$699,617	\$0	\$699,617	\$5,998		\$705,615	1.013	\$714,949	\$0.80
Home Health	\$296,927	\$0	\$296,927	\$4,570		\$301,497	1.030	\$310,652	\$0.35
IP - Maternity	\$9,814,888	\$20,566	\$9,835,454	\$98,752	(\$141,898)	\$9,792,308	1.086	\$10,632,893	\$11.96
IP - Newborn	\$11,219,683	\$499,872	\$11,719,555	\$240,368	(\$170,833)	\$11,789,090	1.230	\$14,504,214	\$16.31
IP - Other	\$20,701,686	\$355,960	\$21,057,646	\$274,521	(\$304,704)	\$21,027,463	1.128	\$23,722,663	\$26.68
IP - Psych	\$2,409,990	\$0	\$2,409,990	\$10,599	\$555,367	\$2,975,956	1.341	\$3,992,220	\$4.49
Lab	\$4,559,571	\$0	\$4,559,571	\$39,767		\$4,599,338	1.100	\$5,058,012	\$5.69
OP - Emergency Room & Related	\$14,979,079	\$0	\$14,979,079	\$217,076	\$171,683	\$15,367,838	1.068	\$16,405,228	\$18.45
OP - Other	\$19,519,029	\$0	\$19,519,029	\$289,766	\$217,307	\$20,026,102	1.053	\$21,085,145	\$23.71
Pharmacy	\$47,615,550	\$188,296	\$47,803,846	\$207	\$675,779	\$48,479,832	1.074	\$52,050,902	\$58.54
Prof - Anesthesia	\$1,160,946	\$0	\$1,160,946	\$10,165		\$1,171,111	1.011	\$1,183,505	\$1.33
Prof - Child EPSDT	\$627,446	\$0	\$627,446	\$4,941	(\$986)	\$631,400	1.023	\$646,135	\$0.73
Prof - Evaluation & Management	\$32,722,280	\$0	\$32,722,280	\$263,091	\$148,913	\$33,134,284	1.019	\$33,778,856	\$37.99
Prof - Maternity	\$5,668,117	\$0	\$5,668,117	\$52,383	(\$8,923)	\$5,711,577	1.004	\$5,731,886	\$6.45
Prof - Other	\$9,459,546	\$0	\$9,459,546	\$75,954	(\$14,874)	\$9,520,626	1.020	\$9,715,684	\$10.93
Prof - Psych	\$2,455,981	\$0	\$2,455,981	\$15,575	(\$3,855)	\$2,467,701	1.021	\$2,518,505	\$2.83
Prof - Specialist	\$5,106,581	\$0	\$5,106,581	\$44,062	(\$8,034)	\$5,142,608	1.012	\$5,206,509	\$5.86
Prof - Vision	\$1,825,522	\$0	\$1,825,522	\$5,883	(\$2,857)	\$1,828,548	1.021	\$1,867,044	\$2.10
Radiology	\$3,628,050	\$0	\$3,628,050	\$33,298		\$3,661,348	1.096	\$4,013,120	\$4.51
Transportation/Ambulance	\$4,345,915	\$0	\$4,345,915	\$19,724		\$4,365,639	1.110	\$4,844,204	\$5.45
Provider Incentive Payment Adjustment									\$0.40
<b>Total</b>	<b>\$200,740,702</b>	<b>\$1,064,694</b>	<b>\$201,805,396</b>	<b>\$1,725,362</b>	<b>\$1,071,364</b>	<b>\$204,602,122</b>		<b>\$220,084,772</b>	<b>\$247.92</b>
Admin Cost Adjustment									\$24.98
<b>Medallion 3.0 Capitation Rate</b>									<b>\$272.90</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$298.54
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,240)	\$430,628	1.074	\$462,489	\$320.28
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$464	\$41,551	1.064	\$44,225	\$30.63
OP - Other	\$202,344		\$202,344	\$3,106	\$2,254	\$207,703	1.064	\$221,069	\$153.09
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,908</b>	<b>\$2,934,302</b>		<b>\$3,252,133</b>	<b>\$2,255.78</b>
Admin Cost Adjustment									\$179.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.88</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$678,120		\$678,120	\$8,328	(\$36,864)	\$649,583	0.982	\$638,153	\$101.62
FQHC / RHC	\$0		\$0			\$0	1.157	\$0	\$0.00
Home Health	\$270,542		\$270,542	\$4,152		\$274,694	1.064	\$292,372	\$46.56
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$3,779,280	(\$1,383,844)	\$2,395,437	\$37,515	(\$34,752)	\$2,398,200	1.074	\$2,575,636	\$410.13
IP - Psych	\$170		\$170		\$39	\$209	1.408	\$294	\$0.05
Lab	\$27,745		\$27,745	\$293		\$28,038	0.982	\$27,545	\$4.39
OP - Emergency Room & Related	\$163,412		\$163,412	\$2,508	\$1,875	\$167,794	1.064	\$178,592	\$28.44
OP - Other	\$1,442,128		\$1,442,128	\$22,134	\$16,063	\$1,480,325	1.064	\$1,575,588	\$250.89
Pharmacy	\$1,191,711	\$10,110	\$1,201,820	\$24	\$66,165	\$1,268,009	1.109	\$1,405,516	\$223.81
Prof - Anesthesia	\$54,050		\$54,050	\$639		\$54,689	1.157	\$63,257	\$10.07
Prof - Child EPSDT	\$9,052		\$9,052	\$107	(\$13)	\$9,147	1.157	\$10,580	\$1.68
Prof - Evaluation & Management	\$544,334		\$544,334	\$6,398	\$1,351	\$552,083	1.157	\$638,572	\$101.68
Prof - Maternity	\$114		\$114	\$1	(\$0)	\$115	1.157	\$133	\$0.02
Prof - Other	\$3,555,085		\$3,555,085	\$42,011	(\$4,979)	\$3,592,118	1.157	\$4,154,856	\$661.60
Prof - Psych	\$8,649		\$8,649	\$102	(\$12)	\$8,739	1.157	\$10,108	\$1.61
Prof - Specialist	\$127,365		\$127,365	\$1,505	(\$178)	\$128,692	1.157	\$148,853	\$23.70
Prof - Vision	\$29,273		\$29,273	\$261	(\$41)	\$29,493	1.157	\$34,114	\$5.43
Radiology	\$26,438		\$26,438	\$323		\$26,760	0.982	\$26,290	\$4.19
Transportation/Ambulance	\$38,034		\$38,034	\$262		\$38,295	0.982	\$37,622	\$5.99
Provider Incentive Payment Adjustment									\$3.01
Total	\$11,945,503	(\$1,373,734)	\$10,571,769	\$126,562	\$8,654	\$10,706,985		\$11,818,079	\$1,884.87
Admin Cost Adjustment									\$149.65
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,034.53</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$935,608		\$935,608	\$11,490	(\$40,773)	\$906,325	0.982	\$890,376	\$25.58
FQHC / RHC	\$1,201		\$1,201	\$14		\$1,215	1.157	\$1,405	\$0.04
Home Health	\$193,345		\$193,345	\$2,967		\$196,313	1.064	\$208,946	\$6.00
IP - Maternity	\$95,449	(\$842)	\$94,607	\$947	(\$1,365)	\$94,189	1.074	\$101,158	\$2.91
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$2,391,540	(\$20,940)	\$2,370,600	\$23,739	(\$34,200)	\$2,360,139	1.074	\$2,534,759	\$72.83
IP - Psych	\$541,568		\$541,568	\$4,979	\$125,397	\$671,944	1.408	\$946,110	\$27.18
Lab	\$109,189		\$109,189	\$1,072		\$110,261	0.982	\$108,321	\$3.11
OP - Emergency Room & Related	\$580,644		\$580,644	\$8,912	\$6,661	\$596,216	1.064	\$634,585	\$18.23
OP - Other	\$2,215,886		\$2,215,886	\$34,009	\$24,682	\$2,274,577	1.064	\$2,420,952	\$69.56
Pharmacy	\$5,744,036	\$48,728	\$5,792,764	\$116	\$318,915	\$6,111,795	1.109	\$6,774,576	\$194.65
Prof - Anesthesia	\$67,806		\$67,806	\$801		\$68,607	1.157	\$79,355	\$2.28
Prof - Child EPSDT	\$10,554		\$10,554	\$125	(\$15)	\$10,664	1.157	\$12,334	\$0.35
Prof - Evaluation & Management	\$1,348,917		\$1,348,917	\$15,765	\$3,348	\$1,368,030	1.157	\$1,582,345	\$45.46
Prof - Maternity	\$30,669		\$30,669	\$362	(\$43)	\$30,988	1.157	\$35,843	\$1.03
Prof - Other	\$1,980,471		\$1,980,471	\$23,396	(\$2,774)	\$2,001,093	1.157	\$2,314,583	\$66.50
Prof - Psych	\$139,711		\$139,711	\$1,650	(\$196)	\$141,165	1.157	\$163,280	\$4.69
Prof - Specialist	\$199,235		\$199,235	\$2,354	(\$279)	\$201,311	1.157	\$232,848	\$6.69
Prof - Vision	\$92,788		\$92,788	\$623	(\$129)	\$93,282	1.157	\$107,896	\$3.10
Radiology	\$95,717		\$95,717	\$1,166		\$96,882	0.982	\$95,177	\$2.73
Transportation/Ambulance	\$179,209		\$179,209	\$1,078		\$180,286	0.982	\$177,114	\$5.09
Provider Incentive Payment Adjustment									\$0.89
<b>Total</b>	<b>\$16,953,542</b>	<b>\$26,946</b>	<b>\$16,980,488</b>	<b>\$135,567</b>	<b>\$399,229</b>	<b>\$17,515,284</b>		<b>\$19,421,964</b>	<b>\$558.93</b>
Admin Cost Adjustment									\$44.38
<b>Medallion 3.0 Capitation Rate</b>									<b>\$603.31</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

