

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

Medallion II
Data Book and Capitation Rates
Fiscal Year 2010

Submitted by:

PricewaterhouseCoopers LLP
Three Embarcadero Center
San Francisco, CA 94111

May 2009



May 29, 2009

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

Dear Bill:

Re: DRAFT FY 2010 Medallion II 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 II program. The methods used for calculating these costs are consistent with Centers for Medicare and Medicaid Services requirements that the capitation rates be actuarially sound and appropriate for the population covered by the program.

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

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

Very Truly Yours,

A handwritten signature in cursive script that reads "PricewaterhouseCoopers".

PricewaterhouseCoopers LLP

**Actuarial Certification of
Proposed FY 2010 Medallion II Capitation Rates
State 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 2010 capitation rates developed for the Medicaid managed care program known as the Medallion II program under the Virginia Department of Medical Assistance Services (DMAS) Medicaid program.

It is my opinion that all requirements of 42 CFR 438.6(c), with respect to the development of Medicaid managed care capitation rates, were satisfied in the development of the proposed capitation rates. I believe that the capitation rates are appropriate for the populations to be covered and the services to be furnished under the contract. The capitation rates are based 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 actuarially sound capitation rates.



Peter B. Davidson, M.A.A.A
Member, American Academy of Actuaries

May 29, 2009
Date

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2010 Medallion II Report

Item	Location	Comments
AA.1.0 Overview of Ratesetting Methodology	Entire Report	
AA.1.1 Actuarial Certification	Pages A and Ai-Aiii	Section Actuarial Certification
AA.1.2 Projection of Expenditures	NA	Performed by DMAS Budget Department
AA.1.3 Procurement, Prior Approval and Ratesetting	NA	State Set Rates
AA.1.5 Risk contracts	NA	Medallion II contract specifies that capitation is payment in full
AA.1.6 Limit on Payment to other providers	NA	DMAS limits payments
AA.1.7 Rate Modifications	NA	No modifications are anticipated
AA.2.0 Base Year Utilization and Cost Data	Pages 3-11; Exh 1a-1b	Encounter and Paid Claims Data
AA.2.1 Medicaid Eligibles under the Contract	Pages 4-5	Data submitted by participating HMOs matched to DMAS elig file
AA.2.2 Dual Eligibles	NA	Duals not eligible
AA.2.3 Spenddown	NA	Individuals on spend down are not eligible
AA.2.4 State Plan Services only	NA	Data submitted by participating HMOs is limited to State plan services
AA.2.5 Services that may be covered out of contract savings	NA	Data submitted by participating HMOs is limited to State plan services
AA.3.0 Adjustments to Base Year Data	Section IV, Pages 12-20; Exh 2a-2l, 3a-3c, Exh 6	
AA.3.1 Benefit Differences	NA	

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2010 Medallion II Report

Item	Location	Comments
AA.3.2 Administrative Cost Allowance Calculations	Pages 17-18, Exh 2I	
AA.3.3 Special Populations' Adjustments	NA	No material change in population
AA.3.4 Eligibility Adjustments	NA	Eligibility adjustments are not needed due to use of encounter data
AA.3.5 DSH Payments	NA	DMAS pays DSH directly to facilities
AA.3.6 Third Party Liability	NA	Claims net of TPL, MCOs will collect TPL
AA.3.7 Co-payments, Coinsurance and Deductibles in Capitated Rates	NA	None required or collected
AA.3.8 Graduate Medical Education	NA	GME payments are made directly to providers
AA.3.9 FQHC and RHC Reimbursement	NA	DMAS pays cost settlement and prospective payment amounts directly to facilities
AA.3.10 Medical Cost / Trend Inflation	Pages 19-20, Exh 3a-3c	Trend Adjustment
AA.3.11 Utilization Adjustments	NA	Changes in utilization over time are accounted for in medical trend
AA.3.12 Utilization and Cost Assumptions	NA	Mandatory Program
AA.3.13 Post-Eligibility Treatment of Income	NA	Institutionalized individuals are excluded
AA.3.14 Incomplete Data Adjustment	Pages 19-20, Exh 3a-3c	Part of Trend Adjustment
AA.4.0 Establish Rate Category Groupings	Page 2	
AA.4.1 Age	Page 2	Rates vary by age
AA.4.2 Gender	Page 2	Rates vary by gender where material

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2010 Medallion II Report

Item	Location	Comments
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 10	Use two years of base data
AA 5.1 Special Population and Assessment of the Data for Distortions	NA	
AA.5.2 Cost-neutral data smoothing adjustment	Page 10	Use two years of base data
AA.5.3 Risk Adjustment	Pages 21-23, Exh 6, 7a-7f, and Appendix	CDPS
AA.6.0 Stop Loss, Reinsurance or Risk Sharing arrangements	NA	DMAS requires MCOs to obtain reinsurance
AA.6.1 Commercial Reinsurance	NA	Responsibility of MCO
AA.6.2 Simple stop loss program	NA	DMAS does not provide
AA.6.3 Risk corridor program	NA	DMAS does not provide
AA.7.0 Incentive Arrangements	NA	No incentives are provided by DMAS to MCOs

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EXHIBIT 2b	Pediatric Evaluation and Management Professional Fee Increase Adjustment
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EXHIBIT 7d	Optima Medallion II Capitation Rates with CDPS Adjustment
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EXHIBIT 7f	Summary of Medallion II Regional Average Capitation Rates with CDPS Adjustment
EXHIBIT 8	Medallion II Regions by FIPS Code

Virginia Medicaid Medallion II
Data Book and Proposed Capitation Rates
Fiscal Year 2010
Prepared by PricewaterhouseCoopers LLP
May 2009

PricewaterhouseCoopers LLP (PwC) has calculated proposed capitation rates for the Virginia Medicaid Medallion II program for State Fiscal Year 2010. Regulations issued by the Centers for Medicare and Medicaid Services (CMS) govern the development of capitation payments for Medicaid managed care programs. These regulations require that rates be “actuarially sound”. While there are no definitive criteria for determining actuarial soundness for Medicaid managed care programs, CMS has issued a checklist that provides guidance. We have followed that checklist in developing the proposed rates shown here and have included a checklist review as an appendix to the actuarial certification. The final rates will be established through signed contracts with health plans, which will ensure that the plans concur that the rates paid will allow for contracting with sufficient numbers of providers to ensure appropriate access to health care and that they expect to remain financially sound throughout the contract period.

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

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

- Differences in expected utilization rates between fee-for-service and managed care programs should be accounted for;
- Appropriate levels of health plan administrative costs should be included in the rates;
- Programmatic changes in the Medicaid program between the data and contract period should be reflected in the rates; and
- A range of appropriate rates could emerge from the rate-setting process and an upper and lower bound may be developed.

These rates are developed to be consistent with the concepts described above. The development of the rates is shown in the attached spreadsheets, with base capitation rates shown in Exhibit 5a and the associated member months as of February 2009 in Exhibit 5c.

Capitation rates for Medallion II will vary based on the following criteria:

- **Eligibility Group.** Members eligible for participation in these programs include: Temporary Assistance to Needy Families (TANF) and related groups and Aged, Blind, and Disabled (ABAD).
- **Demographics.** Capitation rates will be paid separately for the following age groups: Under 1, 1-5, 6-14, 15-20 Female, 15-20 Male, 21-44 Female, 21-44 Male, and 45 and Over.
- **Region.** The state is divided into five rate regions: Northern Virginia, Other Metropolitan Statistical Area (MSA), Richmond and Charlottesville, Rural, and Tidewater. The geographic regions were modified in FY 2006 to conform to CMS' adoption of new regional definitions under the Medicare inpatient prospective payment system.

I. Background

The Virginia Medallion II program provides health care coverage to Medicaid recipients through both a mandatory and voluntary enrollment mechanism. In most areas where Medallion II operates, all eligible Medicaid recipients must choose a managed care plan. In areas where only one plan is available, recipients have the option of enrolling in the Managed Care Organization (MCO) program or the Primary Care Case Management (PCCM) program. We have structured the rate development to reflect common differences, due to program design, in the cost of providing care by region. In that way, any variation in the mix of enrollment by rate cell is automatically reflected in the payment amounts to the health plans.

Managed care plans are responsible for nearly the full range of health services, with certain specific exceptions. Managed care plans are not responsible for the ingredient cost

of immunizations, for school-based health services, for some behavioral health services, and dental services.

Payments to managed care plans for Medallion II are subject to federal rules. As a Medicaid program, the state must comply with federal regulations set forth by CMS regarding payment levels. Specifically, payments to managed care plans must be actuarially sound. To develop proposed capitation rates, we analyzed the health plan encounter data from the established plans in the Medallion II program. Individual health plan data were separately reviewed by rate category and region for each health plan 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 fee-for-service (FFS) program, and payment rates were updated to reflect the contract period covered by these rates. Under the regulations, health plan administrative costs may be explicitly added to the payment amounts, and we have done so in this analysis. Finally, rates are adjusted for differences in health status among health plans within each geographic region.

Rate Setting Data Sources

The historical data used to develop base rates includes health plan incurred claims and subcapitation payments for FY 2007 and FY 2008 (July 1, 2006 to June 30, 2008), with run-out through October 31, 2008. This year's rate setting incorporates a full two years of base data for AmeriGroup. Data for Anthem health plans does not include any pre-merger Unicare data since the UniCare merger occurred in January 2006. There have been no changes in the claims assignment to the service categories (the "bucket book") that has been used for the past four years, or to the definition of rate setting regions that was modified for FY 2006.

Managed Care Expansions During the Base Data Period

There were four managed care expansions in the Medallion II program during the base data period. MCO data for these expansions is incorporated as the expansions were implemented. No FFS Medicaid data is used in the development of the FY 2010 Medallion II base rates.

The four expansions were:

1. Culpeper - July 1, 2006 and Danville - September 1, 2006
2. Medicaid Only "80% FPL" ABAD - July 1, 2006
3. Phase I Virginia Acute and Long Term Care Integration - September 2007. Medallion II enrollees who became eligible for home and community based care (HCBC) waiver services remain in Medallion II for their covered acute care

services and receive their long term care services through the Elderly and Disabled Waiver program.

4. Lynchburg and three surrounding counties - October 1, 2007

Overview of Health Plan Encounter Data Processing

We have worked with health plan representatives to review and analyze the health plan encounter data.

A change was made to the calculation of member months and to the process of matching health plan eligibility segments to the claims files. Previously, DMAS eligibility files were used to identify health plan enrollees and their eligibility spans. These were matched to health plan encounter claims using a date sensitive match to identify the claims to include in the base data summarization. This matching process resulted in dropped claims representing between 0.5% and 1.5% of the dollar value of the health plan claims submitted for the Medallion II and FAMIS programs. Upon investigation, many of the dropped claims were incurred near the very end of the month. We believe these dropped claims result from using a DMAS eligibility file dated after the data period; such a file reflects updated eligibility information, including retroactive additions and deletions that were not known to DMAS or the health plans at the time the claim was paid.

The member month count and claim matching process was revised to substitute the DMAS capitation payment file for 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 Medallion II eligible for the full month for which a capitation payment is made. A match to the health plan claims using the capitation payment eligibility span reduced the dropped claims to approximately 0.3%. Because both member months and raw claims increase under the revised processing, the unadjusted PMPM using the capitation payment file is only 0.1% higher than the PMPM using the eligibility file.

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

¹ Although the Medicare-Medicaid population and those with significant other insurance are not supposed to be enrolled in the Medallion II program, the other coverage is not always known at the time of enrollment. Plans are responsible for claims payment as long as the person remains enrolled in a Medallion II plan.

Newborn processing incorporates the slight revision made in last year's rate setting. As in the past, we used the newborn crosswalk provided by the plans and searched the eligibility file for the mother's member ID and newborn date of birth. This process did not allow us to categorize all newborn claims submitted by the plan, primarily due to missing regions. To improve the process, the non-match newborns and their claims were allocated based on each plan's matched newborn distribution by aid code and region.

Subcapitated services were added based on PMPM values or the claims information provided by the plans. The eligibility member months are those calculated by PwC from the DMAS capitation payment file.

For plans that capitate mental health services, mental health dollars were reallocated between ABAD and TANF and mental health hospital inpatient and mental health professional, based upon the distribution of mental health claims submitted by the health plans that submitted complete FFS mental health claims data. This is the same allocation method that was used in the FY 2008 and FY 2009 Medallion II rate setting.

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

II. Data Book

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

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

For this analysis we rely on health plan encounter data for the Medicaid Medallion II population for dates of service during the period July 1, 2006 to June 30, 2008.

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

- Observed trends in utilization and cost per unit of service;
- 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;
- Health plan administrative costs; and
- Medical claims data sufficient to calculate diagnostic risk assessment factors.

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

PwC summarized the health plan encounter data by eligibility group, 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.

There have been no changes to the service category definitions since the Medallion II rate development for FY 2006. These service categories are primarily defined by bill type, CPT, and revenue code fields in the claims records.

Because of the small number of recipients in the ABAD Age Under 1 rate cell, data is combined into a single statewide rate. The child ABAD rate cells for ages 6-20 is combined within a region.

Hospital payment regions were changed by CMS and were adopted by DMAS for FY 2006. The major impact was to move members from primarily the Rural region and, to a lesser extent, Northern Virginia into Other MSA and Richmond/Charlottesville. Tidewater was essentially unaffected. The details of these changes were documented in a memo dated April 6, 2005. There have been no changes to the geographic regions in the past four years.

In the summarization process, unit counts were made 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, and represent the number of inpatient admits that were paid by the program.

Table 1		
Service Unit Definitions		
Service Category	Unit Count	Multiple Units
DME/Supplies	Claims	
FQHC/RHC	Units	Yes
Home Health Services	Claims	
Inpatient – Maternity	Admits	
Inpatient – Newborn	Admits	
Inpatient – Other	Admits	
Inpatient – Psych	Days	
Lab	Record Counts	
Outpatient – Emergency Room	Claims	
Outpatient – Other	Claims	
Pharmacy	Prescriptions	
Professional – Anesthesia	Claims	
Professional – Child EPSDT	Units	Yes
Professional – Evaluation & Management	Units	Yes
Professional – Maternity	Units	Yes
Professional – Other	Units	Yes
Professional – Psych	Units	Yes
Professional – Specialist	Units	Yes
Professional – Vision	Units	Yes
Radiology	Record Counts	Yes
Transportation	Claims	

The claims and eligibility information used in this report includes data only for Medicaid recipients² who are eligible for the managed care program based on their eligibility category and service use during the data period.

² Payment rates for the FAMIS program are described in a separate report.

Review of the Health Plan Encounter Data

The base capitation rates for Medallion II for FY 2010 are developed using health plan encounter data. Review of the submitted 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 fee-for-service 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 edit tested for logical conditions for the historical data period. The logical condition tests and the processing decisions were:

1. Claims that were duplicates, pended or rejected during claims processing were removed.
2. Claims with dates of service outside the FY 2007 - FY 2008 period were removed.
3. 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 fee-for-service 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:

4. Claims matched to member eligibility with missing or invalid demographic or geographic information were removed.
5. Claims for members enrolled in the FAMIS program were removed.
6. Claims matched to member managed care eligibility periods outside the FY 2007 - FY 2008 period were removed.

7. Claims for members age 1 and older that were not eligible for Medicaid and/or were not enrolled in a Medallion II health plan on the date of service were removed.
8. 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 code, age-sex, and geographic region. This summarization was done only for those services that were paid by the health plans on a fee-for-service 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).

Individual reports were sent to the health plans for review and approval. The reports included the health plan encounter data, with all subcontractor adjustments, by eligibility category, rate cell, and region.

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 fee-for-service 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 pricing 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. All health plans submitted complete claims data for outpatient pharmacy services. Not all of the health plans provided encounter data for laboratory, vision, and mental health, the service categories that were most often capitated. Therefore, while dollars for the capitated and subcontractor services are incorporated into the historical data, utilization is undercounted and measures such as utilization rates and cost per unit for these services are unreliable.

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. In past rate settings, FFS claims were applied to the appropriate inpatient or professional psych service line, but all capitated dollars were included in the Prof - Psych service line with dollars allocated based on the member month distribution between aid categories.

For the health plans that capitate psych services (CareNet and Optima), the capitated mental health data is provided as either total dollars or as an aggregate PMPM with limited detail by service type (inpatient vs. professional) or aid category (ABAD vs. TANF). Approximately 45% of mental health dollars are paid by the plans under subcapitation arrangements.

We analyzed mental health claims level detail provided by three plans that do not capitate, Anthem, Virginia Premier, and AmeriGroup, by service type and aid category to determine a distribution to the capitated mental health service dollars. This is the same allocation method that was developed and adopted for the FY 2008 and FY 2009 Medallion II rate setting.

Analysis of the MCO mental health encounter data showed substantial differences in the total PMPM and the distribution of inpatient and outpatient services between ABAD and TANF. Overall, the historical encounter paid claims showed the ABAD mental health PMPM was approximately ten times the TANF mental health PMPM, or \$36.12 PMPM compared to \$3.63 PMPM. For ABAD, the distribution of dollars was 78.6% inpatient and 21.4% professional while the TANF distribution was 49.8% inpatient and 50.2% professional.

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

Regional Historical Costs

Capitation rates are developed based on the experience of each region, taking into account changes in regional definitions in recent years. In 2006, regional definitions were changed to align with a reclassification of hospitals by CMS for the 2005 Prospective Payment System. This resulted in a reassignment of some of the Federal Information Processing Standards (FIPS) city and county codes into metropolitan and non-metropolitan areas. The region assignments have remained the same for FY 2010.

Data Smoothing for ABAD Rate Cells

The historical data for some of the child rate cells for the ABAD population contains small enrollment and exhibited inconsistent relative cost patterns across regions. 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. The separate rate cells are retained for this report and for administrative purposes but the historical data and all adjustments use the combined data and result in the same base capitation rate for these three ABAD categories within each region. 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. Then Incurred But Not Reported (IBNR) factors, program and policy adjustments, and trend are applied, and the same base rate is calculated for all regions for this ABAD rate cell.

Historical Health Plan Encounter Data

The resulting health plan historical claims and eligibility data were tabulated by service category and are shown in Exhibits 1a and 1b. These exhibits 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 future calculations described here. These exhibits show, for informational purposes:

- Member months for fiscal years 2007 and 2008;
- Total dollar value of claims and capitated services for fiscal years 2007 and 2008 (health plan encounter data only); and
- Costs per member per month (PMPM) for fiscal years 2007 and 2008.

III. Capitation Rate Calculations

The capitation rates for fiscal year 2010 for each of the five geographic regions, Northern Virginia, Other MSA, Richmond/Charlottesville, Rural, and Tidewater, 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 section. The adjustments are applied to the historical data and the resulting capitation rates are calculated in Exhibits of Adjusted and Trended Claims (Exhibits 4a and 4b).

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

1. The combined FY 2007 - FY 2008 historical data for each rate cell and service category are brought forward to Exhibits 4a and 4b from the corresponding rate cell in Exhibits 1a and 1b. This information serves as the starting point for the capitation rate calculation.
2. A number of changes in covered services and payment levels have been mandated by the Virginia Legislature. Each of these adjustments, as well as adjustments for other services not included in the source data, is

described in detail. Adjustments for the base data are presented in Exhibits 2a through 2l.

3. The claims data is adjusted to reflect the expected value of any Incurred But Not Reported (IBNR) claims and to update the data to the FY 2010 contract period. These adjustments are described below and are shown in Exhibits 3a to 3c. The resulting claims are shown in Exhibits 4a and 4b 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.
6. An adjustment is made to reflect average health plan administrative costs and a contribution to reserves. The derivation of this value is included in the adjustments described in Section IV and presented in Exhibit 2l.
7. An adjustment is made to reflect a Virginia State Legislature action that limits the annual increase in the Medallion II program to 7%, less the value of the legislated hospital inpatient fee decrease.
8. An adjustment is made 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.

IV. Base Rate Legislative and Program Adjustments

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 rebates and administrative costs reported by the health plans.

We continue to observe 2%-4% annual increases in the proportion of generic prescriptions. In FY 2008, the proportion of generic scripts in the TANF population was nearly 74% (71% TANF Child and 78% TANF Adult) and it was 69% in the ABAD population. The proportion of generic utilization in the Virginia Medicaid managed care program is similar to that observed as best practice in other state Medicaid managed care programs; therefore, no adjustment is made for further increases in the generic to brand name drug mix for FY 2010.

Separate pharmacy adjustment factors were developed for the TANF and the ABAD eligibility categories, as shown in Exhibit 2a. The factors are a reduction of -3.3% for TANF and -3.4% for ABAD.

Evaluation and Management Professional Fee Increase Adjustment

This adjustment passes through the FFS fee increase of 10% for the pediatric population effective July 1, 2007. Because the fee increase is reflected in the FY 2008 base data, the adjustment is applied to half of the base period. Emergency Department services are excluded from these increases.

This adjustment is shown in Exhibit 2b and is applied to Professional-Evaluation & Management and FQHC/RHC services lines in Exhibit 4a and 4b under the column labeled “Other Adjustments”.

Professional Fee Increase Adjustment (Excluding Pediatric and OB-GYN)

This adjustment passes through the FFS fee increase of 5% for all remaining professional services effective July 1, 2007. This increase excludes pediatric E&M and the OB-GYN services that were subject to increases in the fee schedule that are incorporated as previously described adjustments.

This adjustment is shown in Exhibit 2c and is applied to half of the base period to Professional-E&M, Professional-Specialist and All Other Professional service lines in Exhibit 4a and 4b under the column labeled “Other Adjustments”.

Exempt Infant Formula

This adjustment removes the dollar 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 2d and is applied to the full base period to Professional-E&M, Professional-Specialist and All Other Professional service lines in Exhibit 4a and 4b under the column labeled “Other Adjustments”.

Other Immunizations

The Center for Disease Control and Prevention (CDC) issued updated and new recommendations for pediatric and adolescent immunizations that were incorporated into the FY 2008 and FY 2009 rates setting. The same adjustment is applied to the FY 2010 rate setting but only affects the first six months of the base data.

Recommendations that went into effect after the historical data period used for the rate setting include:

1. The new rotavirus vaccine is recommended in a 3-dose schedule at ages 2, 4, and 6 months.
2. The influenza vaccine is now recommended for all children aged 6-59 months. Previously the recommendation extended only to children aged 6-59 months with certain risk factors.
3. Varicella vaccine recommendations were updated. The first dose should be administered between ages 12-15 months, and a newly recommended second dose should now be administered between ages 4-6 years.
4. Meningococcal vaccine is recommended for all children at the 11-12 year old visit, as well as for unvaccinated adolescents at high school entry (15 years of age).

The adjustment assumes that: 1) The new recommendations can be accommodated within the current pediatric and adolescent vaccination schedules and the cost of serum is covered by the Vaccines for Children program. Therefore, new costs are limited to the cost of administration, currently \$11 per dose, 2) Health plans will achieve compliance rates comparable to those reported to DMAS on the EQRO reports. Reported rates are 68% for children 2 years old and 34.5% for adolescents. The 68% compliance rate was assumed applicable for children up to 6 years old, but has been adjusted on the assumption that health plans began efforts to meet the new recommendations as of January 1, 2007, and 3) The distribution of ages within rate cells is equal.

Based on these assumptions, we estimate that the value of a new immunization schedule adjustment ranges from 0.2% to 0.3% of the Professional-E&M service line, depending on rate cell. This adjustment is shown in Exhibit 2e and is applied to the Professional-E&M service line in Exhibit 4a and 4b under the column labeled "Other Adjustments".

HPV Vaccine Adjustment

The Centers for Disease Control and Prevention (CDC) recommends that females receive the human papillomavirus (HPV) vaccine beginning at age nine (9). The HPV vaccine has been demonstrated to reduce the risk of the most common causes of cervical cancer. The DMAS Medicaid program began to cover the HPV vaccine in December 2006. For girls aged 9 to 19, the cost of the vaccine serum is covered under the Vaccines for Children program, while the health plans and by DMAS are responsible for the cost of vaccine administration. For women aged 20 to 26, DMAS covers the cost of both the serum and the vaccine administration if a prescription is written. DMAS policy provides coverage for women over 19 when the vaccine is considered a medical necessity. The vaccine is contraindicated for pregnant women. The vaccine is mandatory for girls at least 11 years olds entering school beginning October 1, 2008.

Actual utilization experience of the HPV vaccine has been lower than that estimated in prior rate setting. This appears to be due to a combination of lower than expected overall acceptance and the fact that many females did not complete the series of three vaccinations. In the FY 2009 rate setting, the target penetration rate was assumed to be 12.5% for females aged 19 years and under, at a cost of \$11 for each of the three doses in the HPV series. Encounter data collected during the period from December 2006 through December 2007 indicate that fewer than 3% of reported HPV vaccinations occurred among females over the age of 19. Therefore, no adjustment appears warranted for women over the age of 19. These assumptions are applied to the female 6-20 population in the relevant aid category and age cells and are estimated to affect 7.5% of the total rate cell members.

This adjustment is shown in Exhibit 2f and is applied to the Professional-E&M service line in Exhibit 4a and 4b under the column labeled "Other Adjustments".

Substance Abuse Benefit Adjustment

Financial responsibility for selected substance abuse services for children and adults was added to the health plan responsibility in FY 2008. These services include one assessment and evaluation per year and up to 52 outpatient services per year (the first 26 can be provided without prior authorization; any further services within the year require prior authorization). Up to 26 outpatient services per year are covered after the first year with prior authorization. Emergency services, intensive outpatient services, day treatment, and case management services are provided through the Medicaid program, but carved out from MCO responsibility.

First year utilization appears to be significantly lower than the early DMAS estimates. The total cost of expanded substance abuse services is now estimated at no more than \$500,000 per year. This adjustment uses the same assumptions as those used in the FY 2009 rate setting. The distribution of substance abuse services is assumed to be the same as the distribution of mental health services in the PCCM population. The adjustment assumes that 50% of the total dollars will go to MCO members. Seventy five percent (of the 50% for MCO members) will be for carved out substance abuse services with the remaining 25% (of the MCO 50%) included in the capitation rates.

This adjustment is shown in Exhibit 2g and is applied to the Professional-Psych service line in Exhibit 4a and 4b under the column labeled "Other Adjustments".

Hospital Inpatient Adjustments

The hospital inpatient adjustment factor reflects legislative reductions for FY 2009 and FY 2010. The adjustment factor is calculated relative to the 78% operating cost base that was in place for FY 2007 and FY 2008. For FY 2009 and FY 2010, the 78% was reduced by 2.683%. The adjustment is developed using the 78% of cost and applied to an operating component estimated at 90%. There is also a unit cost freeze legislated for FY 2010.

Based on projected inpatient cost trend for Virginia, this rate freeze reduces the operating cost component by an additional 4.03%.³ An additional FY 2010 reduction is a capital reimbursement rate reduction from 80% to 75% of cost, which is applied to the capital component estimated at 10%. Three hospitals, University of Virginia Medical Center, Medical College of Virginia, and Children's Hospital of the Kings Daughters, are exempted from the capital payment reduction.

There is an inpatient psychiatric services adjustment that is similar to the Hospital Inpatient Adjustment. This applies to psychiatric units of general acute care hospitals only; payments to freestanding psychiatric hospitals are removed from the calculation. The inpatient psychiatric adjustment factor is developed using an operating increase from 78% in FY 2007 to an 84% operating cost factor in FY 2008. For FY 2009 and FY 2010, the 84% is reduced by 2.683%. The unit cost freeze legislated for FY 2010 reduces the operating cost component by an additional 4.03%.⁴ Inpatient psychiatric services are also subject to the FY 2010 capital reimbursement rate reduction from 80% to 75% of cost, and this is applied to the capital component which is estimated at 10% of total costs. The same three hospitals are also exempt from the inpatient psych capital fee reduction. The inpatient psychiatric factor is applied to mental health claims that are submitted with encounter detail and the allocated mental health subcapitation dollars.

These adjustment factors are shown in Exhibit 2h and applied to all hospital inpatient service categories in Exhibits 4a and 4b under the column labeled "Other Adjustments".

Freestanding Inpatient Psychiatric Hospital Adjustment

The legislature also mandated similar reductions in payments to freestanding psychiatric hospitals. The impact on the Medallion II program was estimated to apply to approximately 21% of the total Psychiatric inpatient services. This is allocated across all age groups.

These adjustment factors are shown in Exhibit 2i and applied to inpatient psychiatric service categories in Exhibits 4a and 4b under the column labeled "Other Adjustments".

Rural Wage Index Adjustment

This adjustment eliminates the rural wage index hospital factor effective July 1, 2007. The estimated increase of \$536,000 for the eligible hospitals used by the contracting plans was provided by DMAS. The increase is applied to Inpatient - Other for the Rural and Other MSA regions. This is the same adjustment as used in the FY 2009 rate setting.

This adjustment factor is shown in Exhibit 2j and applied to hospital inpatient service categories in Exhibits 4a and 4b under the column labeled "Other Adjustments".

³ This is applied as a policy adjustment in Exhibit 2h rather than as a reduction to the cost per unit trend in Exhibits 3a to 3c.

⁴ Ibid.

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 and ensuring access. Depending on the plan, this is done through an increase in provider fee schedules, payment of case management fees, and/or provider incentive programs. To the extent that it has been used to increase professional fee schedules, the amount is already included in the claims and encounter data. Some plans reported the case management and incentive amounts as capitation payments. To avoid double counting, we did not include the value of the capitation amounts that plans reported as representing incentive payments in the base data. Their value has been incorporated into the Provider Incentive Payment Adjustment.

The estimated weighted average value of the case management and provider incentive programs paid outside of the encounter data is \$3.20 PMPM, or 1.2% of the weighted average of the medical cost component of the base rates. The amount is slightly less in dollar value and percent than the provider incentive factor in the FY 2009 health plan base rates. This percentage is shown in Exhibit 2k 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 and 4b.

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 2008, 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 administrative adjustment uses figures from these reports, adjusted to remove self-reported payment of state taxes and other disallowed costs as identified by DMAS in previous health plan audits. It is weighted by the calendar year MM distribution.

DMAS asked the health plans to provide information on non-state plan related administrative costs. The non-state plan costs reported were so small that no further adjustment was applied. A 0.75% contribution to reserves is added to the adjusted health plan reported administrative factor.

For FY 2010, there is a change in how the administrative allowance is trended and applied. In past rate setting, the administrative component was calculated as a percentage of the adjusted and trended medical cost data in Exhibits 4a and 4b. This method trends the administrative adjustment factor with the weighted average medical trend and results in an administrative dollar PMPM that varies for each rate cell.

The revised methodology develops an administrative dollar PMPM that trends the administrative adjustment by national rates of change reported by the Bureau of Labor Statistics. We use the same source of data to develop the historical administrative PMPM and subtract the self-reported disallowed costs that were valued at 0.09% of the administrative expense. The administrative dollar PMPM is apportioned across the four eligibility groups enrolled in the Virginia Medicaid managed care programs - ABAD, TANF, FAMIS and FAMIS MOMS using the ratio of the adjusted and trended base PMPM for each aid group. The resulting CY 2008 ABAD administrative PMPM is \$56.60 and the TANF administrative PMPM is \$13.20.

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 2010 contract period. The salary component is trended using the Bureau of Labor Statistics 2008 calendar year employment cost trend for total compensation, private industry, management, business and financial services. The non-salary administrative component and the Claims Adjustment Expense components are trended using the 2008 calendar year Consumer Price Index for All Urban Consumers (CPI-U).

The trended value is then increased by a 0.75% contribution to reserves. The allowance for a contribution to reserve has been increased from 0.5% in last year's rate setting to 0.75% for FY 2010. This change offsets a reduction in health plan invested assets due to the change in the capitation payment date from the beginning of the month to the end of the month.

The trended value of the administrative factor is \$58.59 for ABAD and \$13.71 for TANF. This value is converted to an administrative allowance percentage of the base capitation rate, a value of 6.54%. The contribution to reserves is added to determine the final administrative factor of 7.29%.

The administrative factor adjustment is shown in Exhibit 2l. This administrative cost factor is applied to the total adjusted and trended claims amount for each 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 and 4b.

State Budget Cap Adjustment

During the FY 2009 legislative session, the State Legislature mandated a 7% annual rate increase limit on the Medallion II program as well as the reductions in payments to inpatient acute care hospitals and to inpatient freestanding psychiatric hospitals and described in Exhibits 2h and 2i. The legislative directive mandates that the 7% budget cap must be further reduced by the amount of the FY 2010 inpatient payment decreases. Rather than freeze the unit cost component of the contract period trend, the budget cap is presented as an additional adjustment. The adjustment factor was calculated by developing an estimate of the Virginia hospital unit cost reductions and then converting

the estimate to a factor reduction.⁵ We estimate the annual dollar value of the inpatient reductions to be a weighted average of \$3.13 PMPM, or 1.17%, across the ABAD and TANF aid categories.

This adjustment factor is applied after the administrative cost adjustment as the final step of the per capita cost calculations at the bottom of each rate cell worksheet in Exhibits 4a and 4b.

V. Trend and IBNR Adjustments

The data for the trend calculations reflect experience in the Virginia Medallion II program during FY 2006 through FY 2008. These data must be adjusted to reflect the contract period of FY 2010 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 Incurred But Not Reported (IBNR) and can be measured through actuarial models.

Trend and IBNR adjustment factors were developed using monthly historical health plan expenditures for FY 2006 to FY 2008. The historical data were evaluated using a PricewaterhouseCoopers model that calculates IBNR amounts using a variety of actuarially accepted methods, and calculates trend using a least-squares regression methodology. Trend and IBNR factors were developed separately for TANF Under 21, TANF 21 and Over, and ABAD and for the following service categories: Hospital Inpatient, Hospital Outpatient, Practitioner, Prescription Drug, and Other (Transportation, Lab/X-Ray).

Trend rates must be applied to move the historical data from the midpoint of the data period (July 1, 2007) to the midpoint of the contract period (January 1, 2010), or two and one-half years (30 months). Data period trend rates for these groups are developed from a regression analysis on the 24 months of historical Virginia health plan data used for these capitation rates. Contract period trend rates are adjusted to reflect our best estimate of trend in the future and are based primarily on the three year historical trends plus an additional four months, where appropriate. Where we considered the historical trend experience to be an unreliable indicator of future trend, we examined the additional data provided by the plans, estimates of cost increase provided by DMAS, and other sources, as well as the overall rate of change, to derive recommended trend assumptions.

Data period trend was evaluated using the base year data, FY 2007 and FY 2008. Total data period PMPM trend is derived from separate consideration of utilization and cost per

⁵ The inpatient unit cost projection is provided by Global Insight under contract to DMAS.

unit trends. Contract period trend was developed by reviewing the past three years (FY 2006 - FY 2008) of paid claims data plus an additional four months. Both data and contract period trends were evaluated including adjustments for increases in the Medicaid FFS fee schedule during the base years to the extent they were significant.

Table I provides a summary of the adjustments applied to the data used for contract period trend before the regression analysis was performed to calculate trend rates. The professional adjustment reflects the impact of four fee increases, ER Professional, Pediatric E&M, and Adult E&M. The Acute and Psych Hospital Inpatient factors reflect changes in the DMAS operating cost base during the historical period. There are no underlying adjustments made before evaluation of Hospital Outpatient or Pharmacy.

Table I				
Summary of Adjustments to Trend Models				
Service	FY	ABAD	TANF	
			CHILD	ADULT
Professional	FY06	1.0698	1.1280	1.0543
	FY07	1.0518	1.0733	1.0313
	FY08	1.000	1.0000	1.0000
Hosp Inpt	FY06	0.9989	0.9989	0.9989
	FY07	0.9758	0.9758	0.9758
	FY08	1.0000	1.0000	1.0000
Psych Inpt	FY06	1.0681	1.0681	1.0681
	FY07	1.0432	1.0432	1.0432
	FY08	1.0000	1.0000	1.0000

Incurred But Not Reported (IBNR) completion factors are applied to the total claims in the first column of Exhibits 4a and 4b, and the dollar value of the IBNR completion factors are shown in the second column. We have also added information on the cumulative impact of the policy and program adjustments in Exhibits 2a -2l. This is for information purposes and should be evaluated in conjunction with the IBNR and applied trend. Utilization and cost trend are presented separately for the base period and as a combined trend for the contract period. For the TANF Child, the data period trend is about 0.7% lower than the contract period trend. For TANF Adult and ABAD, the data period and contract period trend are more similar. Since the data used in this data period analysis has run-out through October 2008, or four months past the end of the data reporting period, the resulting IBNR factors are generally small. IBNR factors for Hospital Inpatient and Outpatient, Practitioner, Prescription Drug, and Other services are all set to approximately 1.0% or less, except for inpatient hospital for TANF Child Under 21 which is 1.5%.

The Total Trend rates are calculated using compound interest calculations as a combination of the data period and contract period trends multiplied by (1 + IBNR factor).

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

VI. Base Capitation Rates

The health plan base capitation rates for FY 2010, as presented in the adjusted and trended claims in Exhibits 4a and 4b, are shown in Exhibit 5a. Total average costs have been calculated using February 2009 health plan eligible months as weights, which are shown in Exhibit 5c.

Comparison of FY 2009 and FY 2010 Health Plan Base Capitation Rates

Weighted average costs have been calculated for FY 2009 and FY 2010 health plan capitation rates using managed care enrollee member months for February 2009 as weights. The year-to-year comparisons using current FY 2009 base rates are shown in Exhibit 5b.

The average base rate for the TANF groups is 5.74% higher than current FY 2009 rates, while the average base rate for the ABAD groups is 5.99% higher than current rates. This comparison shows a year-to-year combined weighted average change of 5.83%, consistent with the legislative mandate to cap FY 2010 rates at 7% less the value of the legislated hospital rate reductions.

VII. Health Plan Risk Adjusted Capitation Rates

The Virginia Medallion II 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 for a given health plan must be offset by a lower risk score and a reduction in payment to other health plan(s) within the region.

Beginning in FY 2009 all diagnosis codes included on the health plan encounter data are used to develop the person level risk scores. In prior years, the CDPS calculation had been limited to the first three unique diagnosis codes on a record. Also, the most recent CDPS version is applied. The FY 2009 rate setting used CDPS Version 4.5 with the updated grouper 4.5.

The FY 2010 rate setting applies CDPS Version 5.0. This grouper adds additional diagnosis categories to the CDPS assessment. For the CDPS Version 5.0, we tested the Med/Surg, Pharmacy Only and Med/Surg plus Pharmacy models. We also re-calibrated the CDPS weights using Virginia health plan data and compared the results to those obtained using the national weights. Based upon review of the alternative model results, we conclude that the CDPS risk assessment scores derived from the Med/Surg plus Pharmacy model using Virginia specific weights provides the best fit to the Medallion II health plan encounter data. More detail on the CDPS testing and re-calibration using Virginia data is described in the memo attached as an appendix to this report.

General Overview of CDPS Methodology

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

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

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 as of the most recent date known (February 2009). 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. Because capitation rates are based on data from the health plans, average health plan scores are compared to the health plan average for the eligibility category in a region and a relative risk score is developed.

CDPS Analysis Results

The FY 2010 analysis builds upon the CDPS Version 5.0 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.

The CDPS relative risk scores that are applied to the FY 2010 base rates:

- Use calculations based on the most recent year of both MCO and DMAS FFS data, FY 2008, with a minimum length of eligibility of three months;
- Assign members based upon the last known eligibility status and health plan enrollment;
- Use all available ICD-9 codes per record and pharmacy claims to identify each individual's health status;
- Use Medicaid utilization in both fee-for-service and health plans to develop an individual's CDPS score; and
- 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.

Health Plan FY 2010 CDPS Adjusted Rates

The FY 2010 risk adjusted rates for each health plan are shown in Exhibits 7a to 7e. These rates are calculated by applying the health plan specific CDPS adjustment factor for each aid code within a region to the base capitation rates in Exhibit 5a for each geographic region.

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

The capitation rates will be paid in the geographic regions in which each health plan currently contracts. The final 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 capitation rates.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age Under 1				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	85,862	91,455		
Service Type				
DME/Supplies	\$166,463	\$271,576	\$1.94	\$2.97
FQHC / RHC	\$956	\$702	\$0.01	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$10,744,742	\$8,199,107	\$125.14	\$89.65
IP - Other	\$2,697,689	\$3,385,538	\$31.42	\$37.02
IP - Psych	\$2,390	\$3,084	\$0.03	\$0.03
Lab	\$113,207	\$123,476	\$1.32	\$1.35
OP - Emergency Room	\$666,168	\$799,399	\$7.76	\$8.74
OP - Other	\$1,292,401	\$1,580,732	\$15.05	\$17.28
Pharmacy	\$1,958,855	\$2,161,182	\$22.81	\$23.63
Prof - Anesthesia	\$102,156	\$100,598	\$1.19	\$1.10
Prof - Child EPSDT	\$807,633	\$875,496	\$9.41	\$9.57
Prof - Evaluation & Management	\$6,080,780	\$7,321,632	\$70.82	\$80.06
Prof - Maternity	\$1,685	\$0	\$0.02	\$0.00
Prof - Other	\$794,252	\$824,510	\$9.25	\$9.02
Prof - Psych	\$2,599	\$3,194	\$0.03	\$0.03
Prof - Specialist	\$433,282	\$393,940	\$5.05	\$4.31
Prof - Vision	\$107,522	\$118,357	\$1.25	\$1.29
Radiology	\$113,970	\$132,525	\$1.33	\$1.45
Transportation/Ambulance	\$325,475	\$380,207	\$3.79	\$4.16
Total	\$26,412,228	\$26,675,255	\$307.61	\$291.68

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 1-5				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	292,006	315,052		
Service Type				
DME/Supplies	\$245,802	\$372,219	\$0.84	\$1.18
FQHC / RHC	\$783	\$1,452	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$3,789,874	\$3,849,782	\$12.98	\$12.22
IP - Psych	\$11,812	\$16,073	\$0.04	\$0.05
Lab	\$460,860	\$533,285	\$1.58	\$1.69
OP - Emergency Room	\$1,237,379	\$1,508,858	\$4.24	\$4.79
OP - Other	\$3,680,791	\$3,944,353	\$12.61	\$12.52
Pharmacy	\$4,536,541	\$5,095,084	\$15.54	\$16.17
Prof - Anesthesia	\$217,680	\$254,714	\$0.75	\$0.81
Prof - Child EPSDT	\$614,449	\$708,241	\$2.10	\$2.25
Prof - Evaluation & Management	\$8,037,522	\$10,401,906	\$27.53	\$33.02
Prof - Maternity	\$0	\$30	\$0.00	\$0.00
Prof - Other	\$1,060,153	\$1,271,304	\$3.63	\$4.04
Prof - Psych	\$64,148	\$59,625	\$0.22	\$0.19
Prof - Specialist	\$526,615	\$725,015	\$1.80	\$2.30
Prof - Vision	\$319,791	\$364,261	\$1.10	\$1.16
Radiology	\$139,304	\$180,235	\$0.48	\$0.57
Transportation/Ambulance	\$842,346	\$967,102	\$2.88	\$3.07
Total	\$25,785,849	\$30,253,538	\$88.31	\$96.03

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 6-14				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	295,459	311,384		
Service Type				
DME/Supplies	\$83,529	\$177,138	\$0.28	\$0.57
FQHC / RHC	\$0	\$592	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$15,447	\$8,782	\$0.05	\$0.03
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,521,559	\$2,342,039	\$8.53	\$7.52
IP - Psych	\$413,302	\$305,710	\$1.40	\$0.98
Lab	\$386,596	\$434,340	\$1.31	\$1.39
OP - Emergency Room	\$698,482	\$853,796	\$2.36	\$2.74
OP - Other	\$2,321,816	\$2,679,047	\$7.86	\$8.60
Pharmacy	\$5,342,016	\$6,213,756	\$18.08	\$19.96
Prof - Anesthesia	\$131,475	\$141,977	\$0.44	\$0.46
Prof - Child EPSDT	\$109,741	\$152,217	\$0.37	\$0.49
Prof - Evaluation & Management	\$4,585,969	\$5,917,462	\$15.52	\$19.00
Prof - Maternity	\$7,665	\$1,176	\$0.03	\$0.00
Prof - Other	\$3,444,929	\$2,784,291	\$11.66	\$8.94
Prof - Psych	\$445,653	\$443,842	\$1.51	\$1.43
Prof - Specialist	\$443,602	\$526,235	\$1.50	\$1.69
Prof - Vision	\$328,251	\$390,000	\$1.11	\$1.25
Radiology	\$177,741	\$224,617	\$0.60	\$0.72
Transportation/Ambulance	\$851,070	\$869,571	\$2.88	\$2.79
Total	\$22,308,845	\$24,466,587	\$75.51	\$78.57

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 15-20 Female				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	53,974	55,603		
Service Type				
DME/Supplies	\$15,106	\$19,596	\$0.28	\$0.35
FQHC / RHC	\$241	\$413	\$0.00	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,113,576	\$2,033,055	\$39.16	\$36.56
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,078,227	\$569,845	\$19.98	\$10.25
IP - Psych	\$197,669	\$125,816	\$3.66	\$2.26
Lab	\$122,925	\$146,882	\$2.28	\$2.64
OP - Emergency Room	\$297,633	\$376,673	\$5.51	\$6.77
OP - Other	\$1,174,106	\$1,444,564	\$21.75	\$25.98
Pharmacy	\$1,092,276	\$1,065,477	\$20.24	\$19.16
Prof - Anesthesia	\$233,979	\$235,014	\$4.34	\$4.23
Prof - Child EPSDT	\$16,664	\$19,734	\$0.31	\$0.35
Prof - Evaluation & Management	\$1,084,081	\$1,337,088	\$20.09	\$24.05
Prof - Maternity	\$998,281	\$1,057,949	\$18.50	\$19.03
Prof - Other	\$179,759	\$241,363	\$3.33	\$4.34
Prof - Psych	\$88,177	\$92,106	\$1.63	\$1.66
Prof - Specialist	\$137,016	\$166,558	\$2.54	\$3.00
Prof - Vision	\$60,250	\$69,122	\$1.12	\$1.24
Radiology	\$206,812	\$248,020	\$3.83	\$4.46
Transportation/Ambulance	\$185,282	\$176,726	\$3.43	\$3.18
Total	\$9,282,060	\$9,426,002	\$171.97	\$169.52

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 21-44 Female				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	67,923	70,658		
Service Type				
DME/Supplies	\$66,902	\$89,995	\$0.98	\$1.27
FQHC / RHC	\$46	\$575	\$0.00	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$6,624,231	\$6,770,091	\$97.53	\$95.81
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,732,493	\$3,048,289	\$40.23	\$43.14
IP - Psych	\$237,104	\$321,229	\$3.49	\$4.55
Lab	\$266,678	\$294,253	\$3.93	\$4.16
OP - Emergency Room	\$896,511	\$1,118,505	\$13.20	\$15.83
OP - Other	\$4,333,324	\$5,082,929	\$63.80	\$71.94
Pharmacy	\$3,447,636	\$3,898,375	\$50.76	\$55.17
Prof - Anesthesia	\$711,588	\$778,938	\$10.48	\$11.02
Prof - Child EPSDT	\$26,128	\$20,620	\$0.38	\$0.29
Prof - Evaluation & Management	\$2,372,067	\$2,868,053	\$34.92	\$40.59
Prof - Maternity	\$2,981,672	\$3,297,993	\$43.90	\$46.68
Prof - Other	\$462,469	\$677,524	\$6.81	\$9.59
Prof - Psych	\$157,299	\$199,928	\$2.32	\$2.83
Prof - Specialist	\$715,607	\$872,511	\$10.54	\$12.35
Prof - Vision	\$71,712	\$84,590	\$1.06	\$1.20
Radiology	\$795,436	\$974,165	\$11.71	\$13.79
Transportation/Ambulance	\$265,140	\$279,304	\$3.90	\$3.95
Total	\$27,164,044	\$30,677,866	\$399.92	\$434.17

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 15-20 Male				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	45,450	45,632		
Service Type				
DME/Supplies	\$49,030	\$12,265	\$1.08	\$0.27
FQHC / RHC	\$30	\$30	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$482,129	\$452,130	\$10.61	\$9.91
IP - Psych	\$40,516	\$126,193	\$0.89	\$2.77
Lab	\$50,135	\$54,232	\$1.10	\$1.19
OP - Emergency Room	\$149,091	\$175,250	\$3.28	\$3.84
OP - Other	\$508,617	\$636,615	\$11.19	\$13.95
Pharmacy	\$828,544	\$898,089	\$18.23	\$19.68
Prof - Anesthesia	\$28,049	\$29,118	\$0.62	\$0.64
Prof - Child EPSDT	\$11,999	\$10,903	\$0.26	\$0.24
Prof - Evaluation & Management	\$584,670	\$709,279	\$12.86	\$15.54
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$200,287	\$156,500	\$4.41	\$3.43
Prof - Psych	\$76,134	\$78,395	\$1.68	\$1.72
Prof - Specialist	\$115,190	\$133,450	\$2.53	\$2.92
Prof - Vision	\$51,572	\$52,554	\$1.13	\$1.15
Radiology	\$47,344	\$58,454	\$1.04	\$1.28
Transportation/Ambulance	\$125,809	\$137,151	\$2.77	\$3.01
Total	\$3,349,148	\$3,720,609	\$73.69	\$81.54

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 21-44 Male				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	5,488	5,371		
Service Type				
DME/Supplies	\$19,763	\$32,411	\$3.60	\$6.03
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$297,461	\$400,628	\$54.20	\$74.59
IP - Psych	\$8,164	\$2,964	\$1.49	\$0.55
Lab	\$11,055	\$8,613	\$2.01	\$1.60
OP - Emergency Room	\$55,543	\$61,290	\$10.12	\$11.41
OP - Other	\$233,821	\$222,606	\$42.61	\$41.45
Pharmacy	\$421,026	\$307,403	\$76.72	\$57.23
Prof - Anesthesia	\$6,695	\$9,088	\$1.22	\$1.69
Prof - Child EPSDT	\$1,416	\$376	\$0.26	\$0.07
Prof - Evaluation & Management	\$137,601	\$157,522	\$25.07	\$29.33
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$76,989	\$41,220	\$14.03	\$7.67
Prof - Psych	\$9,890	\$18,275	\$1.80	\$3.40
Prof - Specialist	\$38,954	\$48,595	\$7.10	\$9.05
Prof - Vision	\$5,783	\$7,081	\$1.05	\$1.32
Radiology	\$32,723	\$34,587	\$5.96	\$6.44
Transportation/Ambulance	\$16,958	\$18,242	\$3.09	\$3.40
Total	\$1,373,842	\$1,370,899	\$250.34	\$255.24

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 45 and Over				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	9,346	9,279		
Service Type				
DME/Supplies	\$26,628	\$43,523	\$2.85	\$4.69
FQHC / RHC	\$0	\$160	\$0.00	\$0.02
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$11,812	\$8,156	\$1.26	\$0.88
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,293,902	\$1,439,342	\$138.44	\$155.12
IP - Psych	\$33,790	\$40,689	\$3.62	\$4.39
Lab	\$28,873	\$37,282	\$3.09	\$4.02
OP - Emergency Room	\$85,721	\$116,087	\$9.17	\$12.51
OP - Other	\$580,357	\$734,803	\$62.10	\$79.19
Pharmacy	\$1,183,217	\$1,240,925	\$126.60	\$133.73
Prof - Anesthesia	\$29,975	\$32,942	\$3.21	\$3.55
Prof - Child EPSDT	\$1,997	\$1,832	\$0.21	\$0.20
Prof - Evaluation & Management	\$435,290	\$501,089	\$46.58	\$54.00
Prof - Maternity	\$3,989	\$7,114	\$0.43	\$0.77
Prof - Other	\$145,704	\$222,763	\$15.59	\$24.01
Prof - Psych	\$33,851	\$35,275	\$3.62	\$3.80
Prof - Specialist	\$159,326	\$180,581	\$17.05	\$19.46
Prof - Vision	\$17,187	\$24,897	\$1.84	\$2.68
Radiology	\$114,594	\$150,037	\$12.26	\$16.17
Transportation/Ambulance	\$35,563	\$48,406	\$3.81	\$5.22
Total	\$4,221,775	\$4,865,905	\$451.72	\$524.40

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

All Age Categories				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	855,508	904,434		
Service Type				
DME/Supplies	\$673,224	\$1,018,723	\$0.79	\$1.13
FQHC / RHC	\$2,056	\$3,924	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$8,765,066	\$8,820,084	\$10.25	\$9.75
IP - Newborn	\$10,744,742	\$8,199,107	\$12.56	\$9.07
IP - Other	\$14,893,334	\$15,487,593	\$17.41	\$17.12
IP - Psych	\$944,746	\$941,756	\$1.10	\$1.04
Lab	\$1,440,329	\$1,632,363	\$1.68	\$1.80
OP - Emergency Room	\$4,086,526	\$5,009,858	\$4.78	\$5.54
OP - Other	\$14,125,234	\$16,325,649	\$16.51	\$18.05
Pharmacy	\$18,810,112	\$20,880,292	\$21.99	\$23.09
Prof - Anesthesia	\$1,461,598	\$1,582,390	\$1.71	\$1.75
Prof - Child EPSDT	\$1,590,028	\$1,789,419	\$1.86	\$1.98
Prof - Evaluation & Management	\$23,317,979	\$29,214,030	\$27.26	\$32.30
Prof - Maternity	\$3,993,292	\$4,364,262	\$4.67	\$4.83
Prof - Other	\$6,364,543	\$6,219,475	\$7.44	\$6.88
Prof - Psych	\$877,751	\$930,642	\$1.03	\$1.03
Prof - Specialist	\$2,569,592	\$3,046,885	\$3.00	\$3.37
Prof - Vision	\$962,068	\$1,110,862	\$1.12	\$1.23
Radiology	\$1,627,925	\$2,002,639	\$1.90	\$2.21
Transportation/Ambulance	\$2,647,643	\$2,876,709	\$3.09	\$3.18
Total	\$119,897,790	\$131,456,661	\$140.15	\$145.35

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age Under 1				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	41,179	52,410		
Service Type				
DME/Supplies	\$106,048	\$191,246	\$2.58	\$3.65
FQHC / RHC	\$9,938	\$53,427	\$0.24	\$1.02
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$6,680,965	\$9,468,403	\$162.24	\$180.66
IP - Other	\$1,268,288	\$1,684,967	\$30.80	\$32.15
IP - Psych	\$20,678	\$30,818	\$0.50	\$0.59
Lab	\$119,750	\$182,109	\$2.91	\$3.47
OP - Emergency Room	\$251,873	\$350,735	\$6.12	\$6.69
OP - Other	\$688,319	\$866,967	\$16.72	\$16.54
Pharmacy	\$668,506	\$1,090,646	\$16.23	\$20.81
Prof - Anesthesia	\$39,867	\$50,303	\$0.97	\$0.96
Prof - Child EPSDT	\$394,648	\$498,808	\$9.58	\$9.52
Prof - Evaluation & Management	\$3,170,074	\$4,455,318	\$76.98	\$85.01
Prof - Maternity	\$0	\$1,754	\$0.00	\$0.03
Prof - Other	\$514,495	\$708,478	\$12.49	\$13.52
Prof - Psych	\$21,395	\$31,949	\$0.52	\$0.61
Prof - Specialist	\$355,734	\$358,696	\$8.64	\$6.84
Prof - Vision	\$47,824	\$67,808	\$1.16	\$1.29
Radiology	\$77,917	\$173,646	\$1.89	\$3.31
Transportation/Ambulance	\$138,062	\$185,410	\$3.35	\$3.54
Total	\$14,574,382	\$20,451,488	\$353.93	\$390.22

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 1-5				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	131,774	171,183		
Service Type				
DME/Supplies	\$110,697	\$157,375	\$0.84	\$0.92
FQHC / RHC	\$26,658	\$52,240	\$0.20	\$0.31
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,126,459	\$1,803,321	\$8.55	\$10.53
IP - Psych	\$88,444	\$125,413	\$0.67	\$0.73
Lab	\$300,298	\$369,826	\$2.28	\$2.16
OP - Emergency Room	\$621,345	\$788,560	\$4.72	\$4.61
OP - Other	\$1,974,816	\$2,216,472	\$14.99	\$12.95
Pharmacy	\$1,636,261	\$2,105,847	\$12.42	\$12.30
Prof - Anesthesia	\$110,724	\$133,026	\$0.84	\$0.78
Prof - Child EPSDT	\$232,773	\$328,542	\$1.77	\$1.92
Prof - Evaluation & Management	\$2,807,932	\$4,078,917	\$21.31	\$23.83
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$669,428	\$934,494	\$5.08	\$5.46
Prof - Psych	\$169,467	\$232,881	\$1.29	\$1.36
Prof - Specialist	\$443,950	\$600,607	\$3.37	\$3.51
Prof - Vision	\$152,148	\$208,488	\$1.15	\$1.22
Radiology	\$75,342	\$132,070	\$0.57	\$0.77
Transportation/Ambulance	\$319,181	\$401,395	\$2.42	\$2.34
Total	\$10,865,923	\$14,669,475	\$82.46	\$85.69

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 6-14				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	149,231	194,857		
Service Type				
DME/Supplies	\$124,046	\$173,411	\$0.83	\$0.89
FQHC / RHC	\$18,852	\$45,109	\$0.13	\$0.23
Home Health	\$9	\$0	\$0.00	\$0.00
IP - Maternity	\$16,862	\$26,457	\$0.11	\$0.14
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$510,214	\$1,183,736	\$3.42	\$6.07
IP - Psych	\$268,775	\$458,681	\$1.80	\$2.35
Lab	\$291,339	\$392,045	\$1.95	\$2.01
OP - Emergency Room	\$472,695	\$587,958	\$3.17	\$3.02
OP - Other	\$1,567,403	\$1,923,985	\$10.50	\$9.87
Pharmacy	\$3,631,541	\$5,095,781	\$24.34	\$26.15
Prof - Anesthesia	\$68,394	\$81,924	\$0.46	\$0.42
Prof - Child EPSDT	\$44,228	\$72,888	\$0.30	\$0.37
Prof - Evaluation & Management	\$2,009,637	\$2,909,657	\$13.47	\$14.93
Prof - Maternity	\$8,540	\$18,753	\$0.06	\$0.10
Prof - Other	\$348,217	\$547,900	\$2.33	\$2.81
Prof - Psych	\$452,421	\$723,873	\$3.03	\$3.71
Prof - Specialist	\$343,185	\$457,506	\$2.30	\$2.35
Prof - Vision	\$186,285	\$253,305	\$1.25	\$1.30
Radiology	\$101,275	\$156,621	\$0.68	\$0.80
Transportation/Ambulance	\$371,816	\$481,748	\$2.49	\$2.47
Total	\$10,835,734	\$15,591,337	\$72.61	\$80.01

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 15-20 Female				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	33,580	44,412		
Service Type				
DME/Supplies	\$25,618	\$35,284	\$0.76	\$0.79
FQHC / RHC	\$25,155	\$36,353	\$0.75	\$0.82
Home Health	\$1,125	\$3,500	\$0.03	\$0.08
IP - Maternity	\$1,864,878	\$2,274,833	\$55.54	\$51.22
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$288,933	\$694,533	\$8.60	\$15.64
IP - Psych	\$146,416	\$187,707	\$4.36	\$4.23
Lab	\$233,571	\$384,725	\$6.96	\$8.66
OP - Emergency Room	\$291,623	\$367,883	\$8.68	\$8.28
OP - Other	\$1,027,737	\$1,297,158	\$30.61	\$29.21
Pharmacy	\$836,668	\$1,326,171	\$24.92	\$29.86
Prof - Anesthesia	\$138,228	\$177,220	\$4.12	\$3.99
Prof - Child EPSDT	\$36,914	\$41,356	\$1.10	\$0.93
Prof - Evaluation & Management	\$774,248	\$1,171,390	\$23.06	\$26.38
Prof - Maternity	\$1,092,315	\$1,360,900	\$32.53	\$30.64
Prof - Other	\$136,165	\$243,717	\$4.05	\$5.49
Prof - Psych	\$88,186	\$133,286	\$2.63	\$3.00
Prof - Specialist	\$146,216	\$205,527	\$4.35	\$4.63
Prof - Vision	\$43,244	\$58,120	\$1.29	\$1.31
Radiology	\$201,137	\$308,181	\$5.99	\$6.94
Transportation/Ambulance	\$136,865	\$178,049	\$4.08	\$4.01
Total	\$7,535,243	\$10,485,894	\$224.40	\$236.10

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 21-44 Female				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	59,780	81,699		
Service Type				
DME/Supplies	\$149,426	\$173,537	\$2.50	\$2.12
FQHC / RHC	\$73,356	\$106,571	\$1.23	\$1.30
Home Health	\$2,438	\$5,000	\$0.04	\$0.06
IP - Maternity	\$4,888,306	\$5,974,366	\$81.77	\$73.13
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,160,393	\$3,365,399	\$36.14	\$41.19
IP - Psych	\$370,881	\$493,286	\$6.20	\$6.04
Lab	\$578,264	\$983,541	\$9.67	\$12.04
OP - Emergency Room	\$862,960	\$1,163,997	\$14.44	\$14.25
OP - Other	\$4,162,139	\$5,519,864	\$69.62	\$67.56
Pharmacy	\$3,338,767	\$5,196,173	\$55.85	\$63.60
Prof - Anesthesia	\$396,392	\$468,671	\$6.63	\$5.74
Prof - Child EPSDT	\$55,842	\$73,470	\$0.93	\$0.90
Prof - Evaluation & Management	\$1,870,390	\$2,884,515	\$31.29	\$35.31
Prof - Maternity	\$2,763,418	\$3,263,190	\$46.23	\$39.94
Prof - Other	\$558,178	\$816,059	\$9.34	\$9.99
Prof - Psych	\$205,699	\$266,627	\$3.44	\$3.26
Prof - Specialist	\$826,036	\$1,194,005	\$13.82	\$14.61
Prof - Vision	\$76,077	\$112,086	\$1.27	\$1.37
Radiology	\$637,066	\$1,014,335	\$10.66	\$12.42
Transportation/Ambulance	\$290,121	\$420,025	\$4.85	\$5.14
Total	\$24,266,149	\$33,494,715	\$405.92	\$409.98