<b>Age 21-44 Female</b>									
<b>Northern Virginia</b>	<b>Total Base Claims FY14-15</b>	<b>Base Claims Redistribution and Adjustments FY14-15</b>	<b>Total Redistributed Base Claims FY14-15</b>	<b>Completion Factor Adjustments<sup>1</sup></b>	<b>Policy and Program Adjustments<sup>2</sup></b>	<b>Completed and Adjusted Claims FY14-15</b>	<b>Trend Adjustment</b>	<b>Completed &amp; Trended Claims FY17</b>	<b>PMPM FY17</b>
<b>Service Type</b>									
DME/Supplies	\$276,104		\$276,104	\$3,391	(\$8,314)	\$271,180	0.982	\$266,409	\$11.05
FQHC / RHC	\$1,943		\$1,943	\$23		\$1,966	1.157	\$2,274	\$0.09
Home Health	\$29,101		\$29,101	\$447		\$29,547	1.064	\$31,449	\$1.30
IP - Maternity	\$402,545	\$7,674	\$410,219	\$3,996	(\$5,917)	\$408,299	1.074	\$438,507	\$18.18
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$4,531,003	\$86,474	\$4,617,477	\$44,977	(\$66,598)	\$4,595,857	1.074	\$4,935,891	\$204.69
IP - Psych	\$1,481,756		\$1,481,756	\$13,628	\$343,093	\$1,838,477	1.408	\$2,588,610	\$107.35
Lab	\$175,062		\$175,062	\$1,974		\$177,035	0.982	\$173,920	\$7.21
OP - Emergency Room & Related	\$1,836,998		\$1,836,998	\$28,194	\$21,073	\$1,886,265	1.064	\$2,007,651	\$83.26
OP - Other	\$1,827,997		\$1,827,997	\$28,056	\$20,361	\$1,876,414	1.064	\$1,997,166	\$82.82
Pharmacy	\$7,388,810	\$62,681	\$7,451,491	\$149	\$410,234	\$7,861,875	1.109	\$8,714,440	\$361.39
Prof - Anesthesia	\$81,132		\$81,132	\$959		\$82,091	1.157	\$94,951	\$3.94
Prof - Child EPSDT	\$11,374		\$11,374	\$134	(\$16)	\$11,493	1.157	\$13,293	\$0.55
Prof - Evaluation & Management	\$1,940,619		\$1,940,619	\$22,788	\$4,817	\$1,968,224	1.157	\$2,276,564	\$94.41
Prof - Maternity	\$128,738		\$128,738	\$1,521	(\$180)	\$130,079	1.157	\$150,457	\$6.24
Prof - Other	\$804,418		\$804,418	\$9,501	(\$1,127)	\$812,793	1.157	\$940,124	\$38.99
Prof - Psych	\$170,118		\$170,118	\$2,010	(\$238)	\$171,890	1.157	\$198,818	\$8.24
Prof - Specialist	\$433,971		\$433,971	\$5,128	(\$608)	\$438,492	1.157	\$507,186	\$21.03
Prof - Vision	\$65,525		\$65,525	\$548	(\$91)	\$65,982	1.157	\$76,318	\$3.16
Radiology	\$359,168		\$359,168	\$4,402		\$363,570	0.982	\$357,173	\$14.81
Transportation/Ambulance	\$349,948		\$349,948	\$3,523		\$353,470	0.982	\$347,250	\$14.40
Provider Incentive Payment Adjustment									\$1.73
<b>Total</b>	<b>\$22,296,330</b>	<b>\$156,829</b>	<b>\$22,453,159</b>	<b>\$175,348</b>	<b>\$716,489</b>	<b>\$23,344,997</b>		<b>\$26,118,452</b>	<b>\$1,084.86</b>
Admin Cost Adjustment									\$86.13
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,170.99</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$417,481		\$417,481	\$5,127	(\$12,571)	\$410,037	0.982	\$402,822	\$15.48
FQHC / RHC	\$1,118		\$1,118	\$13		\$1,131	1.157	\$1,309	\$0.05
Home Health	\$50,001		\$50,001	\$767		\$50,769	1.064	\$54,036	\$2.08
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$5,129,421	\$97,656	\$5,227,077	\$50,917	(\$75,390)	\$5,202,604	1.074	\$5,587,530	\$214.75
IP - Psych	\$1,814,647		\$1,814,647	\$16,690	\$420,172	\$2,251,509	1.408	\$3,170,167	\$121.84
Lab	\$93,050		\$93,050	\$962		\$94,012	0.982	\$92,358	\$3.55
OP - Emergency Room & Related	\$1,046,013		\$1,046,013	\$16,054	\$11,999	\$1,074,066	1.064	\$1,143,185	\$43.94
OP - Other	\$1,944,900		\$1,944,900	\$29,850	\$21,663	\$1,996,414	1.064	\$2,124,888	\$81.67
Pharmacy	\$8,229,551	\$69,813	\$8,299,364	\$166	\$456,913	\$8,756,443	1.109	\$9,706,018	\$373.04
Prof - Anesthesia	\$43,582		\$43,582	\$515		\$44,097	1.157	\$51,005	\$1.96
Prof - Child EPSDT	\$10,365		\$10,365	\$122	(\$15)	\$10,473	1.157	\$12,114	\$0.47
Prof - Evaluation & Management	\$1,347,370		\$1,347,370	\$15,748	\$3,344	\$1,366,461	1.157	\$1,580,530	\$60.75
Prof - Maternity	\$6,870		\$6,870	\$81	(\$10)	\$6,941	1.157	\$8,029	\$0.31
Prof - Other	\$828,666		\$828,666	\$9,788	(\$1,160)	\$837,293	1.157	\$968,463	\$37.22
Prof - Psych	\$113,724		\$113,724	\$1,343	(\$159)	\$114,908	1.157	\$132,909	\$5.11
Prof - Specialist	\$271,527		\$271,527	\$3,209	(\$380)	\$274,356	1.157	\$317,336	\$12.20
Prof - Vision	\$43,838		\$43,838	\$279	(\$61)	\$44,056	1.157	\$50,958	\$1.96
Radiology	\$155,442		\$155,442	\$1,899		\$157,341	0.982	\$154,572	\$5.94
Transportation/Ambulance	\$312,862		\$312,862	\$3,009		\$315,872	0.982	\$310,314	\$11.93
Provider Incentive Payment Adjustment									\$1.59
<b>Total</b>	<b>\$21,860,428</b>	<b>\$167,469</b>	<b>\$22,027,897</b>	<b>\$156,540</b>	<b>\$824,345</b>	<b>\$23,008,783</b>		<b>\$25,868,542</b>	<b>\$995.81</b>
Admin Cost Adjustment									\$79.06
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,074.87</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,152,318		\$2,152,318	\$26,431	(\$64,810)	\$2,113,939	0.982	\$2,076,741	\$18.60
FQHC / RHC	\$8,281		\$8,281	\$98		\$8,379	1.157	\$9,691	\$0.09
Home Health	\$558,142		\$558,142	\$8,566		\$566,708	1.064	\$603,178	\$5.40
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$35,849,190	\$542,058	\$36,391,248	\$355,855	(\$524,888)	\$36,222,215	1.074	\$38,902,192	\$348.34
IP - Psych	\$3,454,106		\$3,454,106	\$31,769	\$799,780	\$4,285,655	1.408	\$6,034,283	\$54.03
Lab	\$901,404		\$901,404	\$10,312		\$911,716	0.982	\$895,673	\$8.02
OP - Emergency Room & Related	\$5,465,285		\$5,465,285	\$83,881	\$62,693	\$5,611,859	1.064	\$5,972,997	\$53.48
OP - Other	\$12,809,787		\$12,809,787	\$196,603	\$142,683	\$13,149,073	1.064	\$13,995,251	\$125.32
Pharmacy	\$44,602,179	\$378,372	\$44,980,550	\$899	\$2,476,359	\$47,457,809	1.109	\$52,604,277	\$471.04
Prof - Anesthesia	\$492,017		\$492,017	\$5,814		\$497,831	1.157	\$575,821	\$5.16
Prof - Child EPSDT	\$76,507		\$76,507	\$904	(\$107)	\$77,304	1.157	\$89,414	\$0.80
Prof - Evaluation & Management	\$9,402,645		\$9,402,645	\$110,329	\$23,339	\$9,536,313	1.157	\$11,030,263	\$98.77
Prof - Maternity	\$55,429		\$55,429	\$655	(\$78)	\$56,006	1.157	\$64,780	\$0.58
Prof - Other	\$4,079,641		\$4,079,641	\$48,194	(\$5,713)	\$4,122,122	1.157	\$4,767,890	\$42.69
Prof - Psych	\$386,226		\$386,226	\$4,563	(\$541)	\$390,248	1.157	\$451,384	\$4.04
Prof - Specialist	\$3,274,490		\$3,274,490	\$38,696	(\$4,586)	\$3,308,600	1.157	\$3,826,923	\$34.27
Prof - Vision	\$677,952		\$677,952	\$7,003	(\$948)	\$684,007	1.157	\$791,163	\$7.08
Radiology	\$2,252,157		\$2,252,157	\$27,610		\$2,279,767	0.982	\$2,239,651	\$20.05
Transportation/Ambulance	\$1,317,896		\$1,317,896	\$12,608		\$1,330,504	0.982	\$1,307,092	\$11.70
Provider Incentive Payment Adjustment									\$2.10
<b>Total</b>	<b>\$127,815,652</b>	<b>\$920,430</b>	<b>\$128,736,081</b>	<b>\$970,791</b>	<b>\$2,903,183</b>	<b>\$132,610,055</b>		<b>\$146,238,664</b>	<b>\$1,311.56</b>
Admin Cost Adjustment									\$104.13
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,415.70</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$298.54
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,240)	\$430,628	1.074	\$462,489	\$320.28
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$464	\$41,551	1.064	\$44,225	\$30.63
OP - Other	\$202,344		\$202,344	\$3,106	\$2,254	\$207,703	1.064	\$221,069	\$153.09
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,908</b>	<b>\$2,934,302</b>		<b>\$3,252,133</b>	<b>\$2,255.78</b>
Admin Cost Adjustment									\$179.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.88</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$316,266		\$316,266	\$3,884	(\$17,193)	\$302,957	0.982	\$297,626	\$60.62
FQHC / RHC	\$110,760		\$110,760	\$1,309		\$112,069	1.157	\$129,625	\$26.40
Home Health	\$24,538		\$24,538	\$377		\$24,915	1.064	\$26,518	\$5.40
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,339,079	(\$187,024)	\$1,152,055	\$13,292	(\$16,646)	\$1,148,702	1.074	\$1,233,691	\$251.26
IP - Psych	\$106,644		\$106,644		\$24,468	\$131,112	1.408	\$184,608	\$37.60
Lab	\$14,293		\$14,293	\$157		\$14,450	0.982	\$14,196	\$2.89
OP - Emergency Room & Related	\$89,331		\$89,331	\$1,371	\$1,025	\$91,727	1.064	\$97,630	\$19.88
OP - Other	\$740,853		\$740,853	\$11,371	\$8,252	\$760,476	1.064	\$809,414	\$164.85
Pharmacy	\$685,630	\$5,816	\$691,446	\$14	\$38,067	\$729,527	1.109	\$808,639	\$164.69
Prof - Anesthesia	\$24,195		\$24,195	\$286		\$24,481	1.157	\$28,316	\$5.77
Prof - Child EPSDT	\$3,548		\$3,548	\$42	(\$5)	\$3,585	1.157	\$4,147	\$0.84
Prof - Evaluation & Management	\$307,977		\$307,977	\$3,629	\$764	\$312,371	1.157	\$361,307	\$73.59
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$990,979		\$990,979	\$11,712	(\$1,388)	\$1,001,304	1.157	\$1,158,167	\$235.88
Prof - Psych	\$20,043		\$20,043	\$53	(\$28)	\$20,068	1.157	\$23,211	\$4.73
Prof - Specialist	\$57,355		\$57,355	\$678	(\$80)	\$57,952	1.157	\$67,031	\$13.65
Prof - Vision	\$15,613		\$15,613	\$105	(\$22)	\$15,695	1.157	\$18,154	\$3.70
Radiology	\$19,603		\$19,603	\$241		\$19,844	0.982	\$19,495	\$3.97
Transportation/Ambulance	\$74,206		\$74,206	\$738		\$74,945	0.982	\$73,626	\$15.00
Provider Incentive Payment Adjustment									\$1.75
<b>Total</b>	<b>\$4,940,914</b>	<b>(\$181,207)</b>	<b>\$4,759,707</b>	<b>\$49,258</b>	<b>\$37,215</b>	<b>\$4,846,180</b>		<b>\$5,355,402</b>	<b>\$1,092.46</b>
Admin Cost Adjustment									\$86.74
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,179.20</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$387,287		\$387,287	\$4,756	(\$16,878)	\$375,166	0.982	\$368,564	\$9.47
FQHC / RHC	\$191,472		\$191,472	\$2,263		\$193,735	1.157	\$224,085	\$5.76
Home Health	\$3,241		\$3,241	\$50		\$3,291	1.064	\$3,503	\$0.09
IP - Maternity	\$62,337	(\$2,460)	\$59,877	\$619	(\$864)	\$59,632	1.074	\$64,044	\$1.65
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,807,453	(\$71,324)	\$1,736,129	\$17,942	(\$25,055)	\$1,729,016	1.074	\$1,856,941	\$47.74
IP - Psych	\$1,199,254		\$1,199,254	\$3,683	\$275,995	\$1,478,933	1.408	\$2,082,366	\$53.53
Lab	\$124,850		\$124,850	\$1,381		\$126,232	0.982	\$124,010	\$3.19
OP - Emergency Room & Related	\$444,890		\$444,890	\$6,828	\$5,103	\$456,821	1.064	\$486,219	\$12.50
OP - Other	\$1,186,313		\$1,186,313	\$18,207	\$13,214	\$1,217,734	1.064	\$1,296,099	\$33.32
Pharmacy	\$6,257,228	\$53,082	\$6,310,310	\$126	\$347,408	\$6,657,844	1.109	\$7,379,841	\$189.71
Prof - Anesthesia	\$41,363		\$41,363	\$489		\$41,852	1.157	\$48,408	\$1.24
Prof - Child EPSDT	\$7,311		\$7,311	\$86	(\$10)	\$7,387	1.157	\$8,544	\$0.22
Prof - Evaluation & Management	\$1,239,782		\$1,239,782	\$14,564	\$3,077	\$1,257,424	1.157	\$1,454,411	\$37.39
Prof - Maternity	\$38,435		\$38,435	\$454	(\$54)	\$38,835	1.157	\$44,919	\$1.15
Prof - Other	\$2,764,276		\$2,764,276	\$32,673	(\$3,871)	\$2,793,077	1.157	\$3,230,638	\$83.05
Prof - Psych	\$330,946		\$330,946	\$2,531	(\$462)	\$333,016	1.157	\$385,186	\$9.90
Prof - Specialist	\$189,497		\$189,497	\$2,239	(\$265)	\$191,471	1.157	\$221,466	\$5.69
Prof - Vision	\$102,758		\$102,758	\$565	(\$143)	\$103,180	1.157	\$119,344	\$3.07
Radiology	\$104,243		\$104,243	\$1,280		\$105,523	0.982	\$103,666	\$2.66
Transportation/Ambulance	\$377,117		\$377,117	\$3,300		\$380,418	0.982	\$373,724	\$9.61
Provider Incentive Payment Adjustment									\$0.82
Total	\$16,860,055	(\$20,702)	\$16,839,352	\$114,037	\$597,196	\$17,550,585		\$19,875,977	\$511.76
Admin Cost Adjustment									\$40.63
<b>Medallion 3.0 Capitation Rate</b>									<b>\$552.39</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Female									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$357,739		\$357,739	\$4,393	(\$10,772)	\$351,360	0.982	\$345,177	\$14.58
FQHC / RHC	\$118,957		\$118,957	\$1,406		\$120,363	1.157	\$139,219	\$5.88
Home Health	\$21,399		\$21,399	\$328		\$21,728	1.064	\$23,126	\$0.98
IP - Maternity	\$474,738	(\$6,865)	\$467,873	\$4,712	(\$6,750)	\$465,835	1.074	\$500,301	\$21.13
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$3,873,435	(\$56,011)	\$3,817,424	\$38,449	(\$55,077)	\$3,800,797	1.074	\$4,082,007	\$172.40
IP - Psych	\$1,051,056		\$1,051,056	\$5,741	\$242,466	\$1,299,263	1.408	\$1,829,387	\$77.26
Lab	\$320,152		\$320,152	\$3,829		\$323,982	0.982	\$318,281	\$13.44
OP - Emergency Room & Related	\$1,338,805		\$1,338,805	\$20,548	\$15,358	\$1,374,711	1.064	\$1,463,177	\$61.79
OP - Other	\$2,226,815		\$2,226,815	\$34,177	\$24,804	\$2,285,796	1.064	\$2,432,893	\$102.75
Pharmacy	\$7,013,309	\$59,496	\$7,072,805	\$141	\$389,386	\$7,462,333	1.109	\$8,271,571	\$349.34
Prof - Anesthesia	\$55,921		\$55,921	\$661		\$56,582	1.157	\$65,446	\$2.76
Prof - Child EPSDT	\$15,353		\$15,353	\$181	(\$22)	\$15,513	1.157	\$17,943	\$0.76
Prof - Evaluation & Management	\$1,601,502		\$1,601,502	\$18,866	\$3,975	\$1,624,343	1.157	\$1,878,811	\$79.35
Prof - Maternity	\$164,336		\$164,336	\$1,942	(\$230)	\$166,048	1.157	\$192,061	\$8.11
Prof - Other	\$518,834		\$518,834	\$6,128	(\$727)	\$524,235	1.157	\$606,361	\$25.61
Prof - Psych	\$182,337		\$182,337	\$1,417	(\$254)	\$183,500	1.157	\$212,247	\$8.96
Prof - Specialist	\$375,347		\$375,347	\$4,436	(\$526)	\$379,257	1.157	\$438,671	\$18.53
Prof - Vision	\$65,325		\$65,325	\$469	(\$91)	\$65,703	1.157	\$75,996	\$3.21
Radiology	\$332,726		\$332,726	\$4,086		\$336,811	0.982	\$330,885	\$13.97
Transportation/Ambulance	\$560,326		\$560,326	\$6,104		\$566,430	0.982	\$556,463	\$23.50
Provider Incentive Payment Adjustment									\$1.61
Total	\$20,668,413	(\$3,380)	\$20,665,033	\$158,016	\$601,540	\$21,424,589		\$23,780,022	\$1,005.92
Admin Cost Adjustment									\$79.87
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,085.78</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$447,548		\$447,548	\$5,496	(\$13,476)	\$439,568	0.982	\$431,833	\$21.21
FQHC / RHC	\$44,942		\$44,942	\$531		\$45,474	1.157	\$52,597	\$2.58
Home Health	\$33,412		\$33,412	\$513		\$33,925	1.064	\$36,108	\$1.77
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$5,000,881	\$95,442	\$5,096,323	\$49,641	(\$73,504)	\$5,072,460	1.074	\$5,447,757	\$267.52
IP - Psych	\$1,049,380		\$1,049,380	\$5,850	\$242,106	\$1,297,336	1.408	\$1,826,674	\$89.70
Lab	\$105,163		\$105,163	\$1,210		\$106,373	0.982	\$104,501	\$5.13
OP - Emergency Room & Related	\$745,786		\$745,786	\$11,446	\$8,555	\$765,787	1.064	\$815,067	\$40.02
OP - Other	\$1,572,026		\$1,572,026	\$24,127	\$17,510	\$1,613,663	1.064	\$1,717,507	\$84.34
Pharmacy	\$6,154,086	\$52,207	\$6,206,292	\$124	\$341,681	\$6,548,098	1.109	\$7,258,193	\$356.42
Prof - Anesthesia	\$32,242		\$32,242	\$381		\$32,623	1.157	\$37,734	\$1.85
Prof - Child EPSDT	\$5,428		\$5,428	\$64	(\$8)	\$5,485	1.157	\$6,344	\$0.31
Prof - Evaluation & Management	\$957,981		\$957,981	\$11,275	\$2,378	\$971,634	1.157	\$1,123,849	\$55.19
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$1,144,714		\$1,144,714	\$13,532	(\$1,603)	\$1,156,643	1.157	\$1,337,841	\$65.70
Prof - Psych	\$93,397		\$93,397	\$390	(\$130)	\$93,657	1.157	\$108,329	\$5.32
Prof - Specialist	\$239,018		\$239,018	\$2,825	(\$335)	\$241,508	1.157	\$279,342	\$13.72
Prof - Vision	\$50,027		\$50,027	\$354	(\$70)	\$50,311	1.157	\$58,193	\$2.86
Radiology	\$128,795		\$128,795	\$1,581		\$130,376	0.982	\$128,082	\$6.29
Transportation/Ambulance	\$359,374		\$359,374	\$3,706		\$363,080	0.982	\$356,691	\$17.52
Provider Incentive Payment Adjustment									\$1.66
<b>Total</b>	<b>\$18,164,200</b>	<b>\$147,648</b>	<b>\$18,311,848</b>	<b>\$133,046</b>	<b>\$523,105</b>	<b>\$18,967,999</b>		<b>\$21,126,643</b>	<b>\$1,039.11</b>
Admin Cost Adjustment									\$82.50
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,121.61</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,255,120		\$2,255,120	\$27,694	(\$67,906)	\$2,214,907	0.982	\$2,175,933	\$32.70
FQHC / RHC	\$344,067		\$344,067	\$4,066		\$348,133	1.157	\$402,672	\$6.05
Home Health	\$399,863		\$399,863	\$6,137		\$406,000	1.064	\$432,127	\$6.49
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$21,020,571	\$246,028	\$21,266,600	\$208,660	(\$306,748)	\$21,168,511	1.074	\$22,734,708	\$341.67
IP - Psych	\$2,292,381		\$2,292,381	\$10,216	\$528,295	\$2,830,891	1.408	\$3,985,949	\$59.90
Lab	\$882,284		\$882,284	\$10,545		\$892,828	0.982	\$877,117	\$13.18
OP - Emergency Room & Related	\$2,895,932		\$2,895,932	\$44,447	\$33,220	\$2,973,599	1.064	\$3,164,958	\$47.57
OP - Other	\$9,059,580		\$9,059,580	\$139,046	\$100,911	\$9,299,537	1.064	\$9,897,987	\$148.75
Pharmacy	\$27,329,936	\$231,847	\$27,561,783	\$551	\$1,517,387	\$29,079,721	1.109	\$32,233,213	\$484.43
Prof - Anesthesia	\$196,172		\$196,172	\$2,318		\$198,491	1.157	\$229,586	\$3.45
Prof - Child EPSDT	\$50,825		\$50,825	\$601	(\$71)	\$51,355	1.157	\$59,400	\$0.89
Prof - Evaluation & Management	\$5,058,628		\$5,058,628	\$59,610	\$12,557	\$5,130,795	1.157	\$5,934,581	\$89.19
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$3,095,100		\$3,095,100	\$36,563	(\$4,335)	\$3,127,329	1.157	\$3,617,253	\$54.36
Prof - Psych	\$281,761		\$281,761	\$1,288	(\$392)	\$282,658	1.157	\$326,939	\$4.91
Prof - Specialist	\$1,875,888		\$1,875,888	\$22,168	(\$2,627)	\$1,895,429	1.157	\$2,192,365	\$32.95
Prof - Vision	\$301,731		\$301,731	\$2,719	(\$421)	\$304,029	1.157	\$351,657	\$5.28
Radiology	\$1,177,865		\$1,177,865	\$14,464		\$1,192,328	0.982	\$1,171,347	\$17.60
Transportation/Ambulance	\$1,703,919		\$1,703,919	\$18,744		\$1,722,663	0.982	\$1,692,350	\$25.43
Provider Incentive Payment Adjustment									\$2.20
<b>Total</b>	<b>\$80,221,625</b>	<b>\$477,875</b>	<b>\$80,699,499</b>	<b>\$609,834</b>	<b>\$1,809,869</b>	<b>\$83,119,203</b>		<b>\$91,480,143</b>	<b>\$1,377.04</b>
Admin Cost Adjustment									\$109.33
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,486.37</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$298.54
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,240)	\$430,628	1.074	\$462,489	\$320.28
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$464	\$41,551	1.064	\$44,225	\$30.63
OP - Other	\$202,344		\$202,344	\$3,106	\$2,254	\$207,703	1.064	\$221,069	\$153.09
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,908</b>	<b>\$2,934,302</b>		<b>\$3,252,133</b>	<b>\$2,255.78</b>
Admin Cost Adjustment									\$179.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.88</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$797,391		\$797,391	\$9,792	(\$43,348)	\$763,835	0.982	\$750,395	\$89.00
FQHC / RHC	\$1,259		\$1,259	\$15		\$1,274	1.157	\$1,474	\$0.17
Home Health	\$1,135,249		\$1,135,249	\$17,424		\$1,152,673	1.064	\$1,226,850	\$145.52
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,741,419	(\$307,805)	\$1,433,614	\$17,286	(\$20,724)	\$1,430,176	1.074	\$1,535,991	\$182.18
IP - Psych	\$168,104		\$168,104	\$222	\$38,620	\$206,947	1.408	\$291,385	\$34.56
Lab	\$28,066		\$28,066	\$299		\$28,365	0.982	\$27,866	\$3.31
OP - Emergency Room & Related	\$214,325		\$214,325	\$3,289	\$2,459	\$220,073	1.064	\$234,236	\$27.78
OP - Other	\$1,625,827		\$1,625,827	\$24,953	\$18,109	\$1,668,890	1.064	\$1,776,287	\$210.69
Pharmacy	\$1,023,251	\$8,680	\$1,031,931	\$21	\$56,812	\$1,088,764	1.109	\$1,206,832	\$143.14
Prof - Anesthesia	\$40,709		\$40,709	\$481		\$41,191	1.157	\$47,643	\$5.65
Prof - Child EPSDT	\$8,982		\$8,982	\$106	(\$13)	\$9,076	1.157	\$10,497	\$1.25
Prof - Evaluation & Management	\$506,629		\$506,629	\$5,977	\$1,258	\$513,863	1.157	\$594,364	\$70.50
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$1,562,827		\$1,562,827	\$18,471	(\$2,189)	\$1,579,109	1.157	\$1,826,490	\$216.64
Prof - Psych	\$43,660		\$43,660	\$267	(\$61)	\$43,866	1.157	\$50,738	\$6.02
Prof - Specialist	\$129,757		\$129,757	\$1,533	(\$182)	\$131,109	1.157	\$151,649	\$17.99
Prof - Vision	\$25,560		\$25,560	\$185	(\$36)	\$25,710	1.157	\$29,737	\$3.53
Radiology	\$23,777		\$23,777	\$292		\$24,069	0.982	\$23,646	\$2.80
Transportation/Ambulance	\$85,202		\$85,202	\$739		\$85,942	0.982	\$84,429	\$10.01
Provider Incentive Payment Adjustment									\$1.87
<b>Total</b>	<b>\$9,161,997</b>	<b>(\$299,125)</b>	<b>\$8,862,873</b>	<b>\$101,352</b>	<b>\$50,706</b>	<b>\$9,014,931</b>		<b>\$9,870,510</b>	<b>\$1,172.62</b>
Admin Cost Adjustment									\$93.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,265.72</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Capitation Rate Calculations - Health Plan Encounter Data  
Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,501,282		\$1,501,282	\$18,436	(\$65,425)	\$1,454,293	0.982	\$1,428,703	\$14.15
FQHC / RHC	\$30,359		\$30,359	\$359		\$30,717	1.157	\$35,529	\$0.35
Home Health	\$202,376		\$202,376	\$3,106		\$205,482	1.064	\$218,706	\$2.17
IP - Maternity	\$298,655	(\$4,154)	\$294,501	\$2,965	(\$4,249)	\$293,216	1.074	\$314,910	\$3.12
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$6,173,134	(\$85,868)	\$6,087,266	\$61,277	(\$87,825)	\$6,060,719	1.074	\$6,509,134	\$64.45
IP - Psych	\$3,521,882		\$3,521,882	\$17,147	\$811,975	\$4,351,005	1.408	\$6,126,298	\$60.66
Lab	\$253,544		\$253,544	\$2,554		\$256,098	0.982	\$251,591	\$2.49
OP - Emergency Room & Related	\$2,144,994		\$2,144,994	\$32,921	\$24,606	\$2,202,521	1.064	\$2,344,259	\$23.21
OP - Other	\$4,896,615		\$4,896,615	\$75,153	\$54,541	\$5,026,309	1.064	\$5,349,765	\$52.97
Pharmacy	\$13,711,447	\$116,318	\$13,827,765	\$277	\$761,274	\$14,589,316	1.109	\$16,171,425	\$160.11
Prof - Anesthesia	\$132,469		\$132,469	\$1,565		\$134,035	1.157	\$155,032	\$1.53
Prof - Child EPSDT	\$20,308		\$20,308	\$240	(\$28)	\$20,520	1.157	\$23,734	\$0.23
Prof - Evaluation & Management	\$3,154,719		\$3,154,719	\$37,152	\$7,831	\$3,199,702	1.157	\$3,700,964	\$36.64
Prof - Maternity	\$154,070		\$154,070	\$1,821	(\$216)	\$155,675	1.157	\$180,063	\$1.78
Prof - Other	\$3,967,428		\$3,967,428	\$46,899	(\$5,556)	\$4,008,771	1.157	\$4,636,782	\$45.91
Prof - Psych	\$670,122		\$670,122	\$5,056	(\$935)	\$674,243	1.157	\$779,870	\$7.72
Prof - Specialist	\$558,194		\$558,194	\$6,596	(\$782)	\$564,009	1.157	\$652,366	\$6.46
Prof - Vision	\$187,796		\$187,796	\$817	(\$261)	\$188,352	1.157	\$217,859	\$2.16
Radiology	\$220,744		\$220,744	\$2,711		\$223,455	0.982	\$219,522	\$2.17
Transportation/Ambulance	\$541,459		\$541,459	\$2,999		\$544,458	0.982	\$534,878	\$5.30
Provider Incentive Payment Adjustment									\$0.79
<b>Total</b>	<b>\$42,341,599</b>	<b>\$26,296</b>	<b>\$42,367,894</b>	<b>\$320,051</b>	<b>\$1,494,951</b>	<b>\$44,182,896</b>		<b>\$49,851,393</b>	<b>\$494.36</b>
Admin Cost Adjustment									\$39.25
<b>Medallion 3.0 Capitation Rate</b>									<b>\$533.61</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Female									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$889,523		\$889,523	\$10,924	(\$26,785)	\$873,662	0.982	\$858,289	\$15.07
FQHC / RHC	\$85,325		\$85,325	\$1,008		\$86,333	1.157	\$99,858	\$1.75
Home Health	\$131,790		\$131,790	\$2,023		\$133,812	1.064	\$142,424	\$2.50
IP - Maternity	\$1,128,178	\$4,311	\$1,132,489	\$11,199	(\$16,336)	\$1,127,352	1.074	\$1,210,762	\$21.26
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$12,357,608	\$47,224	\$12,404,833	\$122,667	(\$178,940)	\$12,348,560	1.074	\$13,262,194	\$232.92
IP - Psych	\$3,714,630		\$3,714,630	\$25,766	\$858,176	\$4,598,572	1.408	\$6,474,878	\$113.72
Lab	\$519,495		\$519,495	\$6,061		\$525,557	0.982	\$516,309	\$9.07
OP - Emergency Room & Related	\$4,898,024		\$4,898,024	\$75,174	\$56,186	\$5,029,385	1.064	\$5,353,039	\$94.02
OP - Other	\$5,431,493		\$5,431,493	\$83,362	\$60,499	\$5,575,355	1.064	\$5,934,144	\$104.22
Pharmacy	\$14,620,217	\$124,027	\$14,744,244	\$295	\$811,730	\$15,556,269	1.109	\$17,243,238	\$302.84
Prof - Anesthesia	\$187,341		\$187,341	\$2,214		\$189,555	1.157	\$219,250	\$3.85
Prof - Child EPSDT	\$29,159		\$29,159	\$345	(\$41)	\$29,463	1.157	\$34,079	\$0.60
Prof - Evaluation & Management	\$4,157,010		\$4,157,010	\$49,052	\$10,319	\$4,216,380	1.157	\$4,876,915	\$85.65
Prof - Maternity	\$470,716		\$470,716	\$5,563	(\$659)	\$475,619	1.157	\$550,129	\$9.66
Prof - Other	\$1,698,756		\$1,698,756	\$20,081	(\$2,379)	\$1,716,459	1.157	\$1,985,357	\$34.87
Prof - Psych	\$423,529		\$423,529	\$3,427	(\$591)	\$426,365	1.157	\$493,159	\$8.66
Prof - Specialist	\$1,005,804		\$1,005,804	\$11,886	(\$1,409)	\$1,016,281	1.157	\$1,175,491	\$20.65
Prof - Vision	\$109,470		\$109,470	\$754	(\$153)	\$110,071	1.157	\$127,315	\$2.24
Radiology	\$679,983		\$679,983	\$8,350		\$688,334	0.982	\$676,221	\$11.88
Transportation/Ambulance	\$979,243		\$979,243	\$9,978		\$989,221	0.982	\$971,814	\$17.07
Provider Incentive Payment Adjustment									\$1.75
<b>Total</b>	<b>\$53,517,296</b>	<b>\$175,563</b>	<b>\$53,692,859</b>	<b>\$450,129</b>	<b>\$1,569,617</b>	<b>\$55,712,605</b>		<b>\$62,204,863</b>	<b>\$1,094.25</b>
Admin Cost Adjustment									\$86.88
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,181.13</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$784,394		\$784,394	\$9,633	(\$23,620)	\$770,407	0.982	\$756,851	\$14.40
FQHC / RHC	\$60,519		\$60,519	\$715		\$61,234	1.157	\$70,827	\$1.35
Home Health	\$99,063		\$99,063	\$1,520		\$100,583	1.064	\$107,056	\$2.04
IP - Maternity	\$7,304	(\$43)	\$7,261	\$72	(\$105)	\$7,228	1.074	\$7,763	\$0.15
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$8,809,581	(\$51,910)	\$8,757,671	\$87,448	(\$126,342)	\$8,718,777	1.074	\$9,363,854	\$178.17
IP - Psych	\$3,011,881		\$3,011,881	\$19,877	\$695,590	\$3,727,348	1.408	\$5,248,178	\$99.86
Lab	\$135,240		\$135,240	\$1,369		\$136,609	0.982	\$134,205	\$2.55
OP - Emergency Room & Related	\$2,575,471		\$2,575,471	\$39,528	\$29,544	\$2,644,543	1.064	\$2,814,727	\$53.56
OP - Other	\$3,739,744		\$3,739,744	\$57,397	\$41,655	\$3,838,796	1.064	\$4,085,833	\$77.74
Pharmacy	\$11,537,227	\$97,873	\$11,635,100	\$233	\$640,559	\$12,275,891	1.109	\$13,607,126	\$258.91
Prof - Anesthesia	\$73,300		\$73,300	\$866		\$74,166	1.157	\$85,785	\$1.63
Prof - Child EPSDT	\$15,837		\$15,837	\$187	(\$22)	\$16,002	1.157	\$18,509	\$0.35
Prof - Evaluation & Management	\$2,231,247		\$2,231,247	\$26,301	\$5,539	\$2,263,086	1.157	\$2,617,619	\$49.81
Prof - Maternity	\$1,475		\$1,475	\$17	(\$2)	\$1,490	1.157	\$1,724	\$0.03
Prof - Other	\$2,132,043		\$2,132,043	\$25,203	(\$2,986)	\$2,154,259	1.157	\$2,491,744	\$47.41
Prof - Psych	\$266,981		\$266,981	\$1,685	(\$372)	\$268,294	1.157	\$310,325	\$5.90
Prof - Specialist	\$589,590		\$589,590	\$6,967	(\$826)	\$595,732	1.157	\$689,059	\$13.11
Prof - Vision	\$85,147		\$85,147	\$509	(\$119)	\$85,537	1.157	\$98,937	\$1.88
Radiology	\$271,141		\$271,141	\$3,330		\$274,471	0.982	\$269,641	\$5.13
Transportation/Ambulance	\$745,515		\$745,515	\$7,259		\$752,774	0.982	\$739,528	\$14.07
Provider Incentive Payment Adjustment									\$1.33
<b>Total</b>	<b>\$37,172,699</b>	<b>\$45,920</b>	<b>\$37,218,619</b>	<b>\$290,116</b>	<b>\$1,258,494</b>	<b>\$38,767,229</b>		<b>\$43,519,289</b>	<b>\$829.38</b>
Admin Cost Adjustment									\$65.85
<b>Medallion 3.0 Capitation Rate</b>									<b>\$895.23</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$3,988,576		\$3,988,576	\$48,981	(\$120,103)	\$3,917,454	0.982	\$3,848,520	\$24.77
FQHC / RHC	\$439,288		\$439,288	\$5,191		\$444,479	1.157	\$514,111	\$3.31
Home Health	\$891,093		\$891,093	\$13,676		\$904,769	1.064	\$962,993	\$6.20
IP - Maternity	\$4,804	\$48	\$4,852	\$48	(\$70)	\$4,830	1.074	\$5,188	\$0.03
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$64,104,940	\$646,083	\$64,751,023	\$636,334	(\$933,980)	\$64,453,378	1.074	\$69,222,097	\$445.48
IP - Psych	\$8,861,298		\$8,861,298	\$58,087	\$2,046,414	\$10,965,800	1.408	\$15,440,056	\$99.36
Lab	\$1,095,737		\$1,095,737	\$12,608		\$1,108,345	0.982	\$1,088,842	\$7.01
OP - Emergency Room & Related	\$9,829,248		\$9,829,248	\$150,858	\$112,753	\$10,092,859	1.064	\$10,742,362	\$69.13
OP - Other	\$25,856,252		\$25,856,252	\$396,839	\$288,002	\$26,541,093	1.064	\$28,249,084	\$181.80
Pharmacy	\$64,757,148	\$549,351	\$65,306,499	\$1,306	\$3,595,384	\$68,903,189	1.109	\$76,375,259	\$491.51
Prof - Anesthesia	\$564,909		\$564,909	\$6,676		\$571,584	1.157	\$661,128	\$4.25
Prof - Child EPSDT	\$57,841		\$57,841	\$684	(\$81)	\$58,444	1.157	\$67,600	\$0.44
Prof - Evaluation & Management	\$12,850,244		\$12,850,244	\$151,649	\$31,898	\$13,033,791	1.157	\$15,075,653	\$97.02
Prof - Maternity	\$1,458		\$1,458	\$17	(\$2)	\$1,474	1.157	\$1,705	\$0.01
Prof - Other	\$7,336,096		\$7,336,096	\$86,713	(\$10,274)	\$7,412,535	1.157	\$8,573,776	\$55.18
Prof - Psych	\$754,916		\$754,916	\$4,521	(\$1,051)	\$758,386	1.157	\$877,194	\$5.65
Prof - Specialist	\$4,846,954		\$4,846,954	\$57,279	(\$6,788)	\$4,897,445	1.157	\$5,664,674	\$36.45
Prof - Vision	\$626,952		\$626,952	\$5,909	(\$876)	\$631,985	1.157	\$730,992	\$4.70
Radiology	\$2,327,314		\$2,327,314	\$28,580		\$2,355,894	0.982	\$2,314,439	\$14.89
Transportation/Ambulance	\$3,136,955		\$3,136,955	\$32,942		\$3,169,898	0.982	\$3,114,119	\$20.04
Provider Incentive Payment Adjustment									\$2.51
<b>Total</b>	<b>\$212,332,023</b>	<b>\$1,195,483</b>	<b>\$213,527,506</b>	<b>\$1,698,900</b>	<b>\$5,001,227</b>	<b>\$220,227,633</b>		<b>\$243,529,790</b>	<b>\$1,569.74</b>
Admin Cost Adjustment									\$124.63
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,694.37</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$6,020)	\$401,194	1.074	\$430,877	\$298.39
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,458)	\$430,410	1.074	\$462,255	\$320.12
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$483	\$41,570	1.064	\$44,245	\$30.64
OP - Other	\$202,344		\$202,344	\$3,106	\$2,527	\$207,976	1.064	\$221,360	\$153.30
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,779</b>	<b>\$2,934,173</b>		<b>\$3,251,991</b>	<b>\$2,255.68</b>
Admin Cost Adjustment									\$179.09
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.77</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$393,823		\$393,823	\$4,836	(\$21,409)	\$377,250	0.982	\$370,612	\$68.47
FQHC / RHC	\$15,604		\$15,604	\$184		\$15,789	1.157	\$18,262	\$3.37
Home Health	\$45,805		\$45,805	\$703		\$46,508	1.064	\$49,500	\$9.14
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,163,450	\$22,204	\$1,185,654	\$11,549	(\$17,698)	\$1,179,505	1.074	\$1,266,773	\$234.02
IP - Psych	\$112,945		\$112,945	\$27	\$25,920	\$138,891	1.408	\$195,562	\$36.13
Lab	\$19,849		\$19,849	\$221		\$20,070	0.982	\$19,717	\$3.64
OP - Emergency Room & Related	\$171,379		\$171,379	\$2,630	\$2,003	\$176,012	1.064	\$187,339	\$34.61
OP - Other	\$770,671		\$770,671	\$11,828	\$9,622	\$792,121	1.064	\$843,096	\$155.75
Pharmacy	\$823,098	\$6,983	\$830,081	\$17	\$45,699	\$875,797	1.109	\$970,771	\$179.34
Prof - Anesthesia	\$35,130		\$35,130	\$415		\$35,545	1.157	\$41,114	\$7.60
Prof - Child EPSDT	\$10,252		\$10,252	\$121	(\$14)	\$10,358	1.157	\$11,981	\$2.21
Prof - Evaluation & Management	\$353,139		\$353,139	\$4,161	\$877	\$358,177	1.157	\$414,289	\$76.54
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$630,017		\$630,017	\$7,450	(\$882)	\$636,584	1.157	\$736,311	\$136.03
Prof - Psych	\$20,820		\$20,820	\$56	(\$29)	\$20,847	1.157	\$24,113	\$4.45
Prof - Specialist	\$66,249		\$66,249	\$783	(\$93)	\$66,939	1.157	\$77,425	\$14.30
Prof - Vision	\$14,991		\$14,991	\$94	(\$21)	\$15,064	1.157	\$17,424	\$3.22
Radiology	\$57,502		\$57,502	\$706		\$58,208	0.982	\$57,184	\$10.56
Transportation/Ambulance	\$60,411		\$60,411	\$539		\$60,950	0.982	\$59,878	\$11.06
Provider Incentive Payment Adjustment									\$1.59
<b>Total</b>	<b>\$4,765,136</b>	<b>\$29,187</b>	<b>\$4,794,323</b>	<b>\$46,320</b>	<b>\$43,974</b>	<b>\$4,884,617</b>		<b>\$5,361,351</b>	<b>\$992.04</b>
Admin Cost Adjustment									\$78.76
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,070.81</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$781,238		\$781,238	\$9,594	(\$34,046)	\$756,786	0.982	\$743,470	\$15.39
FQHC / RHC	\$136,638		\$136,638	\$1,615		\$138,252	1.157	\$159,911	\$3.31
Home Health	\$201,261		\$201,261	\$3,089		\$204,350	1.064	\$217,500	\$4.50
IP - Maternity	\$134,716	\$2,571	\$137,287	\$1,337	(\$2,049)	\$136,575	1.074	\$146,680	\$3.04
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$2,082,500	\$39,744	\$2,122,244	\$20,672	(\$31,679)	\$2,111,237	1.074	\$2,267,442	\$46.95
IP - Psych	\$1,438,854		\$1,438,854	\$3,322	\$330,885	\$1,773,061	1.408	\$2,496,503	\$51.69
Lab	\$116,440		\$116,440	\$1,244		\$117,684	0.982	\$115,613	\$2.39
OP - Emergency Room & Related	\$794,754		\$794,754	\$12,198	\$9,288	\$816,240	1.064	\$868,768	\$17.99
OP - Other	\$2,238,860		\$2,238,860	\$34,362	\$27,954	\$2,301,175	1.064	\$2,449,262	\$50.71
Pharmacy	\$10,118,672	\$85,839	\$10,204,511	\$204	\$561,799	\$10,766,515	1.109	\$11,934,068	\$247.09
Prof - Anesthesia	\$62,640		\$62,640	\$740		\$63,381	1.157	\$73,310	\$1.52
Prof - Child EPSDT	\$12,930		\$12,930	\$153	(\$18)	\$13,065	1.157	\$15,111	\$0.31
Prof - Evaluation & Management	\$1,462,440		\$1,462,440	\$17,183	\$3,630	\$1,483,252	1.157	\$1,715,617	\$35.52
Prof - Maternity	\$52,093		\$52,093	\$616	(\$73)	\$52,636	1.157	\$60,882	\$1.26
Prof - Other	\$852,825		\$852,825	\$10,129	(\$1,194)	\$861,759	1.157	\$996,762	\$20.64
Prof - Psych	\$309,291		\$309,291	\$1,794	(\$431)	\$310,654	1.157	\$359,320	\$7.44
Prof - Specialist	\$212,288		\$212,288	\$2,509	(\$297)	\$214,500	1.157	\$248,103	\$5.14
Prof - Vision	\$106,421		\$106,421	\$519	(\$148)	\$106,792	1.157	\$123,522	\$2.56
Radiology	\$106,370		\$106,370	\$1,303		\$107,673	0.982	\$105,779	\$2.19
Transportation/Ambulance	\$365,141		\$365,141	\$2,622		\$367,763	0.982	\$361,291	\$7.48
Provider Incentive Payment Adjustment									\$0.84
<b>Total</b>	<b>\$21,586,371</b>	<b>\$128,155</b>	<b>\$21,714,526</b>	<b>\$125,203</b>	<b>\$863,621</b>	<b>\$22,703,350</b>		<b>\$25,458,913</b>	<b>\$527.95</b>
Admin Cost Adjustment									\$41.92
<b>Medallion 3.0 Capitation Rate</b>									<b>\$569.87</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Female									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$453,668		\$453,668	\$5,571	(\$13,661)	\$445,578	0.982	\$437,737	\$15.20
FQHC / RHC	\$334,821		\$334,821	\$3,957		\$338,778	1.157	\$391,851	\$13.61
Home Health	\$130,596		\$130,596	\$2,004		\$132,601	1.064	\$141,134	\$4.90
IP - Maternity	\$407,340	\$5,627	\$412,967	\$4,043	(\$5,956)	\$411,054	1.074	\$441,467	\$15.33
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$4,738,936	\$65,394	\$4,804,330	\$47,041	(\$69,296)	\$4,782,075	1.074	\$5,135,887	\$178.38
IP - Psych	\$1,349,564		\$1,349,564	\$6,822	\$311,202	\$1,667,588	1.408	\$2,347,995	\$81.55
Lab	\$265,428		\$265,428	\$3,141		\$268,568	0.982	\$263,843	\$9.16
OP - Emergency Room & Related	\$1,867,499		\$1,867,499	\$28,662	\$21,422	\$1,917,584	1.064	\$2,040,986	\$70.89
OP - Other	\$3,051,395		\$3,051,395	\$46,833	\$33,988	\$3,132,215	1.064	\$3,333,782	\$115.79
Pharmacy	\$7,327,170	\$62,158	\$7,389,329	\$148	\$406,812	\$7,796,289	1.109	\$8,641,741	\$300.14
Prof - Anesthesia	\$89,826		\$89,826	\$1,062		\$90,887	1.157	\$105,126	\$3.65
Prof - Child EPSDT	\$103,809		\$103,809	\$1,227	(\$145)	\$104,891	1.157	\$121,323	\$4.21
Prof - Evaluation & Management	\$1,768,626		\$1,768,626	\$20,842	\$4,390	\$1,793,859	1.157	\$2,074,883	\$72.06
Prof - Maternity	\$186,238		\$186,238	\$2,201	(\$261)	\$188,178	1.157	\$217,658	\$7.56
Prof - Other	\$760,572		\$760,572	\$9,016	(\$1,065)	\$768,522	1.157	\$888,918	\$30.87
Prof - Psych	\$198,933		\$198,933	\$1,301	(\$277)	\$199,957	1.157	\$231,282	\$8.03
Prof - Specialist	\$483,403		\$483,403	\$5,713	(\$677)	\$488,438	1.157	\$564,957	\$19.62
Prof - Vision	\$55,014		\$55,014	\$388	(\$77)	\$55,325	1.157	\$63,993	\$2.22
Radiology	\$305,022		\$305,022	\$3,744		\$308,766	0.982	\$303,333	\$10.54
Transportation/Ambulance	\$473,689		\$473,689	\$4,716		\$478,405	0.982	\$469,987	\$16.32
Provider Incentive Payment Adjustment									\$1.57
<b>Total</b>	<b>\$24,351,550</b>	<b>\$133,180</b>	<b>\$24,484,730</b>	<b>\$198,430</b>	<b>\$686,399</b>	<b>\$25,369,559</b>		<b>\$28,217,882</b>	<b>\$981.63</b>
Admin Cost Adjustment									\$77.94
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,059.57</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$435,848		\$435,848	\$5,352	(\$13,124)	\$428,076	0.982	\$420,543	\$15.74
FQHC / RHC	\$147,043		\$147,043	\$1,738		\$148,781	1.157	\$172,089	\$6.44
Home Health	\$76,129		\$76,129	\$1,168		\$77,297	1.064	\$82,271	\$3.08
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$4,399,422	(\$162,861)	\$4,236,561	\$43,671	(\$61,138)	\$4,219,093	1.074	\$4,531,252	\$169.56
IP - Psych	\$1,127,223		\$1,127,223	\$5,342	\$259,849	\$1,392,414	1.408	\$1,960,545	\$73.36
Lab	\$82,386		\$82,386	\$904		\$83,289	0.982	\$81,824	\$3.06
OP - Emergency Room & Related	\$1,020,911		\$1,020,911	\$15,669	\$11,711	\$1,048,291	1.064	\$1,115,751	\$41.75
OP - Other	\$1,995,565		\$1,995,565	\$30,628	\$22,228	\$2,048,421	1.064	\$2,180,242	\$81.58
Pharmacy	\$4,992,367	\$42,352	\$5,034,719	\$101	\$277,181	\$5,312,001	1.109	\$5,888,050	\$220.33
Prof - Anesthesia	\$36,463		\$36,463	\$431		\$36,894	1.157	\$42,674	\$1.60
Prof - Child EPSDT	\$8,040		\$8,040	\$95	(\$11)	\$8,124	1.157	\$9,397	\$0.35
Prof - Evaluation & Management	\$992,364		\$992,364	\$11,658	\$2,463	\$1,006,486	1.157	\$1,164,161	\$43.56
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$1,367,543		\$1,367,543	\$16,183	(\$1,915)	\$1,381,811	1.157	\$1,598,285	\$59.81
Prof - Psych	\$134,612		\$134,612	\$647	(\$187)	\$135,072	1.157	\$156,232	\$5.85
Prof - Specialist	\$257,200		\$257,200	\$3,039	(\$360)	\$259,879	1.157	\$300,591	\$11.25
Prof - Vision	\$44,430		\$44,430	\$277	(\$62)	\$44,645	1.157	\$51,639	\$1.93
Radiology	\$129,427		\$129,427	\$1,587		\$131,013	0.982	\$128,708	\$4.82
Transportation/Ambulance	\$433,241		\$433,241	\$4,312		\$437,553	0.982	\$429,853	\$16.08
Provider Incentive Payment Adjustment									\$1.22
<b>Total</b>	<b>\$17,680,213</b>	<b>(\$120,510)</b>	<b>\$17,559,703</b>	<b>\$142,801</b>	<b>\$496,635</b>	<b>\$18,199,139</b>		<b>\$20,314,107</b>	<b>\$761.36</b>
Admin Cost Adjustment									\$60.45
<b>Medallion 3.0 Capitation Rate</b>									<b>\$821.81</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$2,390,929		\$2,390,929	\$29,361	(\$71,995)	\$2,348,295	0.982	\$2,306,974	\$25.69
FQHC / RHC	\$827,350		\$827,350	\$9,777		\$837,127	1.157	\$968,271	\$10.78
Home Health	\$605,980		\$605,980	\$9,301		\$615,280	1.064	\$654,875	\$7.29
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$30,225,268	(\$32,232)	\$30,193,036	\$300,030	(\$435,557)	\$30,057,508	1.074	\$32,281,376	\$359.51
IP - Psych	\$3,109,357		\$3,109,357	\$13,387	\$716,465	\$3,839,210	1.408	\$5,405,680	\$60.20
Lab	\$661,068		\$661,068	\$7,723		\$668,791	0.982	\$657,023	\$7.32
OP - Emergency Room & Related	\$4,341,956		\$4,341,956	\$66,640	\$49,807	\$4,458,403	1.064	\$4,745,314	\$52.85
OP - Other	\$16,730,357		\$16,730,357	\$256,776	\$186,352	\$17,173,486	1.064	\$18,278,646	\$203.57
Pharmacy	\$33,348,474	\$282,904	\$33,631,377	\$673	\$1,851,542	\$35,483,592	1.109	\$39,331,539	\$438.03
Prof - Anesthesia	\$336,282		\$336,282	\$3,974		\$340,256	1.157	\$393,561	\$4.38
Prof - Child EPSDT	\$46,767		\$46,767	\$553	(\$65)	\$47,254	1.157	\$54,657	\$0.61
Prof - Evaluation & Management	\$6,341,151		\$6,341,151	\$74,686	\$15,740	\$6,431,577	1.157	\$7,439,143	\$82.85
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$3,887,820		\$3,887,820	\$46,004	(\$5,445)	\$3,928,379	1.157	\$4,543,795	\$50.60
Prof - Psych	\$403,781		\$403,781	\$1,915	(\$562)	\$405,134	1.157	\$468,602	\$5.22
Prof - Specialist	\$2,628,748		\$2,628,748	\$31,065	(\$3,681)	\$2,656,131	1.157	\$3,072,238	\$34.22
Prof - Vision	\$351,900		\$351,900	\$3,289	(\$492)	\$354,698	1.157	\$410,264	\$4.57
Radiology	\$1,311,559		\$1,311,559	\$16,097		\$1,327,656	0.982	\$1,304,294	\$14.53
Transportation/Ambulance	\$2,119,650		\$2,119,650	\$22,726		\$2,142,377	0.982	\$2,104,678	\$23.44
Provider Incentive Payment Adjustment									\$2.22
<b>Total</b>	<b>\$109,668,398</b>	<b>\$250,671</b>	<b>\$109,919,069</b>	<b>\$893,976</b>	<b>\$2,302,110</b>	<b>\$113,115,156</b>		<b>\$124,420,931</b>	<b>\$1,387.88</b>
Admin Cost Adjustment									\$110.19
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,498.07</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$6,581)	\$400,633	1.074	\$430,275	\$297.97
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$7,060)	\$429,808	1.074	\$461,609	\$319.67
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$571	\$41,658	1.064	\$44,339	\$30.71
OP - Other	\$202,344		\$202,344	\$3,106	\$3,984	\$209,433	1.064	\$222,910	\$154.37
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$25,161</b>	<b>\$2,934,555</b>		<b>\$3,252,386</b>	<b>\$2,255.95</b>
Admin Cost Adjustment									\$179.11
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,435.07</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$731,653		\$731,653	\$8,985	(\$39,774)	\$700,864	0.982	\$688,531	\$66.65
FQHC / RHC	\$1,387		\$1,387	\$16		\$1,403	1.157	\$1,623	\$0.16
Home Health	\$341,392		\$341,392	\$5,240		\$346,632	1.064	\$368,939	\$35.72
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$2,801,842	(\$607,015)	\$2,194,827	\$27,812	(\$35,920)	\$2,186,720	1.074	\$2,348,509	\$227.35
IP - Psych	\$207,714		\$207,714		\$47,657	\$255,370	1.408	\$359,566	\$34.81
Lab	\$38,580		\$38,580	\$336		\$38,917	0.982	\$38,232	\$3.70
OP - Emergency Room & Related	\$322,706		\$322,706	\$4,953	\$4,764	\$332,423	1.064	\$353,815	\$34.25
OP - Other	\$2,422,618		\$2,422,618	\$37,182	\$46,073	\$2,505,873	1.064	\$2,667,133	\$258.19
Pharmacy	\$1,260,919	\$10,697	\$1,271,616	\$25	\$70,008	\$1,341,649	1.109	\$1,487,141	\$143.96
Prof - Anesthesia	\$79,254		\$79,254	\$937		\$80,190	1.157	\$92,753	\$8.98
Prof - Child EPSDT	\$10,790		\$10,790	\$128	(\$15)	\$10,902	1.157	\$12,610	\$1.22
Prof - Evaluation & Management	\$694,502		\$694,502	\$8,197	\$1,724	\$704,424	1.157	\$814,778	\$78.87
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$2,300,110		\$2,300,110	\$27,204	(\$3,221)	\$2,324,093	1.157	\$2,688,184	\$260.23
Prof - Psych	\$35,175		\$35,175	\$57	(\$49)	\$35,183	1.157	\$40,695	\$3.94
Prof - Specialist	\$185,547		\$185,547	\$2,193	(\$260)	\$187,480	1.157	\$216,850	\$20.99
Prof - Vision	\$31,922		\$31,922	\$218	(\$44)	\$32,096	1.157	\$37,124	\$3.59
Radiology	\$31,677		\$31,677	\$389		\$32,066	0.982	\$31,501	\$3.05
Transportation/Ambulance	\$57,082		\$57,082	\$299		\$57,381	0.982	\$56,371	\$5.46
Provider Incentive Payment Adjustment									\$1.91
<b>Total</b>	<b>\$11,554,869</b>	<b>(\$596,318)</b>	<b>\$10,958,551</b>	<b>\$124,171</b>	<b>\$90,941</b>	<b>\$11,173,663</b>		<b>\$12,304,353</b>	<b>\$1,193.04</b>
Admin Cost Adjustment									\$94.72
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,287.76</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,845,149		\$1,845,149	\$22,659	(\$80,411)	\$1,787,397	0.982	\$1,755,945	\$16.87
FQHC / RHC	\$26,803		\$26,803	\$317		\$27,120	1.157	\$31,368	\$0.30
Home Health	\$384,245		\$384,245	\$5,897		\$390,143	1.064	\$415,250	\$3.99
IP - Maternity	\$214,774	\$3,642	\$218,416	\$2,132	(\$3,564)	\$216,984	1.074	\$233,038	\$2.24
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$4,856,308	\$82,357	\$4,938,664	\$48,206	(\$80,592)	\$4,906,278	1.074	\$5,269,279	\$50.62
IP - Psych	\$3,200,415		\$3,200,415	\$7,823	\$736,080	\$3,944,318	1.408	\$5,553,675	\$53.35
Lab	\$251,624		\$251,624	\$1,644		\$253,267	0.982	\$248,811	\$2.39
OP - Emergency Room & Related	\$2,315,166		\$2,315,166	\$35,533	\$34,181	\$2,384,879	1.064	\$2,538,353	\$24.38
OP - Other	\$6,113,344		\$6,113,344	\$93,827	\$116,261	\$6,323,433	1.064	\$6,730,363	\$64.65
Pharmacy	\$16,927,372	\$143,599	\$17,070,971	\$341	\$939,825	\$18,011,138	1.109	\$19,964,320	\$191.77
Prof - Anesthesia	\$163,305		\$163,305	\$1,930		\$165,235	1.157	\$191,121	\$1.84
Prof - Child EPSDT	\$28,176		\$28,176	\$333	(\$39)	\$28,469	1.157	\$32,929	\$0.32
Prof - Evaluation & Management	\$3,240,393		\$3,240,393	\$38,207	\$8,044	\$3,286,644	1.157	\$3,801,527	\$36.52
Prof - Maternity	\$87,271		\$87,271	\$1,031	(\$122)	\$88,180	1.157	\$101,994	\$0.98
Prof - Other	\$5,172,871		\$5,172,871	\$61,396	(\$7,245)	\$5,227,023	1.157	\$6,045,883	\$58.08
Prof - Psych	\$676,866		\$676,866	\$3,940	(\$942)	\$679,864	1.157	\$786,371	\$7.55
Prof - Specialist	\$564,278		\$564,278	\$6,668	(\$790)	\$570,156	1.157	\$659,477	\$6.33
Prof - Vision	\$193,736		\$193,736	\$697	(\$269)	\$194,165	1.157	\$224,582	\$2.16
Radiology	\$226,707		\$226,707	\$2,784		\$229,491	0.982	\$225,453	\$2.17
Transportation/Ambulance	\$517,567		\$517,567	\$2,177		\$519,744	0.982	\$510,598	\$4.90
Provider Incentive Payment Adjustment									\$0.85
<b>Total</b>	<b>\$47,006,371</b>	<b>\$229,598</b>	<b>\$47,235,969</b>	<b>\$337,542</b>	<b>\$1,660,416</b>	<b>\$49,233,928</b>		<b>\$55,320,336</b>	<b>\$532.25</b>
Admin Cost Adjustment									\$42.26
<b>Medallion 3.0 Capitation Rate</b>									<b>\$574.50</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Female									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,315,022		\$1,315,022	\$16,149	(\$39,598)	\$1,291,573	0.982	\$1,268,846	\$21.79
FQHC / RHC	\$251,751		\$251,751	\$2,975		\$254,726	1.157	\$294,631	\$5.06
Home Health	\$160,540		\$160,540	\$2,464		\$163,004	1.064	\$173,494	\$2.98
IP - Maternity	\$1,223,827	\$22,937	\$1,246,764	\$12,148	(\$17,982)	\$1,240,930	1.074	\$1,332,743	\$22.89
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$8,604,712	\$161,267	\$8,765,979	\$85,414	(\$126,431)	\$8,724,962	1.074	\$9,370,497	\$160.92
IP - Psych	\$2,522,185		\$2,522,185	\$11,593	\$581,336	\$3,115,114	1.408	\$4,386,140	\$75.32
Lab	\$326,163		\$326,163	\$3,205		\$329,367	0.982	\$323,572	\$5.56
OP - Emergency Room & Related	\$5,739,804		\$5,739,804	\$88,094	\$65,842	\$5,893,740	1.064	\$6,273,018	\$107.73
OP - Other	\$6,060,188		\$6,060,188	\$93,011	\$67,502	\$6,220,701	1.064	\$6,621,020	\$113.70
Pharmacy	\$15,408,795	\$130,717	\$15,539,512	\$311	\$855,512	\$16,395,335	1.109	\$18,173,295	\$312.10
Prof - Anesthesia	\$217,397		\$217,397	\$2,569		\$219,966	1.157	\$254,426	\$4.37
Prof - Child EPSDT	\$55,169		\$55,169	\$652	(\$77)	\$55,744	1.157	\$64,477	\$1.11
Prof - Evaluation & Management	\$3,853,787		\$3,853,787	\$45,496	\$9,566	\$3,908,850	1.157	\$4,521,206	\$77.64
Prof - Maternity	\$497,958		\$497,958	\$5,885	(\$697)	\$503,146	1.157	\$581,968	\$9.99
Prof - Other	\$2,939,561		\$2,939,561	\$34,881	(\$4,117)	\$2,970,325	1.157	\$3,435,653	\$59.00
Prof - Psych	\$441,571		\$441,571	\$3,038	(\$615)	\$443,995	1.157	\$513,550	\$8.82
Prof - Specialist	\$1,071,106		\$1,071,106	\$12,658	(\$1,500)	\$1,082,264	1.157	\$1,251,811	\$21.50
Prof - Vision	\$112,698		\$112,698	\$866	(\$157)	\$113,407	1.157	\$131,173	\$2.25
Radiology	\$679,734		\$679,734	\$8,347		\$688,081	0.982	\$675,973	\$11.61
Transportation/Ambulance	\$654,131		\$654,131	\$5,700		\$659,831	0.982	\$648,220	\$11.13
Provider Incentive Payment Adjustment									\$1.66
<b>Total</b>	<b>\$52,136,101</b>	<b>\$314,920</b>	<b>\$52,451,021</b>	<b>\$435,456</b>	<b>\$1,388,583</b>	<b>\$54,275,061</b>		<b>\$60,295,713</b>	<b>\$1,037.13</b>
Admin Cost Adjustment									\$82.34
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,119.48</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$1,214,342		\$1,214,342	\$14,913	(\$36,566)	\$1,192,688	0.982	\$1,171,701	\$21.76
FQHC / RHC	\$97,528		\$97,528	\$1,153		\$98,680	1.157	\$114,139	\$2.12
Home Health	\$162,415		\$162,415	\$2,493		\$164,907	1.064	\$175,520	\$3.26
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$8,576,068	\$144,988	\$8,721,056	\$85,130	(\$125,786)	\$8,680,400	1.074	\$9,322,638	\$173.11
IP - Psych	\$2,956,951		\$2,956,951	\$17,198	\$682,372	\$3,656,521	1.408	\$5,148,451	\$95.60
Lab	\$151,161		\$151,161	\$1,134		\$152,295	0.982	\$149,615	\$2.78
OP - Emergency Room & Related	\$3,099,735		\$3,099,735	\$47,574	\$35,558	\$3,182,867	1.064	\$3,387,693	\$62.91
OP - Other	\$3,863,273		\$3,863,273	\$59,293	\$43,031	\$3,965,598	1.064	\$4,220,795	\$78.38
Pharmacy	\$14,166,463	\$120,178	\$14,286,641	\$286	\$786,537	\$15,073,463	1.109	\$16,708,075	\$310.25
Prof - Anesthesia	\$99,069		\$99,069	\$1,171		\$100,240	1.157	\$115,944	\$2.15
Prof - Child EPSDT	\$12,300		\$12,300	\$145	(\$17)	\$12,428	1.157	\$14,375	\$0.27
Prof - Evaluation & Management	\$2,325,669		\$2,325,669	\$27,437	\$5,773	\$2,358,879	1.157	\$2,728,419	\$50.66
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$5,055,077		\$5,055,077	\$59,857	(\$7,080)	\$5,107,855	1.157	\$5,908,047	\$109.71
Prof - Psych	\$290,869		\$290,869	\$1,559	(\$405)	\$292,023	1.157	\$337,771	\$6.27
Prof - Specialist	\$634,257		\$634,257	\$7,495	(\$888)	\$640,864	1.157	\$741,261	\$13.76
Prof - Vision	\$82,245		\$82,245	\$524	(\$115)	\$82,655	1.157	\$95,604	\$1.78
Radiology	\$285,800		\$285,800	\$3,510		\$289,310	0.982	\$284,219	\$5.28
Transportation/Ambulance	\$516,643		\$516,643	\$4,224		\$520,867	0.982	\$511,702	\$9.50
Provider Incentive Payment Adjustment									\$1.52
<b>Total</b>	<b>\$43,589,866</b>	<b>\$265,166</b>	<b>\$43,855,032</b>	<b>\$335,096</b>	<b>\$1,382,415</b>	<b>\$45,572,543</b>		<b>\$51,135,970</b>	<b>\$951.07</b>
Admin Cost Adjustment									\$75.51
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,026.58</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$5,939,583		\$5,939,583	\$72,940	(\$178,852)	\$5,833,671	0.982	\$5,731,019	\$33.02
FQHC / RHC	\$1,564,737		\$1,564,737	\$18,491		\$1,583,228	1.157	\$1,831,255	\$10.55
Home Health	\$1,408,932		\$1,408,932	\$21,624		\$1,430,556	1.064	\$1,522,616	\$8.77
IP - Maternity	\$7,715	\$75	\$7,790	\$77	(\$112)	\$7,754	1.074	\$8,328	\$0.05
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$58,195,143	\$567,726	\$58,762,870	\$577,671	(\$847,608)	\$58,492,932	1.074	\$62,820,655	\$361.95
IP - Psych	\$6,218,840		\$6,218,840	\$25,685	\$1,432,709	\$7,677,235	1.408	\$10,809,692	\$62.28
Lab	\$1,061,403		\$1,061,403	\$10,725		\$1,072,127	0.982	\$1,053,262	\$6.07
OP - Emergency Room & Related	\$13,756,623		\$13,756,623	\$211,135	\$157,805	\$14,125,563	1.064	\$15,034,581	\$86.62
OP - Other	\$28,986,769		\$28,986,769	\$444,886	\$322,871	\$29,754,527	1.064	\$31,669,311	\$182.47
Pharmacy	\$76,566,634	\$649,534	\$77,216,168	\$1,544	\$4,251,059	\$81,468,771	1.109	\$90,303,490	\$520.29
Prof - Anesthesia	\$884,597		\$884,597	\$10,454		\$895,051	1.157	\$1,035,269	\$5.96
Prof - Child EPSDT	\$149,184		\$149,184	\$1,763	(\$209)	\$150,739	1.157	\$174,353	\$1.00
Prof - Evaluation & Management	\$15,068,017		\$15,068,017	\$177,913	\$37,403	\$15,283,334	1.157	\$17,677,607	\$101.85
Prof - Maternity	\$5,009		\$5,009	\$59	(\$7)	\$5,062	1.157	\$5,855	\$0.03
Prof - Other	\$12,266,358		\$12,266,358	\$145,330	(\$17,179)	\$12,394,510	1.157	\$14,336,223	\$82.60
Prof - Psych	\$883,537		\$883,537	\$4,522	(\$1,229)	\$886,830	1.157	\$1,025,760	\$5.91
Prof - Specialist	\$6,142,689		\$6,142,689	\$72,591	(\$8,603)	\$6,206,677	1.157	\$7,179,010	\$41.36
Prof - Vision	\$705,489		\$705,489	\$6,884	(\$986)	\$711,387	1.157	\$822,832	\$4.74
Radiology	\$2,973,765		\$2,973,765	\$36,519		\$3,010,283	0.982	\$2,957,313	\$17.04
Transportation/Ambulance	\$2,374,479		\$2,374,479	\$22,362		\$2,396,842	0.982	\$2,354,666	\$13.57
Provider Incentive Payment Adjustment									\$2.48
<b>Total</b>	<b>\$235,159,503</b>	<b>\$1,217,335</b>	<b>\$236,376,839</b>	<b>\$1,863,176</b>	<b>\$5,147,063</b>	<b>\$243,387,078</b>		<b>\$268,353,097</b>	<b>\$1,548.62</b>
Admin Cost Adjustment									\$122.95
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,671.57</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$298.54
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,240)	\$430,628	1.074	\$462,489	\$320.28
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$464	\$41,551	1.064	\$44,225	\$30.63
OP - Other	\$202,344		\$202,344	\$3,106	\$2,254	\$207,703	1.064	\$221,069	\$153.09
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,908</b>	<b>\$2,934,302</b>		<b>\$3,252,133</b>	<b>\$2,255.78</b>
Admin Cost Adjustment									\$179.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.88</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$512,778		\$512,778	\$6,297	(\$27,876)	\$491,199	0.982	\$482,555	\$52.78
FQHC / RHC	\$5,494		\$5,494	\$65		\$5,559	1.157	\$6,430	\$0.70
Home Health	\$29,372		\$29,372	\$451		\$29,823	1.064	\$31,742	\$3.47
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,545,805	(\$12,186)	\$1,533,619	\$15,344	(\$22,125)	\$1,526,839	1.074	\$1,639,805	\$179.37
IP - Psych	\$73,763		\$73,763	\$297	\$16,992	\$91,052	1.408	\$128,203	\$14.02
Lab	\$40,112		\$40,112	\$440		\$40,552	0.982	\$39,839	\$4.36
OP - Emergency Room & Related	\$136,421		\$136,421	\$2,094	\$1,565	\$140,080	1.064	\$149,095	\$16.31
OP - Other	\$684,528		\$684,528	\$10,506	\$7,625	\$702,659	1.064	\$747,877	\$81.81
Pharmacy	\$1,011,076	\$8,577	\$1,019,653	\$20	\$56,136	\$1,075,810	1.109	\$1,192,474	\$130.44
Prof - Anesthesia	\$36,615		\$36,615	\$433		\$37,047	1.157	\$42,851	\$4.69
Prof - Child EPSDT	\$9,232		\$9,232	\$109	(\$13)	\$9,328	1.157	\$10,789	\$1.18
Prof - Evaluation & Management	\$584,557		\$584,557	\$6,618	\$1,450	\$592,626	1.157	\$685,466	\$74.98
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$2,311,316		\$2,311,316	\$27,298	(\$3,237)	\$2,335,378	1.157	\$2,701,236	\$295.48
Prof - Psych	\$28,470		\$28,470	\$265	(\$40)	\$28,695	1.157	\$33,190	\$3.63
Prof - Specialist	\$103,946		\$103,946	\$1,228	(\$146)	\$105,029	1.157	\$121,482	\$13.29
Prof - Vision	\$49,206		\$49,206	\$416	(\$69)	\$49,554	1.157	\$57,317	\$6.27
Radiology	\$21,733		\$21,733	\$266		\$21,999	0.982	\$21,612	\$2.36
Transportation/Ambulance	\$83,297		\$83,297	\$789		\$84,086	0.982	\$82,607	\$9.04
Provider Incentive Payment Adjustment									\$1.43
<b>Total</b>	<b>\$7,267,721</b>	<b>(\$3,608)</b>	<b>\$7,264,113</b>	<b>\$72,936</b>	<b>\$30,263</b>	<b>\$7,367,312</b>		<b>\$8,174,568</b>	<b>\$895.61</b>
Admin Cost Adjustment									\$71.11
<b>Medallion 3.0 Capitation Rate</b>									<b>\$966.72</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$819,631		\$819,631	\$10,065	(\$35,719)	\$793,977	0.982	\$780,006	\$16.37
FQHC / RHC	\$44,020		\$44,020	\$520		\$44,540	1.157	\$51,518	\$1.08
Home Health	\$26,454		\$26,454	\$406		\$26,860	1.064	\$28,589	\$0.60
IP - Maternity	\$78,573	(\$8,747)	\$69,826	\$780	(\$1,009)	\$69,598	1.074	\$74,747	\$1.57
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$3,499,208	(\$389,544)	\$3,109,665	\$34,735	(\$44,914)	\$3,099,485	1.074	\$3,328,807	\$69.88
IP - Psych	\$1,338,138		\$1,338,138	\$10,251	\$309,367	\$1,657,755	1.408	\$2,334,151	\$49.00
Lab	\$195,579		\$195,579	\$2,125		\$197,705	0.982	\$194,226	\$4.08
OP - Emergency Room & Related	\$586,703		\$586,703	\$9,005	\$6,730	\$602,438	1.064	\$641,206	\$13.46
OP - Other	\$1,868,873		\$1,868,873	\$28,683	\$20,817	\$1,918,373	1.064	\$2,041,825	\$42.86
Pharmacy	\$13,935,118	\$118,215	\$14,053,333	\$281	\$773,692	\$14,827,306	1.109	\$16,435,224	\$345.02
Prof - Anesthesia	\$66,827		\$66,827	\$790		\$67,617	1.157	\$78,210	\$1.64
Prof - Child EPSDT	\$12,346		\$12,346	\$146	(\$17)	\$12,475	1.157	\$14,429	\$0.30
Prof - Evaluation & Management	\$2,029,865		\$2,029,865	\$22,397	\$5,035	\$2,057,297	1.157	\$2,379,591	\$49.95
Prof - Maternity	\$46,883		\$46,883	\$554	(\$66)	\$47,372	1.157	\$54,793	\$1.15
Prof - Other	\$9,546,062		\$9,546,062	\$112,727	(\$13,369)	\$9,645,420	1.157	\$11,156,463	\$234.21
Prof - Psych	\$373,816		\$373,816	\$4,031	(\$523)	\$377,324	1.157	\$436,435	\$9.16
Prof - Specialist	\$296,362		\$296,362	\$3,502	(\$415)	\$299,449	1.157	\$346,361	\$7.27
Prof - Vision	\$128,252		\$128,252	\$660	(\$178)	\$128,734	1.157	\$148,901	\$3.13
Radiology	\$106,357		\$106,357	\$1,302		\$107,659	0.982	\$105,765	\$2.22
Transportation/Ambulance	\$345,735		\$345,735	\$3,040		\$348,775	0.982	\$342,638	\$7.19
Provider Incentive Payment Adjustment									\$1.38
<b>Total</b>	<b>\$35,344,803</b>	<b>(\$280,076)</b>	<b>\$35,064,728</b>	<b>\$246,000</b>	<b>\$1,019,431</b>	<b>\$36,330,158</b>		<b>\$40,973,884</b>	<b>\$861.54</b>
Admin Cost Adjustment									\$68.40
<b>Medallion 3.0 Capitation Rate</b>									<b>\$929.94</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Female									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$612,300		\$612,300	\$7,519	(\$18,437)	\$601,381	0.982	\$590,799	\$16.78
FQHC / RHC	\$85,551		\$85,551	\$1,011		\$86,562	1.157	\$100,123	\$2.84
Home Health	\$143,689		\$143,689	\$2,205		\$145,895	1.064	\$155,283	\$4.41
IP - Maternity	\$535,557	(\$4,909)	\$530,648	\$5,316	(\$7,656)	\$528,309	1.074	\$567,397	\$16.11
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$6,879,060	(\$63,052)	\$6,816,008	\$68,285	(\$98,334)	\$6,785,959	1.074	\$7,288,032	\$206.98
IP - Psych	\$1,820,483		\$1,820,483	\$14,958	\$421,113	\$2,256,554	1.408	\$3,177,271	\$90.23
Lab	\$624,583		\$624,583	\$7,467		\$632,050	0.982	\$620,928	\$17.63
OP - Emergency Room & Related	\$1,766,699		\$1,766,699	\$27,115	\$20,266	\$1,814,080	1.064	\$1,930,821	\$54.83
OP - Other	\$3,189,911		\$3,189,911	\$48,958	\$35,531	\$3,274,400	1.064	\$3,485,117	\$98.98
Pharmacy	\$11,415,333	\$96,839	\$11,512,172	\$230	\$633,791	\$12,146,194	1.109	\$13,463,364	\$382.35
Prof - Anesthesia	\$94,115		\$94,115	\$1,112		\$95,227	1.157	\$110,145	\$3.13
Prof - Child EPSDT	\$47,340		\$47,340	\$559	(\$66)	\$47,833	1.157	\$55,326	\$1.57
Prof - Evaluation & Management	\$2,838,945		\$2,838,945	\$32,469	\$7,045	\$2,878,459	1.157	\$3,329,395	\$94.55
Prof - Maternity	\$241,928		\$241,928	\$2,859	(\$339)	\$244,448	1.157	\$282,743	\$8.03
Prof - Other	\$881,416		\$881,416	\$10,361	(\$1,234)	\$890,542	1.157	\$1,030,054	\$29.25
Prof - Psych	\$361,764		\$361,764	\$3,939	(\$506)	\$365,197	1.157	\$422,408	\$12.00
Prof - Specialist	\$707,456		\$707,456	\$8,360	(\$991)	\$714,826	1.157	\$826,810	\$23.48
Prof - Vision	\$94,384		\$94,384	\$537	(\$131)	\$94,790	1.157	\$109,640	\$3.11
Radiology	\$426,633		\$426,633	\$5,237		\$431,869	0.982	\$424,270	\$12.05
Transportation/Ambulance	\$796,232		\$796,232	\$8,846		\$805,078	0.982	\$790,912	\$22.46
Provider Incentive Payment Adjustment									\$1.76
<b>Total</b>	<b>\$33,563,378</b>	<b>\$28,878</b>	<b>\$33,592,256</b>	<b>\$257,345</b>	<b>\$990,052</b>	<b>\$34,839,653</b>		<b>\$38,760,838</b>	<b>\$1,102.55</b>
Admin Cost Adjustment									\$87.54
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,190.09</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$523,040		\$523,040	\$6,423	(\$15,750)	\$513,713	0.982	\$504,673	\$18.18
FQHC / RHC	\$35,921		\$35,921	\$424		\$36,345	1.157	\$42,039	\$1.51
Home Health	\$59,744		\$59,744	\$917		\$60,661	1.064	\$64,565	\$2.33
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$3,996,598	\$34,879	\$4,031,478	\$39,672	(\$58,151)	\$4,012,998	1.074	\$4,309,909	\$155.26
IP - Psych	\$1,153,635		\$1,153,635	\$8,832	\$266,710	\$1,429,177	1.408	\$2,012,308	\$72.49
Lab	\$189,357		\$189,357	\$2,176		\$191,533	0.982	\$188,163	\$6.78
OP - Emergency Room & Related	\$838,817		\$838,817	\$12,874	\$9,622	\$861,313	1.064	\$916,741	\$33.02
OP - Other	\$1,440,398		\$1,440,398	\$22,107	\$16,044	\$1,478,549	1.064	\$1,573,697	\$56.69
Pharmacy	\$8,002,984	\$67,891	\$8,070,875	\$161	\$444,334	\$8,515,371	1.109	\$9,438,803	\$340.03
Prof - Anesthesia	\$37,159		\$37,159	\$439		\$37,598	1.157	\$43,488	\$1.57
Prof - Child EPSDT	\$6,475		\$6,475	\$77	(\$9)	\$6,543	1.157	\$7,567	\$0.27
Prof - Evaluation & Management	\$1,303,523		\$1,303,523	\$14,612	\$3,234	\$1,321,369	1.157	\$1,528,373	\$55.06
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$719,922		\$719,922	\$8,471	(\$1,008)	\$727,385	1.157	\$841,336	\$30.31
Prof - Psych	\$150,707		\$150,707	\$1,446	(\$211)	\$151,943	1.157	\$175,746	\$6.33
Prof - Specialist	\$325,263		\$325,263	\$3,844	(\$456)	\$328,651	1.157	\$380,137	\$13.69
Prof - Vision	\$61,901		\$61,901	\$301	(\$86)	\$62,116	1.157	\$71,847	\$2.59
Radiology	\$148,606		\$148,606	\$1,822		\$150,428	0.982	\$147,781	\$5.32
Transportation/Ambulance	\$434,494		\$434,494	\$4,564		\$439,058	0.982	\$431,332	\$15.54
Provider Incentive Payment Adjustment									\$1.31
<b>Total</b>	<b>\$19,428,542</b>	<b>\$102,771</b>	<b>\$19,531,313</b>	<b>\$129,162</b>	<b>\$664,273</b>	<b>\$20,324,749</b>		<b>\$22,678,505</b>	<b>\$818.29</b>
Admin Cost Adjustment									\$64.97
<b>Medallion 3.0 Capitation Rate</b>									<b>\$883.26</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$3,031,736		\$3,031,736	\$37,231	(\$91,291)	\$2,977,675	0.982	\$2,925,279	\$29.34
FQHC / RHC	\$238,068		\$238,068	\$2,813		\$240,881	1.157	\$278,617	\$2.79
Home Health	\$1,103,153		\$1,103,153	\$16,931		\$1,120,084	1.064	\$1,192,165	\$11.96
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$39,793,408	(\$268,866)	\$39,524,542	\$395,007	(\$570,203)	\$39,349,346	1.074	\$42,260,690	\$423.81
IP - Psych	\$3,509,271		\$3,509,271	\$25,750	\$811,055	\$4,346,076	1.408	\$6,119,358	\$61.37
Lab	\$1,558,025		\$1,558,025	\$18,597		\$1,576,623	0.982	\$1,548,880	\$15.53
OP - Emergency Room & Related	\$3,363,370		\$3,363,370	\$51,621	\$38,582	\$3,453,573	1.064	\$3,675,819	\$36.86
OP - Other	\$11,536,733		\$11,536,733	\$177,065	\$128,503	\$11,842,301	1.064	\$12,604,385	\$126.40
Pharmacy	\$44,014,602	\$373,387	\$44,387,989	\$888	\$2,443,737	\$46,832,613	1.109	\$51,911,283	\$520.60
Prof - Anesthesia	\$305,574		\$305,574	\$3,611		\$309,185	1.157	\$357,622	\$3.59
Prof - Child EPSDT	\$62,526		\$62,526	\$739	(\$88)	\$63,178	1.157	\$73,075	\$0.73
Prof - Evaluation & Management	\$8,249,279		\$8,249,279	\$94,652	\$20,471	\$8,364,402	1.157	\$9,674,762	\$97.02
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$5,743,990		\$5,743,990	\$67,745	(\$8,044)	\$5,803,692	1.157	\$6,712,893	\$67.32
Prof - Psych	\$495,595		\$495,595	\$4,630	(\$692)	\$499,533	1.157	\$577,789	\$5.79
Prof - Specialist	\$3,186,743		\$3,186,743	\$37,659	(\$4,463)	\$3,219,939	1.157	\$3,724,372	\$37.35
Prof - Vision	\$359,877		\$359,877	\$2,697	(\$502)	\$362,073	1.157	\$418,795	\$4.20
Radiology	\$1,386,825		\$1,386,825	\$17,021		\$1,403,846	0.982	\$1,379,144	\$13.83
Transportation/Ambulance	\$2,311,692		\$2,311,692	\$25,607		\$2,337,299	0.982	\$2,296,170	\$23.03
Provider Incentive Payment Adjustment									\$2.37
<b>Total</b>	<b>\$130,250,468</b>	<b>\$104,521</b>	<b>\$130,354,989</b>	<b>\$980,265</b>	<b>\$2,767,065</b>	<b>\$134,102,318</b>		<b>\$147,731,097</b>	<b>\$1,483.91</b>
Admin Cost Adjustment									\$117.82
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,601.72</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age Under 1									
Statewide	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$92,548		\$92,548	\$1,137	(\$5,031)	\$88,653	0.982	\$87,093	\$60.31
FQHC / RHC	\$1,065		\$1,065	\$13		\$1,078	1.157	\$1,246	\$0.86
Home Health	\$42,826		\$42,826	\$657		\$43,484	1.064	\$46,282	\$32.05
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$298.54
IP - Other	\$424,552	\$8,103	\$432,654	\$4,214	(\$6,240)	\$430,628	1.074	\$462,489	\$320.28
IP - Psych	\$19,498		\$19,498		\$4,473	\$23,971	1.408	\$33,752	\$23.37
Lab	\$4,304		\$4,304	\$43		\$4,347	0.982	\$4,270	\$2.96
OP - Emergency Room & Related	\$40,466		\$40,466	\$621	\$464	\$41,551	1.064	\$44,225	\$30.63
OP - Other	\$202,344		\$202,344	\$3,106	\$2,254	\$207,703	1.064	\$221,069	\$153.09
Pharmacy	\$629,450	\$5,340	\$634,790	\$13	\$34,948	\$669,750	1.109	\$742,380	\$514.11
Prof - Anesthesia	\$18,888		\$18,888	\$223		\$19,111	1.157	\$22,105	\$15.31
Prof - Child EPSDT	\$5,966		\$5,966	\$70	(\$8)	\$6,028	1.157	\$6,972	\$4.83
Prof - Evaluation & Management	\$313,333		\$313,333	\$3,692	\$778	\$317,802	1.157	\$367,589	\$254.56
Prof - Maternity	\$4,188		\$4,188	\$49	(\$6)	\$4,231	1.157	\$4,894	\$3.39
Prof - Other	\$583,940		\$583,940	\$6,901	(\$818)	\$590,023	1.157	\$682,455	\$472.61
Prof - Psych	\$2,924		\$2,924	\$1	(\$4)	\$2,921	1.157	\$3,379	\$2.34
Prof - Specialist	\$49,115		\$49,115	\$580	(\$69)	\$49,627	1.157	\$57,401	\$39.75
Prof - Vision	\$11,383		\$11,383	\$114	(\$16)	\$11,481	1.157	\$13,280	\$9.20
Radiology	\$9,575		\$9,575	\$117		\$9,692	0.982	\$9,522	\$6.59
Transportation/Ambulance	\$10,741		\$10,741	\$82		\$10,823	0.982	\$10,633	\$7.36
Provider Incentive Payment Adjustment									\$3.61
<b>Total</b>	<b>\$2,862,838</b>	<b>\$20,995</b>	<b>\$2,883,832</b>	<b>\$25,561</b>	<b>\$24,908</b>	<b>\$2,934,302</b>		<b>\$3,252,133</b>	<b>\$2,255.78</b>
Admin Cost Adjustment									\$179.10
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,434.88</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 1-5									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$226,246		\$226,246	\$2,778	(\$12,299)	\$216,726	0.982	\$212,912	\$61.89
FQHC / RHC	\$1,538		\$1,538	\$18		\$1,556	1.157	\$1,800	\$0.52
Home Health	\$3,741		\$3,741	\$57		\$3,799	1.064	\$4,043	\$1.18
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$634,869	\$4,886	\$639,755	\$6,302	(\$9,228)	\$636,829	1.074	\$683,946	\$198.82
IP - Psych	\$29,931		\$29,931	\$7	\$6,869	\$36,807	1.408	\$51,825	\$15.07
Lab	\$15,244		\$15,244	\$171		\$15,415	0.982	\$15,144	\$4.40
OP - Emergency Room & Related	\$62,614		\$62,614	\$961	\$718	\$64,293	1.064	\$68,430	\$19.89
OP - Other	\$392,148		\$392,148	\$6,019	\$4,368	\$402,535	1.064	\$428,439	\$124.55
Pharmacy	\$458,446	\$3,889	\$462,335	\$9	\$25,453	\$487,798	1.109	\$540,696	\$157.18
Prof - Anesthesia	\$16,696		\$16,696	\$197		\$16,893	1.157	\$19,540	\$5.68
Prof - Child EPSDT	\$3,580		\$3,580	\$42	(\$5)	\$3,617	1.157	\$4,184	\$1.22
Prof - Evaluation & Management	\$240,203		\$240,203	\$2,820	\$596	\$243,619	1.157	\$281,784	\$81.91
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$413,627		\$413,627	\$4,885	(\$579)	\$417,933	1.157	\$483,406	\$140.53
Prof - Psych	\$6,539		\$6,539	\$27	(\$9)	\$6,557	1.157	\$7,584	\$2.20
Prof - Specialist	\$48,631		\$48,631	\$575	(\$68)	\$49,138	1.157	\$56,836	\$16.52
Prof - Vision	\$13,933		\$13,933	\$111	(\$19)	\$14,025	1.157	\$16,222	\$4.72
Radiology	\$14,069		\$14,069	\$172		\$14,241	0.982	\$13,990	\$4.07
Transportation/Ambulance	\$27,340		\$27,340	\$232		\$27,572	0.982	\$27,087	\$7.87
Provider Incentive Payment Adjustment									\$1.36
<b>Total</b>	<b>\$2,609,397</b>	<b>\$8,775</b>	<b>\$2,618,172</b>	<b>\$25,384</b>	<b>\$15,796</b>	<b>\$2,659,352</b>		<b>\$2,917,869</b>	<b>\$849.58</b>
Admin Cost Adjustment									\$67.45
<b>Medallion 3.0 Capitation Rate</b>									<b>\$917.03</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 6-20									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$498,865		\$498,865	\$6,126	(\$21,740)	\$483,251	0.982	\$474,748	\$18.43
FQHC / RHC	\$19,435		\$19,435	\$230		\$19,665	1.157	\$22,746	\$0.88
Home Health	\$39,323		\$39,323	\$604		\$39,926	1.064	\$42,495	\$1.65
IP - Maternity	\$18,976	\$362	\$19,338	\$188	(\$279)	\$19,248	1.074	\$20,672	\$0.80
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$1,102,067	\$21,033	\$1,123,100	\$10,940	(\$16,198)	\$1,117,841	1.074	\$1,200,547	\$46.60
IP - Psych	\$358,340		\$358,340	\$1,205	\$82,492	\$442,038	1.408	\$622,397	\$24.16
Lab	\$104,051		\$104,051	\$1,162		\$105,213	0.982	\$103,361	\$4.01
OP - Emergency Room & Related	\$437,594		\$437,594	\$6,716	\$5,020	\$449,330	1.064	\$478,246	\$18.56
OP - Other	\$936,455		\$936,455	\$14,373	\$10,431	\$961,258	1.064	\$1,023,118	\$39.71
Pharmacy	\$8,533,107	\$72,389	\$8,605,496	\$172	\$473,767	\$9,079,435	1.109	\$10,064,036	\$390.61
Prof - Anesthesia	\$29,843		\$29,843	\$353		\$30,195	1.157	\$34,926	\$1.36
Prof - Child EPSDT	\$7,748		\$7,748	\$92	(\$11)	\$7,828	1.157	\$9,055	\$0.35
Prof - Evaluation & Management	\$1,135,553		\$1,135,553	\$13,279	\$2,818	\$1,151,651	1.157	\$1,332,068	\$51.70
Prof - Maternity	\$12,141		\$12,141	\$143	(\$17)	\$12,268	1.157	\$14,190	\$0.55
Prof - Other	\$1,405,671		\$1,405,671	\$16,590	(\$1,969)	\$1,420,293	1.157	\$1,642,795	\$63.76
Prof - Psych	\$230,830		\$230,830	\$2,335	(\$323)	\$232,842	1.157	\$269,319	\$10.45
Prof - Specialist	\$142,821		\$142,821	\$1,688	(\$200)	\$144,309	1.157	\$166,916	\$6.48
Prof - Vision	\$63,274		\$63,274	\$355	(\$88)	\$63,542	1.157	\$73,496	\$2.85
Radiology	\$75,383		\$75,383	\$920		\$76,302	0.982	\$74,960	\$2.91
Transportation/Ambulance	\$213,757		\$213,757	\$1,828		\$215,586	0.982	\$211,792	\$8.22
Provider Incentive Payment Adjustment									\$1.11
<b>Total</b>	<b>\$15,365,236</b>	<b>\$93,784</b>	<b>\$15,459,020</b>	<b>\$79,299</b>	<b>\$533,703</b>	<b>\$16,072,022</b>		<b>\$17,881,883</b>	<b>\$695.15</b>
Admin Cost Adjustment									\$55.19
<b>Medallion 3.0 Capitation Rate</b>									<b>\$750.34</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

<b>Age 21-44 Female</b>									
<b>Far Southwest</b>	<b>Total Base Claims FY14-15</b>	<b>Base Claims Redistribution and Adjustments FY14-15</b>	<b>Total Redistributed Base Claims FY14-15</b>	<b>Completion Factor Adjustments<sup>1</sup></b>	<b>Policy and Program Adjustments<sup>2</sup></b>	<b>Completed and Adjusted Claims FY14-15</b>	<b>Trend Adjustment</b>	<b>Completed &amp; Trended Claims FY17</b>	<b>PMPM FY17</b>
<b>Service Type</b>									
DME/Supplies	\$708,872		\$708,872	\$8,705	(\$21,345)	\$696,231	0.982	\$683,980	\$18.45
FQHC / RHC	\$86,205		\$86,205	\$1,019		\$87,224	1.157	\$100,888	\$2.72
Home Health	\$172,744		\$172,744	\$2,651		\$175,395	1.064	\$186,682	\$5.04
IP - Maternity	\$263,298	\$5,025	\$268,323	\$2,614	(\$3,870)	\$267,067	1.074	\$286,826	\$7.74
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$6,497,554	\$123,922	\$6,621,476	\$64,498	(\$95,501)	\$6,590,472	1.074	\$7,078,082	\$190.96
IP - Psych	\$1,063,403		\$1,063,403	\$6,834	\$245,549	\$1,315,786	1.408	\$1,852,652	\$49.98
Lab	\$611,440		\$611,440	\$7,344		\$618,784	0.982	\$607,895	\$16.40
OP - Emergency Room & Related	\$2,331,345		\$2,331,345	\$35,781	\$26,743	\$2,393,869	1.064	\$2,547,921	\$68.74
OP - Other	\$3,479,747		\$3,479,747	\$53,407	\$38,759	\$3,571,914	1.064	\$3,801,776	\$102.57
Pharmacy	\$11,862,568	\$100,633	\$11,963,201	\$239	\$658,622	\$12,622,062	1.109	\$13,990,837	\$377.47
Prof - Anesthesia	\$94,289		\$94,289	\$1,114		\$95,403	1.157	\$110,349	\$2.98
Prof - Child EPSDT	\$22,568		\$22,568	\$267	(\$32)	\$22,803	1.157	\$26,375	\$0.71
Prof - Evaluation & Management	\$2,833,663		\$2,833,663	\$33,281	\$7,034	\$2,873,978	1.157	\$3,324,213	\$89.69
Prof - Maternity	\$135,042		\$135,042	\$1,596	(\$189)	\$136,449	1.157	\$157,825	\$4.26
Prof - Other	\$683,093		\$683,093	\$8,044	(\$957)	\$690,180	1.157	\$798,303	\$21.54
Prof - Psych	\$201,229		\$201,229	\$1,824	(\$281)	\$202,772	1.157	\$234,538	\$6.33
Prof - Specialist	\$685,398		\$685,398	\$8,100	(\$960)	\$692,538	1.157	\$801,030	\$21.61
Prof - Vision	\$93,001		\$93,001	\$605	(\$130)	\$93,476	1.157	\$108,120	\$2.92
Radiology	\$497,555		\$497,555	\$6,101		\$503,656	0.982	\$494,794	\$13.35
Transportation/Ambulance	\$741,305		\$741,305	\$7,943		\$749,248	0.982	\$736,064	\$19.86
Provider Incentive Payment Adjustment									\$1.64
<b>Total</b>	<b>\$33,064,317</b>	<b>\$229,580</b>	<b>\$33,293,897</b>	<b>\$251,967</b>	<b>\$853,443</b>	<b>\$34,399,307</b>		<b>\$37,929,151</b>	<b>\$1,024.95</b>
Admin Cost Adjustment									\$81.38
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,106.33</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 21-44 Male									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$636,452		\$636,452	\$7,816	(\$19,165)	\$625,103	0.982	\$614,103	\$23.78
FQHC / RHC	\$29,751		\$29,751	\$352		\$30,103	1.157	\$34,819	\$1.35
Home Health	\$107,974		\$107,974	\$1,657		\$109,632	1.064	\$116,687	\$4.52
IP - Maternity	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$3,883,818	\$74,079	\$3,957,897	\$38,553	(\$57,084)	\$3,939,365	1.074	\$4,230,827	\$163.86
IP - Psych	\$708,556		\$708,556	\$4,156	\$163,521	\$876,233	1.408	\$1,233,753	\$47.78
Lab	\$239,423		\$239,423	\$2,832		\$242,256	0.982	\$237,993	\$9.22
OP - Emergency Room & Related	\$1,026,265		\$1,026,265	\$15,751	\$11,772	\$1,053,788	1.064	\$1,121,602	\$43.44
OP - Other	\$1,529,438		\$1,529,438	\$23,474	\$17,036	\$1,569,947	1.064	\$1,670,978	\$64.72
Pharmacy	\$6,130,422	\$52,006	\$6,182,428	\$124	\$340,367	\$6,522,919	1.109	\$7,230,284	\$280.04
Prof - Anesthesia	\$32,592		\$32,592	\$385		\$32,977	1.157	\$38,143	\$1.48
Prof - Child EPSDT	\$7,264		\$7,264	\$86	(\$10)	\$7,340	1.157	\$8,490	\$0.33
Prof - Evaluation & Management	\$1,358,742		\$1,358,742	\$15,917	\$3,373	\$1,378,031	1.157	\$1,593,912	\$61.73
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$579,425		\$579,425	\$6,832	(\$811)	\$585,445	1.157	\$677,161	\$26.23
Prof - Psych	\$94,069		\$94,069	\$668	(\$131)	\$94,606	1.157	\$109,426	\$4.24
Prof - Specialist	\$269,220		\$269,220	\$3,181	(\$377)	\$272,024	1.157	\$314,639	\$12.19
Prof - Vision	\$50,643		\$50,643	\$267	(\$70)	\$50,840	1.157	\$58,804	\$2.28
Radiology	\$182,775		\$182,775	\$2,238		\$185,013	0.982	\$181,758	\$7.04
Transportation/Ambulance	\$377,963		\$377,963	\$3,806		\$381,769	0.982	\$375,051	\$14.53
Provider Incentive Payment Adjustment									\$1.23
<b>Total</b>	<b>\$17,244,792</b>	<b>\$126,085</b>	<b>\$17,370,877</b>	<b>\$128,095</b>	<b>\$458,420</b>	<b>\$17,957,391</b>		<b>\$19,848,431</b>	<b>\$769.98</b>
Admin Cost Adjustment									\$61.13
<b>Medallion 3.0 Capitation Rate</b>									<b>\$831.12</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