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 15-20 Male				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	23,677	31,264		
Service Type				
DME/Supplies	\$32,157	\$48,939	\$1.36	\$1.57
FQHC / RHC	\$5,346	\$8,269	\$0.23	\$0.26
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$337,752	\$696,352	\$14.26	\$22.27
IP - Psych	\$58,576	\$136,901	\$2.47	\$4.38
Lab	\$42,011	\$64,209	\$1.77	\$2.05
OP - Emergency Room	\$107,649	\$144,569	\$4.55	\$4.62
OP - Other	\$377,351	\$585,718	\$15.94	\$18.73
Pharmacy	\$458,328	\$743,737	\$19.36	\$23.79
Prof - Anesthesia	\$12,692	\$17,106	\$0.54	\$0.55
Prof - Child EPSDT	\$3,314	\$5,014	\$0.14	\$0.16
Prof - Evaluation & Management	\$276,844	\$446,912	\$11.69	\$14.29
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$50,209	\$73,689	\$2.12	\$2.36
Prof - Psych	\$64,355	\$96,759	\$2.72	\$3.09
Prof - Specialist	\$82,440	\$123,354	\$3.48	\$3.95
Prof - Vision	\$29,450	\$38,672	\$1.24	\$1.24
Radiology	\$38,438	\$62,711	\$1.62	\$2.01
Transportation/Ambulance	\$68,738	\$95,089	\$2.90	\$3.04
Total	\$2,045,651	\$3,388,002	\$86.40	\$108.37

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 21-44 Male				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	6,591	7,426		
Service Type				
DME/Supplies	\$67,198	\$49,257	\$10.20	\$6.63
FQHC / RHC	\$3,090	\$12,148	\$0.47	\$1.64
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$1,789	\$0	\$0.27	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$338,667	\$662,251	\$51.38	\$89.18
IP - Psych	\$72,304	\$67,707	\$10.97	\$9.12
Lab	\$29,124	\$43,740	\$4.42	\$5.89
OP - Emergency Room	\$89,705	\$96,324	\$13.61	\$12.97
OP - Other	\$375,042	\$544,990	\$56.90	\$73.39
Pharmacy	\$380,565	\$499,497	\$57.74	\$67.26
Prof - Anesthesia	\$10,000	\$16,355	\$1.52	\$2.20
Prof - Child EPSDT	\$950	\$1,582	\$0.14	\$0.21
Prof - Evaluation & Management	\$163,605	\$223,728	\$24.82	\$30.13
Prof - Maternity	\$1,231	\$0	\$0.19	\$0.00
Prof - Other	\$34,539	\$57,633	\$5.24	\$7.76
Prof - Psych	\$17,631	\$17,917	\$2.68	\$2.41
Prof - Specialist	\$68,909	\$132,340	\$10.45	\$17.82
Prof - Vision	\$8,562	\$11,475	\$1.30	\$1.55
Radiology	\$42,859	\$56,669	\$6.50	\$7.63
Transportation/Ambulance	\$21,969	\$30,060	\$3.33	\$4.05
Total	\$1,727,740	\$2,523,675	\$262.14	\$339.84

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 45 and Over				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	4,888	7,286		
Service Type				
DME/Supplies	\$48,547	\$50,930	\$9.93	\$6.99
FQHC / RHC	\$5,203	\$5,623	\$1.06	\$0.77
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$2,472	\$0.00	\$0.34
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$814,504	\$873,939	\$166.63	\$119.95
IP - Psych	\$14,979	\$42,430	\$3.06	\$5.82
Lab	\$45,524	\$69,249	\$9.31	\$9.50
OP - Emergency Room	\$53,505	\$66,129	\$10.95	\$9.08
OP - Other	\$408,381	\$636,025	\$83.55	\$87.29
Pharmacy	\$617,439	\$933,965	\$126.32	\$128.19
Prof - Anesthesia	\$14,099	\$18,871	\$2.88	\$2.59
Prof - Child EPSDT	\$2,052	\$2,788	\$0.42	\$0.38
Prof - Evaluation & Management	\$199,715	\$289,595	\$40.86	\$39.75
Prof - Maternity	\$106	\$74	\$0.02	\$0.01
Prof - Other	\$110,317	\$138,215	\$22.57	\$18.97
Prof - Psych	\$26,313	\$32,218	\$5.38	\$4.42
Prof - Specialist	\$95,058	\$165,489	\$19.45	\$22.71
Prof - Vision	\$9,696	\$15,695	\$1.98	\$2.15
Radiology	\$63,312	\$91,054	\$12.95	\$12.50
Transportation/Ambulance	\$34,616	\$51,165	\$7.08	\$7.02
Total	\$2,563,367	\$3,485,925	\$524.42	\$478.44

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

All Age Categories				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	450,700	590,537		
Service Type				
DME/Supplies	\$663,737	\$879,979	\$1.47	\$1.49
FQHC / RHC	\$167,599	\$319,741	\$0.37	\$0.54
Home Health	\$3,572	\$8,500	\$0.01	\$0.01
IP - Maternity	\$6,771,836	\$8,278,127	\$15.03	\$14.02
IP - Newborn	\$6,680,965	\$9,468,403	\$14.82	\$16.03
IP - Other	\$6,845,209	\$10,964,498	\$15.19	\$18.57
IP - Psych	\$1,041,052	\$1,542,944	\$2.31	\$2.61
Lab	\$1,639,882	\$2,489,444	\$3.64	\$4.22
OP - Emergency Room	\$2,751,356	\$3,566,154	\$6.10	\$6.04
OP - Other	\$10,581,189	\$13,591,179	\$23.48	\$23.01
Pharmacy	\$11,568,075	\$16,991,818	\$25.67	\$28.77
Prof - Anesthesia	\$790,396	\$963,476	\$1.75	\$1.63
Prof - Child EPSDT	\$770,720	\$1,024,449	\$1.71	\$1.73
Prof - Evaluation & Management	\$11,272,445	\$16,460,032	\$25.01	\$27.87
Prof - Maternity	\$3,865,610	\$4,644,671	\$8.58	\$7.87
Prof - Other	\$2,421,548	\$3,520,186	\$5.37	\$5.96
Prof - Psych	\$1,045,468	\$1,535,509	\$2.32	\$2.60
Prof - Specialist	\$2,361,527	\$3,237,524	\$5.24	\$5.48
Prof - Vision	\$553,287	\$765,649	\$1.23	\$1.30
Radiology	\$1,237,347	\$1,995,287	\$2.75	\$3.38
Transportation/Ambulance	\$1,381,368	\$1,842,940	\$3.06	\$3.12
Total	\$74,414,189	\$104,090,510	\$165.11	\$176.26

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age Under 1				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	65,609	69,594		
Service Type				
DME/Supplies	\$461,548	\$481,814	\$7.03	\$6.92
FQHC / RHC	\$41,393	\$54,304	\$0.63	\$0.78
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$1,200	\$0	\$0.02	\$0.00
IP - Newborn	\$12,752,855	\$11,471,685	\$194.38	\$164.84
IP - Other	\$2,880,571	\$3,306,736	\$43.91	\$47.51
IP - Psych	\$68,769	\$69,879	\$1.05	\$1.00
Lab	\$121,402	\$137,431	\$1.85	\$1.97
OP - Emergency Room	\$630,804	\$835,931	\$9.61	\$12.01
OP - Other	\$1,617,407	\$1,879,215	\$24.65	\$27.00
Pharmacy	\$1,285,715	\$1,391,793	\$19.60	\$20.00
Prof - Anesthesia	\$76,941	\$82,348	\$1.17	\$1.18
Prof - Child EPSDT	\$650,319	\$685,154	\$9.91	\$9.85
Prof - Evaluation & Management	\$5,503,075	\$6,315,502	\$83.88	\$90.75
Prof - Maternity	\$0	\$2,795	\$0.00	\$0.04
Prof - Other	\$691,125	\$896,161	\$10.53	\$12.88
Prof - Psych	\$58,629	\$71,465	\$0.89	\$1.03
Prof - Specialist	\$552,114	\$509,115	\$8.42	\$7.32
Prof - Vision	\$70,660	\$74,649	\$1.08	\$1.07
Radiology	\$113,654	\$152,726	\$1.73	\$2.19
Transportation/Ambulance	\$269,771	\$281,192	\$4.11	\$4.04
Total	\$27,847,951	\$28,699,895	\$424.45	\$412.39

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 1-5				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	259,893	265,373		
Service Type				
DME/Supplies	\$308,958	\$414,396	\$1.19	\$1.56
FQHC / RHC	\$70,642	\$70,133	\$0.27	\$0.26
Home Health	\$390	\$195	\$0.00	\$0.00
IP - Maternity	\$0	\$4,200	\$0.00	\$0.02
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,736,242	\$3,139,556	\$10.53	\$11.83
IP - Psych	\$257,781	\$272,148	\$0.99	\$1.03
Lab	\$429,775	\$430,457	\$1.65	\$1.62
OP - Emergency Room	\$1,571,285	\$2,010,621	\$6.05	\$7.58
OP - Other	\$5,433,176	\$5,943,266	\$20.91	\$22.40
Pharmacy	\$4,280,714	\$4,960,190	\$16.47	\$18.69
Prof - Anesthesia	\$173,585	\$188,740	\$0.67	\$0.71
Prof - Child EPSDT	\$470,723	\$560,112	\$1.81	\$2.11
Prof - Evaluation & Management	\$5,536,084	\$6,922,683	\$21.30	\$26.09
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$953,271	\$1,132,196	\$3.67	\$4.27
Prof - Psych	\$310,027	\$338,887	\$1.19	\$1.28
Prof - Specialist	\$639,704	\$729,221	\$2.46	\$2.75
Prof - Vision	\$283,104	\$289,536	\$1.09	\$1.09
Radiology	\$122,764	\$167,296	\$0.47	\$0.63
Transportation/Ambulance	\$836,851	\$886,947	\$3.22	\$3.34
Total	\$24,415,077	\$28,460,781	\$93.94	\$107.25

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 6-14				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	341,430	344,219		
Service Type				
DME/Supplies	\$275,642	\$292,129	\$0.81	\$0.85
FQHC / RHC	\$67,219	\$75,869	\$0.20	\$0.22
Home Health	\$98	\$0	\$0.00	\$0.00
IP - Maternity	\$76,022	\$13,213	\$0.22	\$0.04
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,979,167	\$2,401,278	\$5.80	\$6.98
IP - Psych	\$845,762	\$815,128	\$2.48	\$2.37
Lab	\$483,732	\$465,629	\$1.42	\$1.35
OP - Emergency Room	\$1,216,394	\$1,488,361	\$3.56	\$4.32
OP - Other	\$4,327,309	\$4,460,532	\$12.67	\$12.96
Pharmacy	\$7,284,619	\$8,139,881	\$21.34	\$23.65
Prof - Anesthesia	\$123,020	\$121,738	\$0.36	\$0.35
Prof - Child EPSDT	\$89,161	\$141,319	\$0.26	\$0.41
Prof - Evaluation & Management	\$4,265,101	\$5,160,145	\$12.49	\$14.99
Prof - Maternity	\$26,509	\$9,421	\$0.08	\$0.03
Prof - Other	\$715,642	\$948,026	\$2.10	\$2.75
Prof - Psych	\$888,074	\$952,058	\$2.60	\$2.77
Prof - Specialist	\$586,879	\$640,640	\$1.72	\$1.86
Prof - Vision	\$382,845	\$386,334	\$1.12	\$1.12
Radiology	\$183,422	\$212,058	\$0.54	\$0.62
Transportation/Ambulance	\$1,016,324	\$1,006,679	\$2.98	\$2.92
Total	\$24,832,938	\$27,730,438	\$72.73	\$80.56

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 15-20 Female				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	75,831	76,861		
Service Type				
DME/Supplies	\$51,288	\$47,967	\$0.68	\$0.62
FQHC / RHC	\$89,465	\$68,472	\$1.18	\$0.89
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,889,214	\$2,934,352	\$38.10	\$38.18
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$869,850	\$742,428	\$11.47	\$9.66
IP - Psych	\$256,855	\$243,808	\$3.39	\$3.17
Lab	\$247,633	\$334,408	\$3.27	\$4.35
OP - Emergency Room	\$634,271	\$833,475	\$8.36	\$10.84
OP - Other	\$2,247,358	\$2,658,980	\$29.64	\$34.59
Pharmacy	\$1,655,475	\$1,774,383	\$21.83	\$23.09
Prof - Anesthesia	\$310,515	\$301,867	\$4.09	\$3.93
Prof - Child EPSDT	\$55,252	\$55,402	\$0.73	\$0.72
Prof - Evaluation & Management	\$1,450,790	\$1,744,972	\$19.13	\$22.70
Prof - Maternity	\$1,502,395	\$1,557,311	\$19.81	\$20.26
Prof - Other	\$335,297	\$415,054	\$4.42	\$5.40
Prof - Psych	\$176,457	\$195,872	\$2.33	\$2.55
Prof - Specialist	\$235,079	\$263,341	\$3.10	\$3.43
Prof - Vision	\$80,058	\$82,190	\$1.06	\$1.07
Radiology	\$298,689	\$321,561	\$3.94	\$4.18
Transportation/Ambulance	\$340,828	\$355,998	\$4.49	\$4.63
Total	\$13,726,769	\$14,931,842	\$181.02	\$194.27

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 21-44 Female				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	138,495	145,340		
Service Type				
DME/Supplies	\$252,856	\$316,468	\$1.83	\$2.18
FQHC / RHC	\$264,578	\$339,210	\$1.91	\$2.33
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$9,106,145	\$8,518,768	\$65.75	\$58.61
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$4,194,269	\$5,004,151	\$30.28	\$34.43
IP - Psych	\$524,956	\$744,213	\$3.79	\$5.12
Lab	\$597,406	\$848,636	\$4.31	\$5.84
OP - Emergency Room	\$2,212,667	\$3,056,443	\$15.98	\$21.03
OP - Other	\$10,464,092	\$12,432,318	\$75.56	\$85.54
Pharmacy	\$6,603,416	\$7,299,319	\$47.68	\$50.22
Prof - Anesthesia	\$935,016	\$918,973	\$6.75	\$6.32
Prof - Child EPSDT	\$65,794	\$68,370	\$0.48	\$0.47
Prof - Evaluation & Management	\$3,898,768	\$4,656,963	\$28.15	\$32.04
Prof - Maternity	\$4,503,801	\$4,423,834	\$32.52	\$30.44
Prof - Other	\$1,143,950	\$1,291,742	\$8.26	\$8.89
Prof - Psych	\$342,611	\$389,535	\$2.47	\$2.68
Prof - Specialist	\$1,445,454	\$1,593,845	\$10.44	\$10.97
Prof - Vision	\$153,267	\$163,290	\$1.11	\$1.12
Radiology	\$1,223,490	\$1,363,058	\$8.83	\$9.38
Transportation/Ambulance	\$822,192	\$886,648	\$5.94	\$6.10
Total	\$48,754,728	\$54,315,784	\$352.03	\$373.72

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 15-20 Male				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	55,658	56,184		
Service Type				
DME/Supplies	\$50,616	\$61,381	\$0.91	\$1.09
FQHC / RHC	\$18,211	\$18,042	\$0.33	\$0.32
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$3,700	\$3,198	\$0.07	\$0.06
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$462,202	\$839,743	\$8.30	\$14.95
IP - Psych	\$240,464	\$200,845	\$4.32	\$3.57
Lab	\$72,799	\$67,535	\$1.31	\$1.20
OP - Emergency Room	\$277,932	\$327,679	\$4.99	\$5.83
OP - Other	\$1,036,704	\$1,202,195	\$18.63	\$21.40
Pharmacy	\$997,926	\$1,237,974	\$17.93	\$22.03
Prof - Anesthesia	\$22,317	\$28,271	\$0.40	\$0.50
Prof - Child EPSDT	\$8,308	\$9,822	\$0.15	\$0.17
Prof - Evaluation & Management	\$584,640	\$710,227	\$10.50	\$12.64
Prof - Maternity	\$2,666	\$1,912	\$0.05	\$0.03
Prof - Other	\$116,849	\$132,984	\$2.10	\$2.37
Prof - Psych	\$126,139	\$145,118	\$2.27	\$2.58
Prof - Specialist	\$120,178	\$183,801	\$2.16	\$3.27
Prof - Vision	\$56,048	\$58,318	\$1.01	\$1.04
Radiology	\$51,411	\$64,276	\$0.92	\$1.14
Transportation/Ambulance	\$181,459	\$171,120	\$3.26	\$3.05
Total	\$4,430,568	\$5,464,441	\$79.60	\$97.26

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 21-44 Male				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	8,292	8,458		
Service Type				
DME/Supplies	\$83,391	\$38,721	\$10.06	\$4.58
FQHC / RHC	\$2,414	\$6,627	\$0.29	\$0.78
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$467,425	\$370,285	\$56.37	\$43.78
IP - Psych	\$44,605	\$41,304	\$5.38	\$4.88
Lab	\$17,223	\$17,795	\$2.08	\$2.10
OP - Emergency Room	\$86,361	\$116,176	\$10.41	\$13.74
OP - Other	\$457,468	\$481,728	\$55.17	\$56.96
Pharmacy	\$370,408	\$324,993	\$44.67	\$38.42
Prof - Anesthesia	\$11,050	\$11,500	\$1.33	\$1.36
Prof - Child EPSDT	\$1,955	\$2,024	\$0.24	\$0.24
Prof - Evaluation & Management	\$172,483	\$180,468	\$20.80	\$21.34
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$63,298	\$57,672	\$7.63	\$6.82
Prof - Psych	\$20,683	\$19,867	\$2.49	\$2.35
Prof - Specialist	\$65,112	\$77,613	\$7.85	\$9.18
Prof - Vision	\$10,846	\$9,475	\$1.31	\$1.12
Radiology	\$38,163	\$43,797	\$4.60	\$5.18
Transportation/Ambulance	\$37,079	\$41,278	\$4.47	\$4.88
Total	\$1,949,965	\$1,841,324	\$235.16	\$217.70

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 45 and Over				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	12,504	13,514		
Service Type				
DME/Supplies	\$66,978	\$84,978	\$5.36	\$6.29
FQHC / RHC	\$27,092	\$25,640	\$2.17	\$1.90
Home Health	\$0	\$36	\$0.00	\$0.00
IP - Maternity	\$2,050	\$0	\$0.16	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,057,128	\$1,419,043	\$84.54	\$105.01
IP - Psych	\$74,551	\$99,266	\$5.96	\$7.35
Lab	\$40,112	\$60,953	\$3.21	\$4.51
OP - Emergency Room	\$136,279	\$178,817	\$10.90	\$13.23
OP - Other	\$1,322,474	\$1,552,015	\$105.76	\$114.84
Pharmacy	\$1,268,905	\$1,544,296	\$101.48	\$114.27
Prof - Anesthesia	\$25,341	\$30,614	\$2.03	\$2.27
Prof - Child EPSDT	\$2,701	\$4,235	\$0.22	\$0.31
Prof - Evaluation & Management	\$409,450	\$498,630	\$32.75	\$36.90
Prof - Maternity	\$1,075	\$31	\$0.09	\$0.00
Prof - Other	\$222,061	\$240,554	\$17.76	\$17.80
Prof - Psych	\$44,092	\$48,146	\$3.53	\$3.56
Prof - Specialist	\$204,779	\$234,958	\$16.38	\$17.39
Prof - Vision	\$21,776	\$27,336	\$1.74	\$2.02
Radiology	\$111,668	\$137,982	\$8.93	\$10.21
Transportation/Ambulance	\$68,507	\$82,891	\$5.48	\$6.13
Total	\$5,107,020	\$6,270,420	\$408.43	\$463.99

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

All Age Categories				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	957,712	979,543		
Service Type				
DME/Supplies	\$1,551,276	\$1,737,853	\$1.62	\$1.77
FQHC / RHC	\$581,014	\$658,297	\$0.61	\$0.67
Home Health	\$488	\$231	\$0.00	\$0.00
IP - Maternity	\$12,078,330	\$11,473,732	\$12.61	\$11.71
IP - Newborn	\$12,752,855	\$11,471,685	\$13.32	\$11.71
IP - Other	\$14,646,854	\$17,223,221	\$15.29	\$17.58
IP - Psych	\$2,313,743	\$2,486,590	\$2.42	\$2.54
Lab	\$2,010,083	\$2,362,843	\$2.10	\$2.41
OP - Emergency Room	\$6,765,993	\$8,847,503	\$7.06	\$9.03
OP - Other	\$26,905,988	\$30,610,250	\$28.09	\$31.25
Pharmacy	\$23,747,178	\$26,672,829	\$24.80	\$27.23
Prof - Anesthesia	\$1,677,785	\$1,684,050	\$1.75	\$1.72
Prof - Child EPSDT	\$1,344,212	\$1,526,437	\$1.40	\$1.56
Prof - Evaluation & Management	\$21,820,390	\$26,189,591	\$22.78	\$26.74
Prof - Maternity	\$6,036,445	\$5,995,304	\$6.30	\$6.12
Prof - Other	\$4,241,492	\$5,114,391	\$4.43	\$5.22
Prof - Psych	\$1,966,713	\$2,160,949	\$2.05	\$2.21
Prof - Specialist	\$3,849,299	\$4,232,535	\$4.02	\$4.32
Prof - Vision	\$1,058,604	\$1,091,127	\$1.11	\$1.11
Radiology	\$2,143,261	\$2,462,755	\$2.24	\$2.51
Transportation/Ambulance	\$3,573,011	\$3,712,753	\$3.73	\$3.79
Total	\$151,065,016	\$167,714,923	\$157.74	\$171.22

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age Under 1				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	45,926	49,037		
Service Type				
DME/Supplies	\$195,736	\$235,371	\$4.26	\$4.80
FQHC / RHC	\$200,472	\$185,897	\$4.37	\$3.79
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$8,689,491	\$10,699,315	\$189.21	\$218.19
IP - Other	\$1,471,008	\$1,821,792	\$32.03	\$37.15
IP - Psych	\$33,965	\$42,072	\$0.74	\$0.86
Lab	\$117,296	\$139,268	\$2.55	\$2.84
OP - Emergency Room	\$341,323	\$403,077	\$7.43	\$8.22
OP - Other	\$1,097,194	\$1,045,401	\$23.89	\$21.32
Pharmacy	\$817,714	\$1,006,099	\$17.81	\$20.52
Prof - Anesthesia	\$51,556	\$73,794	\$1.12	\$1.50
Prof - Child EPSDT	\$382,814	\$413,349	\$8.34	\$8.43
Prof - Evaluation & Management	\$3,546,638	\$4,628,202	\$77.23	\$94.38
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$442,237	\$660,972	\$9.63	\$13.48
Prof - Psych	\$34,418	\$40,654	\$0.75	\$0.83
Prof - Specialist	\$392,009	\$393,918	\$8.54	\$8.03
Prof - Vision	\$50,964	\$62,626	\$1.11	\$1.28
Radiology	\$108,392	\$274,858	\$2.36	\$5.61
Transportation/Ambulance	\$234,164	\$231,452	\$5.10	\$4.72
Total	\$18,207,390	\$22,358,117	\$396.45	\$455.94

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 1-5				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	157,370	168,210		
Service Type				
DME/Supplies	\$134,425	\$144,454	\$0.85	\$0.86
FQHC / RHC	\$246,232	\$252,628	\$1.56	\$1.50
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,691,372	\$1,630,657	\$10.75	\$9.69
IP - Psych	\$134,932	\$150,331	\$0.86	\$0.89
Lab	\$360,996	\$403,321	\$2.29	\$2.40
OP - Emergency Room	\$778,383	\$945,129	\$4.95	\$5.62
OP - Other	\$2,480,868	\$2,881,480	\$15.76	\$17.13
Pharmacy	\$2,186,891	\$2,549,346	\$13.90	\$15.16
Prof - Anesthesia	\$132,682	\$159,005	\$0.84	\$0.95
Prof - Child EPSDT	\$248,722	\$314,726	\$1.58	\$1.87
Prof - Evaluation & Management	\$3,328,064	\$4,265,071	\$21.15	\$25.36
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$678,595	\$688,596	\$4.31	\$4.09
Prof - Psych	\$173,770	\$199,405	\$1.10	\$1.19
Prof - Specialist	\$396,437	\$481,588	\$2.52	\$2.86
Prof - Vision	\$172,361	\$194,570	\$1.10	\$1.16
Radiology	\$96,626	\$178,611	\$0.61	\$1.06
Transportation/Ambulance	\$485,493	\$536,197	\$3.09	\$3.19
Total	\$13,726,849	\$15,975,114	\$87.23	\$94.97

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 6-14				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	199,187	206,612		
Service Type				
DME/Supplies	\$137,229	\$137,634	\$0.69	\$0.67
FQHC / RHC	\$181,493	\$173,038	\$0.91	\$0.84
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$23,556	\$6,184	\$0.12	\$0.03
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,130,319	\$1,725,188	\$5.67	\$8.35
IP - Psych	\$414,954	\$398,089	\$2.08	\$1.93
Lab	\$391,837	\$420,224	\$1.97	\$2.03
OP - Emergency Room	\$659,368	\$799,153	\$3.31	\$3.87
OP - Other	\$2,387,599	\$2,656,784	\$11.99	\$12.86
Pharmacy	\$4,886,219	\$5,395,542	\$24.53	\$26.11
Prof - Anesthesia	\$90,990	\$102,475	\$0.46	\$0.50
Prof - Child EPSDT	\$36,372	\$48,925	\$0.18	\$0.24
Prof - Evaluation & Management	\$2,548,218	\$3,168,744	\$12.79	\$15.34
Prof - Maternity	\$10,563	\$6,313	\$0.05	\$0.03
Prof - Other	\$403,803	\$604,965	\$2.03	\$2.93
Prof - Psych	\$537,639	\$556,726	\$2.70	\$2.69
Prof - Specialist	\$412,559	\$455,864	\$2.07	\$2.21
Prof - Vision	\$215,931	\$241,017	\$1.08	\$1.17
Radiology	\$134,111	\$149,929	\$0.67	\$0.73
Transportation/Ambulance	\$608,184	\$621,188	\$3.05	\$3.01
Total	\$15,210,945	\$17,667,986	\$76.37	\$85.51

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 15-20 Female				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	46,851	48,140		
Service Type				
DME/Supplies	\$46,927	\$26,661	\$1.00	\$0.55
FQHC / RHC	\$202,279	\$224,179	\$4.32	\$4.66
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,198,400	\$2,291,284	\$46.92	\$47.60
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$550,711	\$421,761	\$11.75	\$8.76
IP - Psych	\$85,852	\$145,217	\$1.83	\$3.02
Lab	\$209,002	\$282,524	\$4.46	\$5.87
OP - Emergency Room	\$361,763	\$396,083	\$7.72	\$8.23
OP - Other	\$1,342,693	\$1,563,810	\$28.66	\$32.48
Pharmacy	\$1,199,514	\$1,469,640	\$25.60	\$30.53
Prof - Anesthesia	\$152,643	\$167,218	\$3.26	\$3.47
Prof - Child EPSDT	\$49,462	\$50,378	\$1.06	\$1.05
Prof - Evaluation & Management	\$1,021,173	\$1,191,391	\$21.80	\$24.75
Prof - Maternity	\$1,259,824	\$1,312,766	\$26.89	\$27.27
Prof - Other	\$155,962	\$227,579	\$3.33	\$4.73
Prof - Psych	\$119,136	\$123,804	\$2.54	\$2.57
Prof - Specialist	\$164,887	\$204,771	\$3.52	\$4.25
Prof - Vision	\$52,010	\$57,092	\$1.11	\$1.19
Radiology	\$226,468	\$284,430	\$4.83	\$5.91
Transportation/Ambulance	\$197,149	\$191,359	\$4.21	\$3.98
Total	\$9,595,855	\$10,631,944	\$204.82	\$220.85

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 21-44 Female				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	68,488	75,996		
Service Type				
DME/Supplies	\$176,521	\$268,351	\$2.58	\$3.53
FQHC / RHC	\$474,765	\$524,611	\$6.93	\$6.90
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$6,067,964	\$6,254,445	\$88.60	\$82.30
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,881,895	\$3,294,573	\$42.08	\$43.35
IP - Psych	\$230,236	\$297,306	\$3.36	\$3.91
Lab	\$453,194	\$660,758	\$6.62	\$8.69
OP - Emergency Room	\$976,120	\$1,170,852	\$14.25	\$15.41
OP - Other	\$4,845,173	\$5,917,789	\$70.74	\$77.87
Pharmacy	\$3,917,578	\$4,661,580	\$57.20	\$61.34
Prof - Anesthesia	\$446,211	\$494,340	\$6.52	\$6.50
Prof - Child EPSDT	\$76,373	\$77,853	\$1.12	\$1.02
Prof - Evaluation & Management	\$2,183,948	\$2,633,019	\$31.89	\$34.65
Prof - Maternity	\$3,195,741	\$3,245,294	\$46.66	\$42.70
Prof - Other	\$513,696	\$692,239	\$7.50	\$9.11
Prof - Psych	\$191,487	\$200,074	\$2.80	\$2.63
Prof - Specialist	\$893,446	\$1,101,022	\$13.05	\$14.49
Prof - Vision	\$77,977	\$97,368	\$1.14	\$1.28
Radiology	\$715,692	\$923,304	\$10.45	\$12.15
Transportation/Ambulance	\$408,318	\$437,159	\$5.96	\$5.75
Total	\$28,726,334	\$32,951,938	\$419.44	\$433.60

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 15-20 Male				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	35,574	35,339		
Service Type				
DME/Supplies	\$30,023	\$50,028	\$0.84	\$1.42
FQHC / RHC	\$30,497	\$38,600	\$0.86	\$1.09
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$1,851	\$0.00	\$0.05
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$685,355	\$371,388	\$19.27	\$10.51
IP - Psych	\$42,797	\$117,590	\$1.20	\$3.33
Lab	\$56,976	\$61,318	\$1.60	\$1.74
OP - Emergency Room	\$167,415	\$181,769	\$4.71	\$5.14
OP - Other	\$662,799	\$623,616	\$18.63	\$17.65
Pharmacy	\$765,078	\$901,041	\$21.51	\$25.50
Prof - Anesthesia	\$17,091	\$15,683	\$0.48	\$0.44
Prof - Child EPSDT	\$3,671	\$4,339	\$0.10	\$0.12
Prof - Evaluation & Management	\$407,321	\$483,494	\$11.45	\$13.68
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$81,222	\$81,447	\$2.28	\$2.30
Prof - Psych	\$80,070	\$80,665	\$2.25	\$2.28
Prof - Specialist	\$128,189	\$116,682	\$3.60	\$3.30
Prof - Vision	\$38,662	\$42,270	\$1.09	\$1.20
Radiology	\$47,366	\$47,818	\$1.33	\$1.35
Transportation/Ambulance	\$118,614	\$130,983	\$3.33	\$3.71
Total	\$3,363,147	\$3,350,582	\$94.54	\$94.81