Age 45 and Over									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$4,216,182		\$4,216,182	\$51,776	(\$126,957)	\$4,141,001	0.982	\$4,068,134	\$30.98
FQHC / RHC	\$372,686		\$372,686	\$4,404		\$377,090	1.157	\$436,165	\$3.32
Home Health	\$1,484,532		\$1,484,532	\$22,784		\$1,507,317	1.064	\$1,604,317	\$12.22
IP - Maternity	\$2,351	\$35	\$2,386	\$23	(\$34)	\$2,375	1.074	\$2,550	\$0.02
IP - Newborn	\$0	\$0	\$0			\$0	1.074	\$0	\$0.00
IP - Other	\$37,747,991	\$557,092	\$38,305,083	\$374,703	(\$552,494)	\$38,127,292	1.074	\$40,948,220	\$311.85
IP - Psych	\$2,762,588		\$2,762,588	\$15,198	\$637,320	\$3,415,107	1.408	\$4,808,535	\$36.62
Lab	\$2,061,431		\$2,061,431	\$24,725		\$2,086,156	0.982	\$2,049,447	\$15.61
OP - Emergency Room & Related	\$5,484,246		\$5,484,246	\$84,172	\$62,911	\$5,631,328	1.064	\$5,993,719	\$45.65
OP - Other	\$14,485,293		\$14,485,293	\$222,319	\$161,346	\$14,868,958	1.064	\$15,825,815	\$120.52
Pharmacy	\$51,846,973	\$439,831	\$52,286,804	\$1,046	\$2,878,598	\$55,166,448	1.109	\$61,148,864	\$465.69
Prof - Anesthesia	\$317,026		\$317,026	\$3,746		\$320,773	1.157	\$371,025	\$2.83
Prof - Child EPSDT	\$77,194		\$77,194	\$912	(\$108)	\$77,998	1.157	\$90,217	\$0.69
Prof - Evaluation & Management	\$10,310,911		\$10,310,911	\$121,127	\$25,593	\$10,457,631	1.157	\$12,095,914	\$92.12
Prof - Maternity	\$0		\$0			\$0	1.157	\$0	\$0.00
Prof - Other	\$2,843,704		\$2,843,704	\$33,505	(\$3,982)	\$2,873,227	1.157	\$3,323,345	\$25.31
Prof - Psych	\$401,010		\$401,010	\$2,821	(\$559)	\$403,272	1.157	\$466,448	\$3.55
Prof - Specialist	\$3,208,408		\$3,208,408	\$37,915	(\$4,493)	\$3,241,830	1.157	\$3,749,692	\$28.56
Prof - Vision	\$482,198		\$482,198	\$3,946	(\$673)	\$485,471	1.157	\$561,524	\$4.28
Radiology	\$1,706,089		\$1,706,089	\$20,920		\$1,727,009	0.982	\$1,696,620	\$12.92
Transportation/Ambulance	\$2,628,254		\$2,628,254	\$28,162		\$2,656,416	0.982	\$2,609,673	\$19.87
Provider Incentive Payment Adjustment									\$1.97
<b>Total</b>	<b>\$142,439,068</b>	<b>\$996,958</b>	<b>\$143,436,026</b>	<b>\$1,054,206</b>	<b>\$3,076,467</b>	<b>\$147,566,699</b>		<b>\$161,850,225</b>	<b>\$1,234.57</b>
Admin Cost Adjustment									\$98.02
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,332.59</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Northern Virginia	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$4,552,179	\$0	\$4,552,179	\$55,902	(\$168,364)	\$4,439,717	0.982	\$4,361,594	\$21.34
FQHC / RHC	\$13,608	\$0	\$13,608	\$161		\$13,769	1.157	\$15,926	\$0.08
Home Health	\$1,143,958	\$0	\$1,143,958	\$17,557		\$1,161,516	1.064	\$1,236,262	\$6.05
IP - Maternity	\$497,994	\$6,832	\$504,826	\$4,943	(\$7,281)	\$502,488	1.074	\$539,666	\$2.64
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$2.11
IP - Other	\$52,104,987	(\$670,494)	\$51,434,493	\$517,217	(\$742,068)	\$51,209,643	1.074	\$54,998,496	\$269.15
IP - Psych	\$7,311,745	\$0	\$7,311,745	\$67,067	\$1,692,953	\$9,071,765	1.408	\$12,773,218	\$62.51
Lab	\$1,310,755	\$0	\$1,310,755	\$14,655		\$1,325,410	0.982	\$1,302,088	\$6.37
OP - Emergency Room & Related	\$9,132,818	\$0	\$9,132,818	\$140,170	\$104,764	\$9,377,752	1.064	\$9,981,235	\$48.85
OP - Other	\$20,443,041	\$0	\$20,443,041	\$313,758	\$227,706	\$20,984,505	1.064	\$22,334,915	\$109.30
Pharmacy	\$67,785,736	\$575,044	\$68,360,779	\$1,367	\$3,763,535	\$72,125,681	1.108	\$79,947,207	\$391.25
Prof - Anesthesia	\$757,475	\$0	\$757,475	\$8,951		\$766,426	1.157	\$886,494	\$4.34
Prof - Child EPSDT	\$123,818	\$0	\$123,818	\$1,463	(\$173)	\$125,108	1.157	\$144,707	\$0.71
Prof - Evaluation & Management	\$14,897,217	\$0	\$14,897,217	\$174,719	\$36,977	\$15,108,913	1.157	\$17,475,862	\$85.52
Prof - Maternity	\$226,007	\$0	\$226,007	\$2,671	(\$317)	\$228,361	1.157	\$264,136	\$1.29
Prof - Other	\$11,832,222	\$0	\$11,832,222	\$139,790	(\$16,570)	\$11,955,441	1.157	\$13,828,370	\$67.67
Prof - Psych	\$821,353	\$0	\$821,353	\$9,669	(\$1,150)	\$829,871	1.157	\$959,878	\$4.70
Prof - Specialist	\$4,355,704	\$0	\$4,355,704	\$51,473	(\$6,100)	\$4,401,078	1.157	\$5,090,547	\$24.91
Prof - Vision	\$920,760	\$0	\$920,760	\$8,828	(\$1,287)	\$928,301	1.157	\$1,073,728	\$5.25
Radiology	\$2,898,496	\$0	\$2,898,496	\$35,517		\$2,934,013	0.982	\$2,882,384	\$14.11
Transportation/Ambulance	\$2,208,689	\$0	\$2,208,689	\$20,562		\$2,229,251	0.982	\$2,190,024	\$10.72
Provider Incentive Payment Adjustment									\$1.82
Total	\$203,734,293	(\$81,065)	\$203,653,228	\$1,590,369	\$4,876,809	\$210,120,406		\$232,717,832	\$1,140.71
Admin Cost Adjustment									\$90.57
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,231.27</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Other MSA	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$3,856,508	\$0	\$3,856,508	\$47,359	(\$131,256)	\$3,772,611	0.982	\$3,706,226	\$23.78
FQHC / RHC	\$811,264	\$0	\$811,264	\$9,587		\$820,851	1.157	\$949,445	\$6.09
Home Health	\$525,281	\$0	\$525,281	\$8,062		\$533,343	1.064	\$567,665	\$3.64
IP - Maternity	\$537,075	(\$9,325)	\$527,750	\$5,331	(\$7,614)	\$525,467	1.074	\$564,345	\$3.62
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$2.77
IP - Other	\$33,465,972	\$35,214	\$33,501,185	\$332,198	(\$483,269)	\$33,350,114	1.074	\$35,817,593	\$229.84
IP - Psych	\$5,718,214	\$0	\$5,718,214	\$25,490	\$1,317,803	\$7,061,506	1.408	\$9,942,736	\$63.80
Lab	\$1,451,046	\$0	\$1,451,046	\$17,165		\$1,468,212	0.982	\$1,442,376	\$9.26
OP - Emergency Room & Related	\$5,555,210	\$0	\$5,555,210	\$85,261	\$63,725	\$5,704,196	1.064	\$6,071,276	\$38.96
OP - Other	\$14,987,932	\$0	\$14,987,932	\$230,033	\$166,944	\$15,384,909	1.064	\$16,374,970	\$105.08
Pharmacy	\$48,069,640	\$407,787	\$48,477,427	\$969	\$2,668,876	\$51,147,273	1.108	\$56,693,837	\$363.80
Prof - Anesthesia	\$368,781	\$0	\$368,781	\$4,358		\$373,139	1.157	\$431,595	\$2.77
Prof - Child EPSDT	\$88,431	\$0	\$88,431	\$1,045	(\$124)	\$89,352	1.157	\$103,350	\$0.66
Prof - Evaluation & Management	\$9,479,203	\$0	\$9,479,203	\$111,636	\$23,530	\$9,614,369	1.157	\$11,120,548	\$71.36
Prof - Maternity	\$206,959	\$0	\$206,959	\$2,446	(\$290)	\$209,115	1.157	\$241,874	\$1.55
Prof - Other	\$9,097,842	\$0	\$9,097,842	\$107,509	(\$12,741)	\$9,192,610	1.157	\$10,632,716	\$68.23
Prof - Psych	\$911,408	\$0	\$911,408	\$5,680	(\$1,269)	\$915,819	1.157	\$1,059,290	\$6.80
Prof - Specialist	\$2,786,219	\$0	\$2,786,219	\$32,926	(\$3,902)	\$2,815,243	1.157	\$3,256,277	\$20.90
Prof - Vision	\$546,837	\$0	\$546,837	\$4,324	(\$763)	\$550,399	1.157	\$636,624	\$4.09
Radiology	\$1,772,806	\$0	\$1,772,806	\$21,769		\$1,794,575	0.982	\$1,762,996	\$11.31
Transportation/Ambulance	\$3,085,683	\$0	\$3,085,683	\$32,675		\$3,118,358	0.982	\$3,063,486	\$19.66
Provider Incentive Payment Adjustment									\$1.69
<b>Total</b>	<b>\$143,718,044</b>	<b>\$441,229</b>	<b>\$144,159,272</b>	<b>\$1,089,752</b>	<b>\$3,593,833</b>	<b>\$148,842,858</b>		<b>\$164,870,320</b>	<b>\$1,059.67</b>
Admin Cost Adjustment									\$84.13
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,143.80</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Richmond/Charlottesville	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$8,053,715	\$0	\$8,053,715	\$98,902	(\$284,312)	\$7,868,305	0.982	\$7,729,850	\$20.57
FQHC / RHC	\$617,814	\$0	\$617,814	\$7,301		\$625,115	1.157	\$723,045	\$1.92
Home Health	\$2,502,397	\$0	\$2,502,397	\$38,407		\$2,540,804	1.064	\$2,704,312	\$7.20
IP - Maternity	\$1,438,941	\$162	\$1,439,103	\$14,284	(\$20,760)	\$1,432,627	1.074	\$1,538,623	\$4.09
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$1.15
IP - Other	\$93,611,235	\$255,827	\$93,867,062	\$929,227	(\$1,354,051)	\$93,442,238	1.074	\$100,355,759	\$267.07
IP - Psych	\$19,297,295	\$0	\$19,297,295	\$121,101	\$4,455,249	\$23,873,644	1.408	\$33,614,545	\$89.46
Lab	\$2,036,386	\$0	\$2,036,386	\$22,934		\$2,059,320	0.982	\$2,023,083	\$5.38
OP - Emergency Room & Related	\$19,702,529	\$0	\$19,702,529	\$302,393	\$226,011	\$20,230,932	1.064	\$21,532,847	\$57.30
OP - Other	\$41,752,274	\$0	\$41,752,274	\$640,810	\$465,061	\$42,858,145	1.064	\$45,616,183	\$121.40
Pharmacy	\$106,278,740	\$901,589	\$107,180,330	\$2,143	\$5,900,706	\$113,083,179	1.108	\$125,346,260	\$333.58
Prof - Anesthesia	\$1,017,616	\$0	\$1,017,616	\$12,026		\$1,029,641	1.157	\$1,190,944	\$3.17
Prof - Child EPSDT	\$138,094	\$0	\$138,094	\$1,632	(\$193)	\$139,532	1.157	\$161,391	\$0.43
Prof - Evaluation & Management	\$23,213,181	\$0	\$23,213,181	\$273,821	\$57,622	\$23,544,624	1.157	\$27,233,103	\$72.47
Prof - Maternity	\$631,907	\$0	\$631,907	\$7,468	(\$885)	\$638,490	1.157	\$738,515	\$1.97
Prof - Other	\$17,281,089	\$0	\$17,281,089	\$204,268	(\$24,201)	\$17,461,156	1.157	\$20,196,605	\$53.75
Prof - Psych	\$2,162,133	\$0	\$2,162,133	\$14,956	(\$3,013)	\$2,174,076	1.157	\$2,514,665	\$6.69
Prof - Specialist	\$7,179,415	\$0	\$7,179,415	\$84,843	(\$10,054)	\$7,254,203	1.157	\$8,390,640	\$22.33
Prof - Vision	\$1,046,309	\$0	\$1,046,309	\$8,287	(\$1,460)	\$1,053,136	1.157	\$1,218,119	\$3.24
Radiology	\$3,532,534	\$0	\$3,532,534	\$43,380		\$3,575,915	0.982	\$3,512,991	\$9.35
Transportation/Ambulance	\$5,499,116	\$0	\$5,499,116	\$54,000		\$5,553,116	0.982	\$5,455,401	\$14.52
Provider Incentive Payment Adjustment									\$1.76
<b>Total</b>	<b>\$357,388,452</b>	<b>\$1,165,132</b>	<b>\$358,553,584</b>	<b>\$2,886,110</b>	<b>\$9,399,902</b>	<b>\$370,839,596</b>		<b>\$412,227,978</b>	<b>\$1,098.81</b>
Admin Cost Adjustment									\$87.24
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,186.05</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Rural	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$4,548,054	\$0	\$4,548,054	\$55,852	(\$159,266)	\$4,444,639	0.982	\$4,366,429	\$21.78
FQHC / RHC	\$1,462,522	\$0	\$1,462,522	\$17,283		\$1,479,805	1.157	\$1,711,630	\$8.54
Home Health	\$1,102,597	\$0	\$1,102,597	\$16,923		\$1,119,519	1.064	\$1,191,564	\$5.94
IP - Maternity	\$542,056	\$8,198	\$550,254	\$5,381	(\$8,006)	\$547,629	1.074	\$588,147	\$2.93
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$6,020)	\$401,194	1.074	\$430,877	\$2.15
IP - Other	\$43,034,126	(\$59,647)	\$42,974,479	\$427,176	(\$621,826)	\$42,779,829	1.074	\$45,944,984	\$229.19
IP - Psych	\$7,157,441	\$0	\$7,157,441	\$28,899	\$1,648,794	\$8,835,135	1.408	\$12,440,038	\$62.06
Lab	\$1,149,474	\$0	\$1,149,474	\$13,275		\$1,162,750	0.982	\$1,142,290	\$5.70
OP - Emergency Room & Related	\$8,236,965	\$0	\$8,236,965	\$126,420	\$94,715	\$8,458,101	1.064	\$9,002,402	\$44.91
OP - Other	\$24,989,191	\$0	\$24,989,191	\$383,532	\$282,672	\$25,655,394	1.064	\$27,306,388	\$136.22
Pharmacy	\$57,239,232	\$485,575	\$57,724,807	\$1,154	\$3,177,982	\$60,903,943	1.108	\$67,508,550	\$336.76
Prof - Anesthesia	\$579,230	\$0	\$579,230	\$6,845		\$586,075	1.157	\$677,889	\$3.38
Prof - Child EPSDT	\$187,764	\$0	\$187,764	\$2,219	(\$263)	\$189,720	1.157	\$219,441	\$1.09
Prof - Evaluation & Management	\$11,231,054	\$0	\$11,231,054	\$132,222	\$27,878	\$11,391,153	1.157	\$13,175,681	\$65.73
Prof - Maternity	\$242,519	\$0	\$242,519	\$2,866	(\$340)	\$245,045	1.157	\$283,434	\$1.41
Prof - Other	\$8,082,716	\$0	\$8,082,716	\$95,683	(\$11,320)	\$8,167,079	1.157	\$9,446,526	\$47.12
Prof - Psych	\$1,070,362	\$0	\$1,070,362	\$5,712	(\$1,489)	\$1,074,585	1.157	\$1,242,929	\$6.20
Prof - Specialist	\$3,697,002	\$0	\$3,697,002	\$43,689	(\$5,177)	\$3,735,514	1.157	\$4,320,716	\$21.55
Prof - Vision	\$584,140	\$0	\$584,140	\$4,680	(\$815)	\$588,005	1.157	\$680,121	\$3.39
Radiology	\$1,919,455	\$0	\$1,919,455	\$23,555		\$1,943,010	0.982	\$1,908,819	\$9.52
Transportation/Ambulance	\$3,462,872	\$0	\$3,462,872	\$34,998		\$3,497,871	0.982	\$3,436,320	\$17.14
Provider Incentive Payment Adjustment									\$1.65
<b>Total</b>	<b>\$180,914,505</b>	<b>\$441,678</b>	<b>\$181,356,184</b>	<b>\$1,432,292</b>	<b>\$4,417,518</b>	<b>\$187,205,994</b>		<b>\$207,025,176</b>	<b>\$1,034.38</b>
Admin Cost Adjustment									\$82.13
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,116.51</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Tidewater	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$11,138,296	\$0	\$11,138,296	\$136,782	(\$380,232)	\$10,894,846	0.982	\$10,703,135	\$26.66
FQHC / RHC	\$1,943,269	\$0	\$1,943,269	\$22,965		\$1,966,234	1.157	\$2,274,262	\$5.66
Home Health	\$2,500,350	\$0	\$2,500,350	\$38,375		\$2,538,726	1.064	\$2,702,099	\$6.73
IP - Maternity	\$1,446,316	\$26,654	\$1,472,970	\$14,357	(\$21,659)	\$1,465,668	1.074	\$1,574,109	\$3.92
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$6,581)	\$400,633	1.074	\$430,275	\$1.07
IP - Other	\$83,458,625	\$357,425	\$83,816,051	\$828,448	(\$1,223,398)	\$83,421,101	1.074	\$89,593,187	\$223.13
IP - Psych	\$15,125,602	\$0	\$15,125,602	\$62,299	\$3,484,628	\$18,672,529	1.408	\$26,291,277	\$65.48
Lab	\$1,833,235	\$0	\$1,833,235	\$17,086		\$1,850,320	0.982	\$1,817,761	\$4.53
OP - Emergency Room & Related	\$25,274,499	\$0	\$25,274,499	\$387,911	\$298,720	\$25,961,130	1.064	\$27,631,799	\$68.82
OP - Other	\$47,648,537	\$0	\$47,648,537	\$731,305	\$599,722	\$48,979,565	1.064	\$52,131,532	\$129.83
Pharmacy	\$124,959,633	\$1,060,064	\$126,019,697	\$2,520	\$6,937,889	\$132,960,106	1.108	\$147,378,700	\$367.05
Prof - Anesthesia	\$1,462,511	\$0	\$1,462,511	\$17,283		\$1,479,794	1.157	\$1,711,617	\$4.26
Prof - Child EPSDT	\$261,585	\$0	\$261,585	\$3,091	(\$366)	\$264,310	1.157	\$305,716	\$0.76
Prof - Evaluation & Management	\$25,495,702	\$0	\$25,495,702	\$300,942	\$63,288	\$25,859,932	1.157	\$29,911,126	\$74.49
Prof - Maternity	\$594,426	\$0	\$594,426	\$7,025	(\$832)	\$600,619	1.157	\$694,711	\$1.73
Prof - Other	\$28,317,918	\$0	\$28,317,918	\$335,570	(\$39,659)	\$28,613,829	1.157	\$33,096,446	\$82.43
Prof - Psych	\$2,330,943	\$0	\$2,330,943	\$13,117	(\$3,244)	\$2,340,816	1.157	\$2,707,526	\$6.74
Prof - Specialist	\$8,646,992	\$0	\$8,646,992	\$102,186	(\$12,110)	\$8,737,068	1.157	\$10,105,809	\$25.17
Prof - Vision	\$1,137,474	\$0	\$1,137,474	\$9,304	(\$1,587)	\$1,145,190	1.157	\$1,324,595	\$3.30
Radiology	\$4,207,257	\$0	\$4,207,257	\$51,666		\$4,258,924	0.982	\$4,183,982	\$10.42
Transportation/Ambulance	\$4,130,643	\$0	\$4,130,643	\$34,845		\$4,165,488	0.982	\$4,092,190	\$10.19
Provider Incentive Payment Adjustment									\$1.80
<b>Total</b>	<b>\$392,309,547</b>	<b>\$1,451,696</b>	<b>\$393,761,244</b>	<b>\$3,121,004</b>	<b>\$9,694,580</b>	<b>\$406,576,827</b>		<b>\$450,661,855</b>	<b>\$1,124.18</b>
Admin Cost Adjustment									\$89.26
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,213.43</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Roanoke/Alleghany	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$5,592,031	\$0	\$5,592,031	\$68,672	(\$194,104)	\$5,466,599	0.982	\$5,370,406	\$24.31
FQHC / RHC	\$410,118	\$0	\$410,118	\$4,847		\$414,964	1.157	\$479,972	\$2.17
Home Health	\$1,405,239	\$0	\$1,405,239	\$21,567		\$1,426,806	1.064	\$1,518,625	\$6.87
IP - Maternity	\$614,130	(\$13,656)	\$600,475	\$6,096	(\$8,664)	\$597,907	1.074	\$642,144	\$2.91
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$1.95
IP - Other	\$56,138,631	(\$690,666)	\$55,447,965	\$557,257	(\$799,967)	\$55,205,255	1.074	\$59,289,733	\$268.39
IP - Psych	\$7,914,788	\$0	\$7,914,788	\$60,086	\$1,829,711	\$9,804,585	1.408	\$13,805,042	\$62.49
Lab	\$2,611,961	\$0	\$2,611,961	\$30,849		\$2,642,810	0.982	\$2,596,305	\$11.75
OP - Emergency Room & Related	\$6,732,475	\$0	\$6,732,475	\$103,329	\$77,229	\$6,913,034	1.064	\$7,357,907	\$33.31
OP - Other	\$18,922,786	\$0	\$18,922,786	\$290,425	\$210,773	\$19,423,984	1.064	\$20,673,970	\$93.59
Pharmacy	\$79,008,563	\$670,250	\$79,678,813	\$1,593	\$4,386,638	\$84,067,044	1.108	\$93,183,527	\$421.82
Prof - Anesthesia	\$559,178	\$0	\$559,178	\$6,608		\$565,786	1.157	\$654,421	\$2.96
Prof - Child EPSDT	\$143,885	\$0	\$143,885	\$1,700	(\$202)	\$145,384	1.157	\$168,159	\$0.76
Prof - Evaluation & Management	\$15,319,502	\$0	\$15,319,502	\$174,440	\$38,012	\$15,531,954	1.157	\$17,965,176	\$81.32
Prof - Maternity	\$292,999	\$0	\$292,999	\$3,463	(\$410)	\$296,051	1.157	\$342,430	\$1.55
Prof - Other	\$19,786,646	\$0	\$19,786,646	\$233,503	(\$27,710)	\$19,992,439	1.157	\$23,124,437	\$104.68
Prof - Psych	\$1,413,276	\$0	\$1,413,276	\$14,312	(\$1,976)	\$1,425,612	1.157	\$1,648,947	\$7.46
Prof - Specialist	\$4,668,885	\$0	\$4,668,885	\$55,174	(\$6,539)	\$4,717,521	1.157	\$5,456,563	\$24.70
Prof - Vision	\$705,004	\$0	\$705,004	\$4,725	(\$982)	\$708,747	1.157	\$819,779	\$3.71
Radiology	\$2,099,728	\$0	\$2,099,728	\$25,765		\$2,125,493	0.982	\$2,088,092	\$9.45
Transportation/Ambulance	\$3,982,191	\$0	\$3,982,191	\$42,928		\$4,025,119	0.982	\$3,954,291	\$17.90
Provider Incentive Payment Adjustment									\$1.90
Total	\$228,717,750	(\$26,519)	\$228,691,231	\$1,711,269	\$5,495,992	\$235,898,492		\$261,571,025	\$1,185.97
Admin Cost Adjustment									\$94.16
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,280.14</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Capitation Rate Calculations - Health Plan Encounter Data**  
**Aged, Blind, and Disabled (ABAD)**

**Exhibit 4b**

All Age Categories									
Far Southwest	Total Base Claims FY14-15	Base Claims Redistribution and Adjustments FY14-15	Total Redistributed Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$6,379,165	\$0	\$6,379,165	\$78,338	(\$206,538)	\$6,250,965	0.982	\$6,140,970	\$27.31
FQHC / RHC	\$510,681	\$0	\$510,681	\$6,035		\$516,716	1.157	\$597,664	\$2.66
Home Health	\$1,851,140	\$0	\$1,851,140	\$28,411		\$1,879,552	1.064	\$2,000,506	\$8.90
IP - Maternity	\$284,626	\$5,422	\$290,048	\$2,825	(\$4,183)	\$288,689	1.074	\$310,049	\$1.38
IP - Newborn	\$395,733	\$7,553	\$403,286	\$3,928	(\$5,817)	\$401,398	1.074	\$431,096	\$1.92
IP - Other	\$50,290,850	\$789,115	\$51,079,965	\$499,209	(\$736,746)	\$50,842,428	1.074	\$54,604,112	\$242.86
IP - Psych	\$4,942,316	\$0	\$4,942,316	\$27,402	\$1,140,225	\$6,109,943	1.408	\$8,602,915	\$38.26
Lab	\$3,035,893	\$0	\$3,035,893	\$36,277		\$3,072,170	0.982	\$3,018,110	\$13.42
OP - Emergency Room & Related	\$9,382,529	\$0	\$9,382,529	\$144,002	\$107,629	\$9,634,159	1.064	\$10,254,144	\$45.61
OP - Other	\$21,025,425	\$0	\$21,025,425	\$322,696	\$234,193	\$21,582,315	1.064	\$22,971,195	\$102.17
Pharmacy	\$79,460,967	\$674,088	\$80,135,055	\$1,602	\$4,411,756	\$84,548,413	1.108	\$93,717,097	\$416.81
Prof - Anesthesia	\$509,333	\$0	\$509,333	\$6,019		\$515,352	1.157	\$596,087	\$2.65
Prof - Child EPSDT	\$124,319	\$0	\$124,319	\$1,469	(\$174)	\$125,614	1.157	\$145,293	\$0.65
Prof - Evaluation & Management	\$16,192,405	\$0	\$16,192,405	\$190,115	\$40,192	\$16,422,712	1.157	\$18,995,479	\$84.48
Prof - Maternity	\$151,372	\$0	\$151,372	\$1,789	(\$212)	\$152,948	1.157	\$176,909	\$0.79
Prof - Other	\$6,509,460	\$0	\$6,509,460	\$76,758	(\$9,116)	\$6,577,102	1.157	\$7,607,465	\$33.83
Prof - Psych	\$936,601	\$0	\$936,601	\$7,676	(\$1,307)	\$942,970	1.157	\$1,090,695	\$4.85
Prof - Specialist	\$4,403,593	\$0	\$4,403,593	\$52,039	(\$6,167)	\$4,449,466	1.157	\$5,146,515	\$22.89
Prof - Vision	\$714,433	\$0	\$714,433	\$5,398	(\$996)	\$718,834	1.157	\$831,446	\$3.70
Radiology	\$2,485,446	\$0	\$2,485,446	\$30,468		\$2,515,914	0.982	\$2,471,643	\$10.99
Transportation/Ambulance	\$3,999,361	\$0	\$3,999,361	\$42,054		\$4,041,414	0.982	\$3,970,300	\$17.66
Provider Incentive Payment Adjustment									\$1.74
<b>Total</b>	<b>\$213,585,647</b>	<b>\$1,476,177</b>	<b>\$215,061,824</b>	<b>\$1,564,512</b>	<b>\$4,962,738</b>	<b>\$221,589,074</b>		<b>\$243,679,690</b>	<b>\$1,085.52</b>
Admin Cost Adjustment									\$86.19
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,171.71</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Pharmacy Completed and Trended claims does not trend the additional dollars added in to level out the Hep C claims

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Summary of FY 2017 Base Capitation Rates  
 Before CDPS Adjustment**

**Exhibit 5a**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,434.88	\$2,434.88	\$2,434.88	\$2,434.77	\$2,435.07	\$2,434.88	\$2,434.88	\$2,434.92
	1-5	\$2,034.53	\$1,179.20	\$1,265.72	\$1,070.81	\$1,287.76	\$966.72	\$917.03	\$1,258.91
	6-14	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$625.25
	Female 15-20	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$610.53
	Female 21-44	\$1,170.99	\$1,085.78	\$1,181.13	\$1,059.57	\$1,119.48	\$1,190.09	\$1,106.33	\$1,136.04
	Male 15-20	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$613.54
	Male 21-44	\$1,074.87	\$1,121.61	\$895.23	\$821.81	\$1,026.58	\$883.26	\$831.12	\$949.84
	Over 44	\$1,415.70	\$1,486.37	\$1,694.37	\$1,498.07	\$1,671.57	\$1,601.72	\$1,332.59	\$1,547.71
	<b>Average</b>	\$1,221.19	\$1,143.16	\$1,202.23	\$1,123.27	\$1,233.09	\$1,278.11	\$1,169.55	\$1,203.18
<b>Low Income Families with Children</b>	Under 1	\$445.72	\$570.51	\$617.66	\$614.15	\$643.09	\$567.55	\$602.53	\$566.79
	1-5	\$122.74	\$128.60	\$142.74	\$139.66	\$136.99	\$131.60	\$142.67	\$133.78
	6-14	\$107.80	\$122.16	\$131.25	\$131.29	\$133.87	\$142.60	\$156.57	\$127.83
	Female 15-20	\$202.69	\$267.51	\$265.46	\$269.18	\$268.85	\$318.84	\$329.59	\$263.88
	Female 21-44	\$593.52	\$514.13	\$528.44	\$536.91	\$491.92	\$563.40	\$561.39	\$534.30
	Male 15-20	\$162.52	\$165.03	\$170.60	\$154.37	\$179.70	\$190.04	\$169.68	\$170.56
	Male 21-44	\$322.17	\$359.25	\$338.40	\$356.90	\$344.08	\$381.46	\$397.24	\$352.92
	Over 44	\$605.35	\$716.14	\$749.41	\$767.60	\$726.86	\$735.55	\$706.07	\$705.39
	<b>Average</b>	\$203.05	\$234.28	\$251.65	\$247.19	\$251.13	\$258.49	\$274.32	\$240.34
<b>Weighted Average</b>		\$264.58	\$346.81	\$365.61	\$357.72	\$361.71	\$400.08	\$446.22	\$348.99

Note:  
 Average is weighted by health plan enrollment distribution as of February 2016

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Comparison of FY 2016 and FY 2017 Base Capitation Rates**  
**Before CDPS Adjustment**

**Exhibit 5b**

		Region																							
		FY 2016	FY 2017		FY 2016	FY 2017		FY 2016	FY 2017		FY 2016	FY 2017													
Aid Category	Age Group	Northern Virginia			% Change 2016-2017			Other MSA			% Change 2016-2017			Richmond/ Charlottesville			% Change 2016-2017			Rural			% Change 2016-2017		
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,757.39	\$2,434.88	-11.70%	\$2,757.39	\$2,434.88	-11.70%	\$2,757.39	\$2,434.88	-11.70%	\$2,757.39	\$2,434.77	-11.70%												
	1-5	\$1,947.75	\$2,034.53	4.46%	\$1,170.23	\$1,179.20	0.77%	\$1,258.28	\$1,265.72	0.59%	\$1,001.25	\$1,070.81	6.95%												
	6-14	\$627.46	\$603.31	-3.85%	\$477.79	\$552.39	15.61%	\$488.27	\$533.61	9.29%	\$486.21	\$569.87	17.21%												
	Female 15-20	\$627.46	\$603.31	-3.85%	\$477.79	\$552.39	15.61%	\$488.27	\$533.61	9.29%	\$486.21	\$569.87	17.21%												
	Female 21-44	\$1,167.06	\$1,170.99	0.34%	\$1,020.07	\$1,085.78	6.44%	\$1,147.24	\$1,181.13	2.95%	\$1,012.34	\$1,059.57	4.67%												
	Male 15-20	\$627.46	\$603.31	-3.85%	\$477.79	\$552.39	15.61%	\$488.27	\$533.61	9.29%	\$486.21	\$569.87	17.21%												
	Male 21-44	\$964.58	\$1,074.87	11.43%	\$1,003.43	\$1,121.61	11.78%	\$859.51	\$895.23	4.16%	\$746.89	\$821.81	10.03%												
	Over 44	\$1,353.77	\$1,415.70	4.57%	\$1,440.26	\$1,486.37	3.20%	\$1,629.57	\$1,694.37	3.98%	\$1,483.22	\$1,498.07	1.00%												
	<b>Average</b>	\$1,173.84	\$1,221.19	4.03%	\$1,078.80	\$1,143.16	5.97%	\$1,152.60	\$1,202.23	4.31%	\$1,078.86	\$1,123.27	4.12%												
<b>Low Income Families with Children</b>	Under 1	\$402.22	\$445.72	10.82%	\$525.18	\$570.51	8.63%	\$566.83	\$617.66	8.97%	\$576.18	\$614.15	6.59%												
	1-5	\$117.44	\$122.74	4.51%	\$124.25	\$128.60	3.51%	\$135.56	\$142.74	5.29%	\$131.75	\$139.66	6.01%												
	6-14	\$103.19	\$107.80	4.47%	\$108.74	\$122.16	12.34%	\$120.42	\$131.25	8.99%	\$116.96	\$131.29	12.25%												
	Female 15-20	\$191.14	\$202.69	6.04%	\$247.48	\$267.51	8.09%	\$251.89	\$265.46	5.39%	\$249.70	\$269.18	7.80%												
	Female 21-44	\$655.60	\$593.52	-9.47%	\$538.34	\$514.13	-4.50%	\$559.26	\$528.44	-5.51%	\$558.86	\$536.91	-3.93%												
	Male 15-20	\$143.87	\$162.52	12.97%	\$137.98	\$165.03	19.61%	\$155.91	\$170.60	9.42%	\$134.82	\$154.37	14.50%												
	Male 21-44	\$377.53	\$322.17	-14.67%	\$394.56	\$359.25	-8.95%	\$366.42	\$338.40	-7.65%	\$403.76	\$356.90	-11.60%												
	Over 44	\$703.73	\$605.35	-13.98%	\$721.95	\$716.14	-0.80%	\$786.19	\$749.41	-4.68%	\$847.03	\$767.60	-9.38%												
	<b>Average</b>	\$203.29	\$203.05	-0.12%	\$226.11	\$234.28	3.61%	\$246.81	\$251.65	1.96%	\$240.28	\$247.19	2.88%												
<b>Weighted Average</b>		\$261.94	\$264.58	1.01%	\$331.68	\$346.81	4.56%	\$355.40	\$365.61	2.87%	\$346.08	\$357.72	3.36%												

Note:  
Average is weighted by health plan enrollment distribution as of February 2016



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Comparison of FY 2016 and FY 2017 Base Capitation Rates**  
**Before CDPS Adjustment**

**Exhibit 5b**

		Region																							
		FY 2016	FY 2017		FY 2016	FY 2017		FY 2016	FY 2017		FY 2016	FY 2017													
Aid Category	Age Group	Tidewater			% Change 2016-2017			Roanoke-Alleghany			% Change 2016-2017			Far Southwest			% Change 2016-2017			Weighted Average			% Change 2016-2017		
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,757.39	\$2,435.07	-11.69%	\$2,757.39	\$2,434.88	-11.70%	\$2,757.39	\$2,434.88	-11.70%	\$2,757.39	\$2,434.92	-11.69%												
	1-5	\$1,133.88	\$1,287.76	13.57%	\$770.76	\$966.72	25.42%	\$856.70	\$917.03	7.04%	\$1,163.23	\$1,258.91	8.22%												
	6-14	\$510.97	\$574.50	12.43%	\$800.48	\$929.94	16.17%	\$676.98	\$750.34	10.84%	\$561.00	\$625.25	11.45%												
	Female 15-20	\$510.97	\$574.50	12.43%	\$800.48	\$929.94	16.17%	\$676.98	\$750.34	10.84%	\$549.71	\$610.53	11.06%												
	Female 21-44	\$1,033.80	\$1,119.48	8.29%	\$1,102.89	\$1,190.09	7.91%	\$1,036.12	\$1,106.33	6.78%	\$1,077.18	\$1,136.04	5.46%												
	Male 15-20	\$510.97	\$574.50	12.43%	\$800.48	\$929.94	16.17%	\$676.98	\$750.34	10.84%	\$552.42	\$613.54	11.06%												
	Male 21-44	\$921.21	\$1,026.58	11.44%	\$882.69	\$883.26	0.06%	\$726.31	\$831.12	14.43%	\$874.92	\$949.84	8.56%												
	Over 44	\$1,583.64	\$1,671.57	5.55%	\$1,527.09	\$1,601.72	4.89%	\$1,254.19	\$1,332.59	6.25%	\$1,481.97	\$1,547.71	4.44%												
	<b>Average</b>	\$1,147.68	\$1,233.09	7.44%	\$1,195.69	\$1,278.11	6.89%	\$1,090.31	\$1,169.55	7.27%	\$1,137.40	\$1,203.18	5.78%												
<b>Low Income Families with Children</b>	Under 1	\$591.40	\$643.09	8.74%	\$542.23	\$567.55	4.67%	\$529.79	\$602.53	13.73%	\$520.59	\$566.79	8.88%												
	1-5	\$126.17	\$136.99	8.58%	\$122.95	\$131.60	7.04%	\$138.96	\$142.67	2.67%	\$126.51	\$133.78	5.75%												
	6-14	\$123.07	\$133.87	8.77%	\$127.09	\$142.60	12.21%	\$141.41	\$156.57	10.72%	\$117.32	\$127.83	8.95%												
	Female 15-20	\$249.37	\$268.85	7.81%	\$287.80	\$318.84	10.79%	\$307.93	\$329.59	7.03%	\$245.86	\$263.88	7.33%												
	Female 21-44	\$527.05	\$491.92	-6.67%	\$589.70	\$563.40	-4.46%	\$614.15	\$561.39	-8.59%	\$571.05	\$534.30	-6.44%												
	Male 15-20	\$153.71	\$179.70	16.91%	\$160.70	\$190.04	18.26%	\$166.46	\$169.68	1.93%	\$150.45	\$170.56	13.37%												
	Male 21-44	\$390.77	\$344.08	-11.95%	\$419.05	\$381.46	-8.97%	\$476.55	\$397.24	-16.64%	\$399.64	\$352.92	-11.69%												
	Over 44	\$768.82	\$726.86	-5.46%	\$758.77	\$735.55	-3.06%	\$743.03	\$706.07	-4.97%	\$758.56	\$705.39	-7.01%												
	<b>Average</b>	\$246.03	\$251.13	2.07%	\$249.93	\$258.49	3.42%	\$273.76	\$274.32	0.21%	\$236.10	\$240.34	1.80%												
<b>Weighted Average</b>		\$347.57	\$361.71	4.07%	\$381.27	\$400.08	4.94%	\$430.55	\$446.22	3.64%	\$337.80	\$348.99	3.31%												

Note:  
Average is weighted by health plan enrollment distribution as of February 2016

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
February 2016 Member Month Distribution**

**Exhibit 5c**

Aid Category	Age Group	Region							Regional Total
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	9	6	13	4	16	5	3	56
	1-5	217	166	329	186	401	312	125	1,736
	6-14	833	931	2,182	1,011	2,232	1,257	578	9,024
	Female 15-20	250	267	628	296	633	245	159	2,478
	Female 21-44	1,013	987	2,401	1,163	2,457	1,430	1,405	10,856
	Male 15-20	472	415	1,278	558	1,234	523	288	4,768
	Male 21-44	1,193	885	2,384	1,167	2,422	1,240	1,052	10,343
Over 44	5,135	2,957	7,069	3,902	7,840	4,363	5,534	36,800	
<b>Aid Category Total</b>		9,122	6,614	16,284	8,287	17,235	9,375	9,144	76,061
<b>Low Income Families with Children</b>	Under 1	10,255	3,048	7,308	3,529	8,031	3,585	2,126	37,882
	1-5	38,228	11,205	28,417	13,484	31,958	13,774	8,339	145,405
	6-14	58,682	18,326	45,702	22,463	51,188	22,217	14,197	232,775
	Female 15-20	8,538	3,279	8,298	4,098	9,381	4,227	2,995	40,816
	Female 21-44	13,192	6,448	17,940	7,934	22,688	8,189	5,771	82,162
	Male 15-20	8,126	2,810	7,106	3,623	7,811	3,611	2,742	35,829
	Male 21-44	2,058	892	2,327	1,151	2,169	1,405	1,489	11,491
Over 44	2,753	796	2,444	1,114	2,584	1,125	819	11,635	
<b>Aid Category Total</b>		141,832	46,804	119,542	57,396	135,810	58,133	38,478	597,995
<b>Total</b>		150,954	53,418	135,826	65,683	153,045	67,508	47,622	674,056

Note: Member Month distribution as of February 2016

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 CDPS Rates Summary of Difference in Implied Cost  
 February 2016 CDPS Rates**

**Exhibit 6**

	Aged, Blind, and Disabled						
	Northern Virginia	Other MSA	Richmond/Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest
<b>Aetna Better Health</b>	0.0%	0.0%	-2.1%	0.0%	0.0%	-0.5%	-8.2%
<b>Anthem Blue Cross and Blue Shield</b>	4.2%	0.0%	2.4%	5.9%	3.8%	-0.7%	-3.2%
<b>InTotal Health</b>	-16.1%	0.0%	0.0%	0.0%	0.0%	-10.0%	-1.1%
<b>Kaiser Permanente</b>	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Optima Family Care</b>	0.0%	-2.1%	-7.1%	-4.7%	-0.1%	1.6%	-6.2%
<b>Virginia Premier Health Plan</b>	15.1%	1.6%	4.4%	0.7%	-10.2%	0.9%	5.3%

	Low Income Families with Children						
	Northern Virginia	Other MSA	Richmond/Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest
<b>Aetna Better Health</b>	0.0%	-10.5%	-3.6%	1.6%	0.0%	-7.8%	-6.4%
<b>Anthem Blue Cross and Blue Shield</b>	2.7%	-8.4%	2.2%	0.9%	0.9%	-3.1%	-6.2%
<b>InTotal Health</b>	-9.3%	0.0%	0.0%	0.2%	0.0%	-14.7%	-3.4%
<b>Kaiser Permanente</b>	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Optima Family Care</b>	0.0%	0.0%	-2.4%	-2.1%	2.4%	-5.5%	-2.3%
<b>Virginia Premier Health Plan</b>	3.7%	3.2%	1.2%	1.8%	-10.4%	3.1%	6.6%

Note:  
 Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Aetna Better Health Medallion 3.0 Capitation Rates  
With CDPS Adjustment**

**Exhibit 7a**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,434.88	\$2,434.88	\$2,382.68	\$2,434.77	\$2,435.07	\$2,422.37	\$2,235.73	\$2,379.64
	1-5	\$2,034.53	\$1,179.20	\$1,238.58	\$1,070.81	\$1,287.76	\$961.75	\$842.02	\$1,101.15
	6-14	\$603.31	\$552.39	\$522.17	\$569.87	\$574.50	\$925.17	\$688.97	\$598.64
	Female 15-20	\$603.31	\$552.39	\$522.17	\$569.87	\$574.50	\$925.17	\$688.97	\$575.41
	Female 21-44	\$1,170.99	\$1,085.78	\$1,155.81	\$1,059.57	\$1,119.48	\$1,183.98	\$1,015.84	\$1,118.18
	Male 15-20	\$603.31	\$552.39	\$522.17	\$569.87	\$574.50	\$925.17	\$688.97	\$591.05
	Male 21-44	\$1,074.87	\$1,121.61	\$876.04	\$821.81	\$1,026.58	\$878.72	\$763.14	\$867.30
	Over 44	\$1,415.70	\$1,486.37	\$1,658.04	\$1,498.07	\$1,671.57	\$1,593.50	\$1,223.60	\$1,505.34
	<b>Average</b>	\$1,242.61	\$1,185.39	\$1,175.22	\$1,155.12	\$1,289.17	\$1,327.63	\$1,069.62	\$1,173.11
<b>Low Income Families with Children</b>	Under 1	\$445.72	\$510.85	\$595.56	\$623.82	\$643.09	\$523.14	\$564.22	\$575.90
	1-5	\$122.74	\$115.15	\$137.63	\$141.86	\$136.99	\$121.30	\$133.60	\$133.18
	6-14	\$107.80	\$109.38	\$126.55	\$133.35	\$133.87	\$131.44	\$146.61	\$129.39
	Female 15-20	\$202.69	\$239.54	\$255.96	\$273.42	\$268.85	\$293.89	\$308.63	\$269.84
	Female 21-44	\$593.52	\$460.37	\$509.53	\$545.37	\$491.92	\$519.31	\$525.70	\$511.28
	Male 15-20	\$162.52	\$147.77	\$164.50	\$156.80	\$179.70	\$175.17	\$158.89	\$163.34
	Male 21-44	\$322.17	\$321.68	\$326.29	\$362.52	\$344.08	\$351.61	\$371.98	\$343.49
	Over 44	\$605.35	\$641.25	\$722.60	\$779.69	\$726.86	\$677.99	\$661.18	\$706.32
	<b>Average</b>	\$357.98	\$212.96	\$235.60	\$248.99	\$202.85	\$248.92	\$251.34	\$238.73
<b>Weighted Average</b>		\$361.49	\$346.61	\$341.81	\$362.26	\$335.94	\$420.25	\$401.12	\$362.90

Note:  
Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Anthem Blue Cross and Blue Shield Medallion 3.0 Capitation Rates  
With CDPS Adjustment**

**Exhibit 7b**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,536.07	\$2,434.88	\$2,493.19	\$2,578.43	\$2,527.64	\$2,418.35	\$2,356.27	\$2,511.87
	1-5	\$2,119.08	\$1,179.20	\$1,296.03	\$1,133.99	\$1,336.71	\$960.15	\$887.43	\$1,481.67
	6-14	\$628.38	\$552.39	\$546.39	\$603.50	\$596.34	\$923.63	\$726.12	\$599.88
	Female 15-20	\$628.38	\$552.39	\$546.39	\$603.50	\$596.34	\$923.63	\$726.12	\$601.94
	Female 21-44	\$1,219.66	\$1,085.78	\$1,209.42	\$1,122.09	\$1,162.04	\$1,182.01	\$1,070.62	\$1,175.81
	Male 15-20	\$628.38	\$552.39	\$546.39	\$603.50	\$596.34	\$923.63	\$726.12	\$601.68
	Male 21-44	\$1,119.54	\$1,121.61	\$916.67	\$870.30	\$1,065.61	\$877.26	\$804.29	\$999.47
	Over 44	\$1,474.53	\$1,486.37	\$1,734.95	\$1,586.46	\$1,735.12	\$1,590.85	\$1,289.58	\$1,599.98
	<b>Average</b>	\$1,258.00	\$1,209.70	\$1,221.49	\$1,223.67	\$1,299.73	\$1,314.45	\$1,146.87	\$1,251.01
<b>Low Income Families with Children</b>	Under 1	\$457.79	\$522.56	\$631.28	\$619.83	\$648.77	\$549.68	\$564.92	\$554.38
	1-5	\$126.06	\$117.79	\$145.89	\$140.95	\$138.20	\$127.45	\$133.77	\$133.61
	6-14	\$110.72	\$111.89	\$134.14	\$132.50	\$135.05	\$138.11	\$146.80	\$123.52
	Female 15-20	\$208.18	\$245.02	\$271.32	\$271.67	\$271.22	\$308.80	\$309.01	\$248.44
	Female 21-44	\$609.58	\$470.91	\$540.09	\$541.87	\$496.26	\$545.65	\$526.35	\$544.52
	Male 15-20	\$166.92	\$151.16	\$174.37	\$155.79	\$181.29	\$184.05	\$159.09	\$170.75
	Male 21-44	\$330.89	\$329.05	\$345.86	\$360.20	\$347.12	\$369.44	\$372.44	\$344.96
	Over 44	\$621.73	\$655.94	\$765.94	\$774.70	\$733.28	\$712.38	\$661.99	\$696.41
	<b>Average</b>	\$206.31	\$234.00	\$268.35	\$259.35	\$260.18	\$272.18	\$263.33	\$239.22
<b>Weighted Average</b>		\$269.44	\$344.64	\$382.92	\$380.00	\$377.88	\$436.02	\$436.37	\$338.64

Note:  
Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 InTotal Health Medallion 3.0 Capitation Rates  
 With CDPS Adjustment**

**Exhibit 7c**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,043.77	\$2,434.88	\$2,434.88	\$2,434.77	\$2,435.07	\$2,191.80	\$2,409.23	\$2,117.30
	1-5	\$1,707.72	\$1,179.20	\$1,265.72	\$1,070.81	\$1,287.76	\$870.21	\$907.37	\$1,284.74
	6-14	\$506.40	\$552.39	\$533.61	\$569.87	\$574.50	\$837.11	\$742.44	\$638.24
	Female 15-20	\$506.40	\$552.39	\$533.61	\$569.87	\$574.50	\$837.11	\$742.44	\$625.60
	Female 21-44	\$982.90	\$1,085.78	\$1,181.13	\$1,059.57	\$1,119.48	\$1,071.28	\$1,094.68	\$1,050.54
	Male 15-20	\$506.40	\$552.39	\$533.61	\$569.87	\$574.50	\$837.11	\$742.44	\$634.61
	Male 21-44	\$902.22	\$1,121.61	\$895.23	\$821.81	\$1,026.58	\$795.08	\$822.36	\$857.64
	Over 44	\$1,188.30	\$1,486.37	\$1,694.37	\$1,498.07	\$1,671.57	\$1,441.82	\$1,318.56	\$1,288.45
	<b>Average</b>	\$1,059.06	\$1,301.77	\$1,114.07	\$1,164.89	\$1,158.00	\$1,169.82	\$1,157.77	\$1,117.84
<b>Low Income Families with Children</b>	Under 1	\$404.44	\$570.51	\$617.66	\$615.25	\$643.09	\$484.21	\$581.99	\$449.09
	1-5	\$111.37	\$128.60	\$142.74	\$139.91	\$136.99	\$112.27	\$137.81	\$116.59
	6-14	\$97.81	\$122.16	\$131.25	\$131.52	\$133.87	\$121.66	\$151.23	\$109.16
	Female 15-20	\$183.92	\$267.51	\$265.46	\$269.66	\$268.85	\$272.02	\$318.35	\$224.78
	Female 21-44	\$538.55	\$514.13	\$528.44	\$537.88	\$491.92	\$480.66	\$542.26	\$532.88
	Male 15-20	\$147.47	\$165.03	\$170.60	\$154.64	\$179.70	\$162.13	\$163.90	\$152.18
	Male 21-44	\$292.33	\$359.25	\$338.40	\$357.55	\$344.08	\$325.44	\$383.70	\$332.66
	Over 44	\$549.28	\$716.14	\$749.41	\$768.98	\$726.86	\$627.53	\$682.00	\$598.47
	<b>Average</b>	\$173.68	\$286.33	\$203.38	\$238.48	\$388.43	\$231.85	\$266.24	\$197.36
<b>Weighted Average</b>		\$224.57	\$369.82	\$431.42	\$319.68	\$389.97	\$385.76	\$431.73	\$277.55

Note:  
 Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Kaiser Permanente Medallion 3.0 Capitation Rates  
 With CDPS Adjustment**

**Exhibit 7d**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,434.88	\$2,434.88	\$2,434.88	\$2,434.77	\$2,435.07	\$2,434.88	\$2,434.88	\$2,434.88
	1-5	\$2,034.53	\$1,179.20	\$1,265.72	\$1,070.81	\$1,287.76	\$966.72	\$917.03	\$2,033.74
	6-14	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$603.32
	Female 15-20	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$603.33
	Female 21-44	\$1,170.99	\$1,085.78	\$1,181.13	\$1,059.57	\$1,119.48	\$1,190.09	\$1,106.33	\$1,170.99
	Male 15-20	\$603.31	\$552.39	\$533.61	\$569.87	\$574.50	\$929.94	\$750.34	\$603.32
	Male 21-44	\$1,074.87	\$1,121.61	\$895.23	\$821.81	\$1,026.58	\$883.26	\$831.12	\$1,074.86
	Over 44	\$1,415.70	\$1,486.37	\$1,694.37	\$1,498.07	\$1,671.57	\$1,601.72	\$1,332.59	\$1,415.70
	<b>Average</b>	\$1,273.14	\$1,120.62	\$1,134.02	\$1,074.33	\$1,158.00	\$1,233.31	\$1,109.12	\$1,273.13
<b>Low Income Families with Children</b>	Under 1	\$445.72	\$570.51	\$617.66	\$614.15	\$643.09	\$567.55	\$602.53	\$445.73
	1-5	\$122.74	\$128.60	\$142.74	\$139.66	\$136.99	\$131.60	\$142.67	\$122.74
	6-14	\$107.80	\$122.16	\$131.25	\$131.29	\$133.87	\$142.60	\$156.57	\$107.83
	Female 15-20	\$202.69	\$267.51	\$265.46	\$269.18	\$268.85	\$318.84	\$329.59	\$202.69
	Female 21-44	\$593.52	\$514.13	\$528.44	\$536.91	\$491.92	\$563.40	\$561.39	\$593.35
	Male 15-20	\$162.52	\$165.03	\$170.60	\$154.37	\$179.70	\$190.04	\$169.68	\$162.52
	Male 21-44	\$322.17	\$359.25	\$338.40	\$356.90	\$344.08	\$381.46	\$397.24	\$322.30
	Over 44	\$605.35	\$716.14	\$749.41	\$767.60	\$726.86	\$735.55	\$706.07	\$605.35
	<b>Average</b>	\$262.33	\$334.05	\$367.99	\$371.26	\$253.48	\$378.88	\$383.22	\$262.36
<b>Weighted Average</b>		\$337.39	\$336.14	\$751.01	\$722.79	\$255.88	\$806.10	\$746.17	\$337.36

Note:  
 Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Optima Family Care Medallion 3.0 Capitation Rates  
 With CDPS Adjustment**

**Exhibit 7e**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,434.88	\$2,383.67	\$2,261.73	\$2,320.81	\$2,431.80	\$2,473.74	\$2,283.29	\$2,375.62
	1-5	\$2,034.53	\$1,154.40	\$1,175.71	\$1,020.69	\$1,286.03	\$982.15	\$859.94	\$1,173.52
	6-14	\$603.31	\$540.77	\$495.66	\$543.20	\$573.73	\$944.79	\$703.63	\$556.72
	Female 15-20	\$603.31	\$540.77	\$495.66	\$543.20	\$573.73	\$944.79	\$703.63	\$562.24
	Female 21-44	\$1,170.99	\$1,062.95	\$1,097.14	\$1,009.98	\$1,117.98	\$1,209.08	\$1,037.46	\$1,087.07
	Male 15-20	\$603.31	\$540.77	\$495.66	\$543.20	\$573.73	\$944.79	\$703.63	\$560.85
	Male 21-44	\$1,074.87	\$1,098.03	\$831.57	\$783.35	\$1,025.20	\$897.35	\$779.38	\$934.75
	Over 44	\$1,415.70	\$1,455.11	\$1,573.88	\$1,427.95	\$1,669.33	\$1,627.29	\$1,249.63	\$1,557.75
	<b>Average</b>	\$1,010.43	\$1,089.63	\$1,113.48	\$1,034.13	\$1,208.15	\$1,347.76	\$1,084.77	\$1,144.50
<b>Low Income Families with Children</b>	Under 1	\$445.72	\$570.27	\$602.80	\$601.03	\$658.26	\$536.26	\$588.95	\$617.76
	1-5	\$122.74	\$128.55	\$139.31	\$136.68	\$140.22	\$124.34	\$139.46	\$137.42
	6-14	\$107.80	\$122.11	\$128.09	\$128.48	\$137.02	\$134.74	\$153.04	\$132.33
	Female 15-20	\$202.69	\$267.40	\$259.07	\$263.43	\$275.19	\$301.27	\$322.16	\$271.67
	Female 21-44	\$593.52	\$513.91	\$515.72	\$525.44	\$503.52	\$532.34	\$548.75	\$512.43
	Male 15-20	\$162.52	\$164.96	\$166.50	\$151.07	\$183.94	\$179.56	\$165.86	\$172.15
	Male 21-44	\$322.17	\$359.10	\$330.26	\$349.28	\$352.19	\$360.43	\$388.29	\$350.58
	Over 44	\$605.35	\$715.84	\$731.38	\$751.20	\$744.00	\$695.00	\$690.16	\$735.78
	<b>Average</b>	\$212.38	\$233.83	\$239.22	\$237.49	\$251.98	\$255.41	\$274.89	\$245.77
<b>Weighted Average</b>		\$281.96	\$343.00	\$340.47	\$347.82	\$359.02	\$414.79	\$415.44	\$355.32

Note:  
 Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting



**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Virginia Premier Health Plan Medallion 3.0 Capitation Rates  
With CDPS Adjustment**

**Exhibit 7f**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,802.71	\$2,473.47	\$2,542.39	\$2,451.84	\$2,187.15	\$2,456.74	\$2,564.51	\$2,358.07
	1-5	\$2,341.88	\$1,197.89	\$1,321.60	\$1,078.32	\$1,156.65	\$975.40	\$965.85	\$1,112.31
	6-14	\$694.45	\$561.14	\$557.17	\$573.87	\$516.01	\$938.30	\$790.29	\$718.06
	Female 15-20	\$694.45	\$561.14	\$557.17	\$573.87	\$516.01	\$938.30	\$790.29	\$679.33
	Female 21-44	\$1,347.89	\$1,103.00	\$1,233.28	\$1,066.99	\$1,005.50	\$1,200.77	\$1,165.23	\$1,160.36
	Male 15-20	\$694.45	\$561.14	\$557.17	\$573.87	\$516.01	\$938.30	\$790.29	\$691.14
	Male 21-44	\$1,237.25	\$1,139.39	\$934.76	\$827.57	\$922.06	\$891.19	\$875.37	\$938.14
	Over 44	\$1,629.56	\$1,509.93	\$1,769.18	\$1,508.57	\$1,501.39	\$1,616.11	\$1,403.54	\$1,557.00
	<b>Average</b>	\$1,345.75	\$1,163.48	\$1,275.19	\$1,147.36	\$1,128.73	\$1,266.60	\$1,229.36	\$1,223.52
<b>Low Income Families with Children</b>	Under 1	\$462.22	\$589.04	\$625.16	\$625.47	\$576.42	\$585.11	\$642.19	\$594.44
	1-5	\$127.28	\$132.78	\$144.47	\$142.23	\$122.79	\$135.67	\$152.06	\$136.86
	6-14	\$111.79	\$126.12	\$132.84	\$133.71	\$119.99	\$147.01	\$166.88	\$136.80
	Female 15-20	\$210.19	\$276.20	\$268.69	\$274.14	\$240.97	\$328.70	\$351.28	\$291.39
	Female 21-44	\$615.47	\$530.82	\$534.86	\$546.81	\$440.92	\$580.82	\$598.35	\$545.46
	Male 15-20	\$168.54	\$170.39	\$172.68	\$157.21	\$161.07	\$195.92	\$180.85	\$177.13
	Male 21-44	\$334.08	\$370.91	\$342.51	\$363.48	\$308.41	\$393.25	\$423.39	\$374.22
	Over 44	\$627.74	\$739.39	\$758.52	\$781.75	\$651.51	\$758.30	\$752.55	\$738.45
	<b>Average</b>	\$229.07	\$235.44	\$248.47	\$250.41	\$223.03	\$259.74	\$289.13	\$249.88
<b>Weighted Average</b>		\$300.65	\$349.55	\$380.61	\$358.37	\$325.52	\$392.27	\$477.41	\$377.42