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 21-44 Male				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	6,867	6,930		
Service Type				
DME/Supplies	\$64,864	\$53,815	\$9.45	\$7.77
FQHC / RHC	\$17,490	\$15,161	\$2.55	\$2.19
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$445,359	\$733,569	\$64.86	\$105.85
IP - Psych	\$47,342	\$62,239	\$6.89	\$8.98
Lab	\$25,694	\$30,289	\$3.74	\$4.37
OP - Emergency Room	\$88,518	\$96,150	\$12.89	\$13.87
OP - Other	\$481,077	\$477,213	\$70.06	\$68.86
Pharmacy	\$512,556	\$564,855	\$74.64	\$81.51
Prof - Anesthesia	\$13,963	\$15,540	\$2.03	\$2.24
Prof - Child EPSDT	\$1,381	\$1,087	\$0.20	\$0.16
Prof - Evaluation & Management	\$178,627	\$192,622	\$26.01	\$27.80
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$55,219	\$35,962	\$8.04	\$5.19
Prof - Psych	\$17,391	\$16,082	\$2.53	\$2.32
Prof - Specialist	\$101,347	\$94,693	\$14.76	\$13.66
Prof - Vision	\$9,062	\$9,708	\$1.32	\$1.40
Radiology	\$39,073	\$38,160	\$5.69	\$5.51
Transportation/Ambulance	\$39,780	\$32,554	\$5.79	\$4.70
Total	\$2,138,743	\$2,469,698	\$311.45	\$356.38

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 45 and Over				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	6,694	7,034		
Service Type				
DME/Supplies	\$70,887	\$63,841	\$10.59	\$9.08
FQHC / RHC	\$21,222	\$27,075	\$3.17	\$3.85
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,752	\$6,909	\$0.41	\$0.98
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$754,091	\$770,247	\$112.65	\$109.50
IP - Psych	\$27,993	\$56,846	\$4.18	\$8.08
Lab	\$43,420	\$52,850	\$6.49	\$7.51
OP - Emergency Room	\$70,998	\$83,077	\$10.61	\$11.81
OP - Other	\$653,676	\$853,645	\$97.65	\$121.36
Pharmacy	\$968,561	\$1,037,337	\$144.69	\$147.47
Prof - Anesthesia	\$19,533	\$22,771	\$2.92	\$3.24
Prof - Child EPSDT	\$2,153	\$3,406	\$0.32	\$0.48
Prof - Evaluation & Management	\$262,312	\$274,417	\$39.19	\$39.01
Prof - Maternity	\$4,409	\$1,732	\$0.66	\$0.25
Prof - Other	\$78,849	\$125,035	\$11.78	\$17.78
Prof - Psych	\$29,002	\$31,834	\$4.33	\$4.53
Prof - Specialist	\$146,110	\$170,378	\$21.83	\$24.22
Prof - Vision	\$11,954	\$15,084	\$1.79	\$2.14
Radiology	\$75,109	\$84,930	\$11.22	\$12.07
Transportation/Ambulance	\$72,946	\$45,665	\$10.90	\$6.49
Total	\$3,315,977	\$3,727,078	\$495.37	\$529.87

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

All Age Categories				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	566,957	597,298		
Service Type				
DME/Supplies	\$856,611	\$980,155	\$1.51	\$1.64
FQHC / RHC	\$1,374,451	\$1,441,189	\$2.42	\$2.41
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$8,292,671	\$8,560,673	\$14.63	\$14.33
IP - Newborn	\$8,689,491	\$10,699,315	\$15.33	\$17.91
IP - Other	\$9,610,111	\$10,769,174	\$16.95	\$18.03
IP - Psych	\$1,018,071	\$1,269,690	\$1.80	\$2.13
Lab	\$1,658,416	\$2,050,551	\$2.93	\$3.43
OP - Emergency Room	\$3,443,886	\$4,075,289	\$6.07	\$6.82
OP - Other	\$13,951,080	\$16,019,737	\$24.61	\$26.82
Pharmacy	\$15,254,111	\$17,585,441	\$26.91	\$29.44
Prof - Anesthesia	\$924,669	\$1,050,827	\$1.63	\$1.76
Prof - Child EPSDT	\$800,947	\$914,064	\$1.41	\$1.53
Prof - Evaluation & Management	\$13,476,302	\$16,836,960	\$23.77	\$28.19
Prof - Maternity	\$4,470,537	\$4,566,106	\$7.89	\$7.64
Prof - Other	\$2,409,584	\$3,116,795	\$4.25	\$5.22
Prof - Psych	\$1,182,914	\$1,249,244	\$2.09	\$2.09
Prof - Specialist	\$2,634,984	\$3,018,916	\$4.65	\$5.05
Prof - Vision	\$628,920	\$719,735	\$1.11	\$1.20
Radiology	\$1,442,836	\$1,982,041	\$2.54	\$3.32
Transportation/Ambulance	\$2,164,648	\$2,226,556	\$3.82	\$3.73
Total	\$94,285,239	\$109,132,458	\$166.30	\$182.71

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age Under 1				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	81,019	83,447		
Service Type				
DME/Supplies	\$327,129	\$314,156	\$4.04	\$3.76
FQHC / RHC	\$186,138	\$156,872	\$2.30	\$1.88
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$18,141,532	\$15,745,906	\$223.92	\$188.69
IP - Other	\$2,883,923	\$1,890,782	\$35.60	\$22.66
IP - Psych	\$83,493	\$85,286	\$1.03	\$1.02
Lab	\$144,660	\$131,473	\$1.79	\$1.58
OP - Emergency Room	\$821,357	\$996,450	\$10.14	\$11.94
OP - Other	\$2,147,276	\$2,317,921	\$26.50	\$27.78
Pharmacy	\$1,355,373	\$1,700,518	\$16.73	\$20.38
Prof - Anesthesia	\$148,107	\$137,992	\$1.83	\$1.65
Prof - Child EPSDT	\$772,877	\$860,667	\$9.54	\$10.31
Prof - Evaluation & Management	\$7,607,690	\$7,970,923	\$93.90	\$95.52
Prof - Maternity	\$0	\$996	\$0.00	\$0.01
Prof - Other	\$767,924	\$1,069,250	\$9.48	\$12.81
Prof - Psych	\$84,200	\$85,998	\$1.04	\$1.03
Prof - Specialist	\$768,133	\$741,125	\$9.48	\$8.88
Prof - Vision	\$87,305	\$97,632	\$1.08	\$1.17
Radiology	\$120,156	\$156,957	\$1.48	\$1.88
Transportation/Ambulance	\$282,031	\$270,176	\$3.48	\$3.24
Total	\$36,729,303	\$34,731,080	\$453.34	\$416.21

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 1-5				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	314,185	311,160		
Service Type				
DME/Supplies	\$287,740	\$331,386	\$0.92	\$1.07
FQHC / RHC	\$246,895	\$203,067	\$0.79	\$0.65
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$3,486	\$3,934	\$0.01	\$0.01
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,043,882	\$2,351,952	\$6.51	\$7.56
IP - Psych	\$361,431	\$349,230	\$1.15	\$1.12
Lab	\$561,119	\$524,108	\$1.79	\$1.68
OP - Emergency Room	\$1,941,450	\$2,545,475	\$6.18	\$8.18
OP - Other	\$5,246,116	\$5,630,279	\$16.70	\$18.09
Pharmacy	\$3,981,663	\$4,326,833	\$12.67	\$13.91
Prof - Anesthesia	\$258,995	\$268,125	\$0.82	\$0.86
Prof - Child EPSDT	\$570,117	\$698,331	\$1.81	\$2.24
Prof - Evaluation & Management	\$6,533,240	\$7,725,830	\$20.79	\$24.83
Prof - Maternity	\$1,737	\$2,050	\$0.01	\$0.01
Prof - Other	\$1,613,799	\$2,246,648	\$5.14	\$7.22
Prof - Psych	\$436,379	\$437,388	\$1.39	\$1.41
Prof - Specialist	\$751,453	\$859,877	\$2.39	\$2.76
Prof - Vision	\$307,205	\$324,869	\$0.98	\$1.04
Radiology	\$128,591	\$153,188	\$0.41	\$0.49
Transportation/Ambulance	\$984,065	\$906,651	\$3.13	\$2.91
Total	\$26,259,364	\$29,889,222	\$83.58	\$96.06

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 6-14				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	422,909	412,754		
Service Type				
DME/Supplies	\$279,541	\$342,579	\$0.66	\$0.83
FQHC / RHC	\$181,816	\$166,883	\$0.43	\$0.40
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$70,328	\$66,548	\$0.17	\$0.16
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,355,292	\$1,762,088	\$5.57	\$4.27
IP - Psych	\$787,909	\$883,900	\$1.86	\$2.14
Lab	\$620,349	\$548,132	\$1.47	\$1.33
OP - Emergency Room	\$1,588,126	\$2,039,386	\$3.76	\$4.94
OP - Other	\$4,798,578	\$5,314,876	\$11.35	\$12.88
Pharmacy	\$9,219,369	\$9,875,096	\$21.80	\$23.92
Prof - Anesthesia	\$180,165	\$189,574	\$0.43	\$0.46
Prof - Child EPSDT	\$133,297	\$186,711	\$0.32	\$0.45
Prof - Evaluation & Management	\$5,237,529	\$5,928,408	\$12.38	\$14.36
Prof - Maternity	\$31,985	\$39,374	\$0.08	\$0.10
Prof - Other	\$1,725,079	\$1,881,450	\$4.08	\$4.56
Prof - Psych	\$1,171,160	\$1,156,723	\$2.77	\$2.80
Prof - Specialist	\$779,626	\$825,645	\$1.84	\$2.00
Prof - Vision	\$420,417	\$456,049	\$0.99	\$1.10
Radiology	\$216,873	\$225,888	\$0.51	\$0.55
Transportation/Ambulance	\$1,304,070	\$1,196,639	\$3.08	\$2.90
Total	\$31,101,508	\$33,085,950	\$73.54	\$80.16

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 15-20 Female				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	94,543	91,996		
Service Type				
DME/Supplies	\$58,460	\$62,215	\$0.62	\$0.68
FQHC / RHC	\$189,136	\$150,213	\$2.00	\$1.63
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$4,106,812	\$3,778,895	\$43.44	\$41.08
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$441,293	\$495,318	\$4.67	\$5.38
IP - Psych	\$215,054	\$214,905	\$2.27	\$2.34
Lab	\$250,506	\$240,984	\$2.65	\$2.62
OP - Emergency Room	\$1,020,668	\$1,270,366	\$10.80	\$13.81
OP - Other	\$2,462,949	\$2,780,845	\$26.05	\$30.23
Pharmacy	\$1,880,414	\$2,078,849	\$19.89	\$22.60
Prof - Anesthesia	\$393,187	\$434,133	\$4.16	\$4.72
Prof - Child EPSDT	\$107,400	\$103,735	\$1.14	\$1.13
Prof - Evaluation & Management	\$1,644,822	\$1,906,187	\$17.40	\$20.72
Prof - Maternity	\$1,948,884	\$2,059,200	\$20.61	\$22.38
Prof - Other	\$286,348	\$439,066	\$3.03	\$4.77
Prof - Psych	\$208,306	\$214,659	\$2.20	\$2.33
Prof - Specialist	\$319,588	\$354,803	\$3.38	\$3.86
Prof - Vision	\$93,034	\$101,755	\$0.98	\$1.11
Radiology	\$453,282	\$486,828	\$4.79	\$5.29
Transportation/Ambulance	\$336,142	\$311,458	\$3.56	\$3.39
Total	\$16,416,285	\$17,484,415	\$173.64	\$190.06

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

Age 21-44 Female				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	181,519	179,586		
Service Type				
DME/Supplies	\$467,636	\$487,132	\$2.58	\$2.71
FQHC / RHC	\$598,104	\$620,480	\$3.29	\$3.46
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$11,997,316	\$11,325,022	\$66.09	\$63.06
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$3,393,414	\$4,402,559	\$18.69	\$24.52
IP - Psych	\$485,847	\$671,511	\$2.68	\$3.74
Lab	\$609,850	\$600,481	\$3.36	\$3.34
OP - Emergency Room	\$3,631,809	\$4,583,315	\$20.01	\$25.52
OP - Other	\$11,034,673	\$11,758,381	\$60.79	\$65.47
Pharmacy	\$7,995,316	\$8,025,557	\$44.05	\$44.69
Prof - Anesthesia	\$1,317,299	\$1,385,867	\$7.26	\$7.72
Prof - Child EPSDT	\$151,612	\$147,008	\$0.84	\$0.82
Prof - Evaluation & Management	\$4,802,355	\$5,223,673	\$26.46	\$29.09
Prof - Maternity	\$6,153,437	\$6,379,369	\$33.90	\$35.52
Prof - Other	\$1,767,324	\$2,063,886	\$9.74	\$11.49
Prof - Psych	\$473,042	\$496,885	\$2.61	\$2.77
Prof - Specialist	\$2,020,574	\$2,120,744	\$11.13	\$11.81
Prof - Vision	\$192,198	\$215,352	\$1.06	\$1.20
Radiology	\$1,821,338	\$1,987,119	\$10.03	\$11.06
Transportation/Ambulance	\$722,942	\$650,660	\$3.98	\$3.62
Total	\$59,636,087	\$63,145,002	\$328.54	\$351.61

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 15-20 Male				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	68,740	66,879		
Service Type				
DME/Supplies	\$40,451	\$116,359	\$0.59	\$1.74
FQHC / RHC	\$27,354	\$27,900	\$0.40	\$0.42
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$571,619	\$593,954	\$8.32	\$8.88
IP - Psych	\$160,695	\$173,475	\$2.34	\$2.59
Lab	\$90,653	\$79,475	\$1.32	\$1.19
OP - Emergency Room	\$347,965	\$478,098	\$5.06	\$7.15
OP - Other	\$1,260,777	\$1,338,724	\$18.34	\$20.02
Pharmacy	\$1,355,448	\$1,802,656	\$19.72	\$26.95
Prof - Anesthesia	\$46,677	\$36,605	\$0.68	\$0.55
Prof - Child EPSDT	\$13,144	\$15,402	\$0.19	\$0.23
Prof - Evaluation & Management	\$693,446	\$818,773	\$10.09	\$12.24
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$749,578	\$808,688	\$10.90	\$12.09
Prof - Psych	\$175,693	\$168,038	\$2.56	\$2.51
Prof - Specialist	\$222,403	\$223,773	\$3.24	\$3.35
Prof - Vision	\$65,796	\$72,984	\$0.96	\$1.09
Radiology	\$65,833	\$68,127	\$0.96	\$1.02
Transportation/Ambulance	\$222,151	\$200,558	\$3.23	\$3.00
Total	\$6,109,681	\$7,023,590	\$88.88	\$105.02

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 21-44 Male				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	7,770	7,706		
Service Type				
DME/Supplies	\$73,321	\$69,550	\$9.44	\$9.03
FQHC / RHC	\$13,525	\$9,422	\$1.74	\$1.22
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,112	\$1,599	\$0.27	\$0.21
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$263,160	\$408,381	\$33.87	\$53.00
IP - Psych	\$22,199	\$31,442	\$2.86	\$4.08
Lab	\$12,921	\$12,463	\$1.66	\$1.62
OP - Emergency Room	\$125,703	\$166,868	\$16.18	\$21.65
OP - Other	\$471,881	\$481,705	\$60.73	\$62.51
Pharmacy	\$390,156	\$409,476	\$50.21	\$53.14
Prof - Anesthesia	\$11,845	\$15,303	\$1.52	\$1.99
Prof - Child EPSDT	\$1,386	\$1,332	\$0.18	\$0.17
Prof - Evaluation & Management	\$173,549	\$188,791	\$22.34	\$24.50
Prof - Maternity	\$743	\$0	\$0.10	\$0.00
Prof - Other	\$194,920	\$80,109	\$25.09	\$10.40
Prof - Psych	\$14,168	\$18,642	\$1.82	\$2.42
Prof - Specialist	\$138,309	\$80,272	\$17.80	\$10.42
Prof - Vision	\$7,967	\$14,019	\$1.03	\$1.82
Radiology	\$39,186	\$41,832	\$5.04	\$5.43
Transportation/Ambulance	\$28,025	\$26,815	\$3.61	\$3.48
Total	\$1,985,079	\$2,058,023	\$255.48	\$267.07

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)

Exhibit 1a

Age 45 and Over				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	15,068	14,601		
Service Type				
DME/Supplies	\$163,450	\$201,658	\$10.85	\$13.81
FQHC / RHC	\$63,593	\$76,679	\$4.22	\$5.25
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$1,902	\$9,702	\$0.13	\$0.66
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,031,992	\$1,217,569	\$68.49	\$83.39
IP - Psych	\$58,805	\$58,409	\$3.90	\$4.00
Lab	\$45,093	\$48,971	\$2.99	\$3.35
OP - Emergency Room	\$295,432	\$330,308	\$19.61	\$22.62
OP - Other	\$1,787,872	\$1,798,781	\$118.65	\$123.20
Pharmacy	\$1,920,020	\$1,940,454	\$127.42	\$132.90
Prof - Anesthesia	\$47,797	\$53,546	\$3.17	\$3.67
Prof - Child EPSDT	\$6,248	\$5,965	\$0.41	\$0.41
Prof - Evaluation & Management	\$579,810	\$665,324	\$38.48	\$45.57
Prof - Maternity	\$823	\$87	\$0.05	\$0.01
Prof - Other	\$383,337	\$368,199	\$25.44	\$25.22
Prof - Psych	\$57,527	\$58,202	\$3.82	\$3.99
Prof - Specialist	\$333,263	\$370,328	\$22.12	\$25.36
Prof - Vision	\$28,843	\$31,197	\$1.91	\$2.14
Radiology	\$151,510	\$177,779	\$10.06	\$12.18
Transportation/Ambulance	\$63,118	\$59,476	\$4.19	\$4.07
Total	\$7,020,433	\$7,472,634	\$465.92	\$511.79

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

All Age Categories				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	1,185,753	1,168,129		
Service Type				
DME/Supplies	\$1,697,727	\$1,925,035	\$1.43	\$1.65
FQHC / RHC	\$1,506,561	\$1,411,516	\$1.27	\$1.21
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$16,181,956	\$15,185,701	\$13.65	\$13.00
IP - Newborn	\$18,141,532	\$15,745,906	\$15.30	\$13.48
IP - Other	\$12,984,576	\$13,122,603	\$10.95	\$11.23
IP - Psych	\$2,175,433	\$2,468,158	\$1.83	\$2.11
Lab	\$2,335,152	\$2,186,086	\$1.97	\$1.87
OP - Emergency Room	\$9,772,510	\$12,410,266	\$8.24	\$10.62
OP - Other	\$29,210,121	\$31,421,514	\$24.63	\$26.90
Pharmacy	\$28,097,761	\$30,159,440	\$23.70	\$25.82
Prof - Anesthesia	\$2,404,072	\$2,521,145	\$2.03	\$2.16
Prof - Child EPSDT	\$1,756,080	\$2,019,152	\$1.48	\$1.73
Prof - Evaluation & Management	\$27,272,440	\$30,427,909	\$23.00	\$26.05
Prof - Maternity	\$8,137,609	\$8,481,076	\$6.86	\$7.26
Prof - Other	\$7,488,309	\$8,957,296	\$6.32	\$7.67
Prof - Psych	\$2,620,475	\$2,636,535	\$2.21	\$2.26
Prof - Specialist	\$5,333,349	\$5,576,567	\$4.50	\$4.77
Prof - Vision	\$1,202,765	\$1,313,857	\$1.01	\$1.12
Radiology	\$2,996,768	\$3,297,720	\$2.53	\$2.82
Transportation/Ambulance	\$3,942,545	\$3,622,435	\$3.32	\$3.10
Total	\$185,257,739	\$194,889,916	\$156.24	\$166.84

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Temporary Assistance to Needy Families (TANF)**

Exhibit 1a

All Age Categories				
All Regions	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	4,016,630	4,239,941		
Service Type				
DME/Supplies	\$5,442,577	\$6,541,744	\$1.36	\$1.54
FQHC / RHC	\$3,631,682	\$3,834,667	\$0.90	\$0.90
Home Health	\$4,059	\$8,731	\$0.00	\$0.00
IP - Maternity	\$52,089,859	\$52,318,316	\$12.97	\$12.34
IP - Newborn	\$57,009,585	\$55,584,416	\$14.19	\$13.11
IP - Other	\$58,980,084	\$67,567,089	\$14.68	\$15.94
IP - Psych	\$7,493,045	\$8,709,138	\$1.87	\$2.05
Lab	\$9,083,861	\$10,721,287	\$2.26	\$2.53
OP - Emergency Room	\$26,820,272	\$33,909,071	\$6.68	\$8.00
OP - Other	\$94,773,612	\$107,968,329	\$23.60	\$25.46
Pharmacy	\$97,477,237	\$112,289,819	\$24.27	\$26.48
Prof - Anesthesia	\$7,258,519	\$7,801,887	\$1.81	\$1.84
Prof - Child EPSDT	\$6,261,987	\$7,273,521	\$1.56	\$1.72
Prof - Evaluation & Management	\$97,159,557	\$119,128,522	\$24.19	\$28.10
Prof - Maternity	\$26,503,494	\$28,051,419	\$6.60	\$6.62
Prof - Other	\$22,925,477	\$26,928,142	\$5.71	\$6.35
Prof - Psych	\$7,693,320	\$8,512,879	\$1.92	\$2.01
Prof - Specialist	\$16,748,750	\$19,112,426	\$4.17	\$4.51
Prof - Vision	\$4,405,644	\$5,001,230	\$1.10	\$1.18
Radiology	\$9,448,138	\$11,740,442	\$2.35	\$2.77
Transportation/Ambulance	\$13,709,215	\$14,281,393	\$3.41	\$3.37
Total	\$624,919,974	\$707,284,469	\$155.58	\$166.81

Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	115	111		
Service Type				
DME/Supplies	\$12,250	\$4,505	\$106.52	\$40.59
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$1,428	\$27,177	\$12.42	\$244.84
IP - Other	\$42,366	\$122,876	\$368.40	\$1,106.99
IP - Psych	\$0	\$0	\$0.00	\$0.00
Lab	\$273	\$223	\$2.37	\$2.01
OP - Emergency Room	\$2,167	\$3,776	\$18.84	\$34.02
OP - Other	\$4,042	\$7,758	\$35.15	\$69.89
Pharmacy	\$19,373	\$40,893	\$168.46	\$368.40
Prof - Anesthesia	\$0	\$1,412	\$0.00	\$12.72
Prof - Child EPSDT	\$606	\$326	\$5.27	\$2.94
Prof - Evaluation & Management	\$13,079	\$62,718	\$113.73	\$565.03
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$5,060	\$7,325	\$44.00	\$65.99
Prof - Psych	\$0	\$0	\$0.00	\$0.00
Prof - Specialist	\$581	\$6,083	\$5.05	\$54.81
Prof - Vision	\$453	\$356	\$3.94	\$3.21
Radiology	\$222	\$1,388	\$1.93	\$12.50
Transportation/Ambulance	\$1,519	\$7,547	\$13.21	\$67.99
Total	\$103,417	\$294,362	\$899.28	\$2,651.91

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	2,843	2,720		
Service Type				
DME/Supplies	\$142,494	\$196,075	\$50.12	\$72.09
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$641,656	\$426,367	\$225.70	\$156.75
IP - Psych	\$648	\$5,502	\$0.23	\$2.02
Lab	\$5,994	\$6,947	\$2.11	\$2.55
OP - Emergency Room	\$24,883	\$29,697	\$8.75	\$10.92
OP - Other	\$785,048	\$409,560	\$276.13	\$150.57
Pharmacy	\$369,586	\$449,109	\$130.00	\$165.11
Prof - Anesthesia	\$27,254	\$19,196	\$9.59	\$7.06
Prof - Child EPSDT	\$4,075	\$4,535	\$1.43	\$1.67
Prof - Evaluation & Management	\$162,404	\$210,418	\$57.12	\$77.36
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$112,383	\$105,322	\$39.53	\$38.72
Prof - Psych	\$4,757	\$3,538	\$1.67	\$1.30
Prof - Specialist	\$44,882	\$36,905	\$15.79	\$13.57
Prof - Vision	\$7,388	\$10,007	\$2.60	\$3.68
Radiology	\$10,550	\$10,133	\$3.71	\$3.73
Transportation/Ambulance	\$14,034	\$10,695	\$4.94	\$3.93
Total	\$2,358,037	\$1,934,005	\$829.42	\$711.03

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	14,544	15,548		
Service Type				
DME/Supplies	\$213,769	\$300,448	\$14.70	\$19.32
FQHC / RHC	\$77	\$142	\$0.01	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$31,727	\$54,092	\$2.18	\$3.48
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,022,555	\$1,458,000	\$139.06	\$93.77
IP - Psych	\$167,026	\$209,444	\$11.48	\$13.47
Lab	\$27,559	\$28,266	\$1.89	\$1.82
OP - Emergency Room	\$96,265	\$111,952	\$6.62	\$7.20
OP - Other	\$737,925	\$874,444	\$50.74	\$56.24
Pharmacy	\$2,888,242	\$2,680,422	\$198.59	\$172.40
Prof - Anesthesia	\$38,742	\$38,540	\$2.66	\$2.48
Prof - Child EPSDT	\$5,546	\$5,551	\$0.38	\$0.36
Prof - Evaluation & Management	\$426,852	\$532,476	\$29.35	\$34.25
Prof - Maternity	\$14,894	\$23,807	\$1.02	\$1.53
Prof - Other	\$163,404	\$1,748,716	\$11.24	\$112.47
Prof - Psych	\$94,615	\$102,299	\$6.51	\$6.58
Prof - Specialist	\$73,364	\$85,238	\$5.04	\$5.48
Prof - Vision	\$19,122	\$23,239	\$1.31	\$1.49
Radiology	\$36,389	\$44,784	\$2.50	\$2.88
Transportation/Ambulance	\$64,194	\$63,815	\$4.41	\$4.10
Total	\$7,122,268	\$8,385,676	\$489.70	\$539.34

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 21-44 Female				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	10,901	10,628		
Service Type				
DME/Supplies	\$118,750	\$128,927	\$10.89	\$12.13
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$123,334	\$133,072	\$11.31	\$12.52
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,235,647	\$1,972,685	\$205.09	\$185.61
IP - Psych	\$519,313	\$553,600	\$47.64	\$52.09
Lab	\$44,614	\$54,648	\$4.09	\$5.14
OP - Emergency Room	\$233,022	\$273,789	\$21.38	\$25.76
OP - Other	\$1,098,393	\$1,312,971	\$100.76	\$123.54
Pharmacy	\$3,231,540	\$3,498,865	\$296.44	\$329.21
Prof - Anesthesia	\$39,985	\$43,739	\$3.67	\$4.12
Prof - Child EPSDT	\$3,982	\$4,916	\$0.37	\$0.46
Prof - Evaluation & Management	\$644,743	\$653,138	\$59.15	\$61.45
Prof - Maternity	\$45,512	\$54,712	\$4.18	\$5.15
Prof - Other	\$209,862	\$226,865	\$19.25	\$21.35
Prof - Psych	\$127,925	\$132,598	\$11.74	\$12.48
Prof - Specialist	\$153,352	\$155,297	\$14.07	\$14.61
Prof - Vision	\$17,470	\$17,212	\$1.60	\$1.62
Radiology	\$118,086	\$150,218	\$10.83	\$14.13
Transportation/Ambulance	\$82,277	\$102,190	\$7.55	\$9.62
Total	\$9,047,809	\$9,469,440	\$830.00	\$890.99

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	9,973	10,142		
Service Type				
DME/Supplies	\$38,661	\$81,831	\$3.88	\$8.07
FQHC / RHC	\$43	\$98	\$0.00	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,682,459	\$1,948,847	\$168.70	\$192.16
IP - Psych	\$416,346	\$519,337	\$41.75	\$51.21
Lab	\$22,004	\$29,945	\$2.21	\$2.95
OP - Emergency Room	\$113,171	\$127,780	\$11.35	\$12.60
OP - Other	\$950,229	\$894,458	\$95.28	\$88.19
Pharmacy	\$2,604,239	\$3,441,264	\$261.13	\$339.31
Prof - Anesthesia	\$21,971	\$18,206	\$2.20	\$1.80
Prof - Child EPSDT	\$20,785	\$2,153	\$2.08	\$0.21
Prof - Evaluation & Management	\$343,694	\$393,777	\$34.46	\$38.83
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$184,042	\$127,360	\$18.45	\$12.56
Prof - Psych	\$102,969	\$102,165	\$10.32	\$10.07
Prof - Specialist	\$84,093	\$130,545	\$8.43	\$12.87
Prof - Vision	\$11,339	\$12,015	\$1.14	\$1.18
Radiology	\$67,475	\$74,584	\$6.77	\$7.35
Transportation/Ambulance	\$75,664	\$70,832	\$7.59	\$6.98
Total	\$6,739,185	\$7,975,197	\$675.74	\$786.35

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 45 and Over				
Northern Virginia	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	46,108	44,796		
Service Type				
DME/Supplies	\$459,686	\$404,547	\$9.97	\$9.03
FQHC / RHC	\$0	\$662	\$0.00	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$14,404,332	\$11,992,740	\$312.40	\$267.72
IP - Psych	\$659,443	\$884,166	\$14.30	\$19.74
Lab	\$204,092	\$234,464	\$4.43	\$5.23
OP - Emergency Room	\$448,718	\$488,846	\$9.73	\$10.91
OP - Other	\$4,990,657	\$5,439,711	\$108.24	\$121.43
Pharmacy	\$12,872,056	\$13,527,739	\$279.17	\$301.99
Prof - Anesthesia	\$178,305	\$171,534	\$3.87	\$3.83
Prof - Child EPSDT	\$32,474	\$16,215	\$0.70	\$0.36
Prof - Evaluation & Management	\$2,859,294	\$2,944,322	\$62.01	\$65.73
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$1,409,358	\$1,545,935	\$30.57	\$34.51
Prof - Psych	\$258,136	\$266,110	\$5.60	\$5.94
Prof - Specialist	\$1,042,287	\$1,090,216	\$22.61	\$24.34
Prof - Vision	\$136,529	\$156,052	\$2.96	\$3.48
Radiology	\$769,479	\$833,693	\$16.69	\$18.61
Transportation/Ambulance	\$370,396	\$369,234	\$8.03	\$8.24
Total	\$41,095,241	\$40,366,186	\$891.28	\$901.11

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	84,484	83,945		
Service Type				
DME/Supplies	\$985,610	\$1,116,333	\$11.67	\$13.30
FQHC / RHC	\$119	\$902	\$0.00	\$0.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$155,062	\$187,163	\$1.84	\$2.23
IP - Newborn	\$1,428	\$27,177	\$0.02	\$0.32
IP - Other	\$21,029,016	\$17,921,514	\$248.91	\$213.49
IP - Psych	\$1,762,775	\$2,172,049	\$20.87	\$25.87
Lab	\$304,537	\$354,493	\$3.60	\$4.22
OP - Emergency Room	\$918,226	\$1,035,839	\$10.87	\$12.34
OP - Other	\$8,566,294	\$8,938,902	\$101.40	\$106.49
Pharmacy	\$21,985,035	\$23,638,291	\$260.23	\$281.59
Prof - Anesthesia	\$306,257	\$292,626	\$3.63	\$3.49
Prof - Child EPSDT	\$67,470	\$33,697	\$0.80	\$0.40
Prof - Evaluation & Management	\$4,450,065	\$4,796,850	\$52.67	\$57.14
Prof - Maternity	\$60,407	\$78,519	\$0.72	\$0.94
Prof - Other	\$2,084,109	\$3,761,522	\$24.67	\$44.81
Prof - Psych	\$588,402	\$606,710	\$6.96	\$7.23
Prof - Specialist	\$1,398,558	\$1,504,285	\$16.55	\$17.92
Prof - Vision	\$192,301	\$218,880	\$2.28	\$2.61
Radiology	\$1,002,201	\$1,114,800	\$11.86	\$13.28
Transportation/Ambulance	\$608,085	\$624,313	\$7.20	\$7.44
Total	\$66,465,957	\$68,424,865	\$786.73	\$815.12