Note:  
Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Summary of Medallion 3.0 Regional Average Capitation Rates  
 With CDPS Adjustment**

**Exhibit 7g**

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,252.17	\$2,431.49	\$2,446.79	\$2,419.80	\$2,321.91	\$2,394.38	\$2,405.51	\$2,369.37
	1-5	\$2,057.68	\$1,177.83	\$1,268.47	\$1,072.81	\$1,285.71	\$967.45	\$918.32	\$1,262.16
	6-14	\$614.70	\$551.74	\$533.04	\$566.59	\$573.97	\$933.06	\$754.43	\$626.29
	Female 15-20	\$616.69	\$551.61	\$534.30	\$564.34	\$573.49	\$931.45	\$756.56	\$611.60
	Female 21-44	\$1,184.63	\$1,086.09	\$1,182.36	\$1,056.86	\$1,120.60	\$1,191.83	\$1,105.78	\$1,137.73
	Male 15-20	\$611.41	\$551.88	\$532.93	\$565.51	\$575.50	\$929.58	\$748.59	\$613.71
	Male 21-44	\$1,074.13	\$1,119.95	\$894.30	\$820.63	\$1,026.83	\$882.19	\$828.05	\$948.88
	Over 44	\$1,409.28	\$1,487.19	\$1,694.35	\$1,501.04	\$1,671.56	\$1,600.51	\$1,332.79	\$1,547.08
	<b>Average</b>	\$1,221.19	\$1,143.16	\$1,202.23	\$1,123.27	\$1,233.09	\$1,278.11	\$1,169.55	\$1,203.18
<b>Low Income Families with Children</b>	Under 1	\$443.49	\$569.39	\$617.42	\$614.57	\$641.36	\$563.17	\$601.60	\$565.26
	1-5	\$122.05	\$128.60	\$142.54	\$139.72	\$136.73	\$130.85	\$142.90	\$133.45
	6-14	\$107.74	\$122.59	\$131.07	\$131.20	\$133.91	\$143.86	\$156.70	\$127.94
	Female 15-20	\$203.43	\$268.02	\$265.52	\$268.96	\$269.48	\$319.60	\$329.43	\$264.28
	Female 21-44	\$596.38	\$513.33	\$529.06	\$536.96	\$492.02	\$562.68	\$560.88	\$534.75
	Male 15-20	\$162.90	\$165.75	\$170.62	\$154.21	\$180.39	\$190.33	\$169.84	\$170.88
	Male 21-44	\$322.72	\$357.50	\$338.65	\$357.24	\$343.94	\$381.29	\$396.63	\$352.84
	Over 44	\$607.00	\$714.33	\$750.61	\$767.99	\$729.50	\$735.47	\$708.77	\$706.71
	<b>Average</b>	\$203.05	\$234.28	\$251.65	\$247.19	\$251.13	\$258.49	\$274.32	\$240.34
<b>Weighted Average</b>		\$264.58	\$346.81	\$365.61	\$357.72	\$361.71	\$400.08	\$446.22	\$348.99

Note:  
 Average is weighted by health plan enrollment distribution as of February 2016

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Drug Reinsurance Adjustment**

**Exhibit 8a**

	LIFC Child	LIFC Adult	ABAD	Source
1a. FY14 Number of Individuals Exceeding the Threshold	51	19	130	FY14 Health Plan Encounter Data
1b. FY14 Additional Individuals	10	4	26	20% Increase of People who exceed the threshold
1c. FY14 Average Cost Before Specialty Cost Trend	\$279,748	\$153,834	\$223,523	FY14 Health Plan Encounter Data
1d. FY14 Average Cost After Specialty Cost Trend	\$425,462	\$233,962	\$339,951	FY14 Health Plan Encounter Data
1e. FY14 Total Dollars Including Additional Individuals	\$26,038,269	\$5,334,328	\$53,032,325	= 1d. * (1a.+1b.)
1f. FY14 Amount of Reinsurance	\$15,172,442	\$1,722,895	\$26,669,093	= ((1e.) - ((1a.+1b.) * \$150,000)) * 90%
2a. FY15 Number of Individuals Exceeding the Threshold	45	18	104	FY15 Health Plan Encounter Data
2b. FY15 Additional Individuals	9	4	21	20% Increase of People who exceed the threshold
2c. FY15 Average Cost Before Specialty Cost Trend	\$283,270	\$190,891	\$309,863	FY15 Health Plan Encounter Data
2d. FY15 Average Cost After Specialty Cost Trend	\$374,624	\$252,453	\$409,793	FY15 Health Plan Encounter Data
2e. FY15 Total Dollars Including Additional Individuals	\$20,229,722	\$5,452,992	\$51,142,224	= 2d. * (2a.+2b.)
2f. FY15 Amount of Reinsurance	\$10,916,750	\$1,991,692	\$29,180,002	= ((2e.) - ((2a.+2b.) * \$150,000)) * 90%
3. Average Reinsurance Amount	\$13,044,596	\$1,857,294	\$27,924,547	= ((1f.) + (2f.)) / 2
4. Annualized Historical Member Months	5,735,921	1,127,104	887,434	Health Plan Encounter Data
<b>5. Estimated PMPM</b>	<b>\$2.27</b>	<b>\$1.65</b>	<b>\$31.47</b>	<b>= (3.) / (4.)</b>

Note:  
Discounted threshold is based upon FY17 reinsurance threshold of \$150,000 per person per year discounted by 15% unit cost trend per year

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Behavior Health Home Adjustment - ABAD Adult**

**Exhibit 8b**

Plan	Region	Funding Amount	Medical Component	Annualized February 2016 MM Snapshot	BHH Adjustment
Aetna Better Health	Richmond/Charlottesville	\$50,000	NA	21,660	\$2.31
Anthem Blue Cross and Blue Shield	Richmond/Charlottesville	\$50,000	\$498,877	53,448	\$10.27
InTotal Health	Northern Virginia	\$50,000	NA	20,460	\$2.44
Kaiser Permanente	Northern Virginia	N/A	NA	6,132	\$0.00
Optima Family Care	Tidewater	\$50,000	NA	68,952	\$0.73
Virginia Premier Health Plan	Far Southwest	\$50,000	NA	42,048	\$1.19

Note:

Health plan February 2016 enrollment distribution for ABAD adults only and region-specific

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Tidewater Physician Access Adjustment**

**Exhibit 8c**

	Physician Access Adjustment	Source
1. Eligible Claims for Tidewater Physician Access Adjustment	\$9,554,934	FY14-FY15 Health Plan Encounter Data
2. Repriced Claims to Average Commercial Rate	\$16,245,219	FY14-FY15 Health Plan Encounter Data
3. Total Tidewater Physician Access Adjustment	\$6,690,285	= (2.) - (1.)
4. FY14 - FY15 ABAD and LIFC Member Months for Tidewater Region Only	3,512,774	FY14-FY15 Health Plan Encounter Data
<b>5. Tidewater Physician Access Adjustment</b>	<b>\$1.90</b>	<b>= (3.) / (4.)</b>

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Teaching Hospital Access Adjustment**

**Exhibit 8d**

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	<b>Adjustment Value</b>	<b>Source</b>
<b>Teaching Hospital Access Adjustment</b>	<b>5.0%</b>	<b>Provided by DMAS</b>

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# Virginia Medicaid

# Exhibit 9a

## FY 2017 Capitation Rate Development

### Aetna Better Health Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment

### With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,403.41	\$2,403.41	\$2,351.21	\$2,403.30	<b>\$2,405.50</b>	\$2,390.91	\$2,204.26	\$2,348.17
	1-5	\$2,003.06	\$1,147.73	\$1,207.11	\$1,039.34	<b>\$1,258.20</b>	\$930.29	\$810.56	\$1,069.68
	6-14	\$571.84	\$520.92	\$490.70	\$538.41	<b>\$544.94</b>	\$893.70	\$657.50	\$567.17
	Female 15-20	\$571.84	\$520.92	\$490.70	\$538.41	<b>\$544.94</b>	\$893.70	\$657.50	\$543.96
	Female 21-44	\$1,139.53	\$1,054.32	\$1,126.65	\$1,028.10	<b>\$1,089.92</b>	\$1,152.51	\$984.38	\$1,087.93
	Male 15-20	\$571.84	\$520.92	\$490.70	\$538.41	<b>\$544.94</b>	\$893.70	\$657.50	\$559.58
	Male 21-44	\$1,043.41	\$1,090.15	\$846.88	\$790.34	<b>\$997.02</b>	\$847.25	\$731.67	\$837.03
	Over 44	\$1,384.23	\$1,454.90	\$1,628.88	\$1,466.60	<b>\$1,642.01</b>	\$1,562.03	\$1,192.13	\$1,474.86
	<b>Average</b>	\$1,211.14	\$1,153.92	\$1,145.43	\$1,123.66	\$1,259.60	\$1,296.16	\$1,038.15	\$1,142.48
<b>Low Income Families with Children</b>	Under 1	\$443.45	\$508.58	\$593.29	\$621.55	<b>\$642.72</b>	\$520.86	\$561.94	\$573.62
	1-5	\$120.46	\$112.88	\$135.36	\$139.59	<b>\$136.62</b>	\$119.03	\$131.33	\$130.91
	6-14	\$105.52	\$107.11	\$124.28	\$131.08	<b>\$133.50</b>	\$129.17	\$144.34	\$127.12
	Female 15-20	\$200.42	\$237.26	\$253.69	\$271.14	<b>\$268.48</b>	\$291.62	\$306.36	\$267.57
	Female 21-44	\$591.87	\$458.72	\$507.88	\$543.72	<b>\$492.17</b>	\$517.66	\$524.05	\$509.63
	Male 15-20	\$160.25	\$145.50	\$162.23	\$154.52	<b>\$179.33</b>	\$172.89	\$156.62	\$161.07
	Male 21-44	\$320.52	\$320.03	\$324.65	\$360.88	<b>\$344.33</b>	\$349.96	\$370.33	\$341.84
	Over 44	\$603.70	\$639.60	\$720.96	\$778.04	<b>\$727.12</b>	\$676.34	\$659.53	\$704.67
	<b>Average</b>	\$356.01	\$210.80	\$233.43	\$246.83	\$202.55	\$246.77	\$249.19	\$236.57
<b>Weighted Average</b>		\$359.41	\$340.43	\$336.52	\$356.43	\$332.05	\$413.44	\$393.60	\$356.96

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells shaded in grey have additional BHH Adjustment

Cells bolded have additional Physician Access Adjustment

# Virginia Medicaid

# Exhibit 9b

## FY 2017 Capitation Rate Development

### Anthem Blue Cross and Blue Shield Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,504.60	\$2,403.41	\$2,461.72	\$2,546.97	<b>\$2,498.07</b>	\$2,386.88	\$2,324.81	\$2,480.72
	1-5	\$2,087.61	\$1,147.73	\$1,264.56	\$1,102.53	<b>\$1,307.15</b>	\$928.69	\$855.96	\$1,450.70
	6-14	\$596.91	\$520.92	\$514.92	\$572.03	<b>\$566.78</b>	\$892.16	\$694.65	\$568.99
	Female 15-20	\$596.91	\$520.92	\$514.92	\$572.03	<b>\$566.78</b>	\$892.16	\$694.65	\$571.00
	Female 21-44	\$1,188.19	\$1,054.32	\$1,188.22	\$1,090.62	<b>\$1,132.47</b>	\$1,150.54	\$1,039.15	\$1,147.78
	Male 15-20	\$596.91	\$520.92	\$514.92	\$572.03	<b>\$566.78</b>	\$892.16	\$694.65	\$570.78
	Male 21-44	\$1,088.08	\$1,090.15	\$895.47	\$838.84	<b>\$1,036.04</b>	\$845.79	\$772.82	\$971.30
	Over 44	\$1,443.06	\$1,454.90	\$1,713.75	\$1,554.99	<b>\$1,705.56</b>	\$1,559.38	\$1,258.11	\$1,571.21
	<b>Average</b>	\$1,226.53	\$1,178.23	\$1,197.45	\$1,192.20	\$1,270.17	\$1,282.99	\$1,115.41	\$1,221.93
<b>Low Income Families with Children</b>	Under 1	\$455.52	\$520.28	\$629.01	\$617.55	<b>\$648.40</b>	\$547.40	\$562.64	\$552.55
	1-5	\$123.78	\$115.52	\$143.61	\$138.68	<b>\$137.83</b>	\$125.18	\$131.49	\$131.77
	6-14	\$108.44	\$109.61	\$131.87	\$130.23	<b>\$134.68</b>	\$135.83	\$144.52	\$121.67
	Female 15-20	\$205.90	\$242.75	\$269.04	\$269.39	<b>\$270.85</b>	\$306.52	\$306.74	\$246.61
	Female 21-44	\$607.94	\$469.26	\$538.44	\$540.23	<b>\$496.52</b>	\$544.00	\$524.70	\$543.45
	Male 15-20	\$164.65	\$148.88	\$172.09	\$153.52	<b>\$180.92</b>	\$181.78	\$156.81	\$168.90
	Male 21-44	\$329.24	\$327.40	\$344.21	\$358.56	<b>\$347.37</b>	\$367.79	\$370.79	\$343.76
	Over 44	\$620.09	\$654.29	\$764.29	\$773.05	<b>\$733.53</b>	\$710.74	\$660.34	\$695.21
	<b>Average</b>	\$204.12	\$231.86	\$266.21	\$257.20	\$259.94	\$270.03	\$261.19	\$237.50
<b>Weighted Average</b>		\$265.49	\$339.16	\$378.15	\$374.18	\$374.32	\$429.26	\$428.49	\$334.24

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells shaded in grey have additional BHH Adjustment

Cells bolded have additional Physician Access Adjustment



# Virginia Medicaid

# Exhibit 9c

## FY 2017 Capitation Rate Development

### InTotal Health Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment

### With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,012.30	\$2,403.41	\$2,403.41	\$2,403.30	<b>\$2,405.50</b>	\$2,160.33	\$2,377.76	\$2,085.84
	1-5	\$1,676.26	\$1,147.73	\$1,234.25	\$1,039.34	<b>\$1,258.20</b>	\$838.74	\$875.90	\$1,253.28
	6-14	\$474.93	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$805.64	\$710.97	\$606.77
	Female 15-20	\$474.93	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$805.64	\$710.97	\$594.13
	Female 21-44	\$953.87	\$1,054.32	\$1,149.66	\$1,028.10	<b>\$1,089.92</b>	\$1,039.81	\$1,063.21	\$1,019.91
	Male 15-20	\$474.93	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$805.64	\$710.97	\$603.15
	Male 21-44	\$873.19	\$1,090.15	\$863.76	\$790.34	<b>\$997.02</b>	\$763.61	\$790.90	\$827.26
	Over 44	\$1,159.27	\$1,454.90	\$1,662.90	\$1,466.60	<b>\$1,642.01</b>	\$1,410.35	\$1,287.09	\$1,258.14
	<b>Average</b>	\$1,029.69	\$1,270.30	\$1,082.60	\$1,133.42	\$1,128.43	\$1,138.36	\$1,126.31	\$1,087.31
<b>Low Income Families with Children</b>	Under 1	\$402.17	\$568.24	\$615.38	\$612.98	<b>\$642.72</b>	\$481.93	\$579.72	\$446.81
	1-5	\$109.09	\$126.33	\$140.47	\$137.64	<b>\$136.62</b>	\$110.00	\$135.54	\$114.31
	6-14	\$95.54	\$119.88	\$128.97	\$129.25	<b>\$133.50</b>	\$119.38	\$148.96	\$106.89
	Female 15-20	\$181.64	\$265.24	\$263.19	\$267.39	<b>\$268.48</b>	\$269.74	\$316.08	\$222.51
	Female 21-44	\$536.90	\$512.48	\$526.79	\$536.23	<b>\$492.17</b>	\$479.01	\$540.61	\$531.24
	Male 15-20	\$145.20	\$162.76	\$168.33	\$152.37	<b>\$179.33</b>	\$159.86	\$161.62	\$149.91
	Male 21-44	\$290.68	\$357.60	\$336.75	\$355.90	<b>\$344.33</b>	\$323.79	\$382.05	\$331.01
	Over 44	\$547.63	\$714.49	\$747.77	\$767.33	<b>\$727.12</b>	\$625.89	\$680.35	\$596.82
	<b>Average</b>	\$171.47	\$284.20	\$201.21	\$236.30	\$388.06	\$229.70	\$264.10	\$195.17
<b>Weighted Average</b>		\$220.80	\$365.27	\$421.91	\$314.94	\$389.54	\$378.80	\$424.15	\$272.88

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells shaded in grey have additional BHH Adjustment

Cells bolded have additional Physician Access Adjustment

# Virginia Medicaid

# Exhibit 9d

## FY 2017 Capitation Rate Development

### Kaiser Permanente Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment

### With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,403.41	\$2,403.41	\$2,403.41	\$2,403.30	<b>\$2,405.50</b>	\$2,403.41	\$2,403.41	\$2,403.41
	1-5	\$2,003.06	\$1,147.73	\$1,234.25	\$1,039.34	<b>\$1,258.20</b>	\$935.25	\$885.56	\$2,002.27
	6-14	\$571.84	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$898.48	\$718.87	\$571.85
	Female 15-20	\$571.84	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$898.48	\$718.87	\$571.86
	Female 21-44	\$1,139.53	\$1,054.32	\$1,149.66	\$1,028.10	<b>\$1,089.92</b>	\$1,158.62	\$1,074.86	\$1,139.52
	Male 15-20	\$571.84	\$520.92	\$502.14	\$538.41	<b>\$544.94</b>	\$898.48	\$718.87	\$571.86
	Male 21-44	\$1,043.41	\$1,090.15	\$863.76	\$790.34	<b>\$997.02</b>	\$851.79	\$799.65	\$1,043.39
	Over 44	\$1,384.23	\$1,454.90	\$1,662.90	\$1,466.60	<b>\$1,642.01</b>	\$1,570.26	\$1,301.13	\$1,384.23
	<b>Average</b>	\$1,241.68	\$1,089.16	\$1,102.55	\$1,042.86	\$1,128.43	\$1,201.84	\$1,077.65	\$1,241.67
<b>Low Income Families with Children</b>	Under 1	\$443.45	\$568.24	\$615.38	\$611.87	<b>\$642.72</b>	\$565.28	\$600.25	\$443.45
	1-5	\$120.46	\$126.33	\$140.47	\$137.39	<b>\$136.62</b>	\$129.33	\$140.40	\$120.46
	6-14	\$105.52	\$119.88	\$128.97	\$129.01	<b>\$133.50</b>	\$140.33	\$154.29	\$105.55
	Female 15-20	\$200.42	\$265.24	\$263.19	\$266.90	<b>\$268.48</b>	\$316.57	\$327.31	\$200.42
	Female 21-44	\$591.87	\$512.48	\$526.79	\$535.26	<b>\$492.17</b>	\$561.75	\$559.75	\$591.71
	Male 15-20	\$160.25	\$162.76	\$168.33	\$152.09	<b>\$179.33</b>	\$187.77	\$167.41	\$160.25
	Male 21-44	\$320.52	\$357.60	\$336.75	\$355.26	<b>\$344.33</b>	\$379.81	\$395.59	\$320.65
	Over 44	\$603.70	\$714.49	\$747.77	\$765.95	<b>\$727.12</b>	\$733.90	\$704.42	\$603.70
	<b>Average</b>	\$260.20	\$332.19	\$365.96	\$369.22	\$253.32	\$376.84	\$381.18	\$260.23
<b>Weighted Average</b>		\$333.07	\$334.20	\$734.25	\$706.04	\$255.64	\$789.34	\$729.42	\$333.05

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells bolded have additional Physician Access Adjustment

# Virginia Medicaid

# Exhibit 9e

## FY 2017 Capitation Rate Development

### Optima Family Care Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,403.41	\$2,352.21	\$2,230.26	\$2,289.35	<b>\$2,402.24</b>	\$2,442.27	\$2,251.83	\$2,344.97
	1-5	\$2,003.06	\$1,122.93	\$1,144.24	\$989.23	<b>\$1,256.47</b>	\$950.68	\$828.47	\$1,142.89
	6-14	\$571.84	\$509.30	\$464.20	\$511.73	<b>\$544.17</b>	\$913.32	\$672.16	\$526.07
	Female 15-20	\$571.84	\$509.30	\$464.20	\$511.73	<b>\$544.17</b>	\$913.32	\$672.16	\$531.61
	Female 21-44	\$1,139.53	\$1,031.48	\$1,065.67	\$978.51	<b>\$1,089.14</b>	\$1,177.61	\$1,005.99	\$1,056.71
	Male 15-20	\$571.84	\$509.30	\$464.20	\$511.73	<b>\$544.17</b>	\$913.32	\$672.16	\$530.22
	Male 21-44	\$1,043.41	\$1,066.56	\$800.10	\$751.88	<b>\$996.37</b>	\$865.89	\$747.91	\$904.33
	Over 44	\$1,384.23	\$1,423.65	\$1,542.41	\$1,396.49	<b>\$1,640.50</b>	\$1,595.82	\$1,218.17	\$1,527.35
	<b>Average</b>	\$978.97	\$1,058.17	\$1,082.02	\$1,002.66	<b>\$1,179.11</b>	\$1,316.30	\$1,053.30	\$1,114.04
<b>Low Income Families with Children</b>	Under 1	\$443.45	\$568.00	\$600.52	\$598.75	<b>\$657.89</b>	\$533.99	\$586.68	\$616.28
	1-5	\$120.46	\$126.27	\$137.03	\$134.40	<b>\$139.85</b>	\$122.07	\$137.18	\$136.00
	6-14	\$105.52	\$119.83	\$125.81	\$126.21	<b>\$136.65</b>	\$132.46	\$150.77	\$130.93
	Female 15-20	\$200.42	\$265.12	\$256.80	\$261.15	<b>\$274.82</b>	\$298.99	\$319.89	\$270.29
	Female 21-44	\$591.87	\$512.27	\$514.07	\$523.79	<b>\$503.78</b>	\$530.69	\$547.10	\$511.72
	Male 15-20	\$160.25	\$162.69	\$164.23	\$148.79	<b>\$183.57</b>	\$177.29	\$163.58	\$170.74
	Male 21-44	\$320.52	\$357.45	\$328.61	\$347.63	<b>\$352.45</b>	\$358.78	\$386.64	\$349.65
	Over 44	\$603.70	\$714.19	\$729.74	\$749.55	<b>\$744.26</b>	\$693.35	\$688.51	\$735.01
	<b>Average</b>	\$210.19	\$231.67	\$237.06	\$235.32	<b>\$251.74</b>	\$253.25	\$272.76	\$244.48
<b>Weighted Average</b>		\$277.22	\$337.10	\$334.92	\$341.59	\$355.55	\$408.36	\$408.21	\$350.47

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells shaded in grey have additional BHH Adjustment

Cells bolded have additional Physician Access Adjustment

# Virginia Medicaid

# Exhibit 9f

## FY 2017 Capitation Rate Development

### Virginia Premier Health Plan Medallion 3.0 Capitation Rates Net of Drug Reinsurance Adjustment With Behavioral Health Home Adjustment, Physician Access Adjustment, CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,911.38	\$2,565.68	\$2,638.04	\$2,542.96	<b>\$2,266.94</b>	\$2,548.11	\$2,661.27	\$2,445.40
	1-5	\$2,427.51	\$1,226.32	\$1,356.22	\$1,100.76	<b>\$1,184.92</b>	\$992.70	\$982.68	\$1,136.68
	6-14	\$697.71	\$557.73	\$553.56	\$571.09	<b>\$512.25</b>	\$953.74	\$798.34	\$722.71
	Female 15-20	\$697.71	\$557.73	\$553.56	\$571.09	<b>\$512.25</b>	\$953.74	\$798.34	\$682.04
	Female 21-44	\$1,383.82	\$1,126.68	\$1,263.48	\$1,088.88	<b>\$1,026.21</b>	\$1,229.35	\$1,193.22	\$1,187.31
	Male 15-20	\$697.71	\$557.73	\$553.56	\$571.09	<b>\$512.25</b>	\$953.74	\$798.34	\$694.44
	Male 21-44	\$1,267.65	\$1,164.90	\$950.03	\$837.48	<b>\$938.60</b>	\$904.28	\$888.86	\$954.00
	Over 44	\$1,679.58	\$1,553.96	\$1,826.18	\$1,552.53	<b>\$1,546.89</b>	\$1,665.45	\$1,443.44	\$1,603.87
	<b>Average</b>	\$1,381.57	\$1,190.19	\$1,307.48	\$1,173.26	\$1,155.61	\$1,298.46	\$1,260.39	\$1,253.62
<b>Low Income Families with Children</b>	Under 1	\$483.05	\$616.21	\$654.15	\$654.47	<b>\$604.87</b>	\$612.09	\$672.03	\$622.17
	1-5	\$131.37	\$137.14	\$149.42	\$147.07	<b>\$128.56</b>	\$140.18	\$157.39	\$141.70
	6-14	\$115.10	\$130.16	\$137.21	\$138.12	<b>\$125.62</b>	\$152.09	\$172.95	\$141.60
	Female 15-20	\$218.42	\$287.73	\$279.85	\$285.57	<b>\$252.65</b>	\$342.86	\$366.57	\$303.90
	Female 21-44	\$644.60	\$555.71	\$559.95	\$572.50	<b>\$463.22</b>	\$608.22	\$626.62	\$571.37
	Male 15-20	\$174.69	\$176.63	\$179.04	\$162.80	<b>\$168.75</b>	\$203.44	\$187.62	\$183.90
	Male 21-44	\$349.14	\$387.81	\$357.99	\$380.01	<b>\$324.09</b>	\$411.27	\$442.91	\$391.46
	Over 44	\$657.48	\$774.71	\$794.80	\$819.19	<b>\$684.34</b>	\$794.57	\$788.52	\$773.92
	<b>Average</b>	\$238.36	\$245.04	\$258.73	\$260.77	\$233.93	\$270.56	\$301.44	\$260.46
<b>Weighted Average</b>		\$311.64	\$361.26	\$393.70	\$370.60	\$338.23	\$405.86	\$493.47	\$390.56

Note:

Health plan enrollment distribution as of February 2016 is used in plan assignment and weighting

Cells shaded in grey have additional BHH Adjustment

Cells bolded have additional Physician Access Adjustment

# Virginia Medicaid

# Exhibit 9g

## FY 2017 Capitation Rate Development

### Summary of Medallion 3.0 Regional Average Capitation Rates Net of Drug Reinsurance Adjustment With Behavioral Health Home Adjustment, Physician Access Adjustment and CDPS Adjustments

Aid Category	Age Group	Region							FY 2017 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>Aged, Blind, and Disabled</b>	Under 1	\$2,220.71	\$2,441.23	\$2,454.43	\$2,418.96	<b>\$2,347.02</b>	\$2,387.46	\$2,416.76	\$2,374.23
	1-5	\$2,033.23	\$1,173.06	\$1,250.66	\$1,052.94	<b>\$1,264.66</b>	\$969.28	\$909.65	\$1,247.99
	6-14	\$585.86	\$533.21	\$508.01	\$541.65	<b>\$548.06</b>	\$939.89	\$742.79	\$606.67
	Female 15-20	\$588.28	\$534.22	\$509.98	\$539.46	<b>\$547.31</b>	\$934.26	\$746.47	\$590.67
	Female 21-44	\$1,159.73	\$1,082.45	\$1,169.45	\$1,036.82	<b>\$1,097.82</b>	\$1,202.10	\$1,100.21	\$1,125.55
	Male 15-20	\$583.18	\$533.66	\$507.59	\$540.27	<b>\$548.88</b>	\$930.59	\$734.28	\$591.94
	Male 21-44	\$1,047.06	\$1,112.89	\$877.66	\$798.03	<b>\$1,004.19</b>	\$878.28	\$815.22	\$931.70
	Over 44	\$1,382.82	\$1,491.93	\$1,689.19	\$1,487.86	<b>\$1,653.40</b>	\$1,618.25	\$1,333.00	\$1,539.64
	<b>Average</b>	\$1,194.50	\$1,139.22	\$1,189.02	\$1,104.99	\$1,211.71	\$1,288.52	\$1,165.86	\$1,190.81
<b>Low Income Families with Children</b>	Under 1	\$442.35	\$580.58	\$622.02	\$619.85	<b>\$645.49</b>	\$578.52	\$612.27	\$570.16
	1-5	\$120.12	\$129.52	\$141.90	\$139.22	<b>\$137.31</b>	\$132.89	\$143.90	\$133.22
	6-14	\$105.79	\$123.41	\$130.28	\$130.54	<b>\$134.37</b>	\$147.28	\$157.98	\$127.80
	Female 15-20	\$201.87	\$272.19	\$266.21	\$269.88	<b>\$270.61</b>	\$329.00	\$334.47	\$266.12
	Female 21-44	\$597.44	\$523.37	\$532.83	\$541.80	<b>\$495.28</b>	\$580.57	\$571.45	\$540.43
	Male 15-20	\$161.16	\$167.71	\$170.26	\$153.79	<b>\$180.91</b>	\$194.91	\$171.43	\$171.23
	Male 21-44	\$322.51	\$364.14	\$340.64	\$360.46	<b>\$346.32</b>	\$392.88	\$403.42	\$356.80
	Over 44	\$607.20	\$729.45	\$756.25	\$775.82	<b>\$733.23</b>	\$759.80	\$723.99	\$713.98
	<b>Average</b>	\$201.55	\$237.73	\$252.22	\$248.06	\$252.45	\$265.46	\$278.28	\$241.68
<b>Weighted Average</b>		\$261.55	\$349.34	\$364.53	\$356.18	\$360.47	\$407.54	\$448.71	\$348.78

Note:

Average is weighted by health plan enrollment distribution as of February 2016

Cells bolded have additional Physician Access Adjustment

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
County Listing by Region**

**Exhibit 10**

<b>Northern Virginia</b>	<b>Other MSA</b>	<b>Richmond/ Charlottesville</b>	<b>Rural</b>	<b>Tidewater</b>	<b>Roanoke-Alleghany</b>	<b>Far Southwest</b>
Alexandria City	Amherst County	Albemarle County	Accomack County	Chesapeake City	Alleghany County	Bland County
Arlington County	Appomattox County	Amelia County	Augusta County	Gloucester County	Bath County	Bristol City
Clarke County	Campbell County	Caroline County	Brunswick County	Hampton City	Bedford City	Buchanan County
Fairfax City	Danville City	Charles City County	Buckingham County	Isle of Wight County	Bedford County	Carroll County
Fairfax County	Frederick County	Charlottesville City	Charlotte County	James City County	Botetourt County	Dickenson County
Falls Church City	Harrisonburg, City of	Chesterfield County	Culpeper County	Mathews County	Buena Vista City	Galax City
Fauquier County	Lynchburg City	Colonial Heights City	Emporia City	Newport News City	Clifton Forge City	Grayson County
Fredericksburg City	Pittsylvania County	Cumberland County	Essex County	Norfolk City	Covington City	Lee County
Loudoun County	Rockingham County	Dinwiddie County	Franklin City	Poquoson City	Craig County	Norton City
Manassas City	Winchester, City of	Fluvanna County	Greensville County	Portsmouth City	Floyd County	Russell County
Manassas Park City		Goochland County	Halifax County	Suffolk City	Franklin County	Scott County
Prince William County		Greene County	Lancaster County	Surry County	Giles County	Smyth County
Spotsylvania County		Hanover County	King George County	Virginia Beach City	Henry County	Tazewell County
Stafford County		Henrico County	Lunenburg County	Williamsburg City	Highland County	Washington County
Warren County		Hopewell City	Madison County	York County	Lexington City	Wise County
		King and Queen County	Mecklenburg County		Martinsville City	
		King William County	Middlesex County		Montgomery County	
		Louisa County	Northampton County		Patrick County	
		Nelson County	Northumberland County		Pulaski County	
		New Kent County	Nottoway County		Radford City	
		Petersburg City	Orange County		Roanoke City	
		Powhatan County	Page County		Roanoke County	
		Prince George County	Prince Edward County		Rockbridge County	
		Richmond City	Rappahannock County		Salem City	
		Sussex County	Richmond County		Wythe County	
			Shenandoah County			
			Southampton County			
			Staunton City			
			Waynesboro City			
			Westmoreland County			

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Historical Eligibility and Claims - Adoption Assistance (AA)**

**Adoption Assistance / Foster Care Exhibit 1a**

Child Under 21								
Statewide	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	32,186	68,558	100,744					
			\$4,797.33					
<b>Service Type</b>								
DME/Supplies	\$140,197	\$295,594	\$4.36	\$4.31	396	386	\$131.89	\$133.93
FQHC / RHC	\$9,355	\$31,773	\$0.29	\$0.46	83	123	\$41.95	\$45.33
Home Health	\$87,535	\$138,121	\$2.72	\$2.01	28	26	\$1,167.14	\$946.03
IP - Maternity	\$27,755	\$70,594	\$0.86	\$1.03	4	4	\$2,523.16	\$2,823.75
IP - Newborn	\$1,514	\$761	\$0.05	\$0.01	1	0	\$757.17	\$760.50
IP - Other	\$390,915	\$853,309	\$12.15	\$12.45	10	25	\$14,478.32	\$5,925.76
IP - Psych	\$635,222	\$1,443,182	\$19.74	\$21.05	346	372	\$685.24	\$678.51
Lab	\$60,799	\$158,063	\$1.89	\$2.31	1,149	1,575	\$19.72	\$17.56
OP - Emergency Room & Related	\$265,767	\$520,846	\$8.26	\$7.60	352	363	\$281.53	\$251.13
OP - Other	\$732,625	\$1,444,597	\$22.76	\$21.07	714	651	\$382.57	\$388.54
Pharmacy	\$3,992,898	\$8,657,922	\$124.06	\$126.29	11,834	12,704	\$125.80	\$119.28
Prof - Anesthesia	\$21,913	\$40,726	\$0.68	\$0.59	51	52	\$161.13	\$137.13
Prof - Child EPSDT	\$9,771	\$17,816	\$0.30	\$0.26	226	200	\$16.10	\$15.56
Prof - Evaluation & Management	\$731,895	\$1,785,426	\$22.74	\$26.04	4,175	4,705	\$65.37	\$66.42
Prof - Maternity	\$16,437	\$36,891	\$0.51	\$0.54	12	10	\$530.24	\$636.05
Prof - Other	\$507,501	\$1,765,518	\$15.77	\$25.75	2,389	2,948	\$79.20	\$104.82
Prof - Psych	\$373,810	\$890,142	\$11.61	\$12.98	2,039	2,311	\$68.35	\$67.42
Prof - Specialist	\$102,452	\$210,893	\$3.18	\$3.08	300	325	\$127.27	\$113.51
Prof - Vision	\$55,874	\$149,018	\$1.74	\$2.17	183	195	\$114.03	\$133.89
Radiology	\$40,730	\$85,842	\$1.27	\$1.25	510	543	\$29.75	\$27.66
Transportation/Ambulance	\$114,236	\$250,653	\$3.55	\$3.66	379	549	\$112.44	\$79.90
<b>Total</b>	<b>\$8,319,201</b>	<b>\$18,847,686</b>	<b>\$258.47</b>	<b>\$274.92</b>				

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Historical Eligibility and Claims - Foster Care (FC)**

**Adoption Assistance / Foster Care Exhibit 1b**

Child Under 21								
Statewide	Total Claims FY14	Total Claims FY15	Unadjusted PMPM FY14	Unadjusted PMPM FY15	Units/1000 FY14	Units/1000 FY15	Cost/Unit FY14	Cost/Unit FY15
Member Months	24,648	55,065	79,713					
			\$3,795.86					
<b>Service Type</b>								
DME/Supplies	\$179,299	\$277,305	\$7.27	\$5.04	750	581	\$116.43	\$104.09
FQHC / RHC	\$10,383	\$32,577	\$0.42	\$0.59	126	178	\$40.09	\$39.78
Home Health	\$3,506	\$19,304	\$0.14	\$0.35	7	13	\$233.72	\$327.18
IP - Maternity	\$23,116	\$132,909	\$0.94	\$2.41	4	9	\$2,889.49	\$3,164.49
IP - Newborn	\$45,564	\$179,065	\$1.85	\$3.25	8	5	\$2,680.26	\$8,139.33
IP - Other	\$438,597	\$1,182,322	\$17.79	\$21.47	24	26	\$8,950.97	\$9,935.48
IP - Psych	\$694,640	\$1,793,828	\$28.18	\$32.58	499	598	\$678.36	\$654.20
Lab	\$71,112	\$207,608	\$2.89	\$3.77	2,159	2,686	\$16.04	\$16.84
OP - Emergency Room & Related	\$359,118	\$779,922	\$14.57	\$14.16	627	661	\$279.04	\$257.23
OP - Other	\$955,632	\$1,644,082	\$38.77	\$29.86	1,135	1,096	\$409.79	\$327.05
Pharmacy	\$2,877,563	\$6,038,123	\$116.75	\$109.65	15,566	15,288	\$90.00	\$86.07
Prof - Anesthesia	\$31,897	\$62,747	\$1.29	\$1.14	109	105	\$142.40	\$130.45
Prof - Child EPSDT	\$28,866	\$49,887	\$1.17	\$0.91	927	810	\$15.15	\$13.42
Prof - Evaluation & Management	\$987,920	\$2,348,329	\$40.08	\$42.65	6,593	7,097	\$72.95	\$72.11
Prof - Maternity	\$18,137	\$71,640	\$0.74	\$1.30	23	35	\$385.88	\$444.97
Prof - Other	\$1,125,508	\$2,161,974	\$45.66	\$39.26	4,188	4,447	\$130.84	\$105.94
Prof - Psych	\$1,123,160	\$2,566,237	\$45.57	\$46.60	8,333	8,308	\$65.62	\$67.31
Prof - Specialist	\$118,216	\$240,922	\$4.80	\$4.38	537	554	\$107.08	\$94.70
Prof - Vision	\$48,972	\$127,934	\$1.99	\$2.32	217	218	\$109.80	\$128.06
Radiology	\$58,971	\$111,340	\$2.39	\$2.02	705	808	\$40.70	\$30.02
Transportation/Ambulance	\$104,479	\$259,870	\$4.24	\$4.72	1,336	1,409	\$38.08	\$40.19
<b>Total</b>	<b>\$9,304,657</b>	<b>\$20,287,927</b>	<b>\$377.50</b>	<b>\$368.44</b>				



Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Pharmacy Adjustment

Adoption Assistance / Foster Care Exhibit 2a

	Adoption Assistance	Foster Care	Source
1. Health Plan Total Drug Cost PMPM	\$125.57	\$111.85	FY14-15 Health Plan Encounter Data
2. Health Plan Drug Ingredient Cost PMPM	\$124.21	\$110.17	Health Plan Encounter Analysis
3. Change in Average Managed Care Discount	0.3%	0.3%	From Plan Data
4. Current Average Managed Care Rebate	1.9%	1.9%	From Plan Data
5. FY17 Managed Care Dispensing Fee PMPM	\$1.33	\$1.64	From Plan Data
6. Average PBM Admin Cost PMPM	\$0.68	\$0.88	From Plan Data
7. Adjusted PMPM with FY17 Pharmacy Pricing Arrangements	\$123.54	\$110.32	= (2.) * (1 - (3.)) * (1 - (4.)) + (5.) + (6.)
<b>8. Pharmacy Adjustment</b>	<b>-1.6%</b>	<b>-1.4%</b>	= (7.) / (1.) - 1

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Exempt Infant Formula Carveout Adjustment**

**Adoption Assistance / Foster Care Exhibit 2b**

	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
1. Claims Associated with Exempt Infant Formula	\$8,948	\$7,643	FY14-15 Health Plan Encounter Data
2. Total Claims in DME/Supplies Service Category	\$435,790	\$456,605	FY14-15 Health Plan Encounter Data
<b>3. Exempt Infant Formula Carveout Adjustment</b>	<b>-2.1%</b>	<b>-1.7%</b>	<b>= (1.) / (2.)</b>

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Hospital Inpatient Adjustments**

**Adoption Assistance / Foster Care Exhibit 2c.1**

	<u>Adoption Assistance</u>		<u>Foster Care</u>		Source
	IP - Med/Surg	IP - Psych	IP - Med/Surg	IP - Psych	
1a. FY14 Total Claims in IP Service Categories	\$420,184	\$635,222	\$507,278	\$694,640	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in IP Service Categories	\$924,663	\$1,443,182	\$1,494,296	\$1,793,828	FY15 Health Plan Encounter Data
1c. FY14 Children's Hospital of The King's Daughters IP Clair	\$118,010	\$0	\$38,922	\$0	FY14 Health Plan Encounter Data
1d. FY15 Children's Hospital of The King's Daughters IP Clair	\$140,271	\$0	\$243,872	\$0	FY15 Health Plan Encounter Data
2. FY14-15 Hospital Capital Percentage	8.9%	8.9%	8.9%	8.9%	Provided by DMAS
3a. FY16 Capital Reimbursement Decrease	-4.5%	-4.5%	-4.5%	-4.5%	= ((4a.)-(2.))/(2.)
3b. FY17 Capital Reimbursement Decrease	0.00%	0.00%	0.00%	0.00%	= ((4b.)-(4a.))/(4a.)
4a. FY16 Hospital Capital Percentage	8.5%	8.5%	8.5%	8.5%	Provided by DMAS
4b. FY17 Hospital Capital Percentage	8.5%	8.5%	8.5%	8.5%	Provided by DMAS
5. % Excluded Claims from Freestanding Psych Hospitals	0.0%	21.2%	0.0%	21.2%	FY14-15 Health Plan Encounter Data
6a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	1.05%	1.05%	Provided by DMAS
6b. Dollar Change	\$10,439	\$15,740	\$16,513	\$18,845	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (6a.)
7a. FY17 Hospital Rate Change - Rebasing	-2.65%	27.00%	-2.65%	27.00%	Provided by DMAS
7b. Dollar Change	(\$26,347)	\$404,737	(\$41,676)	\$484,590	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (7a.)
<b>8. Hospital Inpatient Adjustment</b>	<b>-1.2%</b>	<b>20.2%</b>	<b>-1.3%</b>	<b>20.2%</b>	= ((6b.) + (7b.)) / ((1a.) + (1b.))

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Hospital Inpatient Adjustments for Children's Hospital of The King's Daughters**

**Adoption Assistance / Foster Care Exhibit 2c.2**

	<u>Adoption Assistance</u>	<u>Foster Care</u>	
	<u>IP - Med/Surg</u>	<u>IP - Med/Surg</u>	<u>Source</u>
1a. FY14-15 Total Claims in IP Service Categories (for age 0-20)			
Statewide	\$1,344,847	\$2,001,574	FY14-15 Health Plan Encounter Data
2. FY14-15 Children Hospital King's Daughter IP Claims			
Statewide	\$258,281	\$282,794	FY14-15 Health Plan Encounter Data
3. FY14-15 Hospital Capital Percentage	10.3%	10.3%	Provided by DMAS
4a. FY16 Capital Reimbursement Increase	1.9%	1.9%	= ((5a.)-(3.))/(3.)
4b. FY17 Capital Reimbursement Increase	0.00%	0.00%	= ((5b.)-(5a.))/(5a.)
5a. FY16 Hospital Capital Percentage	10.5%	10.5%	Provided by DMAS
5b. FY17 Hospital Capital Percentage	10.5%	10.5%	Provided by DMAS
6. % Excluded Claims from Freestanding Psych Hospitals	0.00%	0.00%	FY14-15 Health Plan Encounter Data
7a. FY17 Hospital Rate Change - Unit Cost	2.10%	2.10%	Provided by DMAS
7b. Dollar Change			
Statewide	\$4,854	\$5,315	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (7a.))
8a. FY17 Hospital Rate Change - Rebasing	-2.65%	-2.65%	Provided by DMAS
8b. Dollar Change			
Statewide	(\$6,126)	(\$6,707)	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (8a.))
<b>9. Hospital Inpatient Adjustment</b>			
Statewide	<b>-0.095%</b>	<b>-0.070%</b>	= ( (7b.) + (8b.)) / (1a.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Freestanding Psychiatric Hospital Rate Adjustment**

**Adoption Assistance / Foster Care Exhibit 2d**

	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
1a. FY14 Total Claims in IP Service Categories	\$635,222	\$694,640	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in IP Service Categories	\$1,443,182	\$1,793,828	FY15 Health Plan Encounter Data
2. FY14-15 Hospital Capital Percentage	3.9%	3.9%	Provided by DMAS
3. % Claims from Freestanding Psych Hospitals	21.2%	21.2%	FY14-15 Health Plan Encounter Data
4a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	Provided by DMAS
4b. Dollar Change	\$4,441	\$5,317	$=((1a.) + (1b.)) * (1 - (2.)) * (3.) * (4a.)$
5a. FY17 Hospital Rate Change - Rebasing	2.50%	2.50%	Provided by DMAS
5b. Dollar Change	\$39,360	\$47,125	$=((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)$
<b>6. Freestanding Psychiatric Hospital Rate Adjustment</b>	<b>2.1%</b>	<b>2.1%</b>	$=((4b.) + (5b.)) / ((1a.) + (1b.))$

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Outpatient Adjustments**

**Adoption Assistance / Foster Care Exhibit 2e.1**

	<u>Adoption Assistance</u>		<u>Foster Care</u>		Source
	OP - Emergency Room & Related	OP - Other	OP - Emergency Room & Related	OP - Other	
1a. FY14 Total Claims in OP Service Categories	\$265,767	\$732,625	\$359,118	\$955,632	FY14 Health Plan Encounter Data
1b. FY15 Total Claims in OP Service Categories	\$520,846	\$1,444,597	\$779,922	\$1,644,082	FY15 Health Plan Encounter Data
1c. FY14 Children's Hospital of The King's Daughters OP Clair	\$14,029	\$148,395	\$8,900	\$74,611	FY14 Health Plan Encounter Data
1d. FY15 Children's Hospital of The King's Daughters OP Clair	\$18,011	\$212,482	\$13,056	\$148,436	FY15 Health Plan Encounter Data
2a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	1.05%	1.05%	Provided by DMAS
2b. Dollar Change	\$7,923	\$19,072	\$11,729	\$24,955	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (2a.)
3a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	0.1%	0.1%	Provided by DMAS
3b. Dollar Change	\$755	\$1,816	\$1,117	\$2,377	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (3a.)
<b>4. Hospital Outpatient Adjustment</b>	<b>1.10%</b>	<b>0.96%</b>	<b>1.13%</b>	<b>1.05%</b>	= ((2b.) + (3b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Outpatient Adjustments for Children's Hospital of The King's Daughters**

**Adoption Assistance / Foster Care Exhibit 2e.2**

	<u>Adoption Assistance</u>		<u>Foster Care</u>		<u>Source</u>
	<u>OP - Emergency Room &amp; Related</u>	<u>OP - Other</u>	<u>OP - Emergency Room &amp; Related</u>	<u>OP - Other</u>	
1. FY14 Total Claims in OP Service Categories (For Age 0-20)					
Statewide	\$786,613	\$2,177,221	\$1,139,040	\$2,599,714	FY14-15 Health Plan Encounter Data
2. FY14-15 Children Hospital King's Daughter OP Claims					
Statewide	\$32,040	\$360,877	\$21,956	\$223,047	FY14-15 Health Plan Encounter Data
3a. FY17 Hospital Rate Change - Unit Cost	2.10%	2.10%	2.10%	2.10%	Provided by DMAS
3b. Dollar Change					
Statewide	\$673	\$7,578	\$461	\$4,684	= ((2.) * (3a.))
4a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	0.1%	0.1%	Provided by DMAS
4b. Dollar Change					
Statewide	\$32	\$361	\$22	\$223	= ((2.) * (4a.))
<b>5. Hospital Outpatient Adjustment</b>					
Statewide	<b>0.09%</b>	<b>0.36%</b>	<b>0.04%</b>	<b>0.19%</b>	= ((3b.)+(4b.)) / (1.)

Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 DME Fee Adjustment

Adoption Assistance / Foster Care Exhibit 2f

	Adoption Assistance	Foster Care	Source
1. Claims Associated with DME/Supplies Service Category	\$435,790	\$456,605	FY14-15 Health Plan Encounter Data
2. Proportion of Claims subject to change	\$11,074	\$23,820	Provided by DMAS
3a. FY15 DME Fee Change	-29.9%	-31.2%	Provided by DMAS
3b. Dollar Change	(\$3,316)	(\$7,425)	= (2.) * (3a.)
<b>4. DME Fee Adjustment</b>	<b>-0.8%</b>	<b>-1.6%</b>	= (3b.) / (1.)



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Adoption Assistance and Foster Care - Health Plan Encounter Data**  
**Hepatitis C Treatment Adjustment**

**Exhibit 2g**

	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
1. Total Claims in Pharmacy Service Categories	\$12,650,820	\$8,915,687	FY14-15 Health Plan Encounter Data
2. Unique Individuals in Base Period	7,082	7,925	FY14-15 Health Plan Encounter Data
3a. Proportion of Population Being Tested for Hepatitis C	0.7%	2.9%	FY14-15 Health Plan Encounter Data
3b. Number of Individuals Being Tested	49	227	FY14-15 Health Plan Encounter Data
3c. Projected Testing Change in FY17	15%	35%	Estimate
3d. Additional Number of People Being Tested	7	79	= (3b.) * (3c.)
3e. Average Cost Per Test Per Person	\$29.04	\$29.04	FY14-15 Health Plan Encounter Data
4a. Proportion of Population Diagnosed With Hepatitis C	0.13%	0.3%	FY14-15 Health Plan Encounter Data
4b. Number of Individuals Diagnosed With Hepatitis C	9	22	FY14-15 Health Plan Encounter Data
4c. Projected Increase in People Diagnosed With Hepatitis C	5%	5%	Estimate
4d. Projected Number of People With Hepatitis C	9	23	= (4b.) * (1 + (4c.))
5a. Proportion of People With Hepatitis C With Drug Therapy	0.0%	0.0%	FY14-15 Health Plan Encounter Data
5b. Number of Individuals With Hepatitis C With Drug Therapy in Base Period	0	0	FY14-15 Health Plan Encounter Data
5c. Expected Percentage Increase of Hepatitis C Receiving Drug Therapy - Current Protocols	0%	0%	Estimate
5d. Expected Percentage Increase of Hepatitis C Receiving Drug Therapy - New Protocols	100%	100%	Estimate
5e. Projected Number of Additional People Going Through Drug Therapy	0	0	= (4d.) * (5a.) * (1 + (5c.)) * (1 + (5d.)) - (5b.)
5f. Average Cost of Current Drug Therapy	\$76,477	\$76,477	FY14-15 Health Plan Encounter Data
5g. Average Cost of New Drug Therapy	\$90,000	\$90,000	Estimate
6. Additional Cost of Hepatitis C Treatment	\$213	\$2,307	= ((3d.) * (3e.)) + ((5g.) - (5f.)) * (5b.) + (5e.) * (5g.)
<b>7. Hepatitis C Treatment Adjustment</b>	<b>0.0%</b>	<b>0.0%</b>	= (6.) / (1.)

Note: Based on analysis of FY14 - FY15 base data experience

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Provider Incentive Payment Adjustment**

**Adoption Assistance / Foster Care Exhibit 2h**

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	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
<b>Provider Incentive Payment Adjustment</b>	<b>0.2%</b>	<b>0.2%</b>	From Plan Data - LIFC Child

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**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Emergency Room Triage Adjustment**

**Adoption Assistance / Foster Care Exhibit 2i**

	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
1. Total Claims in Prof - Evaluation & Management	\$2,517,321	\$3,336,249	FY14-15 Health Plan Encounter Data
2. FY14-15 Number of Claims in ER Triage Level 3	114	144	FY14-15 Health Plan Encounter Data
3. ER Cost No Triage Level 3	\$43.65	\$43.65	FY14-15 Health Plan Encounter Data
4. ER Triage Cost	\$22.06	\$22.06	Provided by DMAS
5. FY16 ER Triage Financial Impact (2 years)	\$2,461	\$3,109	= (2.) * ((3.) - (4.))
<b>6. FY16 ER Triage Adjustment</b>	<b>0.10%</b>	<b>0.09%</b>	= (5.) / (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Resource Based Relative Value Scale Adjustment**

**Adoption Assistance / Foster Care Exhibit 2j**

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**Adoption Assistance / Foster Care**

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1. Professional Fee Adjustment - Effective FY17	-0.17%	Provided by DMAS
2. Proportion of claims subject to fee adjustment	88%	FY14-15 Health Plan Encounter Data
3. <b>Final Professional Fee Adjustment</b>	<b>-0.15%</b>	<b>= (1.) * (2.)</b>

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**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Administrative Cost Adjustment**

**Adoption Assistance / Foster Care Exhibit 2k**

	<b>Adoption Assistance</b>	<b>Foster Care</b>	<b>Source</b>
1. Claims Adjustment Expense PMPM	\$8.33	\$11.45	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
2. General Admin Expense PMPM	\$14.53	\$19.95	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
3. Claims Adjustment Expense Increase %	0.7%	0.7%	BLS CPI-U
4. General Admin Expense Increase %	2.2%	2.2%	Weighted average of BLS Compensation Trend and CPI
5a. Administrative PMPM*	\$23.43	\$32.18	= (1.) * (1+ (3.)) ^ (18 months/12) + (2.) * (1+ (4.)) ^ (18 months/12)
5b. Administrative PMPM Weighted by Claims	\$20.00	\$31.70	Reallocation of administrative costs weighted by claims
6. Adjusted and Trended Base PMPM	\$314.11	\$431.42	Weighted average of medical component of FY2017 Med3.0 Base Rates
7. Administrative allowance as % of Base Capitation Rate	5.90%	6.74%	= (5b.) / (((5b.) + (6.)) / (1 - 1.5%))
8. Contribution to Reserves as % of Base Capitation Rate	1.50%	1.50%	Provided by DMAS
<b>9. Administrative Factor as % of Base Capitation Rate</b>	<b>7.4%</b>	<b>8.2%</b>	= (7.) + (8.)

\*Note:  
Administrative increases are applied from midpoint of CY2015 to the midpoint of the contract period (18 months) using compound interest calculations.

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - Adoption Assistance**

**Adoption Assistance / Foster Care Exhibit 3a**

**USING LIFC CHILD TREND/IBNR NUMBERS**

Adoption Assistance Child Under 21									
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor	
	IBNR	Policy/Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend			
Inpatient Medical/Surgical	2.1%	-1.3%	0.8%	10.3%	1.5%	11.9%	6.5%	1.2303	
Inpatient Psychiatric	0.8%	22.3%	23.3%	4.2%	14.6%	19.4%	15.0%	1.4725	
Outpatient Hospital	1.3%	1.2%	2.5%	3.8%	5.8%	9.8%	2.4%	1.1380	
Practitioner	0.8%	-0.1%	0.7%	-2.0%	3.5%	1.5%	0.8%	1.0269	
Prescription Drug	0.0%	-1.6%	-1.6%	3.4%	2.4%	5.9%	5.0%	1.1392	
Other	1.1%	-1.1%	0.0%	-5.6%	16.0%	9.4%	1.7%	1.1227	
<b>Weighted Average<sup>2</sup></b>	<b>0.6%</b>	<b>1.0%</b>	<b>1.5%</b>	<b>2.2%</b>	<b>4.7%</b>	<b>7.0%</b>	<b>4.5%</b>	<b>1.1461</b>	

<b>Months of Trend Applied</b>	12	12	12	18
--------------------------------	----	----	----	----

<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 Claims)

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

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 FY14-15 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - Foster Care**

**Adoption Assistance / Foster Care Exhibit 3b**

**USING LIFC CHILD TREND/IBNR NUMBERS**

Foster Care Child Under 21									
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor	
	IBNR	Policy/Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend			
Inpatient Medical/Surgical	2.1%	-1.3%	0.8%	10.3%	1.5%	11.9%	6.5%	1.2303	
Inpatient Psychiatric	0.8%	22.3%	23.3%	4.2%	14.6%	19.4%	15.0%	1.4725	
Outpatient Hospital	1.3%	1.2%	2.5%	3.8%	5.8%	9.8%	2.4%	1.1380	
Practitioner	0.8%	-0.1%	0.6%	-2.0%	3.5%	1.5%	0.8%	1.0269	
Prescription Drug	0.0%	-1.3%	-1.3%	3.4%	2.4%	5.9%	5.0%	1.1392	
Other	1.1%	-1.2%	-0.1%	-5.6%	16.0%	9.4%	1.7%	1.1227	
<b>Weighted Average<sup>2</sup></b>	<b>0.7%</b>	<b>1.4%</b>	<b>2.2%</b>	<b>1.6%</b>	<b>5.0%</b>	<b>6.7%</b>	<b>4.1%</b>	<b>1.1365</b>	

<b>Months of Trend Applied</b>	12	12	12	18
--------------------------------	----	----	----	----

<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 Claims)

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

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 FY14-15 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid  
FY 2017 Capitation Rate Development  
Health Plan Encounter Data  
Adoption Assistance (AA)**

**Adoption Assistance / Foster Care Exhibit 4a**

Child Under 21							
Statewide	Total Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>							
DME/Supplies	\$435,790	\$4,608	(\$12,393)	\$428,005	1.123	\$480,531	\$4.77
FQHC / RHC	\$41,128	\$313.68		\$41,442	1.027	\$42,558	\$0.42
Home Health	\$225,656	\$2,886.73		\$228,543	1.138	\$260,074	\$2.58
IP - Maternity	\$98,348	\$2,107	(\$1,283)	\$99,172	1.230	\$122,012	\$1.21
IP - Newborn	\$2,275	\$49	(\$30)	\$2,294	1.230	\$2,822	\$0.03
IP - Other	\$1,244,224	\$26,656	(\$16,234)	\$1,254,646	1.230	\$1,543,601	\$15.32
IP - Psych	\$2,078,404	\$10,982	\$466,730	\$2,556,116	1.473	\$3,763,963	\$37.36
Lab	\$218,862	\$1,671		\$220,533	1.123	\$247,598	\$2.46
OP - Emergency Room & Related	\$786,613	\$10,063	\$9,502	\$806,178	1.138	\$917,403	\$9.11
OP - Other	\$2,177,221	\$27,852	\$29,196	\$2,234,269	1.138	\$2,542,524	\$25.24
Pharmacy	\$12,650,820	\$69	(\$204,298)	\$12,446,592	1.139	\$14,179,232	\$140.75
Prof - Anesthesia	\$62,640	\$478		\$63,118	1.027	\$64,818	\$0.64
Prof - Child EPSDT	\$27,588	\$210	(\$41)	\$27,757	1.027	\$28,504	\$0.28
Prof - Evaluation & Management	\$2,517,321	\$18,789	(\$1,293)	\$2,534,818	1.027	\$2,603,093	\$25.84
Prof - Maternity	\$53,328	\$407	(\$80)	\$53,655	1.027	\$55,100	\$0.55
Prof - Other	\$2,273,018	\$17,346	(\$3,407)	\$2,286,958	1.027	\$2,348,557	\$23.31
Prof - Psych	\$1,263,952	\$6,479	(\$1,890)	\$1,268,541	1.027	\$1,302,709	\$12.93
Prof - Specialist	\$313,345	\$2,390	(\$470)	\$315,265	1.027	\$323,757	\$3.21
Prof - Vision	\$204,892	\$586	(\$306)	\$205,172	1.027	\$210,699	\$2.09
Radiology	\$126,572	\$1,338		\$127,911	1.123	\$143,608	\$1.43
Transportation/Ambulance	\$364,889	\$896		\$365,785	1.123	\$410,675	\$4.08
Provider Incentive Payment Adjustment							\$0.50
<b>Total</b>	<b>\$27,166,887</b>	<b>\$136,177</b>	<b>\$263,705</b>	<b>\$27,566,768</b>		<b>\$31,593,840</b>	<b>\$314.11</b>
Admin Cost Adjustment							\$25.08
<b>Medallion 3.0 Capitation Rate</b>							<b>\$339.19</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.



**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Health Plan Encounter Data  
 Foster Care (FC)**

**Adoption Assistance / Foster Care Exhibit 4b**

Child Under 21							
Statewide	Total Base Claims FY14-15	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims FY14-15	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>							
DME/Supplies	\$456,605	\$4,828	(\$15,227)	\$446,205	1.123	\$500,965	\$6.28
FQHC / RHC	\$42,960	\$327.66		\$43,288	1.027	\$44,454	\$0.56
Home Health	\$22,809	\$291.79		\$23,101	1.138	\$26,288	\$0.33
IP - Maternity	\$156,024	\$3,343	(\$2,114)	\$157,253	1.230	\$193,469	\$2.43
IP - Newborn	\$224,630	\$4,812	(\$3,044)	\$226,398	1.230	\$278,540	\$3.49
IP - Other	\$1,620,919	\$34,726	(\$21,966)	\$1,633,680	1.230	\$2,009,930	\$25.21
IP - Psych	\$2,488,468	\$12,781	\$558,733	\$3,059,982	1.473	\$4,505,922	\$56.53
Lab	\$278,720	\$2,432		\$281,153	1.123	\$315,657	\$3.96
OP - Emergency Room & Related	\$1,139,040	\$14,571	\$13,500	\$1,167,111	1.138	\$1,328,134	\$16.66
OP - Other	\$2,599,714	\$33,257	\$32,651	\$2,665,623	1.138	\$3,033,389	\$38.05
Pharmacy	\$8,915,687	\$49	(\$119,693)	\$8,796,042	1.139	\$10,020,504	\$125.71
Prof - Anesthesia	\$94,644	\$722		\$95,366	1.027	\$97,935	\$1.23
Prof - Child EPSDT	\$78,752	\$601	(\$118)	\$79,235	1.027	\$81,369	\$1.02
Prof - Evaluation & Management	\$3,336,249	\$25,091	(\$1,868)	\$3,359,471	1.027	\$3,449,959	\$43.28
Prof - Maternity	\$89,776	\$685	(\$135)	\$90,326	1.027	\$92,759	\$1.16
Prof - Other	\$3,287,483	\$25,073	(\$4,928)	\$3,307,628	1.027	\$3,396,720	\$42.61
Prof - Psych	\$3,689,397	\$18,308	(\$5,515)	\$3,702,190	1.027	\$3,801,909	\$47.69
Prof - Specialist	\$359,139	\$2,739	(\$538)	\$361,339	1.027	\$371,072	\$4.66
Prof - Vision	\$176,906	\$555	(\$264)	\$177,197	1.027	\$181,970	\$2.28
Radiology	\$170,311	\$1,795		\$172,105	1.123	\$193,227	\$2.42
Transportation/Ambulance	\$364,349	\$1,498		\$365,846	1.123	\$410,744	\$5.15
Provider Incentive Payment Adjustment							\$0.69
Total	\$29,592,583	\$188,485	\$429,474	\$30,210,542		\$34,334,916	\$431.42
Admin Cost Adjustment							\$38.75
<b>Medallion 3.0 Capitation Rate</b>							<b>\$470.17</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Adoption Assistance and Foster Care - Health Plan Encounter Data**  
**Capitation Rates and Member Months**

**Exhibit 5**

	Statewide								
Child Under 21	FY 2016 AA (Blended MCO and FFS Rate)	FY 2017 AA	% Change	FY 2016 FC (Blended MCO and FFS Rate)	FY 2017 FC	% Change	FY 2016 AA and FC (Blended MCO and FFS Rate) Weighted Average	FY 2017 AA and FC Weighted Average	% Change
MCO Capitation Rate	\$341.37	\$339.19	-0.6%	\$496.97	\$470.17	-5.4%	\$411.96	\$398.61	-3.2%
February 2016 Member Months		5,750			4,775				

	Statewide								
Child Under 21	FY 2016 AA (MCO Rate)	FY 2017 AA	% Change	FY 2016 FC (MCO Rate)	FY 2017 FC	% Change	FY 2016 AA and FC (MCO Rate) Weighted Average	FY 2017 AA and FC Weighted Average	% Change
MCO Capitation Rate	\$301.60	\$339.19	12.5%	\$468.96	\$470.17	0.3%	\$377.53	\$398.61	5.6%
February 2016 Member Months		5,750			4,775				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Adoption Assistance and Foster Care Expansion**  
**Drug Reinsurance Adjustment**

**Exhibit 6**

	MCO AA	MCO FC	Source
1a. FY14 Number of Individuals Exceeding the Threshold	2	2	FY14 Health Plan Encounter / FFS Data
1b. FY14 Additional Individuals	0	0	20% Increase of People who exceed the threshold
1c. FY14 Average Cost Before Specialty Cost Trend	\$154,258	\$189,602	FY14 Health Plan Encounter / FFS Data
1d. FY14 Average Cost After Specialty Cost Trend	\$234,608	\$288,361	FY14 Health Plan Encounter / FFS Data
1e. FY14 Total Dollars Including Additional Individuals	\$563,058	\$692,067	= 1d. * (1a.+1b.)
1f. FY14 Amount of Reinsurance	\$182,752	\$298,861	= ((1e.) - ((1a.+1b.) * \$150,000)) * 90%
2a. FY15 Number of Individuals Exceeding the Threshold	3	2	FY15 Health Plan Encounter Data
2b. FY15 Additional Individuals	1	0	20% Increase of People who exceed the threshold
2c. FY15 Average Cost Before Specialty Cost Trend	\$251,310	\$333,291	FY15 Health Plan Encounter Data
2d. FY15 Average Cost After Specialty Cost Trend	\$332,357	\$440,777	FY15 Health Plan Encounter Data
2e. FY15 Total Dollars Including Additional Individuals	\$1,196,485	\$1,057,865	= 2d. * (2a.+2b.)
2f. FY15 Amount of Reinsurance	\$590,836	\$628,079	= ((2e.) - ((2a.+2b.) * \$150,000)) * 90%
3. Average Reinsurance Amount	\$386,794	\$463,470	= ((1f.) + (2f.)) / 2
4. Annualized Historical Member Months	50,372	39,857	Health Plan Encounter / FFS Data
<b>5. Estimated PMPM</b>	<b>\$7.68</b>	<b>\$11.63</b>	<b>= (3.) / (4.)</b>

Note:  
Discounted threshold is based upon FY17 reinsurance threshold of \$150,000 per person per year discounted by 15% unit cost trend per year

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Adoption Assistance and Foster Care Expansion  
 Capitation Rates Net Drug Reinsurance Adjustment  
 Compared to FY 2016 Blended and Without Reinsurance**