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	71	130		
Service Type				
DME/Supplies	\$4,154	\$9,747	\$58.51	\$74.98
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$32,003	\$209,808	\$450.74	\$1,613.91
IP - Other	\$24,809	\$27,366	\$349.42	\$210.50
IP - Psych	\$580	\$1,098	\$8.17	\$8.45
Lab	\$805	\$2,056	\$11.34	\$15.81
OP - Emergency Room	\$1,393	\$1,799	\$19.62	\$13.84
OP - Other	\$34,543	\$15,344	\$486.52	\$118.03
Pharmacy	\$25,766	\$57,191	\$362.90	\$439.93
Prof - Anesthesia	\$1,682	\$797	\$23.69	\$6.13
Prof - Child EPSDT	\$559	\$1,096	\$7.88	\$8.43
Prof - Evaluation & Management	\$12,491	\$39,684	\$175.92	\$305.26
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$10,204	\$33,310	\$143.71	\$256.23
Prof - Psych	\$158	\$299	\$2.22	\$2.30
Prof - Specialist	\$10,721	\$5,239	\$151.00	\$40.30
Prof - Vision	\$217	\$567	\$3.06	\$4.36
Radiology	\$1,036	\$1,239	\$14.59	\$9.53
Transportation/Ambulance	\$1,952	\$448	\$27.50	\$3.45
Total	\$163,074	\$407,087	\$2,296.82	\$3,131.44

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	2,484	3,403		
Service Type				
DME/Supplies	\$146,938	\$157,113	\$59.15	\$46.17
FQHC / RHC	\$3,492	\$2,093	\$1.41	\$0.62
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$487,782	\$1,206,479	\$196.37	\$354.53
IP - Psych	\$22,483	\$36,347	\$9.05	\$10.68
Lab	\$15,005	\$22,997	\$6.04	\$6.76
OP - Emergency Room	\$21,862	\$26,100	\$8.80	\$7.67
OP - Other	\$518,922	\$580,974	\$208.91	\$170.72
Pharmacy	\$211,544	\$357,136	\$85.16	\$104.95
Prof - Anesthesia	\$14,401	\$23,793	\$5.80	\$6.99
Prof - Child EPSDT	\$4,474	\$6,147	\$1.80	\$1.81
Prof - Evaluation & Management	\$132,998	\$206,815	\$53.54	\$60.77
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$212,530	\$295,881	\$85.56	\$86.95
Prof - Psych	\$14,122	\$15,184	\$5.69	\$4.46
Prof - Specialist	\$42,007	\$69,235	\$16.91	\$20.35
Prof - Vision	\$5,534	\$7,552	\$2.23	\$2.22
Radiology	\$6,224	\$18,417	\$2.51	\$5.41
Transportation/Ambulance	\$26,880	\$39,207	\$10.82	\$11.52
Total	\$1,887,197	\$3,071,472	\$759.74	\$902.58

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	15,301	21,962		
Service Type				
DME/Supplies	\$168,704	\$238,550	\$11.03	\$10.86
FQHC / RHC	\$11,148	\$11,446	\$0.73	\$0.52
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$58,035	\$45,355	\$3.79	\$2.07
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$455,483	\$1,034,928	\$29.77	\$47.12
IP - Psych	\$277,732	\$433,882	\$18.15	\$19.76
Lab	\$61,047	\$104,188	\$3.99	\$4.74
OP - Emergency Room	\$112,353	\$130,304	\$7.34	\$5.93
OP - Other	\$605,906	\$841,689	\$39.60	\$38.32
Pharmacy	\$2,010,507	\$2,839,137	\$131.40	\$129.27
Prof - Anesthesia	\$21,091	\$27,639	\$1.38	\$1.26
Prof - Child EPSDT	\$8,273	\$11,843	\$0.54	\$0.54
Prof - Evaluation & Management	\$323,925	\$532,625	\$21.17	\$24.25
Prof - Maternity	\$25,428	\$21,112	\$1.66	\$0.96
Prof - Other	\$158,779	\$299,382	\$10.38	\$13.63
Prof - Psych	\$143,797	\$227,852	\$9.40	\$10.37
Prof - Specialist	\$70,970	\$117,693	\$4.64	\$5.36
Prof - Vision	\$21,274	\$35,401	\$1.39	\$1.61
Radiology	\$36,100	\$52,728	\$2.36	\$2.40
Transportation/Ambulance	\$111,335	\$152,599	\$7.28	\$6.95
Total	\$4,681,888	\$7,158,354	\$305.99	\$325.94

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 21-44 Female				
Other MSA	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	12,761	16,238		
Service Type				
DME/Supplies	\$238,010	\$266,915	\$18.65	\$16.44
FQHC / RHC	\$34,949	\$13,664	\$2.74	\$0.84
Home Health	\$250	\$313	\$0.02	\$0.02
IP - Maternity	\$198,313	\$238,155	\$15.54	\$14.67
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,067,411	\$2,423,776	\$162.01	\$149.27
IP - Psych	\$373,614	\$543,045	\$29.28	\$33.44
Lab	\$160,272	\$247,396	\$12.56	\$15.24
OP - Emergency Room	\$262,600	\$339,993	\$20.58	\$20.94
OP - Other	\$1,218,678	\$1,751,978	\$95.50	\$107.89
Pharmacy	\$2,690,348	\$3,727,150	\$210.83	\$229.53
Prof - Anesthesia	\$44,092	\$51,822	\$3.46	\$3.19
Prof - Child EPSDT	\$11,919	\$13,562	\$0.93	\$0.84
Prof - Evaluation & Management	\$624,825	\$889,696	\$48.96	\$54.79
Prof - Maternity	\$73,597	\$105,182	\$5.77	\$6.48
Prof - Other	\$313,694	\$371,001	\$24.58	\$22.85
Prof - Psych	\$131,260	\$173,554	\$10.29	\$10.69
Prof - Specialist	\$233,574	\$342,509	\$18.30	\$21.09
Prof - Vision	\$20,422	\$31,070	\$1.60	\$1.91
Radiology	\$146,348	\$212,227	\$11.47	\$13.07
Transportation/Ambulance	\$242,462	\$292,909	\$19.00	\$18.04
Total	\$9,086,639	\$12,035,918	\$712.06	\$741.22

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	9,093	11,784		
Service Type				
DME/Supplies	\$102,543	\$148,794	\$11.28	\$12.63
FQHC / RHC	\$14,212	\$8,627	\$1.56	\$0.73
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,134,884	\$1,621,114	\$124.81	\$137.57
IP - Psych	\$371,193	\$526,977	\$40.82	\$44.72
Lab	\$57,743	\$83,985	\$6.35	\$7.13
OP - Emergency Room	\$117,751	\$141,123	\$12.95	\$11.98
OP - Other	\$472,719	\$788,975	\$51.99	\$66.95
Pharmacy	\$1,721,478	\$2,469,287	\$189.32	\$209.55
Prof - Anesthesia	\$11,381	\$15,628	\$1.25	\$1.33
Prof - Child EPSDT	\$5,433	\$5,406	\$0.60	\$0.46
Prof - Evaluation & Management	\$298,256	\$422,061	\$32.80	\$35.82
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$331,868	\$244,423	\$36.50	\$20.74
Prof - Psych	\$62,139	\$84,329	\$6.83	\$7.16
Prof - Specialist	\$84,728	\$128,449	\$9.32	\$10.90
Prof - Vision	\$14,549	\$17,729	\$1.60	\$1.50
Radiology	\$53,329	\$78,399	\$5.86	\$6.65
Transportation/Ambulance	\$104,018	\$123,844	\$11.44	\$10.51
Total	\$4,958,223	\$6,909,150	\$545.28	\$586.32

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	28,980	38,996		
Service Type				
DME/Supplies	\$748,502	\$1,013,408	\$25.83	\$25.99
FQHC / RHC	\$42,303	\$52,408	\$1.46	\$1.34
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$7,386,812	\$11,878,001	\$254.89	\$304.60
IP - Psych	\$702,030	\$1,143,001	\$24.22	\$29.31
Lab	\$361,509	\$587,831	\$12.47	\$15.07
OP - Emergency Room	\$360,084	\$429,990	\$12.43	\$11.03
OP - Other	\$3,292,312	\$4,581,913	\$113.61	\$117.50
Pharmacy	\$7,863,805	\$11,448,800	\$271.35	\$293.59
Prof - Anesthesia	\$83,027	\$123,070	\$2.86	\$3.16
Prof - Child EPSDT	\$25,100	\$38,209	\$0.87	\$0.98
Prof - Evaluation & Management	\$1,576,796	\$2,310,187	\$54.41	\$59.24
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$1,352,374	\$1,604,025	\$46.67	\$41.13
Prof - Psych	\$177,356	\$261,430	\$6.12	\$6.70
Prof - Specialist	\$690,306	\$1,093,366	\$23.82	\$28.04
Prof - Vision	\$72,211	\$108,349	\$2.49	\$2.78
Radiology	\$418,995	\$593,374	\$14.46	\$15.22
Transportation/Ambulance	\$436,489	\$665,273	\$15.06	\$17.06
Total	\$25,590,009	\$37,932,637	\$883.02	\$972.73

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	68,690	92,513		
Service Type				
DME/Supplies	\$1,408,852	\$1,834,527	\$20.51	\$19.83
FQHC / RHC	\$106,105	\$88,239	\$1.54	\$0.95
Home Health	\$250	\$313	\$0.00	\$0.00
IP - Maternity	\$256,348	\$283,510	\$3.73	\$3.06
IP - Newborn	\$32,003	\$209,808	\$0.47	\$2.27
IP - Other	\$11,557,180	\$18,191,663	\$168.25	\$196.64
IP - Psych	\$1,747,633	\$2,684,350	\$25.44	\$29.02
Lab	\$656,382	\$1,048,452	\$9.56	\$11.33
OP - Emergency Room	\$876,044	\$1,069,309	\$12.75	\$11.56
OP - Other	\$6,143,079	\$8,560,875	\$89.43	\$92.54
Pharmacy	\$14,523,448	\$20,898,702	\$211.43	\$225.90
Prof - Anesthesia	\$175,675	\$242,750	\$2.56	\$2.62
Prof - Child EPSDT	\$55,758	\$76,263	\$0.81	\$0.82
Prof - Evaluation & Management	\$2,969,290	\$4,401,068	\$43.23	\$47.57
Prof - Maternity	\$99,025	\$126,294	\$1.44	\$1.37
Prof - Other	\$2,379,449	\$2,848,021	\$34.64	\$30.79
Prof - Psych	\$528,832	\$762,649	\$7.70	\$8.24
Prof - Specialist	\$1,132,306	\$1,756,493	\$16.48	\$18.99
Prof - Vision	\$134,207	\$200,668	\$1.95	\$2.17
Radiology	\$662,032	\$956,384	\$9.64	\$10.34
Transportation/Ambulance	\$923,136	\$1,274,281	\$13.44	\$13.77
Total	\$46,367,031	\$67,514,618	\$675.02	\$729.79

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	88	103		
Service Type				
DME/Supplies	\$4,511	\$10,404	\$51.26	\$101.01
FQHC / RHC	\$0	\$0	\$0.00	\$0.00
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$97,417	\$76,937	\$1,107.02	\$746.96
IP - Other	\$82,138	\$31,870	\$933.38	\$309.42
IP - Psych	\$1,438	\$2,150	\$16.34	\$20.88
Lab	\$258	\$469	\$2.93	\$4.55
OP - Emergency Room	\$2,995	\$5,205	\$34.03	\$50.54
OP - Other	\$13,703	\$13,327	\$155.71	\$129.39
Pharmacy	\$15,811	\$10,113	\$179.67	\$98.19
Prof - Anesthesia	\$1,101	\$1,669	\$12.51	\$16.20
Prof - Child EPSDT	\$337	\$778	\$3.83	\$7.56
Prof - Evaluation & Management	\$19,807	\$19,626	\$225.08	\$190.55
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$11,127	\$32,192	\$126.44	\$312.54
Prof - Psych	\$391	\$585	\$4.45	\$5.68
Prof - Specialist	\$6,973	\$7,786	\$79.23	\$75.60
Prof - Vision	\$282	\$905	\$3.21	\$8.78
Radiology	\$1,058	\$609	\$12.02	\$5.91
Transportation/Ambulance	\$8,172	\$1,009	\$92.87	\$9.80
Total	\$267,519	\$215,635	\$3,039.98	\$2,093.55

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	5,827	5,516		
Service Type				
DME/Supplies	\$211,554	\$218,172	\$36.31	\$39.55
FQHC / RHC	\$6,311	\$957	\$1.08	\$0.17
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$706,080	\$520,121	\$121.17	\$94.29
IP - Psych	\$83,691	\$87,274	\$14.36	\$15.82
Lab	\$15,416	\$11,785	\$2.65	\$2.14
OP - Emergency Room	\$58,800	\$67,946	\$10.09	\$12.32
OP - Other	\$1,142,630	\$912,225	\$196.09	\$165.38
Pharmacy	\$520,471	\$518,229	\$89.32	\$93.95
Prof - Anesthesia	\$28,285	\$28,409	\$4.85	\$5.15
Prof - Child EPSDT	\$8,844	\$8,449	\$1.52	\$1.53
Prof - Evaluation & Management	\$266,312	\$271,147	\$45.70	\$49.16
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$251,555	\$224,723	\$43.17	\$40.74
Prof - Psych	\$36,489	\$35,703	\$6.26	\$6.47
Prof - Specialist	\$91,642	\$84,405	\$15.73	\$15.30
Prof - Vision	\$14,651	\$22,452	\$2.51	\$4.07
Radiology	\$20,302	\$26,703	\$3.48	\$4.84
Transportation/Ambulance	\$34,706	\$25,210	\$5.96	\$4.57
Total	\$3,497,738	\$3,063,909	\$600.26	\$555.46

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	50,128	52,854		
Service Type				
DME/Supplies	\$472,879	\$497,317	\$9.43	\$9.41
FQHC / RHC	\$10,923	\$12,439	\$0.22	\$0.24
Home Health	\$195	\$0	\$0.00	\$0.00
IP - Maternity	\$192,494	\$156,802	\$3.84	\$2.97
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,159,884	\$2,022,711	\$43.09	\$38.27
IP - Psych	\$1,269,168	\$1,284,593	\$25.32	\$24.30
Lab	\$91,491	\$99,114	\$1.83	\$1.88
OP - Emergency Room	\$365,203	\$480,149	\$7.29	\$9.08
OP - Other	\$2,272,026	\$2,735,873	\$45.32	\$51.76
Pharmacy	\$4,326,455	\$4,889,271	\$86.31	\$92.51
Prof - Anesthesia	\$64,158	\$79,814	\$1.28	\$1.51
Prof - Child EPSDT	\$22,898	\$25,821	\$0.46	\$0.49
Prof - Evaluation & Management	\$997,321	\$1,212,239	\$19.90	\$22.94
Prof - Maternity	\$93,736	\$83,619	\$1.87	\$1.58
Prof - Other	\$1,049,699	\$1,134,149	\$20.94	\$21.46
Prof - Psych	\$461,991	\$496,774	\$9.22	\$9.40
Prof - Specialist	\$207,446	\$268,800	\$4.14	\$5.09
Prof - Vision	\$75,509	\$68,712	\$1.51	\$1.30
Radiology	\$98,179	\$97,349	\$1.96	\$1.84
Transportation/Ambulance	\$239,938	\$244,127	\$4.79	\$4.62
Total	\$14,471,590	\$15,889,674	\$288.69	\$300.63

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 21-44 Female				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	25,195	25,027		
Service Type				
DME/Supplies	\$341,627	\$304,408	\$13.56	\$12.16
FQHC / RHC	\$111,353	\$71,605	\$4.42	\$2.86
Home Health	\$0	\$36	\$0.00	\$0.00
IP - Maternity	\$327,391	\$398,216	\$12.99	\$15.91
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$4,198,515	\$4,175,786	\$166.64	\$166.85
IP - Psych	\$1,526,828	\$1,481,952	\$60.60	\$59.21
Lab	\$126,197	\$153,039	\$5.01	\$6.11
OP - Emergency Room	\$632,436	\$748,913	\$25.10	\$29.92
OP - Other	\$3,378,125	\$3,651,394	\$134.08	\$145.90
Pharmacy	\$5,498,626	\$5,567,120	\$218.24	\$222.44
Prof - Anesthesia	\$84,410	\$79,038	\$3.35	\$3.16
Prof - Child EPSDT	\$22,920	\$20,864	\$0.91	\$0.83
Prof - Evaluation & Management	\$1,304,889	\$1,385,709	\$51.79	\$55.37
Prof - Maternity	\$129,172	\$164,299	\$5.13	\$6.56
Prof - Other	\$1,072,085	\$793,801	\$42.55	\$31.72
Prof - Psych	\$253,185	\$270,409	\$10.05	\$10.80
Prof - Specialist	\$431,211	\$414,361	\$17.11	\$16.56
Prof - Vision	\$47,445	\$44,149	\$1.88	\$1.76
Radiology	\$272,107	\$281,797	\$10.80	\$11.26
Transportation/Ambulance	\$442,109	\$419,113	\$17.55	\$16.75
Total	\$20,200,633	\$20,426,009	\$801.77	\$816.16

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	16,706	16,907		
Service Type				
DME/Supplies	\$368,777	\$334,919	\$22.07	\$19.81
FQHC / RHC	\$29,315	\$21,684	\$1.75	\$1.28
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,562,039	\$2,529,692	\$153.36	\$149.62
IP - Psych	\$1,032,760	\$1,123,838	\$61.82	\$66.47
Lab	\$49,319	\$58,522	\$2.95	\$3.46
OP - Emergency Room	\$266,737	\$297,788	\$15.97	\$17.61
OP - Other	\$1,478,726	\$1,624,570	\$88.51	\$96.09
Pharmacy	\$3,140,673	\$3,394,981	\$188.00	\$200.80
Prof - Anesthesia	\$18,260	\$15,055	\$1.09	\$0.89
Prof - Child EPSDT	\$6,979	\$2,883	\$0.42	\$0.17
Prof - Evaluation & Management	\$543,873	\$619,290	\$32.56	\$36.63
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$421,439	\$355,811	\$25.23	\$21.05
Prof - Psych	\$145,956	\$155,400	\$8.74	\$9.19
Prof - Specialist	\$158,231	\$150,496	\$9.47	\$8.90
Prof - Vision	\$22,770	\$25,414	\$1.36	\$1.50
Radiology	\$84,960	\$99,985	\$5.09	\$5.91
Transportation/Ambulance	\$349,295	\$373,886	\$20.91	\$22.11
Total	\$10,680,106	\$11,184,216	\$639.30	\$661.51

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 45 and Over				
Richmond/Charlottesville	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	55,997	56,295		
Service Type				
DME/Supplies	\$1,364,156	\$1,519,075	\$24.36	\$26.98
FQHC / RHC	\$221,797	\$254,871	\$3.96	\$4.53
Home Health	\$36	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$15,834,059	\$16,843,008	\$282.77	\$299.19
IP - Psych	\$2,323,760	\$2,783,333	\$41.50	\$49.44
Lab	\$291,003	\$337,968	\$5.20	\$6.00
OP - Emergency Room	\$919,033	\$1,076,203	\$16.41	\$19.12
OP - Other	\$9,906,536	\$10,673,095	\$176.91	\$189.59
Pharmacy	\$16,515,427	\$17,127,824	\$294.93	\$304.25
Prof - Anesthesia	\$186,163	\$252,529	\$3.32	\$4.49
Prof - Child EPSDT	\$39,085	\$30,569	\$0.70	\$0.54
Prof - Evaluation & Management	\$3,174,406	\$3,576,346	\$56.69	\$63.53
Prof - Maternity	\$0	\$297	\$0.00	\$0.01
Prof - Other	\$2,405,819	\$2,574,557	\$42.96	\$45.73
Prof - Psych	\$453,794	\$508,447	\$8.10	\$9.03
Prof - Specialist	\$1,498,848	\$1,699,233	\$26.77	\$30.18
Prof - Vision	\$156,460	\$164,401	\$2.79	\$2.92
Radiology	\$784,003	\$964,382	\$14.00	\$17.13
Transportation/Ambulance	\$1,328,226	\$1,242,365	\$23.72	\$22.07
Total	\$57,402,610	\$61,628,502	\$1,025.10	\$1,094.74

**Virginia Medicaid
 FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	153,941	156,702		
Service Type				
DME/Supplies	\$2,763,504	\$2,884,295	\$17.95	\$18.41
FQHC / RHC	\$379,698	\$361,556	\$2.47	\$2.31
Home Health	\$231	\$36	\$0.00	\$0.00
IP - Maternity	\$519,885	\$555,018	\$3.38	\$3.54
IP - Newborn	\$97,417	\$76,937	\$0.63	\$0.49
IP - Other	\$25,542,714	\$26,123,189	\$165.93	\$166.71
IP - Psych	\$6,237,645	\$6,763,140	\$40.52	\$43.16
Lab	\$573,684	\$660,897	\$3.73	\$4.22
OP - Emergency Room	\$2,245,204	\$2,676,205	\$14.58	\$17.08
OP - Other	\$18,191,747	\$19,610,483	\$118.17	\$125.15
Pharmacy	\$30,017,463	\$31,507,538	\$194.99	\$201.07
Prof - Anesthesia	\$382,376	\$456,514	\$2.48	\$2.91
Prof - Child EPSDT	\$101,063	\$89,364	\$0.66	\$0.57
Prof - Evaluation & Management	\$6,306,608	\$7,084,356	\$40.97	\$45.21
Prof - Maternity	\$222,908	\$248,215	\$1.45	\$1.58
Prof - Other	\$5,211,724	\$5,115,233	\$33.86	\$32.64
Prof - Psych	\$1,351,805	\$1,467,318	\$8.78	\$9.36
Prof - Specialist	\$2,394,350	\$2,625,082	\$15.55	\$16.75
Prof - Vision	\$317,118	\$326,033	\$2.06	\$2.08
Radiology	\$1,260,608	\$1,470,826	\$8.19	\$9.39
Transportation/Ambulance	\$2,402,445	\$2,305,710	\$15.61	\$14.71
Total	\$106,520,196	\$112,407,945	\$691.95	\$717.34

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age Under 1				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	109	102		
Service Type				
DME/Supplies	\$15,670	\$8,579	\$143.77	\$84.11
FQHC / RHC	\$2,922	\$1,189	\$26.81	\$11.66
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$15,241	\$69,215	\$139.83	\$678.58
IP - Other	\$18,627	\$35,311	\$170.89	\$346.19
IP - Psych	\$1,808	\$1,952	\$16.59	\$19.14
Lab	\$863	\$1,810	\$7.92	\$17.74
OP - Emergency Room	\$1,733	\$2,701	\$15.90	\$26.48
OP - Other	\$18,676	\$31,598	\$171.34	\$309.79
Pharmacy	\$44,948	\$34,920	\$412.36	\$342.35
Prof - Anesthesia	\$1,978	\$2,792	\$18.15	\$27.37
Prof - Child EPSDT	\$558	\$322	\$5.12	\$3.16
Prof - Evaluation & Management	\$25,479	\$44,974	\$233.75	\$440.92
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$27,155	\$51,180	\$249.13	\$501.76
Prof - Psych	\$492	\$531	\$4.51	\$5.21
Prof - Specialist	\$4,847	\$9,444	\$44.47	\$92.59
Prof - Vision	\$723	\$932	\$6.63	\$9.14
Radiology	\$1,567	\$1,257	\$14.38	\$12.32
Transportation/Ambulance	\$466	\$2,303	\$4.28	\$22.58
Total	\$183,754	\$301,011	\$1,685.81	\$2,951.09

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 1-5				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	3,893	4,233		
Service Type				
DME/Supplies	\$162,549	\$125,203	\$41.75	\$29.58
FQHC / RHC	\$7,141	\$8,703	\$1.83	\$2.06
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$635,768	\$436,849	\$163.31	\$103.20
IP - Psych	\$50,541	\$54,344	\$12.98	\$12.84
Lab	\$17,418	\$17,505	\$4.47	\$4.14
OP - Emergency Room	\$35,525	\$37,332	\$9.13	\$8.82
OP - Other	\$567,112	\$443,536	\$145.67	\$104.78
Pharmacy	\$351,423	\$362,067	\$90.27	\$85.53
Prof - Anesthesia	\$24,054	\$20,218	\$6.18	\$4.78
Prof - Child EPSDT	\$5,866	\$6,690	\$1.51	\$1.58
Prof - Evaluation & Management	\$183,355	\$230,098	\$47.10	\$54.36
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$187,184	\$241,603	\$48.08	\$57.08
Prof - Psych	\$20,646	\$18,532	\$5.30	\$4.38
Prof - Specialist	\$55,817	\$38,723	\$14.34	\$9.15
Prof - Vision	\$11,028	\$9,889	\$2.83	\$2.34
Radiology	\$13,043	\$15,203	\$3.35	\$3.59
Transportation/Ambulance	\$48,007	\$44,531	\$12.33	\$10.52
Total	\$2,376,477	\$2,111,025	\$610.45	\$498.71

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 6-20				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	26,423	27,393		
Service Type				
DME/Supplies	\$310,739	\$344,882	\$11.76	\$12.59
FQHC / RHC	\$94,732	\$100,021	\$3.59	\$3.65
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$85,580	\$127,797	\$3.24	\$4.67
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,676,083	\$2,468,101	\$63.43	\$90.10
IP - Psych	\$609,998	\$652,236	\$23.09	\$23.81
Lab	\$97,295	\$86,215	\$3.68	\$3.15
OP - Emergency Room	\$176,054	\$210,744	\$6.66	\$7.69
OP - Other	\$1,157,541	\$1,272,936	\$43.81	\$46.47
Pharmacy	\$2,895,335	\$3,347,329	\$109.58	\$122.20
Prof - Anesthesia	\$36,459	\$54,922	\$1.38	\$2.00
Prof - Child EPSDT	\$11,040	\$13,445	\$0.42	\$0.49
Prof - Evaluation & Management	\$557,994	\$721,192	\$21.12	\$26.33
Prof - Maternity	\$31,261	\$48,020	\$1.18	\$1.75
Prof - Other	\$505,679	\$499,367	\$19.14	\$18.23
Prof - Psych	\$235,397	\$227,755	\$8.91	\$8.31
Prof - Specialist	\$106,836	\$159,064	\$4.04	\$5.81
Prof - Vision	\$33,680	\$37,481	\$1.27	\$1.37
Radiology	\$57,118	\$60,060	\$2.16	\$2.19
Transportation/Ambulance	\$181,312	\$188,716	\$6.86	\$6.89
Total	\$8,860,134	\$10,620,283	\$335.32	\$387.70

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	15,757	15,607		
Service Type				
DME/Supplies	\$277,204	\$260,383	\$17.59	\$16.68
FQHC / RHC	\$135,217	\$128,023	\$8.58	\$8.20
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$184,653	\$177,974	\$11.72	\$11.40
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,985,893	\$2,287,918	\$126.03	\$146.60
IP - Psych	\$493,714	\$499,705	\$31.33	\$32.02
Lab	\$102,664	\$142,748	\$6.52	\$9.15
OP - Emergency Room	\$285,653	\$324,010	\$18.13	\$20.76
OP - Other	\$1,811,640	\$1,928,535	\$114.97	\$123.57
Pharmacy	\$3,903,250	\$4,040,216	\$247.72	\$258.87
Prof - Anesthesia	\$69,165	\$46,999	\$4.39	\$3.01
Prof - Child EPSDT	\$23,427	\$15,380	\$1.49	\$0.99
Prof - Evaluation & Management	\$693,723	\$752,731	\$44.03	\$48.23
Prof - Maternity	\$72,591	\$63,496	\$4.61	\$4.07
Prof - Other	\$281,386	\$291,349	\$17.86	\$18.67
Prof - Psych	\$152,983	\$152,667	\$9.71	\$9.78
Prof - Specialist	\$252,020	\$296,425	\$15.99	\$18.99
Prof - Vision	\$23,761	\$23,769	\$1.51	\$1.52
Radiology	\$162,105	\$173,656	\$10.29	\$11.13
Transportation/Ambulance	\$256,563	\$301,746	\$16.28	\$19.33
Total	\$11,167,614	\$11,907,730	\$708.74	\$762.97

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	10,877	11,083		
Service Type				
DME/Supplies	\$114,348	\$188,118	\$10.51	\$16.97
FQHC / RHC	\$57,157	\$69,266	\$5.25	\$6.25
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$1,578,734	\$1,951,979	\$145.14	\$176.12
IP - Psych	\$338,009	\$418,589	\$31.08	\$37.77
Lab	\$38,852	\$51,511	\$3.57	\$4.65
OP - Emergency Room	\$137,142	\$133,710	\$12.61	\$12.06
OP - Other	\$666,674	\$749,711	\$61.29	\$67.65
Pharmacy	\$2,126,822	\$2,258,787	\$195.53	\$203.81
Prof - Anesthesia	\$16,321	\$14,699	\$1.50	\$1.33
Prof - Child EPSDT	\$5,388	\$2,816	\$0.50	\$0.25
Prof - Evaluation & Management	\$294,270	\$315,794	\$27.05	\$28.49
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$260,067	\$180,071	\$23.91	\$16.25
Prof - Psych	\$93,346	\$88,993	\$8.58	\$8.03
Prof - Specialist	\$114,671	\$96,188	\$10.54	\$8.68
Prof - Vision	\$12,399	\$15,587	\$1.14	\$1.41
Radiology	\$59,192	\$55,112	\$5.44	\$4.97
Transportation/Ambulance	\$181,984	\$190,798	\$16.73	\$17.22
Total	\$6,095,377	\$6,781,729	\$560.39	\$611.90

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 45 and Over				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	42,482	43,163		
Service Type				
DME/Supplies	\$957,321	\$1,041,927	\$22.53	\$24.14
FQHC / RHC	\$379,420	\$417,882	\$8.93	\$9.68
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$2,170	\$0	\$0.05	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$9,940,281	\$11,245,563	\$233.99	\$260.54
IP - Psych	\$1,038,435	\$1,217,878	\$24.44	\$28.22
Lab	\$322,744	\$386,606	\$7.60	\$8.96
OP - Emergency Room	\$541,805	\$592,805	\$12.75	\$13.73
OP - Other	\$6,082,679	\$6,609,468	\$143.18	\$153.13
Pharmacy	\$12,294,384	\$12,395,271	\$289.40	\$287.17
Prof - Anesthesia	\$144,172	\$131,525	\$3.39	\$3.05
Prof - Child EPSDT	\$26,495	\$24,607	\$0.62	\$0.57
Prof - Evaluation & Management	\$2,102,208	\$2,357,396	\$49.48	\$54.62
Prof - Maternity	\$0	\$29	\$0.00	\$0.00
Prof - Other	\$1,113,976	\$1,192,927	\$26.22	\$27.64
Prof - Psych	\$282,520	\$317,848	\$6.65	\$7.36
Prof - Specialist	\$1,072,607	\$1,077,628	\$25.25	\$24.97
Prof - Vision	\$107,517	\$125,340	\$2.53	\$2.90
Radiology	\$523,058	\$593,117	\$12.31	\$13.74
Transportation/Ambulance	\$760,552	\$764,211	\$17.90	\$17.71
Total	\$37,692,344	\$40,492,028	\$887.25	\$938.12