**Exhibit 7**

	Statewide	
	Adoption Assistance	Foster Care
MCO Capitation Rate	\$339.19	\$470.17
MCO Reinsurance Adjustment	\$7.68	\$11.63
<b>FY17 Final Rate Net Reinsurance Adjustment</b>	<b>\$331.51</b>	<b>\$458.54</b>
FY16 Final Blended MCO and FFS Capitation Rate (Without Reinsurance)	\$341.37	\$496.97
% Change	-0.6%	-5.4%
FY16 Final MCO Capitation Rate (Without Reinsurance)	\$301.60	\$468.96
% Change	12.5%	0.3%

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 Adoption Assistance and Foster Care Expansion  
 February 2016 Member Month Distribution**

**Exhibit 8**

Aid Category	Region							Regional Total
	Northern Virginia	Other MSA	Richmond/Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
Adoption Assistance	800	601	1,048	644	1,150	790	717	5,750
Foster Care	759	438	1,001	397	923	683	574	4,775
MCO Total	1,559	1,039	2,049	1,041	2,073	1,473	1,291	10,525

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Historical Eligibility and Claims - ALTC**

**Exhibit 1a**

Statewide	Child							
	Total Claims		Unadjusted PMPM		Units/1000		Cost/Unit	
	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015
Member Months	22,733	17,452						
<b>Service Type</b>								
DME/Supplies	\$3,654,615	\$2,925,280	\$160.76	\$167.62	13,372	16,555	\$144.27	\$121.50
FQHC / RHC	\$44,508	\$15,010	\$1.96	\$0.86	241	308	\$97.61	\$33.50
Home Health	\$786,348	\$555,622	\$34.59	\$31.84	374	379	\$1,109.09	\$1,008.39
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$26,391	\$70,124	\$1.16	\$4.02	1	2	\$13,195.70	\$23,374.80
IP - Other	\$6,597,992	\$5,243,028	\$290.24	\$300.43	223	227	\$15,598.09	\$15,887.96
IP - Psych	\$237,419	\$130,460	\$10.44	\$7.48	167	132	\$748.96	\$679.48
Lab	\$132,502	\$60,008	\$5.83	\$3.44	3,271	2,559	\$21.38	\$16.13
OP - Emergency Room & Related	\$583,138	\$359,396	\$25.65	\$20.59	886	981	\$347.31	\$252.03
OP - Other	\$4,073,869	\$3,207,981	\$179.21	\$183.82	4,650	5,628	\$462.47	\$391.93
Pharmacy	\$8,880,784	\$6,641,735	\$390.66	\$380.57	29,451	41,789	\$159.18	\$109.28
Prof - Anesthesia	\$100,353	\$81,350	\$4.41	\$4.66	377	488	\$140.55	\$114.58
Prof - Child EPSDT	\$10,396	\$7,257	\$0.46	\$0.42	345	457	\$15.92	\$10.93
Prof - Evaluation & Management	\$1,616,833	\$1,256,801	\$71.12	\$72.01	10,379	12,961	\$82.23	\$66.67
Prof - Maternity	\$2,567	\$0	\$0.11	\$0.00	3	0	\$427.88	-
Prof - Other	\$10,765,644	\$8,240,343	\$473.57	\$472.17	19,970	26,737	\$284.56	\$211.92
Prof - Psych	\$90,958	\$67,154	\$4.00	\$3.85	715	840	\$67.18	\$54.95
Prof - Specialist	\$371,988	\$284,171	\$16.36	\$16.28	1,017	1,135	\$193.04	\$172.23
Prof - Vision	\$65,927	\$50,756	\$2.90	\$2.91	347	472	\$100.35	\$73.88
Radiology	\$234,142	\$97,812	\$10.30	\$5.60	2,435	2,541	\$50.77	\$26.47
Transportation/Ambulance	\$194,849	\$169,660	\$8.57	\$9.72	1,295	1,206	\$79.43	\$96.73
<b>Total</b>	<b>\$38,471,225</b>	<b>\$29,463,948</b>	<b>\$1,692.31</b>	<b>\$1,688.28</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Historical Eligibility and Claims - ALTC**

**Exhibit 1a**

Adult								
Statewide	Total Claims		Unadjusted PMPM		Units/1000		Cost/Unit	
	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015	Dec 2014 - Jun 2015	Jul 2015 - Nov 2015
Member Months	32,504	25,213						
<b>Service Type</b>								
DME/Supplies	\$4,104,854	\$3,467,499	\$126.29	\$137.53	13,026	17,298	\$116.34	\$95.41
FQHC / RHC	\$219,296	\$205,218	\$6.75	\$8.14	1,151	1,553	\$70.35	\$62.87
Home Health	\$1,225,703	\$886,764	\$37.71	\$35.17	1,143	1,269	\$395.90	\$332.49
IP - Maternity	\$17,638	\$56,162	\$0.54	\$2.23	2	6	\$3,527.63	\$4,680.19
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$24,936,839	\$19,392,294	\$767.19	\$769.14	733	871	\$12,556.31	\$10,596.88
IP - Psych	\$426,634	\$563,386	\$13.13	\$22.35	219	369	\$720.67	\$726.95
Lab	\$322,360	\$197,538	\$9.92	\$7.83	8,338	7,262	\$14.27	\$12.95
OP - Emergency Room & Related	\$2,799,116	\$2,084,372	\$86.12	\$82.67	1,876	2,489	\$550.90	\$398.54
OP - Other	\$7,569,299	\$5,261,146	\$232.87	\$208.67	4,847	5,875	\$576.53	\$426.21
Pharmacy	\$18,188,316	\$14,548,541	\$559.57	\$577.03	81,366	116,346	\$82.53	\$59.51
Prof - Anesthesia	\$152,486	\$115,106	\$4.69	\$4.57	504	618	\$111.63	\$88.61
Prof - Child EPSDT	\$35,736	\$22,315	\$1.10	\$0.89	768	1,076	\$17.19	\$9.87
Prof - Evaluation & Management	\$4,021,524	\$3,156,670	\$123.72	\$125.20	20,747	25,611	\$71.56	\$58.66
Prof - Maternity	\$51,231	\$32,178	\$1.58	\$1.28	9	18	\$2,049.22	\$846.80
Prof - Other	\$3,079,640	\$2,351,796	\$94.75	\$93.28	9,448	11,993	\$120.34	\$93.33
Prof - Psych	\$97,523	\$75,172	\$3.00	\$2.98	520	650	\$69.26	\$55.03
Prof - Specialist	\$1,221,962	\$977,450	\$37.59	\$38.77	3,036	3,740	\$148.60	\$124.39
Prof - Vision	\$129,927	\$111,717	\$4.00	\$4.43	560	817	\$85.70	\$65.07
Radiology	\$626,768	\$466,677	\$19.28	\$18.51	6,543	8,146	\$35.36	\$27.27
Transportation/Ambulance	\$1,300,834	\$1,098,680	\$40.02	\$43.58	8,803	10,682	\$54.56	\$48.95
<b>Total</b>	<b>\$70,527,687</b>	<b>\$55,070,681</b>	<b>\$2,169.82</b>	<b>\$2,184.22</b>				

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Pharmacy Adjustment**

**Exhibit 2a**

	ALTC Child	ALTC Adult	Source
1. Dec 2014 - Nov 2015 Health Plan Drug Cost PMPM	\$386.28	\$567.20	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Nov 2015 Health Plan Drug Ingredient Cost PMPM	\$382.99	\$558.28	Dec 2014 - Nov 2015 Health Plan Encounter Analysis
3. Change in Average Managed Care Discount	0.2%	0.2%	From Plan Data
4. Current Average Managed Care Rebate	1.9%	1.9%	From Plan Data
5. FY17 Managed Care Dispensing Fee PMPM	\$3.23	\$8.96	From Plan Data
6. Average PBM Admin Cost PMPM	\$1.54	\$4.26	From Plan Data
7. Adjusted PMPM with FY17 Pharmacy Pricing Arrangements	\$379.57	\$559.56	= (2.) * (1 - (3.)) * (1 - (4.)) + (5.) + (6.)
<b>8. Pharmacy Adjustment</b>	<b>-1.7%</b>	<b>-1.3%</b>	= (7.) / (1.) - 1



**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Exempt Infant Formula Carveout Adjustment**

**Exhibit 2b**

	ALTC Child	Source
1. Claims Associated with Exempt Infant Formula	\$111,729	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Total Claims in DME/Supplies Service Category	\$7,309,230	Dec 2014 - Nov 2015 Health Plan Encounter Data
<b>3. Exempt Infant Formula Carveout Adjustment</b>	<b>-1.5%</b>	<b>= (1.) / (2.)</b>

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Hospital Inpatient Adjustments**

**Exhibit 2c (i)**

	<u>ALTC</u>		Source
	IP - Med/Surg	IP - Psych	
1a. Dec 2014 - Jun 2015 Total Claims in IP Service Categories	\$31,578,860	\$664,053	Dec 2014 - Jun 2015 Health Plan Encounter Data
1b. Jul 2015 - Nov 2015 Total Claims in IP Service Categories	\$24,761,609	\$693,846	Jul 2015 - Nov 2015 Health Plan Encounter Data
1c. Dec 2014 - Jun 2015 Children's Hospital of The King's Daughters IP Cla	\$197,519	\$0	Dec 2014 - Jun 2015 Health Plan Encounter Data
1d. Jul 2015 - Nov 2015 Children's Hospital of The King's Daughters IP Clai	\$115,786	\$0	Jul 2015 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Nov 2015 Hospital Capital Percentage	8.73%	8.73%	Provided by DMAS
3a. FY16 Capital Reimbursement Increase	-2.67%	-2.67%	= ((4a.)-(2.))/(2.)
3b. FY17 Capital Reimbursement Increase	0.00%	0.00%	= ((4b.)-(4a.))/(4a.)
4a. FY16 Hospital Capital Percentage	8.50%	8.50%	Provided by DMAS
4b. FY17 Hospital Capital Percentage	8.50%	8.50%	Provided by DMAS
5. % Excluded Claims from Freestanding Psych Hospitals	0.00%	11.73%	Dec 2014 - Nov 2015 Health Plan Encounter Data
6a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	Provided by DMAS
6b. Dollar Change	\$538,281	\$11,515	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (6a.)
7a. FY17 Hospital Rate Change - Rebasing	-2.65%	27.00%	Provided by DMAS
7b. Dollar Change	(\$1,358,519)	\$296,102	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (1 - (4b.)) * (1 - (5.)) * (7a.)
<b>8. Hospital Inpatient Adjustment</b>	<b>-1.5%</b>	<b>22.7%</b>	= ((6b.) + (7b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Inpatient Adjustments For Children Hospital King's Daughter**

**Exhibit 2c (ii)**

	ALTC Child	Source
	IP - Med/Surg	
1a. Dec 2014 - Nov 2015 Total Claims in IP Service Categories (for age 0-20) Statewide	\$11,937,536	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Nov 2015 Children Hospital King's Daughter IP Claims Statewide	\$313,306	Dec 2014 - Nov 2015 Health Plan Encounter Data
3. Dec 2014 - Nov 2015 Hospital Capital Percentage	10.38%	Provided by DMAS
4a. FY16 Capital Reimbursement Increase	1.12%	= ((5a.)-(3.))/(3.)
4b. FY17 Capital Reimbursement Increase	0.00%	= ((5b.)-(5a.))/(5a.)
5a. FY16 Hospital Capital Percentage	10.50%	Provided by DMAS
5b. FY17 Hospital Capital Percentage	10.50%	Provided by DMAS
6. % Excluded Claims from Freestanding Psych Hospitals	0.00%	Dec 2014 - Jun 2015-15 Health Plan Encounter Data
7a. FY17 Hospital Rate Change - Unit Cost	2.10%	Provided by DMAS
7b. Dollar Change Statewide	\$5,889	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (7a.))
8a. FY17 Hospital Rate Change - Rebasing	-2.65%	Provided by DMAS
8b. Dollar Change Statewide	(\$7,431)	= ((2.) * (1 - (5b.)) * (1 - (6.)) * (8a.))
<b>9. Hospital Inpatient Adjustment</b> Statewide	<b>-0.0129%</b>	= ((7b.) + (8b.)) / (1a.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Freestanding Psychiatric Hospital Rate Adjustment**

**Exhibit 2d**

	ALTC	Source
1a. Dec 2014 - Jun 2015 Total Claims in IP Service Categories	\$664,053	Dec 2014 - Jun 2015 Health Plan Encounter Data
1b. Jul 2015 - Nov 2015 Total Claims in IP Service Categories	\$693,846	Jul 2015 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Nov 2015 Hospital Capital Percentage	3.9%	Provided by DMAS
3. % Claims from Freestanding Psych Hospitals	11.7%	Dec 2014 - Nov 2015 Health Plan Encounter Data
4a. FY17 Hospital Rate Change - Unit Cost	1.05%	Provided by DMAS
4b. Dollar Change	\$1,608	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (4a.)
5a. FY17 Hospital Rate Change - Rebasing	2.5%	Provided by DMAS
5b. Dollar Change	\$3,828	= ((1a.) + (1b.)) * (1 - (2.)) * (3.) * (5a.)
<b>6. Freestanding Psychiatric Hospital Rate Adjustment</b>	<b>0.4%</b>	= ((4b.) + (5b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Hospital Outpatient Adjustments**

**Exhibit 2e (i)**

	ALTC		Source
	OP - Emergency Room & Related	OP - Other	
1a. Dec 2014 - Jun 2015 Total Claims in OP Service Categories	\$3,382,254	\$11,643,168	Dec 2014 - Jun 2015 Health Plan Encounter Data
1b. Jul 2015 - Nov 2015 Total Claims in OP Service Categories	\$2,443,769	\$8,469,127	Jul 2015 - Nov 2015 Health Plan Encounter Data
1c. Dec 2014 - Jun 2015 Children's Hospital of The King's Daughters OP Claim	\$30,988	\$297,613	Dec 2014 - Jun 2015 Health Plan Encounter Data
1d. Jul 2015 - Nov 2015 Children's Hospital of The King's Daughters OP Claim	\$14,145	\$247,016	Jul 2015 - Nov 2015 Health Plan Encounter Data
2a. FY17 Hospital Rate Change - Unit Cost	1.05%	1.05%	Provided by DMAS
2b. Dollar Change	\$60,699	\$205,460	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (2a.)
3a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	Provided by DMAS
3b. Dollar Change	\$5,781	\$19,568	= [ ((1a.)+(1b.))-((1c.)+(1d.))] * (3a.)
<b>4. Hospital Outpatient Adjustment</b>	<b>1.14%</b>	<b>1.12%</b>	= ((2b.) + (3b.)) / ((1a.) + (1b.))

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**Health Plan Encounter Data**  
**Hospital Outpatient Adjustments for Children's Hospital of The King's Daughters**

**Exhibit 2e (ii)**

	ALTC Child		Source
	OP - Emergency Room & Related	OP - Other	
1. Dec 2014 - Nov 2015 Total Claims in OP Service Categories (For Age 0-20) Statewide	\$942,535	\$7,281,850	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Nov 2015 Children Hospital King's Daughter OP Claims Statewide	\$45,133	\$544,629	Dec 2014 - Nov 2015 Health Plan Encounter Data
3a. FY17 Hospital Rate Change - Unit Cost	2.1%	2.1%	Provided by DMAS
3b. Dollar Change Statewide	\$948	\$11,437	= ((2.) * (3a.))
4a. FY17 Hospital Rate Change - Rebasing	0.1%	0.1%	Provided by DMAS
4b. Dollar Change Statewide	\$45	\$545	= ((2.) * (4a.))
<b>5. Hospital Outpatient Adjustment</b> Statewide	<b>0.1%</b>	<b>0.2%</b>	= ((3b.)+(4b.))/ (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**DME Fee Adjustment**

**Exhibit 2f**

	<b>ALTC</b>	<b>Source</b>
1. Claims Associated with DME/Supplies Service Category	\$14,152,248	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - Jun 2015 Claims subject to DME Fee Adjustment	\$0	Provided by DMAS
3a. FY15 DME Fee Change	-31.9%	Provided by DMAS
3b. Dollar Change	\$0	= (2.) * (3a.)
<b>4. DME Fee Adjustment</b>	<b>0.00%</b>	= (3b.) / (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Hepatitis C Treatment Adjustment**

**Exhibit 2g**

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**ALTC Adult**

**Source**

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**1. Hepatitis C Treatment Adjustment**

**6.7%**

Uses ABAD Hep C Adjustment

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**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Provider Incentive Payment Adjustment**

**Exhibit 2h**

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	ALTC	Source
Provider Incentive Payment Adjustment	0.1%	From Plan Data

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**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Emergency Room Triage Adjustment**

**Exhibit 2i**

	ALTC	Source
1. Total Claims in Prof - Evaluation & Management	\$5,599,312	Dec 2014 - Nov 2015 Health Plan Encounter Data
2. Dec 2014 - June 2015 Number of Claims in ER Triage Level 3	681	Dec 2014 - June 2015 Health Plan Encounter Data
3. ER Cost No Triage Level 3	\$41.89	Dec 2014 - June 2015 Health Plan Encounter Data
4. ER Triage Cost	\$22.06	Provided by DMAS
5. FY16 ER Triage Financial Impact (7 Months)	\$13,507	= (2.) * ((3.) - (4.))
<b>6. FY16 ER Triage Adjustment</b>	<b>0.2%</b>	= (5.) / (1.)

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Resource Based Relative Value Scale Adjustment**

**Exhibit 2j**

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**ALTC**

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1. Professional Fee Adjustment - Effective FY17	-0.17%	Provided by DMAS
2. Proportion of claims subject to fee adjustment	87%	FY14-15 Health Plan Encounter Data
3. <b>Final Professional Fee Adjustment</b>	<b>-0.15%</b>	= (1.) * (2.)

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**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Administrative Cost Adjustment**

**Exhibit 2k**

	ALTC	Source
1. Claims Adjustment Expense PMPM	\$56.18	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
2. General Admin Expense PMPM	\$97.91	Expense from CY2015 BOI Reports; CY2015 Member months from capitation payment files
3. Claims Adjustment Expense Increase %	0.7%	BLS CPI-U
4. General Admin Expense Increase %	2.2%	Weighted average of BLS Compensation Trend and CPI
5a. Administrative PMPM*	\$157.93	= (1.) * (1+ (3.)) ^ (18 months/12) + (2.) * (1+ (4.)) ^ (18 months/12)
5b. Administrative PMPM Weighted by Claims	\$105.26	Reallocation of administrative costs weighted by claims
6. Adjusted and Trended Base PMPM	\$2,141.35	Weighted average of medical component of FY2017 Med3.0 Base Rates
7. Administrative allowance as % of Base Capitation Rate	4.61%	= (5b.) / (((5b.) + (6.)) / (1 - 1.5%))
8. Contribution to Reserves as % of Base Capitation Rate	1.50%	Provided by DMAS
<b>9. Administrative Factor as % of Base Capitation Rate</b>	<b>6.1%</b>	<b>= (7.) + (8.)</b>

\*Note:  
 Administrative increases are applied from midpoint of CY2015 to the midpoint of the contract period (18 months) using compound interest calculations

**Virginia Medicaid**

USES ABAD TREND (DATA PERIOD & CONTRACT PERIOD)

**Exhibit 3a**

**FY 2017 Capitation Rate Development**

**ALTC / HAP Expansion - Health Plan Encounter Data**

**Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ALTC Child**

ALTC Child Categories								
Category of Service	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	0.02	-1.5%	0.8%	5.3%	-0.5%	4.8%	1.7%	1.0421
Inpatient Psychiatric	0.02	23.1%	25.9%	7.4%	12.7%	21.1%	10.6%	1.2271
Outpatient Hospital	0.02	1.1%	3.5%	0.6%	2.6%	3.3%	2.0%	1.0386
Practitioner	0.02	-0.1%	2.2%	2.1%	4.8%	7.0%	5.3%	1.0942
Prescription Drug	0.02	-1.7%	0.6%	4.7%	-1.2%	3.4%	4.8%	1.0698
Other	0.02	-1.3%	1.0%	-9.8%	9.0%	-1.8%	0.0%	0.9912
<b>Weighted Average<sup>2</sup></b>	<b>2.4%</b>	<b>-0.6%</b>	<b>1.8%</b>	<b>1.8%</b>	<b>2.7%</b>	<b>4.4%</b>	<b>3.5%</b>	<b>1.0613</b>

<b>Months of Trend Applied</b>	6	6	6	13
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<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 Claims)

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

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 FY13-14 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid**

USES ABAD TREND (DATA PERIOD & CONTRACT PERIOD)

**Exhibit 3b**

**FY 2017 Capitation Rate Development**

**ALTC / HAP Expansion - Health Plan Encounter Data**

**Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ALTC Adult**

Category of Service	ALTC Adult Categories							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/ Program <sup>1</sup>	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	0.02	-1.5%	0.2%	5.3%	-0.5%	4.8%	1.7%	1.0421
Inpatient Psychiatric	0.02	23.1%	25.1%	7.4%	12.7%	21.1%	10.6%	1.2271
Outpatient Hospital	0.02	1.0%	2.7%	0.6%	2.6%	3.3%	2.0%	1.0386
Practitioner	0.02	0.0%	1.6%	2.1%	4.8%	7.0%	5.3%	1.0942
Prescription Drug	0.02	5.4%	7.2%	4.7%	-1.2%	3.4%	4.8%	1.0698
Other	0.02	0.0%	1.7%	-9.8%	9.0%	-1.8%	0.0%	0.9912
<b>Weighted Average<sup>2</sup></b>	<b>1.7%</b>	<b>1.2%</b>	<b>2.9%</b>	<b>2.6%</b>	<b>1.5%</b>	<b>4.0%</b>	<b>3.0%</b>	<b>1.0528</b>

  

<b>Months of Trend Applied</b>	6	6	6	13
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<sup>1</sup> The Policy and Program Adjustments are summarized in this table as weighted averages and are applied at the rate cell level in Exhibits 4.

<sup>2</sup> Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY14-15), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY14-15 Claims)

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

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 FY13-14 incurred claims paid through Oct 2015.

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes FY13-15 incurred claims paid through Feb 2016.

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

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Acute and Long term Care (ALTC)**

**Exhibit 4a**

ALTC Child

Child									
Statewide	Total Base Claims Dec 2014 - Nov 2015	Base Claims Redistribution and Adjustments Dec 2014 - Nov 2015	Total Redistributed Base Claims Dec 2014 - Nov 2015	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims Dec 2014 - Nov 2015	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$6,579,895		\$6,579,895	\$154,684	(\$102,945)	\$6,631,633	0.991	\$6,573,027	\$163.57
FQHC / RHC	\$59,518		\$59,518	\$1,399.17		\$60,917	1.094	\$66,654	\$1.66
Home Health	\$1,341,970		\$1,341,970	\$31,547.73		\$1,373,518	1.039	\$1,426,546	\$35.50
IP - Maternity	\$0		\$0	\$0		\$0	1.042	\$0	\$0.00
IP - Newborn	\$96,516		\$96,516	\$2,269	(\$1,451)	\$97,334	1.042	\$101,428	\$2.52
IP - Other	\$11,841,020		\$11,841,020	\$278,365	(\$178,007)	\$11,941,378	1.042	\$12,443,643	\$309.66
IP - Psych	\$367,879		\$367,879	\$7,930	\$86,640	\$462,449	1.227	\$567,481	\$14.12
Lab	\$192,510		\$192,510	\$3,791		\$196,300	0.991	\$194,566	\$4.84
OP - Emergency Room & Related	\$942,535		\$942,535	\$22,158	\$12,024	\$976,717	1.039	\$1,014,426	\$25.24
OP - Other	\$7,281,850		\$7,281,850	\$171,186	\$95,652	\$7,548,688	1.039	\$7,840,129	\$195.10
Pharmacy	\$15,522,519		\$15,522,519	\$364,912	(\$275,839)	\$15,611,592	1.070	\$16,701,006	\$415.60
Prof - Anesthesia	\$181,703		\$181,703	\$4,272		\$185,975	1.094	\$203,490	\$5.06
Prof - Child EPSDT	\$17,653		\$17,653	\$415	(\$26)	\$18,042	1.094	\$19,741	\$0.49
Prof - Evaluation & Management	\$2,873,634		\$2,873,634	\$65,929	\$2,784	\$2,942,347	1.094	\$3,219,462	\$80.12
Prof - Maternity	\$2,567		\$2,567	\$60	(\$4)	\$2,624	1.094	\$2,871	\$0.07
Prof - Other	\$19,005,988		\$19,005,988	\$446,813	(\$28,500)	\$19,424,300	1.094	\$21,253,711	\$528.90
Prof - Psych	\$158,112		\$158,112	\$3,568	(\$237)	\$161,443	1.094	\$176,647	\$4.40
Prof - Specialist	\$656,159		\$656,159	\$15,425	(\$984)	\$670,601	1.094	\$733,759	\$18.26
Prof - Vision	\$116,683		\$116,683	\$1,970	(\$174)	\$118,479	1.094	\$129,637	\$3.23
Radiology	\$331,954		\$331,954	\$7,804		\$339,758	0.991	\$336,755	\$8.38
Transportation/Ambulance	\$364,509		\$364,509	\$6,676		\$371,185	0.991	\$367,905	\$9.16
Provider Incentive Payment Adjustment									\$1.53
<b>Total</b>	<b>\$67,935,173</b>		<b>\$67,935,173</b>	<b>\$1,591,171</b>	<b>(\$391,066)</b>	<b>\$69,135,278</b>		<b>\$73,372,886</b>	<b>\$1,827.41</b>
Admin Cost Adjustment									\$119.02
<b>Medallion 3.0 Capitation Rate</b>									<b>\$1,946.43</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

**Virginia Medicaid**  
**FY 2017 Capitation Rate Development**  
**ALTC / HAP Expansion - Health Plan Encounter Data**  
**Acute and Long term Care (ALTC)**

**Exhibit 4a**

ALTC Adult

Adult									
Statewide	Total Base Claims Dec 2014 - Nov 2015	Base Claims Redistribution and Adjustments Dec 2014 - Nov 2015	Total Redistributed Base Claims Dec 2014 - Nov 2015	Completion Factor Adjustments <sup>1</sup>	Policy and Program Adjustments <sup>2</sup>	Completed and Adjusted Claims Dec 2014 - Nov 2015	Trend Adjustment	Completed & Trended Claims FY17	PMPM FY17
<b>Service Type</b>									
DME/Supplies	\$7,572,353		\$7,572,353	\$127,351		\$7,699,704	0.991	\$7,631,660	\$132.23
FQHC / RHC	\$424,514		\$424,514	\$7,139.44		\$431,654	1.094	\$472,307	\$8.18
Home Health	\$2,112,467		\$2,112,467	\$35,527.30		\$2,147,994	1.039	\$2,230,924	\$38.65
IP - Maternity	\$73,801		\$73,801	\$1,241	(\$1,093)	\$73,949	1.042	\$77,060	\$1.34
IP - Newborn	\$0		\$0	\$0		\$0	1.042	\$0	\$0.00
IP - Other	\$44,329,133		\$44,329,133	\$745,524	(\$656,223)	\$44,418,433	1.042	\$46,286,712	\$801.96
IP - Psych	\$990,019		\$990,019	\$15,789	\$231,882	\$1,237,691	1.227	\$1,518,796	\$26.31
Lab	\$519,899		\$519,899	\$8,178		\$528,077	0.991	\$523,410	\$9.07
OP - Emergency Room & Related	\$4,883,488		\$4,883,488	\$82,130	\$56,662	\$5,022,281	1.039	\$5,216,181	\$90.38
OP - Other	\$12,830,445		\$12,830,445	\$215,781	\$145,969	\$13,192,195	1.039	\$13,701,521	\$237.39
Pharmacy	\$32,736,857		\$32,736,857	\$550,566	\$1,797,132	\$35,084,555	1.070	\$37,532,840	\$650.29
Prof - Anesthesia	\$267,592		\$267,592	\$4,500		\$272,092	1.094	\$297,718	\$5.16
Prof - Child EPSDT	\$58,051		\$58,051	\$976	(\$86)	\$58,941	1.094	\$64,492	\$1.12
Prof - Evaluation & Management	\$7,178,194		\$7,178,194	\$119,193	\$6,912	\$7,304,299	1.094	\$7,992,229	\$138.47
Prof - Maternity	\$83,409		\$83,409	\$1,403	(\$124)	\$84,687	1.094	\$92,663	\$1.61
Prof - Other	\$5,431,436		\$5,431,436	\$91,371	(\$8,091)	\$5,514,716	1.094	\$6,034,101	\$104.55
Prof - Psych	\$172,695		\$172,695	\$2,726	(\$257)	\$175,164	1.094	\$191,661	\$3.32
Prof - Specialist	\$2,199,412		\$2,199,412	\$36,990	(\$3,277)	\$2,233,125	1.094	\$2,443,444	\$42.33
Prof - Vision	\$241,644		\$241,644	\$3,438	(\$359)	\$244,723	1.094	\$267,772	\$4.64
Radiology	\$1,093,445		\$1,093,445	\$18,389		\$1,111,835	0.991	\$1,102,009	\$19.09
Transportation/Ambulance	\$2,399,514		\$2,399,514	\$38,248		\$2,437,762	0.991	\$2,416,219	\$41.86
Provider Incentive Payment Adjustment									\$1.98
<b>Total</b>	<b>\$125,598,368</b>		<b>\$125,598,368</b>	<b>\$2,106,463</b>	<b>\$1,569,046</b>	<b>\$129,273,878</b>		<b>\$136,093,721</b>	<b>\$2,359.93</b>
Admin Cost Adjustment									\$153.71
<b>Medallion 3.0 Capitation Rate</b>									<b>\$2,513.63</b>

<sup>1</sup> Completion Factor Adjustment is applied to non-capitated claims only

<sup>2</sup> Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.



**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 ALTC / HAP Expansion - Health Plan Encounter Data  
 Capitation Rates and Member Months**

**Exhibit 5**

	Statewide					
	Child			Adult		
	FY16 (Blended MCO and FFS Rate)	FY17	% Change	FY16 (Blended MCO and FFS Rate)	FY17	% Change
ALTC Capitation Rate	\$1,869.94	\$1,946.43	4.09%	\$2,444.29	\$2,513.63	2.84%
February 2016 Member Months		3,755			5,415	
	FY16 (MCO ALTC Rate)	FY17	% Change	FY16 (MCO ALTC Rate)	FY17	% Change
ALTC Capitation Rate	\$2,005.82	\$1,946.43	-2.96%	\$2,298.39	\$2,513.63	9.36%
February 2016 Member Months		3,755			5,415	

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 ALTC / HAP Expansion  
 Drug Reinsurance Adjustment**

**Exhibit 6**

		MCO ALTC Child	MCO ALTC Adult	Source
1a.	Dec 2014 - Nov 2015 Number of Individuals Exceeding the Threshold	13	12	Dec 2014 - Nov 2015 Health Plan Encounter
1b.	Dec 2014 - Nov 2015 Additional Individuals	3	2	20% Increase of People who exceed the threshold
1c.	Dec 2014 - Nov 2015 Average Cost Before Specialty Cost Trend	\$338,730	\$210,034	Dec 2014 - Nov 2015 Health Plan Encounter
1d.	Dec 2014 - Nov 2015 Average Cost After Specialty Cost Trend	\$422,628	\$262,056	Dec 2014 - Nov 2015 Health Plan Encounter
	Dec 2014 - Nov 2015 Total Dollars For Individuals Exceeding the Discounted Threshold	\$4,403,491	\$2,520,404	Dec 2014 - Nov 2015 Health Plan Encounter
	Dec 2014 - Nov 2015 Trended to FY17 Total Dollars For Individuals Exceeding the Threshold	\$5,494,169	\$3,144,670	Dec 2014 - Nov 2015 Health Plan Encounter
1e.	Dec 2014 - Nov 2015 Total Dollars Including Additional Individuals	\$6,593,002	\$3,773,604	= (1d.) * ((1a.)+ (1b.))
1f.	Dec 2014 - Nov 2015 Amount of Reinsurance	\$3,827,702	\$1,452,244	= ((1e.) - ((1a.)+(1b.)) * \$150,000) * 90%
2.	Annualized Historical Member Months	40,185	57,717	Health Plan Encounter
3.	<b>Estimated PMPM</b>	<b>\$95.25</b>	<b>\$25.16</b>	= (1f.) / (2.)

Note:

Discounted threshold is based upon FY17 reinsurance threshold of \$150,000 per person per year discounted by 15% unit cost trend per year

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 ALTC / HAP Expansion  
 Capitation Rates Net Drug Reinsurance Adjustment  
 Blended Capitation Rate for FFS HAP and MCO ALTC**

**Exhibit 7**

	Statewide	
	Child	Adult
MCO ALTC Capitation Rate	\$1,946.43	\$2,513.63
MCO ALTC Reinsurance Adjustment	\$95.25	\$25.16
<b>FY17 Final Rate Net Reinsurance Adjustment</b>	<b>\$1,851.18</b>	<b>\$2,488.47</b>
FY16 Final Blended MCO and FFS Capitation Rate (Before Reinsurance)	\$1,869.94	\$2,444.29
% Change	-1.0%	1.8%
FY16 Final MCO ALTC Capitation Rate (Before Reinsurance)	\$2,005.82	\$2,298.39
% Change	-7.7%	8.3%

**Virginia Medicaid  
 FY 2017 Capitation Rate Development  
 ALTC / HAP Expansion  
 February 2016 Member Month Distribution**

**Exhibit 8**

Aid Category	Region							Regional Total
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	Roanoke-Alleghany	Far Southwest	
<b>ALTC</b>								
Child	1,024	355	680	484	689	411	112	3,755
Adult	924	449	1,242	689	1,283	560	268	5,415
ALTC Total	1,948	804	1,922	1,173	1,972	971	380	9,170