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

All Age Categories				
Rural	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	99,541	101,581		
Service Type				
DME/Supplies	\$1,837,830	\$1,969,092	\$18.46	\$19.38
FQHC / RHC	\$676,589	\$725,084	\$6.80	\$7.14
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$272,403	\$305,771	\$2.74	\$3.01
IP - Newborn	\$15,241	\$69,215	\$0.15	\$0.68
IP - Other	\$15,835,385	\$18,425,721	\$159.08	\$181.39
IP - Psych	\$2,532,506	\$2,844,703	\$25.44	\$28.00
Lab	\$579,837	\$686,395	\$5.83	\$6.76
OP - Emergency Room	\$1,177,912	\$1,301,301	\$11.83	\$12.81
OP - Other	\$10,304,323	\$11,035,785	\$103.52	\$108.64
Pharmacy	\$21,616,163	\$22,438,590	\$217.16	\$220.89
Prof - Anesthesia	\$292,149	\$271,155	\$2.93	\$2.67
Prof - Child EPSDT	\$72,775	\$63,261	\$0.73	\$0.62
Prof - Evaluation & Management	\$3,857,029	\$4,422,184	\$38.75	\$43.53
Prof - Maternity	\$103,853	\$111,544	\$1.04	\$1.10
Prof - Other	\$2,375,448	\$2,456,498	\$23.86	\$24.18
Prof - Psych	\$785,385	\$806,327	\$7.89	\$7.94
Prof - Specialist	\$1,606,799	\$1,677,472	\$16.14	\$16.51
Prof - Vision	\$189,108	\$212,998	\$1.90	\$2.10
Radiology	\$816,082	\$898,405	\$8.20	\$8.84
Transportation/Ambulance	\$1,428,884	\$1,492,306	\$14.35	\$14.69
Total	\$66,375,700	\$72,213,807	\$666.82	\$710.90

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age Under 1				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	339	303		
Service Type				
DME/Supplies	\$17,334	\$21,646	\$51.13	\$71.44
FQHC / RHC	\$19,514	\$4,245	\$57.56	\$14.01
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$37,590	\$38,614	\$110.88	\$127.44
IP - Other	\$402,819	\$117,297	\$1,188.26	\$387.12
IP - Psych	\$5,732	\$4,427	\$16.91	\$14.61
Lab	\$1,312	\$893	\$3.87	\$2.95
OP - Emergency Room	\$5,078	\$6,620	\$14.98	\$21.85
OP - Other	\$56,021	\$68,765	\$165.25	\$226.95
Pharmacy	\$58,294	\$92,924	\$171.96	\$306.68
Prof - Anesthesia	\$3,228	\$5,524	\$9.52	\$18.23
Prof - Child EPSDT	\$1,926	\$1,883	\$5.68	\$6.21
Prof - Evaluation & Management	\$77,095	\$68,625	\$227.42	\$226.49
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$63,614	\$93,466	\$187.65	\$308.47
Prof - Psych	\$1,560	\$1,205	\$4.60	\$3.98
Prof - Specialist	\$5,803	\$15,242	\$17.12	\$50.30
Prof - Vision	\$2,338	\$2,396	\$6.90	\$7.91
Radiology	\$1,725	\$1,943	\$5.09	\$6.41
Transportation/Ambulance	\$2,776	\$1,406	\$8.19	\$4.64
Total	\$763,758	\$547,121	\$2,252.97	\$1,805.68

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 1-5				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	6,967	7,578		
Service Type				
DME/Supplies	\$244,370	\$259,421	\$35.08	\$34.23
FQHC / RHC	\$12,020	\$8,300	\$1.73	\$1.10
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$993,148	\$1,183,230	\$142.55	\$156.14
IP - Psych	\$120,775	\$127,183	\$17.34	\$16.78
Lab	\$24,336	\$22,640	\$3.49	\$2.99
OP - Emergency Room	\$72,462	\$111,801	\$10.40	\$14.75
OP - Other	\$1,286,120	\$1,227,904	\$184.60	\$162.04
Pharmacy	\$514,084	\$777,140	\$73.79	\$102.55
Prof - Anesthesia	\$47,517	\$54,323	\$6.82	\$7.17
Prof - Child EPSDT	\$10,750	\$15,657	\$1.54	\$2.07
Prof - Evaluation & Management	\$406,978	\$473,166	\$58.42	\$62.44
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$675,449	\$739,079	\$96.95	\$97.53
Prof - Psych	\$39,232	\$39,410	\$5.63	\$5.20
Prof - Specialist	\$107,223	\$118,526	\$15.39	\$15.64
Prof - Vision	\$13,485	\$18,621	\$1.94	\$2.46
Radiology	\$20,208	\$20,173	\$2.90	\$2.66
Transportation/Ambulance	\$28,302	\$34,549	\$4.06	\$4.56
Total	\$4,616,460	\$5,231,124	\$662.62	\$690.30

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 6-20				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	56,494	56,747		
Service Type				
DME/Supplies	\$547,334	\$568,808	\$9.69	\$10.02
FQHC / RHC	\$45,776	\$39,491	\$0.81	\$0.70
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$202,393	\$194,205	\$3.58	\$3.42
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,113,677	\$2,244,469	\$37.41	\$39.55
IP - Psych	\$1,267,692	\$1,317,822	\$22.44	\$23.22
Lab	\$116,185	\$105,508	\$2.06	\$1.86
OP - Emergency Room	\$474,783	\$627,051	\$8.40	\$11.05
OP - Other	\$3,150,707	\$3,444,378	\$55.77	\$60.70
Pharmacy	\$5,539,858	\$6,051,862	\$98.06	\$106.65
Prof - Anesthesia	\$105,214	\$103,280	\$1.86	\$1.82
Prof - Child EPSDT	\$28,717	\$31,794	\$0.51	\$0.56
Prof - Evaluation & Management	\$1,211,575	\$1,372,975	\$21.45	\$24.19
Prof - Maternity	\$92,552	\$93,794	\$1.64	\$1.65
Prof - Other	\$1,822,826	\$1,894,259	\$32.27	\$33.38
Prof - Psych	\$517,046	\$529,225	\$9.15	\$9.33
Prof - Specialist	\$296,026	\$304,843	\$5.24	\$5.37
Prof - Vision	\$66,799	\$80,654	\$1.18	\$1.42
Radiology	\$121,415	\$120,549	\$2.15	\$2.12
Transportation/Ambulance	\$215,083	\$201,698	\$3.81	\$3.55
Total	\$17,935,658	\$19,326,663	\$317.48	\$340.58

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

Age 21-44 Female				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	30,240	29,085		
Service Type				
DME/Supplies	\$441,069	\$480,571	\$14.59	\$16.52
FQHC / RHC	\$154,435	\$123,041	\$5.11	\$4.23
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$411,361	\$347,736	\$13.60	\$11.96
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$3,581,399	\$3,132,678	\$118.43	\$107.71
IP - Psych	\$1,132,112	\$1,065,805	\$37.44	\$36.64
Lab	\$103,360	\$92,760	\$3.42	\$3.19
OP - Emergency Room	\$957,326	\$1,204,787	\$31.66	\$41.42
OP - Other	\$3,548,481	\$3,528,834	\$117.34	\$121.33
Pharmacy	\$6,460,551	\$6,211,774	\$213.64	\$213.57
Prof - Anesthesia	\$110,009	\$107,575	\$3.64	\$3.70
Prof - Child EPSDT	\$54,752	\$53,710	\$1.81	\$1.85
Prof - Evaluation & Management	\$1,488,113	\$1,538,737	\$49.21	\$52.90
Prof - Maternity	\$147,300	\$169,859	\$4.87	\$5.84
Prof - Other	\$1,030,479	\$1,331,905	\$34.08	\$45.79
Prof - Psych	\$304,881	\$301,726	\$10.08	\$10.37
Prof - Specialist	\$511,268	\$519,580	\$16.91	\$17.86
Prof - Vision	\$45,707	\$51,275	\$1.51	\$1.76
Radiology	\$315,671	\$323,505	\$10.44	\$11.12
Transportation/Ambulance	\$252,689	\$245,829	\$8.36	\$8.45
Total	\$21,050,963	\$20,831,689	\$696.13	\$716.23

Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	20,155	20,176		
Service Type				
DME/Supplies	\$399,873	\$535,794	\$19.84	\$26.56
FQHC / RHC	\$54,135	\$65,922	\$2.69	\$3.27
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$2,174,642	\$2,434,637	\$107.90	\$120.67
IP - Psych	\$795,920	\$924,339	\$39.49	\$45.81
Lab	\$38,398	\$37,792	\$1.91	\$1.87
OP - Emergency Room	\$399,545	\$503,403	\$19.82	\$24.95
OP - Other	\$1,716,601	\$2,659,779	\$85.17	\$131.83
Pharmacy	\$3,843,159	\$3,938,600	\$190.68	\$195.21
Prof - Anesthesia	\$30,849	\$36,277	\$1.53	\$1.80
Prof - Child EPSDT	\$11,510	\$6,232	\$0.57	\$0.31
Prof - Evaluation & Management	\$647,158	\$753,599	\$32.11	\$37.35
Prof - Maternity	\$0	\$0	\$0.00	\$0.00
Prof - Other	\$795,638	\$1,095,161	\$39.48	\$54.28
Prof - Psych	\$169,694	\$180,983	\$8.42	\$8.97
Prof - Specialist	\$196,862	\$220,512	\$9.77	\$10.93
Prof - Vision	\$26,169	\$27,993	\$1.30	\$1.39
Radiology	\$113,820	\$147,515	\$5.65	\$7.31
Transportation/Ambulance	\$149,889	\$195,138	\$7.44	\$9.67
Total	\$11,563,862	\$13,763,675	\$573.75	\$682.18

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age 45 and Over				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	67,861	69,795		
Service Type				
DME/Supplies	\$1,830,865	\$1,979,083	\$26.98	\$28.36
FQHC / RHC	\$362,526	\$544,541	\$5.34	\$7.80
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00
IP - Other	\$15,424,840	\$17,466,215	\$227.30	\$250.25
IP - Psych	\$1,912,632	\$2,180,807	\$28.18	\$31.25
Lab	\$245,555	\$260,614	\$3.62	\$3.73
OP - Emergency Room	\$1,496,366	\$2,057,759	\$22.05	\$29.48
OP - Other	\$10,818,132	\$12,610,786	\$159.42	\$180.68
Pharmacy	\$20,841,483	\$21,012,831	\$307.12	\$301.06
Prof - Anesthesia	\$267,231	\$310,320	\$3.94	\$4.45
Prof - Child EPSDT	\$81,974	\$42,533	\$1.21	\$0.61
Prof - Evaluation & Management	\$4,419,183	\$4,996,665	\$65.12	\$71.59
Prof - Maternity	\$0	\$129	\$0.00	\$0.00
Prof - Other	\$4,362,732	\$4,864,077	\$64.29	\$69.69
Prof - Psych	\$562,973	\$589,326	\$8.30	\$8.44
Prof - Specialist	\$1,980,341	\$2,215,839	\$29.18	\$31.75
Prof - Vision	\$198,536	\$220,640	\$2.93	\$3.16
Radiology	\$1,003,390	\$1,134,030	\$14.79	\$16.25
Transportation/Ambulance	\$627,604	\$680,279	\$9.25	\$9.75
Total	\$66,436,363	\$73,166,474	\$979.01	\$1,048.31

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)**

Exhibit 1b

All Age Categories				
Tidewater	Total Claims FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	182,056	183,684		
Service Type				
DME/Supplies	\$3,480,843	\$3,845,322	\$19.12	\$20.93
FQHC / RHC	\$648,407	\$785,539	\$3.56	\$4.28
Home Health	\$0	\$0	\$0.00	\$0.00
IP - Maternity	\$613,754	\$541,940	\$3.37	\$2.95
IP - Newborn	\$37,590	\$38,614	\$0.21	\$0.21
IP - Other	\$24,690,525	\$26,578,527	\$135.62	\$144.70
IP - Psych	\$5,234,863	\$5,620,383	\$28.75	\$30.60
Lab	\$529,145	\$520,207	\$2.91	\$2.83
OP - Emergency Room	\$3,405,560	\$4,511,422	\$18.71	\$24.56
OP - Other	\$20,576,061	\$23,540,446	\$113.02	\$128.16
Pharmacy	\$37,257,430	\$38,085,130	\$204.65	\$207.34
Prof - Anesthesia	\$564,048	\$617,298	\$3.10	\$3.36
Prof - Child EPSDT	\$189,629	\$151,808	\$1.04	\$0.83
Prof - Evaluation & Management	\$8,250,102	\$9,203,768	\$45.32	\$50.11
Prof - Maternity	\$239,853	\$263,783	\$1.32	\$1.44
Prof - Other	\$8,750,737	\$10,017,947	\$48.07	\$54.54
Prof - Psych	\$1,595,386	\$1,641,875	\$8.76	\$8.94
Prof - Specialist	\$3,097,524	\$3,394,542	\$17.01	\$18.48
Prof - Vision	\$353,034	\$401,580	\$1.94	\$2.19
Radiology	\$1,576,229	\$1,747,715	\$8.66	\$9.51
Transportation/Ambulance	\$1,276,343	\$1,358,899	\$7.01	\$7.40
Total	\$122,367,064	\$132,866,746	\$672.14	\$723.34

**Virginia Medicaid
FY 2010 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 FY07	Total Claims FY08	Unadjusted PMPM FY07	Unadjusted PMPM FY08
Member Months	588,712	618,425		
Service Type				
DME/Supplies	\$10,476,640	\$11,649,569	\$17.80	\$18.84
FQHC / RHC	\$1,810,918	\$1,961,320	\$3.08	\$3.17
Home Health	\$481	\$348	\$0.00	\$0.00
IP - Maternity	\$1,817,452	\$1,873,403	\$3.09	\$3.03
IP - Newborn	\$183,679	\$421,752	\$0.31	\$0.68
IP - Other	\$98,654,820	\$107,240,613	\$167.58	\$173.41
IP - Psych	\$17,515,422	\$20,084,625	\$29.75	\$32.48
Lab	\$2,643,585	\$3,270,444	\$4.49	\$5.29
OP - Emergency Room	\$8,622,944	\$10,594,076	\$14.65	\$17.13
OP - Other	\$63,781,504	\$71,686,491	\$108.34	\$115.92
Pharmacy	\$125,399,539	\$136,568,251	\$213.01	\$220.83
Prof - Anesthesia	\$1,720,506	\$1,880,343	\$2.92	\$3.04
Prof - Child EPSDT	\$486,694	\$414,393	\$0.83	\$0.67
Prof - Evaluation & Management	\$25,833,095	\$29,908,227	\$43.88	\$48.36
Prof - Maternity	\$726,045	\$828,355	\$1.23	\$1.34
Prof - Other	\$20,801,466	\$24,199,222	\$35.33	\$39.13
Prof - Psych	\$4,849,810	\$5,284,879	\$8.24	\$8.55
Prof - Specialist	\$9,629,537	\$10,957,874	\$16.36	\$17.72
Prof - Vision	\$1,185,767	\$1,360,159	\$2.01	\$2.20
Radiology	\$5,317,152	\$6,188,129	\$9.03	\$10.01
Transportation/Ambulance	\$6,638,893	\$7,055,508	\$11.28	\$11.41
Total	\$408,095,947	\$453,427,982	\$693.20	\$733.20

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Pharmacy Adjustment**

Exhibit 2a

	TANF	ABAD	Source
1. Health Plan Total Drug Cost PMPM	\$25.41	\$217.02	FY07-FY08 Health Plan Encounter Data
2. Average Managed Care Rebate	3.6%	3.6%	From Plan Data
3. Adjusted PMPM with Managed Care Rebate	\$24.49	\$209.20	= (1.) * (1 - (2.))
4. Average PBM Admin Cost PMPM	\$0.07	\$0.44	From Plan Data
5. Adjusted PMPM with FY08 Pharmacy Pricing Arrangements	\$24.56	\$209.64	= (3.) + (4.)
6. Pharmacy Adjustment	-3.3%	-3.4%	= (5.) / (1.) - 1

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Pediatric E&M Fee Increase Adjustment**

Exhibit 2b

		Child Under 21	Source
1.	FY07 Claims Associated with Pediatric E&M Procedure Codes	a. FQHC / RHC b. Prof - Evaluation & Management	\$1,257,399 \$71,355,681 FY07 Health Plan Encounter Data
2.	% Fee Increase Effective FY08		10% Provided by DMAS
3.	Dollar Increase	a. FQHC / RHC b. Prof - Evaluation & Management	\$125,740 \$7,135,568 = (1.) * (2.)
4.	Total claims in Service Category	a. FQHC / RHC b. Prof - Evaluation & Management	\$4,534,970 \$187,826,143 FY07-FY08 Health Plan Encounter Data
5.	Pediatric E&M Fee Increase Adjustment	a. FQHC / RHC b. Prof - Evaluation & Management	2.8% 3.8% = (3.) / (4.)

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Professional Fee Increase Adjustment (Excluding Pediatric E&M and OB-GYN services)**

Exhibit 2c

		Child Under 21	Adult 21 and Over	Source
1. Claims Associated with Professional Services*	a. Prof - Evaluation & Management	\$13,905,915	\$38,855,400	FY07 Health Plan Encounter Data
	b. Prof - Specialist	\$10,284,738	\$13,079,569	
	c. All Other Professional Categories	\$43,654,493	\$34,058,479	
2. % Fee Increase Effective FY08		5.0%	5.0%	Provided by DMAS
3. Dollar Increase	a. Prof - Evaluation & Management	\$695,296	\$1,942,770	= (1.) * (2.)
	b. Prof - Specialist	\$514,237	\$653,978	
	c. All Other Professional Categories	\$2,182,725	\$1,702,924	
4. Total claims in Service Category	a. Prof - Evaluation & Management	\$187,826,143	\$84,203,259	FY07-FY08 Health Plan Encounter Data
	b. Prof - Specialist	\$22,623,887	\$33,824,701	
	c. All Other Professional Categories	\$109,729,238	\$112,625,920	
5. Professional Fee Increase Adjustment	a. Prof - Evaluation & Management	0.4%	2.3%	= (3.) / (4.)
	b. Prof - Specialist	2.3%	1.9%	
	c. All Other Professional Categories	2.0%	1.5%	

* Note:

Claims associated with OB-GYN and Pediatric E&M procedure codes have been excluded from this adjustment.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Exempt Infant Formula Carveout Adjustment**

Exhibit 2d

	TANF Age 0-5	TANF Age 6-20	ABAD Age 0-5	ABAD Age 6-20	Source
1. Claims Associated with Exempt Infant Formula	\$129,850	\$80,551	\$163,119	\$447,176	FY07-FY08 Health Plan Encounter Data
2. Total Claims in DME/Supplies Service Category	\$5,258,538	\$2,903,246	\$1,972,688	\$3,663,430	FY07-FY08 Health Plan Encounter Data
3. Exempt Infant Formula Carveout Adjustment	-2.5%	-2.8%	-8.3%	-12.2%	= (1.) / (2.)

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Other Immunization Adjustments**

Exhibit 2e

	Age Under 1	Age 1-5	Age 6-20	Source
1. Average Members in Rate Cell	27,792	101,320	127,762	Estimated from capitation payment files
2. Assumed Compliance Rate	68.0%	68.0%	34.5%	Provided by DMAS
3. Assumed Penetration	63.8%	45.0%	65.3%	Provided by DMAS
4. Estimated Cost	\$44.00	\$22.00	\$22.00	Provided by DMAS
5. Total Dollar Increase	\$530,105	\$682,083	\$632,738	= (1.) * (2.) * (3.) * (4.)
6. Proportion of Claims to be Adjusted	21%	21%	21%	
7. Total Claims in Prof - Evaluation & Management Service Category	\$56,983,411	\$62,180,940	\$47,181,213	FY07-FY08 Health Plan Encounter Data
8. Other Immunization Adjustments	0.2%	0.2%	0.3%	= (5.) * (6.) / (7.)

Notes (Included Vaccines):

Rotavirus vaccine - 3 Doses (age under 1); effective December 1, 2006

Influenza vaccine (age 6-59 months); effective December 1, 2006

Varicella vaccine (recommended second dose at age 4-6); effective December 1, 2006

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 HPV Vaccine Adjustment**

Exhibit 2f

	TANF Age 6-20	ABAD Age 6-20	Source
1. Average Members in Rate Cell	145,826	10,150	Estimated from capitation payment files
2. Assumed Penetration*	7.5%	7.5%	
3. Estimated Cost	\$33.00	\$33.00	Provided by DMAS
4. Total Dollar Increase	\$360,920	\$25,122	= (1.) * (2.) * (3.)
5. Proportion of Claims to be Adjusted	21%	21%	
6. Total Claims in Prof - Evaluation & Management Service Category	\$55,057,012	\$7,889,173	FY07-FY08 Health Plan Encounter Data
7. HPV Vaccine Adjustment	0.1%	0.1%	= (4.) * (5.) / (6.)

*Note:

Assumed penetration is 12.5% adjusted for the proportion of females in the rate cell who will receive the HPV vaccine.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Substance Abuse Benefit Adjustment**

Exhibit 2g

	TANF Child	TANF Adult	ABAD Child	ABAD Adult	Source
1. Estimated Budget for PCCM and MCO	\$500,000	\$500,000	\$500,000	\$500,000	Provided by DMAS
2. % of Estimated Expenditures Applicable for MCO	50.0%	50.0%	50.0%	50.0%	Provided by DMAS
3. % Carved Out of MCO	75.0%	75.0%	75.0%	75.0%	Provided by DMAS
4. % of Estimated Expenditures Applicable for Rate Cell	49.7%	14.0%	25.5%	10.9%	Provided by DMAS
5. Estimated Budget MCO (Dollar Increase)	\$31,061	\$8,723	\$15,914	\$6,802	= (1.) * (2.) * (1 - (3.)) * (4.)
6. Total Claims in Prof - Psych Service Category	\$12,716,001	\$3,490,197	\$3,269,586	\$6,865,102	FY07-FY08 Health Plan Encounter Data
7. Proportion of Claims to be Adjusted	48%	47%	48%	48%	FY07 Health Plan Encounter Data
8. Substance Abuse Benefit Adjustment	0.1%	0.1%	0.2%	0.05%	= (5.) / (6.) * (7.)

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Hospital Inpatient Adjustments**

Exhibit 2h

	Inpatient Medical/Surgical	Inpatient Psychiatric	Source
1. FY07 Hospital Inpatient Operating Adjustment Factor	78.0%	78.0%	Provided by DMAS
FY08 Hospital Inpatient Operating Adjustment Factor	78.0%	84.0%	
2. FY07 Inpatient Claims	\$268,735,478	\$25,008,467	FY07-FY08 Health Plan Encounter Data
FY08 Inpatient Claims	\$285,005,588	\$28,793,763	
3. FY07-08 Hospital Inpatient Operating Adjustment Factor	78.0%	81.2%	Weighted Average of FY07-FY08
4. FY09 Hospital Inpatient Operating Adjustment Factor	78.0%	84.0%	Provided by DMAS
5. FY09 Hospital Rate Reduction	2.7%	2.7%	Provided by DMAS
6. FY10 Hospital Rate Reduction	4.0%	4.0%	Provided by DMAS
7. FY09 Hospital Capital Percentage	10.0%	10.0%	Provided by DMAS
8. FY10 Capital Reimbursement Reduction for Private Hospitals	6.3%	6.3%	Provided by DMAS
9. % Excluded Claims from Exempt Hospitals*	17.1%	11.3%	FY07-FY08 Health Plan Encounter Data
10. % Excluded Claims from Freestanding Psych Hospitals	0.0%	21.2%	FY07-FY08 Health Plan Encounter Data
11. Hospital Inpatient Adjustment	-6.5%	-2.8%	$= (((4.) * (1 - (5.)) * (1 - (6.))) / (3.)) * (1 - (7.)) \\ + ((7.) * (1 - (9.)) * (1 - (8.)) + (7.) * (9.) - 1) * (1 - (10.))$

*Exempt hospitals are CHKD, UVA, and MCV.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Freestanding Psychiatric Hospital Rate Reduction Adjustment**

Exhibit 2i

	Adjustment Values	Source
1. FY07-FY08 Total IP - Psych Claims	\$53,802,230	FY07-FY08 Health Plan Encounter Data
2. % Claims from Freestanding Psych Hospitals	21.2%	FY07-FY08 Health Plan Encounter Data
3. FY07-FY08 Freestanding Hospital Psych Claims	\$11,416,546	= (1.) * (2.)
4. FY09 Hospital Rate Reduction	2.7%	Provided by DMAS
5. FY10 Hospital Rebasing Adjustment	17.8%	Provided by DMAS
6. FY10 Hospital Rate Reduction	4.0%	Provided by DMAS
7. Hospital Capital Percentage	10.0%	Provided by DMAS
8. FY10 Capital Reimbursement Reduction for Private Hospitals	6.3%	Provided by DMAS
		= (FY09 Operating Adjustment Factor * (1 - (4.)) * (1 - (5.)) * (1 - (6.)) / FY07FY08 Operating Adjustment Factor * (1 - (7.))
9. Freestanding Psychiatric Hospital Rate Reduction Adjustmei	-4.6%	+ (7.) * (1 - (8.)) - 1) * (2.)

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Rural Wage Index Adjustment**

Exhibit 2j

	Rural	Other MSA	Source
1. Estimated Impact of Adjustment	\$497,071	\$39,533	Provided by DMAS
2. Total Claims in IP - Other Service Category	\$54,640,390	\$47,558,550	FY07-FY08 Health Plan Encounter Data
3. Proportion of Claims to be Adjusted	47%	39%	FY07 Health Plan Encounter Data
4. Rural Wage Index Adjustment	0.4%	0.03%	= (1.) / (2.) * (3.)

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Provider Incentive Payment Adjustment**

Exhibit 2k

	Adjustment Value	Source
Provider Incentive Payment Adjustment	1.2%	From Plan Data

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Administrative Cost Adjustment**

Exhibit 21

	ABAD	TANF	Source
1. Claims Adjustment Expense PMPM	\$8.25	\$1.92	Expense from CY2008 BOI Reports; Member months from capitation payment files
2. General Admin Expense PMPM	\$48.35	\$11.27	Expense from CY2008 BOI Reports; Member months from capitation payment files
3. Claims Adjustment Expense Increase %	1.8%	1.8%	BLS CPI-U
4. General Admin Expense Increase %	2.7%	2.7%	Weighted average of BLS Compensation Trend and CPI
5. Administrative PMPM*	\$58.79	\$13.71	$= (1.) * (1 + (3.)) ^ (18 \text{ months}/12) + (2.) * (1 + (4.)) ^ (18 \text{ months}/12)$
6. Adjusted and Trended Base PMPM	\$833.95	\$194.45	Weighted average of medical component of FY2010 MedII Base Rates
7. Administrative allowance as % of Base Capitation Rate	6.54%	6.54%	$= (5.) / (((5.) + (6.)) / (1 - 0.75\%))$
8. Contribution to Reserves as % of Base Capitation Rate	0.75%	0.75%	Provided by DMAS
9. Administrative Factor as % of Base Capitation Rate	7.29%	7.29%	$= (7.) + (8.)$

*Note:

Administrative increases are applied from midpoint of CY2008 to the midpoint of the contract period (18 months) using compound interest calculations.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 State Budget Cap Adjustment**

Exhibit 2m

	PMPM	% Change	Source
1. FY 2009 Average Rate Weighted by Feb 2009 MM	\$268.07		MedII FY2009 Rates
2. FY 2010 Average Rate before FFS Payment Adjustments and State Budget Cap	\$294.18	9.74%	= (2.) / (1.) - (1.)
3. FY 2010 Average Rate with FFS Payment Adjustments Only	\$291.05	8.57%	= (3.) / (1.) - (1.)
4. FFS Payment Adjustment Effect	\$3.13	1.17%	= (2.) - (3.)
5. State Budget Cap*	\$286.84	7%	% Provided by DMAS; PMPM calculated as (1.) * (1 + 7%)
6. FY 2010 Average Rate Weighted by Feb 2009 MM	\$283.71	5.83%	= (5.) - (4.)
7. State Budget Cap Adjustment Factor		-2.52%	= (6.) / (3.) - 1

*FY 2010 state budget is capped at 7% increase less the value of FFS payment adjustments as shown on Exhibits 2h and 2i.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data**

Exhibit 3a

Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - TANF Child Under 21

Category of Service	TANF Child Under 21							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/ Program ¹	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	1.5%	-6.4%	-5.0%	-5.2%	3.8%	-1.5%	5.1%	1.0617
Inpatient Psychiatric	0.2%	-7.4%	-7.2%	5.2%	4.7%	10.1%	9.0%	1.2531
Outpatient Hospital	0.6%	0.0%	0.6%	4.5%	6.6%	11.4%	8.8%	1.2648
Practitioner	0.5%	3.3%	3.8%	-8.4%	17.6%	7.8%	8.5%	1.2184
Prescription Drug	0.0%	-3.3%	-3.3%	8.0%	3.3%	11.5%	10.5%	1.2943
Other	0.4%	0.0%	0.4%	12.5%	9.4%	23.1%	13.5%	1.4885
Weighted Average²	0.7%	-1.1%	-0.4%	-1.5%	9.6%	7.6%	8.3%	1.2151

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

² Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY07-FY08), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY07-FY08 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.

Inpatient contract period trend included consideration of cost per unit projections provided by DMAS.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations.

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

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data**

Exhibit 3b

Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - TANF Adult 21 and Over

Category of Service	TANF Adult 21 and Over							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/ Program ¹	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	0.4%	-6.4%	-6.1%	3.0%	-2.5%	0.4%	4.7%	1.0762
Inpatient Psychiatric	0.3%	-7.4%	-7.1%	27.0%	6.8%	35.7%	14.0%	1.6517
Outpatient Hospital	0.6%	0.0%	0.6%	5.7%	6.2%	12.3%	8.5%	1.2697
Practitioner	0.6%	1.3%	1.9%	-1.9%	6.0%	4.0%	5.3%	1.1234
Prescription Drug	0.0%	-3.3%	-3.3%	-1.4%	7.9%	6.4%	5.2%	1.1484
Other	0.5%	0.0%	0.5%	8.4%	10.9%	20.2%	14.2%	1.4662
Weighted Average²	0.4%	-2.0%	-1.5%	2.2%	4.4%	6.7%	6.5%	1.1727

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

² Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY07-FY08), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY07-FY08 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.

Inpatient contract period trend included consideration of cost per unit projections provided by DMAS.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations.

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

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Health Plan Encounter Data
 Incurred But Not Reported (IBNR), Policy/Program, and Trend Adjustments - ABAD**

Exhibit 3c

Category of Service	ABAD All Age Categories							
	Completion and Policy/Program Adjustments			Data Period Trend			Contract Period Cost and Utilization Trend	Total Trend Factor
	IBNR	Policy/ Program ¹	Total Base Data Adjustments	Cost Trend	Utilization Trend	Cost and Utilization Trend		
Inpatient Medical/Surgical	0.9%	-6.4%	-5.6%	8.6%	-1.0%	7.6%	6.9%	1.1896
Inpatient Psychiatric	0.7%	-7.4%	-6.8%	15.4%	-1.5%	13.6%	8.2%	1.2787
Outpatient Hospital	0.8%	0.0%	0.8%	5.5%	3.5%	9.2%	7.7%	1.2208
Practitioner	1.1%	1.4%	2.5%	15.3%	-8.0%	6.1%	6.8%	1.1703
Prescription Drug	0.0%	-3.4%	-3.4%	0.9%	2.6%	3.5%	4.6%	1.1070
Other	0.5%	0.0%	0.5%	8.1%	7.7%	16.4%	14.0%	1.4169
Weighted Average²	0.6%	-2.6%	-2.0%	7.3%	-0.2%	6.9%	6.6%	1.1778

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

² Weighted averages for Completion and Program Adjustments are calculated using a distribution by Service Type, before Trend and Adjustments (Total Claims FY07-FY08), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY07-FY08 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.

Inpatient contract period trend included consideration of cost per unit projections provided by DMAS.

Data period trends are applied from the midpoint of the data period to the end of the data period using compound interest calculations. Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations.

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

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age Under 1							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$438,039	\$2,306	(\$10,874)	\$429,472	1.218	\$523,285	\$2.95
FQHC / RHC	\$1,658	\$9	\$46	\$1,713	1.218	\$2,088	\$0.01
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$18,943,849	\$283,972	(\$1,243,074)	\$17,984,747	1.062	\$19,094,777	\$107.69
IP - Other	\$6,083,227	\$91,189	(\$399,174)	\$5,775,241	1.062	\$6,131,692	\$34.58
IP - Psych	\$5,473	\$12	(\$407)	\$5,079	1.253	\$6,364	\$0.04
Lab	\$236,683	\$1,011		\$237,694	1.488	\$353,799	\$2.00
OP - Emergency Room	\$1,465,567	\$9,011		\$1,474,579	1.265	\$1,864,987	\$10.52
OP - Other	\$2,873,133	\$17,666		\$2,890,799	1.265	\$3,656,164	\$20.62
Pharmacy	\$4,120,037	\$43	(\$137,072)	\$3,983,008	1.294	\$5,155,160	\$29.07
Prof - Anesthesia	\$202,755	\$1,067	\$4,054	\$207,877	1.218	\$253,285	\$1.43
Prof - Child EPSDT	\$1,683,129	\$8,862	\$33,657	\$1,725,648	1.218	\$2,102,595	\$11.86
Prof - Evaluation & Management	\$13,402,412	\$70,563	\$587,828	\$14,060,803	1.218	\$17,132,217	\$96.62
Prof - Maternity	\$1,685	\$9		\$1,694	1.218	\$2,064	\$0.01
Prof - Other	\$1,618,763	\$8,523	\$32,370	\$1,659,655	1.218	\$2,022,187	\$11.40
Prof - Psych	\$5,793	\$31	\$123	\$5,946	1.218	\$7,245	\$0.04
Prof - Specialist	\$827,222	\$4,355	\$18,902	\$850,479	1.218	\$1,036,256	\$5.84
Prof - Vision	\$225,879	\$1,189	\$4,517	\$231,585	1.218	\$282,173	\$1.59
Radiology	\$246,495	\$1,053		\$247,548	1.488	\$368,467	\$2.08
Transportation/Ambulance	\$705,682	\$3,014		\$708,696	1.488	\$1,054,870	\$5.95
Provider Incentive Payment Adjustment							\$4.04
Total	\$53,087,483	\$503,884	(\$1,109,104)	\$52,482,263		\$61,049,675	\$348.34
Admin Cost Adjustment							\$27.37
State Budget Cap Adjustment							(\$9.48)
Medallion II Capitation Rate							\$366.23

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 1-5							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$618,020	\$3,254	(\$15,341)	\$605,933	1.218	\$738,292	\$1.22
FQHC / RHC	\$2,235	\$12	\$62	\$2,309	1.218	\$2,813	\$0.00
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$7,639,657	\$114,520	(\$501,306)	\$7,252,871	1.062	\$7,700,523	\$12.68
IP - Psych	\$27,885	\$64	(\$2,073)	\$25,875	1.253	\$32,423	\$0.05
Lab	\$994,145	\$4,245		\$998,390	1.488	\$1,486,070	\$2.45
OP - Emergency Room	\$2,746,237	\$16,886		\$2,763,122	1.265	\$3,494,685	\$5.76
OP - Other	\$7,625,144	\$46,884		\$7,672,028	1.265	\$9,703,268	\$15.98
Pharmacy	\$9,631,625	\$101	(\$320,440)	\$9,311,286	1.294	\$12,051,487	\$19.85
Prof - Anesthesia	\$472,394	\$2,487	\$9,446	\$484,328	1.218	\$590,123	\$0.97
Prof - Child EPSDT	\$1,322,690	\$6,964	\$26,449	\$1,356,104	1.218	\$1,652,328	\$2.72
Prof - Evaluation & Management	\$18,439,428	\$97,082	\$815,187	\$19,351,697	1.218	\$23,578,844	\$38.84
Prof - Maternity	\$30	\$0		\$30	1.218	\$37	\$0.00
Prof - Other	\$2,331,456	\$12,275	\$46,621	\$2,390,353	1.218	\$2,912,496	\$4.80
Prof - Psych	\$123,773	\$652	\$2,620	\$127,044	1.218	\$154,795	\$0.25
Prof - Specialist	\$1,251,631	\$6,590	\$28,599	\$1,286,820	1.218	\$1,567,910	\$2.58
Prof - Vision	\$684,052	\$3,601	\$13,679	\$701,332	1.218	\$854,530	\$1.41
Radiology	\$319,539	\$1,365		\$320,903	1.488	\$477,654	\$0.79
Transportation/Ambulance	\$1,809,448	\$7,727		\$1,817,175	1.488	\$2,704,803	\$4.46
Provider Incentive Payment Adjustment							\$1.35
Total	\$56,039,387	\$324,708	\$103,504	\$56,467,599		\$69,703,080	\$116.17
Admin Cost Adjustment							\$9.13
State Budget Cap Adjustment							(\$3.16)
Medallion II Capitation Rate							\$122.14

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 6-14							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$260,667	\$1,372	(\$7,270)	\$254,769	1.218	\$310,421	\$0.51
FQHC / RHC	\$592	\$3	\$16	\$611	1.218	\$745	\$0.00
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$24,230	\$363	(\$1,590)	\$23,003	1.062	\$24,423	\$0.04
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$4,863,598	\$72,906	(\$319,144)	\$4,617,360	1.062	\$4,902,347	\$8.08
IP - Psych	\$719,012	\$1,638	(\$53,460)	\$667,190	1.253	\$836,036	\$1.38
Lab	\$820,936	\$3,506		\$824,442	1.488	\$1,227,153	\$2.02
OP - Emergency Room	\$1,552,278	\$9,544		\$1,561,822	1.265	\$1,975,329	\$3.26
OP - Other	\$5,000,864	\$30,748		\$5,031,612	1.265	\$6,363,778	\$10.49
Pharmacy	\$11,555,772	\$121	(\$384,455)	\$11,171,439	1.294	\$14,459,060	\$23.83
Prof - Anesthesia	\$273,452	\$1,440	\$5,468	\$280,360	1.218	\$341,602	\$0.56
Prof - Child EPSDT	\$261,958	\$1,379	\$5,238	\$268,575	1.218	\$327,242	\$0.54
Prof - Evaluation & Management	\$10,503,431	\$55,300	\$484,136	\$11,042,867	1.218	\$13,455,049	\$22.17
Prof - Maternity	\$8,841	\$47		\$8,887	1.218	\$10,829	\$0.02
Prof - Other	\$6,229,220	\$32,796	\$124,563	\$6,386,580	1.218	\$7,781,652	\$12.82
Prof - Psych	\$889,495	\$4,683	\$18,827	\$913,005	1.218	\$1,112,440	\$1.83
Prof - Specialist	\$969,837	\$5,106	\$22,160	\$997,104	1.218	\$1,214,909	\$2.00
Prof - Vision	\$718,250	\$3,782	\$14,363	\$736,394	1.218	\$897,251	\$1.48
Radiology	\$402,359	\$1,718		\$404,077	1.488	\$601,455	\$0.99
Transportation/Ambulance	\$1,720,641	\$7,348		\$1,727,989	1.488	\$2,572,053	\$4.24
Provider Incentive Payment Adjustment							\$1.13
Total	\$46,775,431	\$233,801	(\$91,147)	\$46,918,085		\$58,413,771	\$97.39
Admin Cost Adjustment							\$7.65
State Budget Cap Adjustment							(\$2.65)
Medallion II Capitation Rate							\$102.39

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Female							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$34,702	\$183	(\$968)	\$33,917	1.218	\$41,326	\$0.38
FQHC / RHC	\$654	\$3	\$18	\$675	1.218	\$823	\$0.01
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$4,146,630	\$62,159	(\$272,097)	\$3,936,692	1.062	\$4,179,667	\$38.14
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,648,072	\$24,705	(\$108,145)	\$1,564,633	1.062	\$1,661,203	\$15.16
IP - Psych	\$323,485	\$737	(\$24,052)	\$300,170	1.253	\$376,134	\$3.43
Lab	\$269,808	\$1,152		\$270,960	1.488	\$403,314	\$3.68
OP - Emergency Room	\$674,305	\$4,146		\$678,451	1.265	\$858,078	\$7.83
OP - Other	\$2,618,670	\$16,101		\$2,634,772	1.265	\$3,332,352	\$30.41
Pharmacy	\$2,157,753	\$23	(\$71,787)	\$2,085,988	1.294	\$2,699,870	\$24.64
Prof - Anesthesia	\$468,993	\$2,469	\$9,378	\$480,841	1.218	\$585,875	\$5.35
Prof - Child EPSDT	\$36,399	\$192	\$728	\$37,318	1.218	\$45,470	\$0.41
Prof - Evaluation & Management	\$2,421,169	\$12,747	\$111,599	\$2,545,516	1.218	\$3,101,553	\$28.30
Prof - Maternity	\$2,056,230	\$10,826		\$2,067,056	1.218	\$2,518,579	\$22.98
Prof - Other	\$421,122	\$2,217	\$8,421	\$431,761	1.218	\$526,074	\$4.80
Prof - Psych	\$180,282	\$949	\$3,816	\$185,047	1.218	\$225,469	\$2.06
Prof - Specialist	\$303,574	\$1,598	\$6,937	\$312,109	1.218	\$380,286	\$3.47
Prof - Vision	\$129,372	\$681	\$2,587	\$132,640	1.218	\$161,614	\$1.47
Radiology	\$454,832	\$1,942		\$456,774	1.488	\$679,893	\$6.20
Transportation/Ambulance	\$362,008	\$1,546		\$363,554	1.488	\$541,137	\$4.94
Provider Incentive Payment Adjustment							\$2.39
Total	\$18,708,062	\$144,377	(\$333,565)	\$18,518,874		\$22,318,716	\$206.07
Admin Cost Adjustment							\$16.19
State Budget Cap Adjustment							(\$5.61)
Medallion II Capitation Rate							\$216.65

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Female							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$156,897	\$946		\$157,843	1.123	\$177,318	\$1.28
FQHC / RHC	\$621	\$4		\$624	1.123	\$701	\$0.01
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$13,394,323	\$48,939	(\$869,104)	\$12,574,158	1.076	\$13,532,122	\$97.65
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$5,780,782	\$21,121	(\$375,092)	\$5,426,811	1.076	\$5,840,253	\$42.14
IP - Psych	\$558,332	\$1,903	(\$41,560)	\$518,676	1.652	\$856,696	\$6.18
Lab	\$560,931	\$2,591		\$563,521	1.466	\$826,239	\$5.96
OP - Emergency Room	\$2,015,016	\$12,061		\$2,027,077	1.270	\$2,573,800	\$18.57
OP - Other	\$9,416,254	\$56,361		\$9,472,615	1.270	\$12,027,475	\$86.79
Pharmacy	\$7,346,011	\$244	(\$244,404)	\$7,101,851	1.148	\$8,155,977	\$58.85
Prof - Anesthesia	\$1,490,526	\$8,988	\$22,673	\$1,522,188	1.123	\$1,709,991	\$12.34
Prof - Child EPSDT	\$46,749	\$282	\$711	\$47,742	1.123	\$53,632	\$0.39
Prof - Evaluation & Management	\$5,240,119	\$31,600	\$121,631	\$5,393,350	1.123	\$6,058,769	\$43.72
Prof - Maternity	\$6,279,665	\$37,869		\$6,317,534	1.123	\$7,096,976	\$51.21
Prof - Other	\$1,139,993	\$6,875	\$17,341	\$1,164,209	1.123	\$1,307,846	\$9.44
Prof - Psych	\$357,227	\$2,154	\$7,571	\$366,952	1.123	\$412,226	\$2.97
Prof - Specialist	\$1,588,118	\$9,577	\$30,890	\$1,628,585	1.123	\$1,829,516	\$13.20
Prof - Vision	\$156,302	\$943	\$2,378	\$159,623	1.123	\$179,316	\$1.29
Radiology	\$1,769,601	\$8,173		\$1,777,773	1.466	\$2,606,587	\$18.81
Transportation/Ambulance	\$544,444	\$2,514		\$546,958	1.466	\$801,955	\$5.79
Provider Incentive Payment Adjustment							\$5.60
Total	\$57,841,910	\$253,145	(\$1,326,964)	\$56,768,091		\$66,047,395	\$482.19
Admin Cost Adjustment							\$37.89
State Budget Cap Adjustment							(\$13.13)
Medallion II Capitation Rate							\$506.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Male							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$61,295	\$323	(\$1,710)	\$59,908	1.218	\$72,994	\$0.80
FQHC / RHC	\$60	\$0	\$2	\$62	1.218	\$76	\$0.00
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$934,260	\$14,005	(\$61,305)	\$886,959	1.062	\$941,703	\$10.34
IP - Psych	\$166,709	\$380	(\$12,395)	\$154,694	1.253	\$193,842	\$2.13
Lab	\$104,367	\$446		\$104,813	1.488	\$156,010	\$1.71
OP - Emergency Room	\$324,341	\$1,994		\$326,335	1.265	\$412,735	\$4.53
OP - Other	\$1,145,232	\$7,042		\$1,152,274	1.265	\$1,457,349	\$16.00
Pharmacy	\$1,726,634	\$18	(\$57,444)	\$1,669,207	1.294	\$2,160,435	\$23.72
Prof - Anesthesia	\$57,167	\$301	\$1,143	\$58,611	1.218	\$71,414	\$0.78
Prof - Child EPSDT	\$22,902	\$121	\$458	\$23,480	1.218	\$28,609	\$0.31
Prof - Evaluation & Management	\$1,293,949	\$6,813	\$57,866	\$1,358,628	1.218	\$1,655,404	\$18.17
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$356,788	\$1,878	\$7,135	\$365,801	1.218	\$445,706	\$4.89
Prof - Psych	\$154,529	\$814	\$3,271	\$158,614	1.218	\$193,261	\$2.12
Prof - Specialist	\$248,640	\$1,309	\$5,681	\$255,630	1.218	\$311,469	\$3.42
Prof - Vision	\$104,127	\$548	\$2,082	\$106,757	1.218	\$130,077	\$1.43
Radiology	\$105,798	\$452		\$106,250	1.488	\$158,149	\$1.74
Transportation/Ambulance	\$262,960	\$1,123		\$264,083	1.488	\$393,079	\$4.32
Provider Incentive Payment Adjustment							\$1.13
Total	\$7,069,757	\$37,565	(\$55,217)	\$7,052,105		\$8,782,312	\$97.55
Admin Cost Adjustment							\$7.67
State Budget Cap Adjustment							(\$2.66)
Medallion II Capitation Rate							\$102.56

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Male							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$52,175	\$315		\$52,489	1.123	\$58,965	\$5.43
FQHC / RHC	\$0	\$0		\$0	1.123	\$0	\$0.00
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$698,089	\$2,551	(\$45,296)	\$655,343	1.076	\$705,271	\$64.95
IP - Psych	\$11,128	\$38	(\$828)	\$10,337	1.652	\$17,074	\$1.57
Lab	\$19,668	\$91		\$19,759	1.466	\$28,970	\$2.67
OP - Emergency Room	\$116,833	\$699		\$117,532	1.270	\$149,232	\$13.74
OP - Other	\$456,426	\$2,732		\$459,158	1.270	\$582,998	\$53.69
Pharmacy	\$728,429	\$24	(\$24,235)	\$704,219	1.148	\$808,746	\$74.48
Prof - Anesthesia	\$15,783	\$95	\$240	\$16,118	1.123	\$18,107	\$1.67
Prof - Child EPSDT	\$1,792	\$11	\$27	\$1,830	1.123	\$2,056	\$0.19
Prof - Evaluation & Management	\$295,123	\$1,780	\$6,850	\$303,753	1.123	\$341,229	\$31.42
Prof - Maternity	\$0	\$0		\$0	1.123	\$0	\$0.00
Prof - Other	\$118,209	\$713	\$1,798	\$120,720	1.123	\$135,614	\$12.49
Prof - Psych	\$28,166	\$170	\$597	\$28,933	1.123	\$32,502	\$2.99
Prof - Specialist	\$87,548	\$528	\$1,703	\$89,779	1.123	\$100,856	\$9.29
Prof - Vision	\$12,863	\$78	\$196	\$13,136	1.123	\$14,757	\$1.36
Radiology	\$67,310	\$311		\$67,621	1.466	\$99,147	\$9.13
Transportation/Ambulance	\$35,200	\$163		\$35,363	1.466	\$51,849	\$4.77
Provider Incentive Payment Adjustment							\$3.40
Total	\$2,744,741	\$10,297	(\$58,948)	\$2,696,090		\$3,147,371	\$293.24
Admin Cost Adjustment							\$23.04
State Budget Cap Adjustment							(\$7.98)
Medallion II Capitation Rate							\$308.30

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 45 and Over							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$70,152	\$423		\$70,575	1.123	\$79,282	\$4.26
FQHC / RHC	\$160	\$1		\$161	1.123	\$181	\$0.01
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$19,967	\$73	(\$1,296)	\$18,745	1.076	\$20,173	\$1.08
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$2,733,244	\$9,987	(\$177,349)	\$2,565,881	1.076	\$2,761,363	\$148.26
IP - Psych	\$74,479	\$254	(\$5,544)	\$69,189	1.652	\$114,279	\$6.14
Lab	\$66,155	\$306		\$66,460	1.466	\$97,444	\$5.23
OP - Emergency Room	\$201,808	\$1,208		\$203,016	1.270	\$257,771	\$13.84
OP - Other	\$1,315,160	\$7,872		\$1,323,032	1.270	\$1,679,867	\$90.19
Pharmacy	\$2,424,143	\$81	(\$80,652)	\$2,343,571	1.148	\$2,691,427	\$144.51
Prof - Anesthesia	\$62,917	\$379	\$957	\$64,254	1.123	\$72,181	\$3.88
Prof - Child EPSDT	\$3,829	\$23	\$58	\$3,910	1.123	\$4,392	\$0.24
Prof - Evaluation & Management	\$936,379	\$5,647	\$21,735	\$963,760	1.123	\$1,082,666	\$58.13
Prof - Maternity	\$11,104	\$67		\$11,171	1.123	\$12,549	\$0.67
Prof - Other	\$368,466	\$2,222	\$5,605	\$376,293	1.123	\$422,719	\$22.70
Prof - Psych	\$69,127	\$417	\$1,465	\$71,009	1.123	\$79,769	\$4.28
Prof - Specialist	\$339,907	\$2,050	\$6,612	\$348,568	1.123	\$391,574	\$21.02
Prof - Vision	\$42,085	\$254	\$640	\$42,979	1.123	\$48,281	\$2.59
Radiology	\$264,631	\$1,222		\$265,853	1.466	\$389,796	\$20.93
Transportation/Ambulance	\$83,969	\$388		\$84,357	1.466	\$123,685	\$6.64
Provider Incentive Payment Adjustment							\$6.51
Total	\$9,087,680	\$32,872	(\$227,769)	\$8,892,783		\$10,329,401	\$561.11
Admin Cost Adjustment							\$44.09
State Budget Cap Adjustment							(\$15.28)
Medallion II Capitation Rate							\$589.93

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

All Age Categories							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,691,947	\$9,122	(\$36,163)	\$1,664,906	1.202	\$2,001,882	\$1.14
FQHC / RHC	\$5,980	\$32	\$145	\$6,157	1.206	\$7,428	\$0.00
Home Health	\$0	\$0		\$0	1.000	\$0	\$0.00
IP - Maternity	\$17,585,150	\$111,534	(\$1,144,086)	\$16,552,598	1.073	\$17,756,384	\$10.09
IP - Newborn	\$18,943,849	\$283,972	(\$1,243,074)	\$17,984,747	1.062	\$19,094,777	\$10.85
IP - Other	\$30,380,927	\$350,983	(\$1,986,811)	\$28,745,100	1.066	\$30,644,355	\$17.41
IP - Psych	\$1,886,502	\$5,025	(\$140,318)	\$1,751,209	1.389	\$2,432,848	\$1.38
Lab	\$3,072,691	\$13,347		\$3,086,038	1.484	\$4,579,001	\$2.60
OP - Emergency Room	\$9,096,385	\$55,550		\$9,151,934	1.266	\$11,586,616	\$6.58
OP - Other	\$30,450,883	\$185,406		\$30,636,289	1.267	\$38,803,250	\$22.05
Pharmacy	\$39,690,404	\$656	(\$1,320,490)	\$38,370,570	1.256	\$48,182,161	\$27.38
Prof - Anesthesia	\$3,043,988	\$17,228	\$53,360	\$3,114,576	1.170	\$3,642,578	\$2.07
Prof - Child EPSDT	\$3,379,447	\$17,833	\$67,327	\$3,464,607	1.217	\$4,216,325	\$2.40
Prof - Evaluation & Management	\$52,532,009	\$281,532	\$2,206,832	\$55,020,373	1.207	\$66,405,731	\$37.73
Prof - Maternity	\$8,357,555	\$48,817		\$8,406,372	1.147	\$9,641,034	\$5.48
Prof - Other	\$12,584,017	\$67,499	\$243,854	\$12,895,370	1.206	\$15,554,293	\$8.84
Prof - Psych	\$1,808,392	\$9,869	\$38,288	\$1,856,550	1.195	\$2,217,708	\$1.26
Prof - Specialist	\$5,616,477	\$31,113	\$121,484	\$5,769,074	1.184	\$6,832,775	\$3.88
Prof - Vision	\$2,072,930	\$11,076	\$40,441	\$2,124,447	1.209	\$2,567,999	\$1.46
Radiology	\$3,630,564	\$16,235		\$3,646,799	1.476	\$5,381,146	\$3.06
Transportation/Ambulance	\$5,524,352	\$23,822		\$5,548,174	1.486	\$8,243,431	\$4.68
Provider Incentive Payment Adjustment							\$2.00
Total	\$251,354,451	\$1,540,650	(\$3,099,211)	\$249,795,891		\$299,791,721	\$172.34
Admin Cost Adjustment							\$13.54
State Budget Cap Adjustment							(\$4.69)
Medallion II Capitation Rate							\$181.19

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age Under 1							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$297,294	\$1,565	(\$7,380)	\$291,480	1.218	\$355,150	\$3.79
FQHC / RHC	\$63,365	\$334	\$1,766	\$65,465	1.218	\$79,765	\$0.85
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$16,149,368	\$242,082	(\$1,059,703)	\$15,331,747	1.062	\$16,278,032	\$173.93
IP - Other	\$2,953,255	\$44,270	(\$192,825)	\$2,804,699	1.062	\$2,977,807	\$31.82
IP - Psych	\$51,496	\$117	(\$3,829)	\$47,785	1.253	\$59,878	\$0.64
Lab	\$301,859	\$1,289		\$303,148	1.488	\$451,225	\$4.82
OP - Emergency Room	\$602,608	\$3,705		\$606,313	1.265	\$766,840	\$8.19
OP - Other	\$1,555,286	\$9,563		\$1,564,849	1.265	\$1,979,158	\$21.15
Pharmacy	\$1,759,152	\$18	(\$58,526)	\$1,700,644	1.294	\$2,201,123	\$23.52
Prof - Anesthesia	\$90,170	\$475	\$1,803	\$92,448	1.218	\$112,642	\$1.20
Prof - Child EPSDT	\$893,456	\$4,704	\$17,866	\$916,026	1.218	\$1,116,121	\$11.93
Prof - Evaluation & Management	\$7,625,392	\$40,147	\$334,449	\$7,999,988	1.218	\$9,747,490	\$104.15
Prof - Maternity	\$1,754	\$9		\$1,763	1.218	\$2,149	\$0.02
Prof - Other	\$1,222,973	\$6,439	\$24,455	\$1,253,868	1.218	\$1,527,760	\$16.32
Prof - Psych	\$53,344	\$281	\$1,129	\$54,754	1.218	\$66,714	\$0.71
Prof - Specialist	\$714,430	\$3,761	\$16,324	\$734,516	1.218	\$894,962	\$9.56
Prof - Vision	\$115,632	\$609	\$2,312	\$118,553	1.218	\$144,450	\$1.54
Radiology	\$251,563	\$1,074		\$252,638	1.488	\$376,043	\$4.02
Transportation/Ambulance	\$323,472	\$1,381		\$324,853	1.488	\$483,533	\$5.17
Provider Incentive Payment Adjustment							\$4.97
Total	\$35,025,870	\$361,825	(\$922,158)	\$34,465,537		\$39,620,841	\$428.32
Admin Cost Adjustment							\$33.66
State Budget Cap Adjustment							(\$11.66)
Medallion II Capitation Rate							\$450.32

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 1-5							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$268,072	\$1,411	(\$6,654)	\$262,829	1.218	\$320,241	\$1.06
FQHC / RHC	\$78,899	\$415	\$2,199	\$81,513	1.218	\$99,319	\$0.33
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$2,929,780	\$43,918	(\$191,292)	\$2,782,405	1.062	\$2,954,137	\$9.75
IP - Psych	\$213,857	\$487	(\$15,901)	\$198,443	1.253	\$248,664	\$0.82
Lab	\$670,125	\$2,862		\$672,986	1.488	\$1,001,718	\$3.31
OP - Emergency Room	\$1,409,905	\$8,669		\$1,418,574	1.265	\$1,794,154	\$5.92
OP - Other	\$4,191,289	\$25,771		\$4,217,059	1.265	\$5,333,564	\$17.61
Pharmacy	\$3,742,108	\$39	(\$124,498)	\$3,617,649	1.294	\$4,682,280	\$15.46
Prof - Anesthesia	\$243,750	\$1,283	\$4,874	\$249,908	1.218	\$304,497	\$1.01
Prof - Child EPSDT	\$561,315	\$2,955	\$11,224	\$575,494	1.218	\$701,204	\$2.31
Prof - Evaluation & Management	\$6,886,849	\$36,259	\$304,460	\$7,227,568	1.218	\$8,806,344	\$29.07
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$1,603,921	\$8,445	\$32,073	\$1,644,439	1.218	\$2,003,647	\$6.61
Prof - Psych	\$402,347	\$2,118	\$8,516	\$412,982	1.218	\$503,193	\$1.66
Prof - Specialist	\$1,044,557	\$5,500	\$23,868	\$1,073,925	1.218	\$1,308,511	\$4.32
Prof - Vision	\$360,636	\$1,899	\$7,212	\$369,746	1.218	\$450,513	\$1.49
Radiology	\$207,413	\$886		\$208,298	1.488	\$310,045	\$1.02
Transportation/Ambulance	\$720,576	\$3,077		\$723,653	1.488	\$1,077,133	\$3.56
Provider Incentive Payment Adjustment							\$1.24
Total	\$25,535,398	\$145,994	\$56,080	\$25,737,472		\$31,899,163	\$106.53
Admin Cost Adjustment							\$8.37
State Budget Cap Adjustment							(\$2.90)
Medallion II Capitation Rate							\$112.00

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 6-14							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$297,457	\$1,566	(\$8,296)	\$290,727	1.218	\$354,232	\$1.03
FQHC / RHC	\$63,961	\$337	\$1,783	\$66,081	1.218	\$80,516	\$0.23
Home Health	\$9	\$0		\$9	1.265	\$11	\$0.00
IP - Maternity	\$43,318	\$649	(\$2,843)	\$41,125	1.062	\$43,663	\$0.13
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,693,950	\$25,393	(\$110,602)	\$1,608,741	1.062	\$1,708,033	\$4.96
IP - Psych	\$727,456	\$1,657	(\$54,087)	\$675,025	1.253	\$845,854	\$2.46
Lab	\$683,383	\$2,918		\$686,302	1.488	\$1,021,537	\$2.97
OP - Emergency Room	\$1,060,653	\$6,522		\$1,067,174	1.265	\$1,349,719	\$3.92
OP - Other	\$3,491,388	\$21,467		\$3,512,855	1.265	\$4,442,916	\$12.91
Pharmacy	\$8,727,323	\$92	(\$290,354)	\$8,437,060	1.294	\$10,919,986	\$31.74
Prof - Anesthesia	\$150,317	\$791	\$3,006	\$154,115	1.218	\$187,779	\$0.55
Prof - Child EPSDT	\$117,116	\$617	\$2,342	\$120,074	1.218	\$146,303	\$0.43
Prof - Evaluation & Management	\$4,919,294	\$25,900	\$226,746	\$5,171,940	1.218	\$6,301,688	\$18.31
Prof - Maternity	\$27,293	\$144		\$27,437	1.218	\$33,430	\$0.10
Prof - Other	\$896,117	\$4,718	\$17,919	\$918,755	1.218	\$1,119,446	\$3.25
Prof - Psych	\$1,176,294	\$6,193	\$24,897	\$1,207,384	1.218	\$1,471,123	\$4.28
Prof - Specialist	\$800,690	\$4,216	\$18,295	\$823,201	1.218	\$1,003,020	\$2.92
Prof - Vision	\$439,590	\$2,314	\$8,790	\$450,695	1.218	\$549,143	\$1.60
Radiology	\$257,896	\$1,101		\$258,998	1.488	\$385,509	\$1.12
Transportation/Ambulance	\$853,563	\$3,645		\$857,209	1.488	\$1,275,926	\$3.71
Provider Incentive Payment Adjustment							\$1.13
Total	\$26,427,071	\$110,240	(\$162,405)	\$26,374,906		\$33,239,836	\$97.74
Admin Cost Adjustment							\$7.68
State Budget Cap Adjustment							(\$2.66)
Medallion II Capitation Rate							\$102.76

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Female							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$60,902	\$321	(\$1,699)	\$59,524	1.218	\$72,526	\$0.93
FQHC / RHC	\$61,508	\$324	\$1,714	\$63,547	1.218	\$77,428	\$0.99
Home Health	\$4,625	\$28		\$4,653	1.265	\$5,885	\$0.08
IP - Maternity	\$4,139,711	\$62,055	(\$271,643)	\$3,930,123	1.062	\$4,172,692	\$53.50
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$983,466	\$14,742	(\$64,213)	\$933,996	1.062	\$991,642	\$12.71
IP - Psych	\$334,123	\$761	(\$24,843)	\$310,042	1.253	\$388,504	\$4.98
Lab	\$618,297	\$2,640		\$620,937	1.488	\$924,244	\$11.85
OP - Emergency Room	\$659,506	\$4,055		\$663,561	1.265	\$839,245	\$10.76
OP - Other	\$2,324,895	\$14,295		\$2,339,190	1.265	\$2,958,512	\$37.93
Pharmacy	\$2,162,839	\$23	(\$71,957)	\$2,090,905	1.294	\$2,706,234	\$34.70
Prof - Anesthesia	\$315,449	\$1,661	\$6,308	\$323,418	1.218	\$394,064	\$5.05
Prof - Child EPSDT	\$78,270	\$412	\$1,565	\$80,247	1.218	\$97,776	\$1.25
Prof - Evaluation & Management	\$1,945,638	\$10,244	\$89,681	\$2,045,562	1.218	\$2,492,390	\$31.96
Prof - Maternity	\$2,453,215	\$12,916		\$2,466,131	1.218	\$3,004,828	\$38.53
Prof - Other	\$379,882	\$2,000	\$7,596	\$389,479	1.218	\$474,556	\$6.08
Prof - Psych	\$221,472	\$1,166	\$4,688	\$227,326	1.218	\$276,982	\$3.55
Prof - Specialist	\$351,743	\$1,852	\$8,037	\$361,632	1.218	\$440,626	\$5.65
Prof - Vision	\$101,364	\$534	\$2,027	\$103,924	1.218	\$126,625	\$1.62
Radiology	\$509,318	\$2,175		\$511,493	1.488	\$761,339	\$9.76
Transportation/Ambulance	\$314,914	\$1,345		\$316,259	1.488	\$470,740	\$6.04
Provider Incentive Payment Adjustment							\$3.26
Total	\$18,021,136	\$133,549	(\$312,738)	\$17,841,947		\$21,676,841	\$281.20
Admin Cost Adjustment							\$22.10
State Budget Cap Adjustment							(\$7.66)
Medallion II Capitation Rate							\$295.64

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Female							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$322,963	\$1,948		\$324,910	1.123	\$364,997	\$2.58
FQHC / RHC	\$179,927	\$1,085		\$181,012	1.123	\$203,345	\$1.44
Home Health	\$7,438	\$45		\$7,482	1.270	\$9,500	\$0.07
IP - Maternity	\$10,862,672	\$39,689	(\$704,835)	\$10,197,526	1.076	\$10,974,426	\$77.57
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$5,525,792	\$20,190	(\$356,763)	\$5,189,219	1.076	\$5,584,560	\$39.47
IP - Psych	\$864,167	\$2,945	(\$64,325)	\$802,787	1.652	\$1,325,962	\$9.37
Lab	\$1,561,805	\$7,213		\$1,569,018	1.466	\$2,300,508	\$16.26
OP - Emergency Room	\$2,026,957	\$12,132		\$2,039,089	1.270	\$2,589,052	\$18.30
OP - Other	\$9,682,002	\$57,952		\$9,739,954	1.270	\$12,366,918	\$87.41
Pharmacy	\$8,534,940	\$284	(\$283,960)	\$8,251,263	1.148	\$9,475,996	\$66.98
Prof - Anesthesia	\$865,063	\$5,217	\$13,159	\$883,439	1.123	\$992,435	\$7.01
Prof - Child EPSDT	\$129,311	\$780	\$1,967	\$132,058	1.123	\$148,351	\$1.05
Prof - Evaluation & Management	\$4,754,905	\$28,674	\$110,369	\$4,893,947	1.123	\$5,497,751	\$38.86
Prof - Maternity	\$6,026,609	\$36,343		\$6,062,951	1.123	\$6,810,984	\$48.14
Prof - Other	\$1,374,237	\$8,287	\$20,904	\$1,403,428	1.123	\$1,576,580	\$11.14
Prof - Psych	\$472,326	\$2,848	\$10,010	\$485,185	1.123	\$545,046	\$3.85
Prof - Specialist	\$2,020,040	\$12,182	\$39,292	\$2,071,514	1.123	\$2,327,092	\$16.45
Prof - Vision	\$188,164	\$1,135	\$2,862	\$192,160	1.123	\$215,869	\$1.53
Radiology	\$1,651,400	\$7,627		\$1,659,027	1.466	\$2,432,480	\$17.19
Transportation/Ambulance	\$710,146	\$3,280		\$713,426	1.466	\$1,046,031	\$7.39
Provider Incentive Payment Adjustment							\$5.54
Total	\$57,760,864	\$249,854	(\$1,211,319)	\$56,799,398		\$66,787,882	\$477.61
Admin Cost Adjustment							\$37.53
State Budget Cap Adjustment							(\$13.00)
Medallion II Capitation Rate							\$502.14

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Male							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$81,096	\$427	(\$2,262)	\$79,261	1.218	\$96,575	\$1.76
FQHC / RHC	\$13,616	\$72	\$380	\$14,067	1.218	\$17,140	\$0.31
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,034,104	\$15,501	(\$67,519)	\$982,086	1.062	\$1,042,701	\$18.98
IP - Psych	\$195,478	\$445	(\$14,534)	\$181,389	1.253	\$227,293	\$4.14
Lab	\$106,220	\$454		\$106,673	1.488	\$158,780	\$2.89
OP - Emergency Room	\$252,218	\$1,551		\$253,769	1.265	\$320,957	\$5.84
OP - Other	\$963,069	\$5,922		\$968,990	1.265	\$1,225,540	\$22.31
Pharmacy	\$1,202,065	\$13	(\$39,992)	\$1,162,086	1.294	\$1,504,074	\$27.38
Prof - Anesthesia	\$29,798	\$157	\$596	\$30,551	1.218	\$37,224	\$0.68
Prof - Child EPSDT	\$8,328	\$44	\$167	\$8,539	1.218	\$10,404	\$0.19
Prof - Evaluation & Management	\$723,756	\$3,811	\$32,367	\$759,933	1.218	\$925,932	\$16.85
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$123,898	\$652	\$2,478	\$127,028	1.218	\$154,776	\$2.82
Prof - Psych	\$161,114	\$848	\$3,410	\$165,373	1.218	\$201,496	\$3.67
Prof - Specialist	\$205,795	\$1,083	\$4,702	\$211,580	1.218	\$257,798	\$4.69
Prof - Vision	\$68,122	\$359	\$1,362	\$69,843	1.218	\$85,099	\$1.55
Radiology	\$101,149	\$432		\$101,581	1.488	\$151,200	\$2.75
Transportation/Ambulance	\$163,826	\$700		\$164,526	1.488	\$244,891	\$4.46
Provider Incentive Payment Adjustment							\$1.42
Total	\$5,433,653	\$32,469	(\$78,847)	\$5,387,276		\$6,661,879	\$122.68
Admin Cost Adjustment							\$9.64
State Budget Cap Adjustment							(\$3.34)
Medallion II Capitation Rate							\$128.98

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Male							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$116,456	\$702		\$117,158	1.123	\$131,613	\$9.39
FQHC / RHC	\$15,238	\$92		\$15,330	1.123	\$17,221	\$1.23
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$1,789	\$7	(\$116)	\$1,680	1.076	\$1,808	\$0.13
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$1,000,918	\$3,657	(\$64,622)	\$939,953	1.076	\$1,011,563	\$72.17
IP - Psych	\$140,010	\$477	(\$10,422)	\$130,066	1.652	\$214,830	\$15.33
Lab	\$72,864	\$337		\$73,201	1.466	\$107,327	\$7.66
OP - Emergency Room	\$186,029	\$1,113		\$187,142	1.270	\$237,617	\$16.95
OP - Other	\$920,032	\$5,507		\$925,539	1.270	\$1,175,167	\$83.84
Pharmacy	\$880,062	\$29	(\$29,280)	\$850,811	1.148	\$977,097	\$69.71
Prof - Anesthesia	\$26,355	\$159	\$401	\$26,914	1.123	\$30,235	\$2.16
Prof - Child EPSDT	\$2,532	\$15	\$39	\$2,586	1.123	\$2,905	\$0.21
Prof - Evaluation & Management	\$387,333	\$2,336	\$8,991	\$398,659	1.123	\$447,845	\$31.95
Prof - Maternity	\$1,231	\$7		\$1,239	1.123	\$1,391	\$0.10
Prof - Other	\$92,173	\$556	\$1,402	\$94,131	1.123	\$105,744	\$7.54
Prof - Psych	\$35,548	\$214	\$753	\$36,516	1.123	\$41,021	\$2.93
Prof - Specialist	\$201,249	\$1,214	\$3,914	\$206,377	1.123	\$231,839	\$16.54
Prof - Vision	\$20,037	\$121	\$305	\$20,463	1.123	\$22,988	\$1.64
Radiology	\$99,528	\$460		\$99,988	1.466	\$146,603	\$10.46
Transportation/Ambulance	\$52,030	\$240		\$52,270	1.466	\$76,638	\$5.47
Provider Incentive Payment Adjustment							\$4.17
Total	\$4,251,415	\$17,243	(\$88,635)	\$4,180,022		\$4,981,452	\$359.56
Admin Cost Adjustment							\$28.25
State Budget Cap Adjustment							(\$9.79)
Medallion II Capitation Rate							\$378.02

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 45 and Over							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$99,477	\$600		\$100,077	1.123	\$112,424	\$9.23
FQHC / RHC	\$10,826	\$65		\$10,891	1.123	\$12,235	\$1.00
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$2,472	\$9	(\$160)	\$2,321	1.076	\$2,497	\$0.21
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$1,688,443	\$6,169	(\$109,011)	\$1,585,601	1.076	\$1,706,400	\$140.17
IP - Psych	\$57,409	\$196	(\$4,273)	\$53,331	1.652	\$88,087	\$7.24
Lab	\$114,773	\$530		\$115,303	1.466	\$169,058	\$13.89
OP - Emergency Room	\$119,634	\$716		\$120,350	1.270	\$152,809	\$12.55
OP - Other	\$1,044,406	\$6,251		\$1,050,658	1.270	\$1,334,031	\$109.58
Pharmacy	\$1,551,404	\$52	(\$51,616)	\$1,499,840	1.148	\$1,722,461	\$141.49
Prof - Anesthesia	\$32,970	\$199	\$502	\$33,670	1.123	\$37,824	\$3.11
Prof - Child EPSDT	\$4,839	\$29	\$74	\$4,942	1.123	\$5,552	\$0.46
Prof - Evaluation & Management	\$489,310	\$2,951	\$11,358	\$503,618	1.123	\$565,753	\$46.47
Prof - Maternity	\$180	\$1		\$181	1.123	\$203	\$0.02
Prof - Other	\$248,532	\$1,499	\$3,781	\$253,811	1.123	\$285,126	\$23.42
Prof - Psych	\$58,531	\$353	\$1,240	\$60,124	1.123	\$67,542	\$5.55
Prof - Specialist	\$260,547	\$1,571	\$5,068	\$267,186	1.123	\$300,151	\$24.66
Prof - Vision	\$25,391	\$153	\$386	\$25,930	1.123	\$29,130	\$2.39
Radiology	\$154,367	\$713		\$155,080	1.466	\$227,379	\$18.68
Transportation/Ambulance	\$85,781	\$396		\$86,177	1.466	\$126,354	\$10.38
Provider Incentive Payment Adjustment							\$6.70
Total	\$6,049,292	\$22,453	(\$142,653)	\$5,929,092		\$6,945,018	\$577.18
Admin Cost Adjustment							\$45.35
State Budget Cap Adjustment							(\$15.71)
Medallion II Capitation Rate							\$606.82

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

All Age Categories							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,543,717	\$8,540	(\$26,291)	\$1,525,966	1.185	\$1,807,758	\$1.74
FQHC / RHC	\$487,341	\$2,723	\$7,842	\$497,906	1.179	\$586,968	\$0.56
Home Health	\$12,072	\$73		\$12,145	1.268	\$15,397	\$0.01
IP - Maternity	\$15,049,963	\$102,409	(\$979,597)	\$14,172,775	1.072	\$15,195,087	\$14.59
IP - Newborn	\$16,149,368	\$242,082	(\$1,059,703)	\$15,331,747	1.062	\$16,278,032	\$15.63
IP - Other	\$17,809,707	\$173,840	(\$1,156,848)	\$16,826,700	1.068	\$17,976,844	\$17.26
IP - Psych	\$2,583,996	\$7,085	(\$192,213)	\$2,398,868	1.417	\$3,399,072	\$3.26
Lab	\$4,129,326	\$18,243		\$4,147,569	1.479	\$6,134,397	\$5.89
OP - Emergency Room	\$6,317,510	\$38,463		\$6,355,974	1.267	\$8,050,394	\$7.73
OP - Other	\$24,172,368	\$146,727		\$24,319,095	1.267	\$30,815,804	\$29.60
Pharmacy	\$28,559,892	\$550	(\$950,183)	\$27,610,259	1.238	\$34,189,251	\$32.84
Prof - Anesthesia	\$1,753,872	\$9,942	\$30,648	\$1,794,462	1.168	\$2,096,701	\$2.01
Prof - Child EPSDT	\$1,795,168	\$9,556	\$35,243	\$1,839,968	1.211	\$2,228,617	\$2.14
Prof - Evaluation & Management	\$27,732,477	\$150,321	\$1,118,418	\$29,001,216	1.199	\$34,785,193	\$33.41
Prof - Maternity	\$8,510,282	\$49,420		\$8,559,702	1.151	\$9,852,984	\$9.46
Prof - Other	\$5,941,734	\$32,596	\$110,608	\$6,084,938	1.191	\$7,247,634	\$6.96
Prof - Psych	\$2,580,977	\$14,022	\$54,644	\$2,649,643	1.198	\$3,173,117	\$3.05
Prof - Specialist	\$5,599,051	\$31,378	\$119,501	\$5,749,931	1.176	\$6,763,998	\$6.50
Prof - Vision	\$1,318,936	\$7,123	\$25,256	\$1,351,315	1.202	\$1,623,817	\$1.56
Radiology	\$3,232,634	\$14,468		\$3,247,102	1.475	\$4,790,598	\$4.60
Transportation/Ambulance	\$3,224,308	\$14,064		\$3,238,373	1.483	\$4,801,247	\$4.61
Provider Incentive Payment Adjustment							\$2.39
Total	\$178,504,699	\$1,073,626	(\$2,862,675)	\$176,715,650		\$211,812,911	\$205.81
Admin Cost Adjustment							\$16.17
State Budget Cap Adjustment							(\$5.60)
Medallion II Capitation Rate							\$216.38

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age Under 1							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$943,362	\$4,967	(\$23,417)	\$924,911	1.218	\$1,126,947	\$8.34
FQHC / RHC	\$95,697	\$504	\$2,667	\$98,868	1.218	\$120,465	\$0.89
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$1,200	\$18	(\$79)	\$1,139	1.062	\$1,210	\$0.01
IP - Newborn	\$24,224,541	\$363,131	(\$1,589,587)	\$22,998,084	1.062	\$24,417,541	\$180.60
IP - Other	\$6,187,308	\$92,749	(\$406,004)	\$5,874,052	1.062	\$6,236,603	\$46.13
IP - Psych	\$138,647	\$316	(\$10,309)	\$128,655	1.253	\$161,213	\$1.19
Lab	\$258,833	\$1,105		\$259,938	1.488	\$386,909	\$2.86
OP - Emergency Room	\$1,466,735	\$9,018		\$1,475,754	1.265	\$1,866,473	\$13.80
OP - Other	\$3,496,622	\$21,499		\$3,518,121	1.265	\$4,449,576	\$32.91
Pharmacy	\$2,677,508	\$28	(\$89,079)	\$2,588,456	1.294	\$3,350,208	\$24.78
Prof - Anesthesia	\$159,289	\$839	\$3,185	\$163,313	1.218	\$198,986	\$1.47
Prof - Child EPSDT	\$1,335,473	\$7,031	\$26,705	\$1,369,209	1.218	\$1,668,297	\$12.34
Prof - Evaluation & Management	\$11,818,577	\$62,224	\$518,361	\$12,399,163	1.218	\$15,107,611	\$111.74
Prof - Maternity	\$2,795	\$15		\$2,810	1.218	\$3,423	\$0.03
Prof - Other	\$1,587,286	\$8,357	\$31,740	\$1,627,384	1.218	\$1,982,866	\$14.67
Prof - Psych	\$130,094	\$685	\$2,753	\$133,532	1.218	\$162,701	\$1.20
Prof - Specialist	\$1,061,229	\$5,587	\$24,249	\$1,091,065	1.218	\$1,329,395	\$9.83
Prof - Vision	\$145,309	\$765	\$2,906	\$148,980	1.218	\$181,522	\$1.34
Radiology	\$266,379	\$1,138		\$267,517	1.488	\$398,190	\$2.95
Transportation/Ambulance	\$550,963	\$2,353		\$553,315	1.488	\$823,591	\$6.09
Provider Incentive Payment Adjustment							\$5.56
Total	\$56,547,845	\$582,329	(\$1,505,908)	\$55,624,266		\$63,973,727	\$478.72
Admin Cost Adjustment							\$37.62
State Budget Cap Adjustment							(\$13.03)
Medallion II Capitation Rate							\$503.31

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 1-5							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$723,354	\$3,808	(\$17,956)	\$709,206	1.218	\$864,124	\$1.65
FQHC / RHC	\$140,775	\$741	\$3,924	\$145,440	1.218	\$177,209	\$0.34
Home Health	\$585	\$4		\$589	1.265	\$744	\$0.00
IP - Maternity	\$4,200	\$63	(\$276)	\$3,987	1.062	\$4,233	\$0.01
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$5,875,799	\$88,079	(\$385,563)	\$5,578,315	1.062	\$5,922,612	\$11.28
IP - Psych	\$529,929	\$1,207	(\$39,401)	\$491,735	1.253	\$616,179	\$1.17
Lab	\$860,232	\$3,674		\$863,905	1.488	\$1,285,893	\$2.45
OP - Emergency Room	\$3,581,907	\$22,024		\$3,603,930	1.265	\$4,558,104	\$8.68
OP - Other	\$11,376,442	\$69,949		\$11,446,391	1.265	\$14,476,929	\$27.56
Pharmacy	\$9,240,904	\$97	(\$307,441)	\$8,933,560	1.294	\$11,562,601	\$22.01
Prof - Anesthesia	\$362,326	\$1,908	\$7,245	\$371,479	1.218	\$452,624	\$0.86
Prof - Child EPSDT	\$1,030,835	\$5,427	\$20,613	\$1,056,875	1.218	\$1,287,737	\$2.45
Prof - Evaluation & Management	\$12,458,767	\$65,595	\$550,788	\$13,075,150	1.218	\$15,931,261	\$30.33
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$2,085,467	\$10,980	\$41,702	\$2,138,149	1.218	\$2,605,202	\$4.96
Prof - Psych	\$648,914	\$3,416	\$13,735	\$666,065	1.218	\$811,559	\$1.55
Prof - Specialist	\$1,368,925	\$7,207	\$31,279	\$1,407,412	1.218	\$1,714,844	\$3.26
Prof - Vision	\$572,640	\$3,015	\$11,451	\$587,106	1.218	\$715,352	\$1.36
Radiology	\$290,060	\$1,239		\$291,299	1.488	\$433,589	\$0.83
Transportation/Ambulance	\$1,723,798	\$7,361		\$1,731,159	1.488	\$2,576,772	\$4.91
Provider Incentive Payment Adjustment							\$1.48
Total	\$52,875,857	\$295,794	(\$69,899)	\$53,101,753		\$65,997,568	\$127.12
Admin Cost Adjustment							\$9.99
State Budget Cap Adjustment							(\$3.46)
Medallion II Capitation Rate							\$133.65

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 6-14							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$567,771	\$2,989	(\$15,836)	\$554,924	1.218	\$676,140	\$0.99
FQHC / RHC	\$143,088	\$753	\$3,988	\$147,830	1.218	\$180,122	\$0.26
Home Health	\$98	\$1		\$98	1.265	\$124	\$0.00
IP - Maternity	\$89,235	\$1,338	(\$5,855)	\$84,717	1.062	\$89,946	\$0.13
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$4,380,445	\$65,664	(\$287,440)	\$4,158,669	1.062	\$4,415,345	\$6.44
IP - Psych	\$1,660,889	\$3,783	(\$123,490)	\$1,541,183	1.253	\$1,931,211	\$2.82
Lab	\$949,361	\$4,054		\$953,416	1.488	\$1,419,127	\$2.07
OP - Emergency Room	\$2,704,755	\$16,630		\$2,721,386	1.265	\$3,441,897	\$5.02
OP - Other	\$8,787,841	\$54,033		\$8,841,874	1.265	\$11,182,842	\$16.31
Pharmacy	\$15,424,500	\$162	(\$513,166)	\$14,911,496	1.294	\$19,299,771	\$28.15
Prof - Anesthesia	\$244,758	\$1,289	\$4,894	\$250,941	1.218	\$305,756	\$0.45
Prof - Child EPSDT	\$230,479	\$1,213	\$4,609	\$236,302	1.218	\$287,919	\$0.42
Prof - Evaluation & Management	\$9,425,245	\$49,623	\$434,439	\$9,909,307	1.218	\$12,073,877	\$17.61
Prof - Maternity	\$35,929	\$189		\$36,119	1.218	\$44,008	\$0.06
Prof - Other	\$1,663,668	\$8,759	\$33,268	\$1,705,695	1.218	\$2,078,284	\$3.03
Prof - Psych	\$1,840,132	\$9,688	\$38,947	\$1,888,768	1.218	\$2,301,346	\$3.36
Prof - Specialist	\$1,227,519	\$6,463	\$28,048	\$1,262,030	1.218	\$1,537,706	\$2.24
Prof - Vision	\$769,178	\$4,050	\$15,381	\$788,609	1.218	\$960,871	\$1.40
Radiology	\$395,480	\$1,689		\$397,169	1.488	\$591,173	\$0.86
Transportation/Ambulance	\$2,023,003	\$8,639		\$2,031,642	1.488	\$3,024,030	\$4.41
Provider Incentive Payment Adjustment							\$1.13
Total	\$52,563,376	\$241,010	(\$382,213)	\$52,422,173		\$65,841,495	\$97.16
Admin Cost Adjustment							\$7.63
State Budget Cap Adjustment							(\$2.64)
Medallion II Capitation Rate							\$102.14

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Female							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$99,255	\$523	(\$2,768)	\$97,009	1.218	\$118,199	\$0.77
FQHC / RHC	\$157,937	\$832	\$4,402	\$163,170	1.218	\$198,813	\$1.30
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$5,823,566	\$87,296	(\$382,136)	\$5,528,727	1.062	\$5,869,963	\$38.44
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,612,278	\$24,168	(\$105,796)	\$1,530,650	1.062	\$1,625,123	\$10.64
IP - Psych	\$500,663	\$1,140	(\$37,225)	\$464,579	1.253	\$582,150	\$3.81
Lab	\$582,041	\$2,486		\$584,526	1.488	\$870,047	\$5.70
OP - Emergency Room	\$1,467,746	\$9,025		\$1,476,771	1.265	\$1,867,760	\$12.23
OP - Other	\$4,906,339	\$30,167		\$4,936,506	1.265	\$6,243,491	\$40.89
Pharmacy	\$3,429,858	\$36	(\$114,110)	\$3,315,784	1.294	\$4,291,579	\$28.11
Prof - Anesthesia	\$612,382	\$3,224	\$12,246	\$627,852	1.218	\$764,999	\$5.01
Prof - Child EPSDT	\$110,653	\$583	\$2,213	\$113,449	1.218	\$138,230	\$0.91
Prof - Evaluation & Management	\$3,195,762	\$16,825	\$147,303	\$3,359,890	1.218	\$4,093,818	\$26.81
Prof - Maternity	\$3,059,706	\$16,109		\$3,075,815	1.218	\$3,747,690	\$24.54
Prof - Other	\$750,351	\$3,951	\$15,005	\$769,306	1.218	\$937,352	\$6.14
Prof - Psych	\$372,329	\$1,960	\$7,881	\$382,170	1.218	\$465,651	\$3.05
Prof - Specialist	\$498,420	\$2,624	\$11,389	\$512,433	1.218	\$624,368	\$4.09
Prof - Vision	\$162,249	\$854	\$3,244	\$166,347	1.218	\$202,684	\$1.33
Radiology	\$620,250	\$2,649		\$622,899	1.488	\$927,164	\$6.07
Transportation/Ambulance	\$696,827	\$2,976		\$699,802	1.488	\$1,041,632	\$6.82
Provider Incentive Payment Adjustment							\$2.66
Total	\$28,658,612	\$207,428	(\$438,354)	\$28,427,686		\$34,610,714	\$229.33
Admin Cost Adjustment							\$18.02
State Budget Cap Adjustment							(\$6.24)
Medallion II Capitation Rate							\$241.11

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Female							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$569,324	\$3,433		\$572,757	1.123	\$643,423	\$2.27
FQHC / RHC	\$603,788	\$3,641		\$607,429	1.123	\$682,372	\$2.40
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$17,624,913	\$64,397	(\$1,143,610)	\$16,545,700	1.076	\$17,806,235	\$62.73
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$9,198,420	\$33,609	(\$596,848)	\$8,635,180	1.076	\$9,293,052	\$32.74
IP - Psych	\$1,269,169	\$4,325	(\$94,471)	\$1,179,023	1.652	\$1,947,391	\$6.86
Lab	\$1,446,042	\$6,678		\$1,452,720	1.466	\$2,129,991	\$7.50
OP - Emergency Room	\$5,269,110	\$31,538		\$5,300,649	1.270	\$6,730,287	\$23.71
OP - Other	\$22,896,410	\$137,047		\$23,033,457	1.270	\$29,245,813	\$103.04
Pharmacy	\$13,902,735	\$463	(\$462,548)	\$13,440,650	1.148	\$15,435,641	\$54.38
Prof - Anesthesia	\$1,853,989	\$11,180	\$28,202	\$1,893,371	1.123	\$2,126,970	\$7.49
Prof - Child EPSDT	\$134,165	\$809	\$2,041	\$137,015	1.123	\$153,919	\$0.54
Prof - Evaluation & Management	\$8,555,731	\$51,594	\$198,592	\$8,805,917	1.123	\$9,892,370	\$34.85
Prof - Maternity	\$8,927,635	\$53,837		\$8,981,472	1.123	\$10,089,584	\$35.55
Prof - Other	\$2,435,692	\$14,688	\$37,050	\$2,487,430	1.123	\$2,794,323	\$9.84
Prof - Psych	\$732,146	\$4,415	\$15,517	\$752,078	1.123	\$844,868	\$2.98
Prof - Specialist	\$3,039,299	\$18,328	\$59,117	\$3,116,745	1.123	\$3,501,281	\$12.34
Prof - Vision	\$316,557	\$1,909	\$4,815	\$323,281	1.123	\$363,167	\$1.28
Radiology	\$2,586,548	\$11,945		\$2,598,493	1.466	\$3,809,933	\$13.42
Transportation/Ambulance	\$1,708,840	\$7,892		\$1,716,732	1.466	\$2,517,087	\$8.87
Provider Incentive Payment Adjustment							\$4.96
Total	\$103,070,512	\$461,730	(\$1,952,144)	\$101,580,098		\$120,007,707	\$427.77
Admin Cost Adjustment							\$33.61
State Budget Cap Adjustment							(\$11.65)
Medallion II Capitation Rate							\$449.74

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Male							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$111,996	\$590	(\$3,124)	\$109,462	1.218	\$133,373	\$1.19
FQHC / RHC	\$36,252	\$191	\$1,010	\$37,454	1.218	\$45,635	\$0.41
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$6,898	\$103	(\$453)	\$6,549	1.062	\$6,953	\$0.06
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,301,945	\$19,516	(\$85,432)	\$1,236,029	1.062	\$1,312,318	\$11.73
IP - Psych	\$441,309	\$1,005	(\$32,812)	\$409,502	1.253	\$513,135	\$4.59
Lab	\$140,334	\$599		\$140,933	1.488	\$209,774	\$1.88
OP - Emergency Room	\$605,611	\$3,724		\$609,335	1.265	\$770,662	\$6.89
OP - Other	\$2,238,899	\$13,766		\$2,252,665	1.265	\$2,849,079	\$25.47
Pharmacy	\$2,235,900	\$23	(\$74,387)	\$2,161,536	1.294	\$2,797,650	\$25.01
Prof - Anesthesia	\$50,588	\$266	\$1,012	\$51,866	1.218	\$63,195	\$0.57
Prof - Child EPSDT	\$18,130	\$95	\$363	\$18,588	1.218	\$22,648	\$0.20
Prof - Evaluation & Management	\$1,294,867	\$6,817	\$57,907	\$1,359,591	1.218	\$1,656,577	\$14.81
Prof - Maternity	\$4,577	\$24		\$4,601	1.218	\$5,607	\$0.05
Prof - Other	\$249,834	\$1,315	\$4,996	\$256,145	1.218	\$312,097	\$2.79
Prof - Psych	\$271,257	\$1,428	\$5,741	\$278,426	1.218	\$339,245	\$3.03
Prof - Specialist	\$303,979	\$1,600	\$6,946	\$312,525	1.218	\$380,792	\$3.40
Prof - Vision	\$114,366	\$602	\$2,287	\$117,255	1.218	\$142,867	\$1.28
Radiology	\$115,687	\$494		\$116,181	1.488	\$172,932	\$1.55
Transportation/Ambulance	\$352,580	\$1,506		\$354,085	1.488	\$527,044	\$4.71
Provider Incentive Payment Adjustment							\$1.29
Total	\$9,895,009	\$53,667	(\$115,947)	\$9,832,729		\$12,261,584	\$110.92
Admin Cost Adjustment							\$8.72
State Budget Cap Adjustment							(\$3.02)
Medallion II Capitation Rate							\$116.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Capitation Rate Calculations - Health Plan Encounter Data
 Temporary Assistance to Needy Families (TANF)**

Exhibit 4a

Age 21-44 Male							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$122,112	\$736		\$122,849	1.123	\$138,006	\$8.24
FQHC / RHC	\$9,042	\$55		\$9,096	1.123	\$10,219	\$0.61
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$837,710	\$3,061	(\$54,356)	\$786,415	1.076	\$846,328	\$50.53
IP - Psych	\$85,909	\$293	(\$6,395)	\$79,807	1.652	\$131,818	\$7.87
Lab	\$35,018	\$162		\$35,180	1.466	\$51,581	\$3.08
OP - Emergency Room	\$202,536	\$1,212		\$203,749	1.270	\$258,702	\$15.44
OP - Other	\$939,196	\$5,622		\$944,818	1.270	\$1,199,644	\$71.62
Pharmacy	\$695,402	\$23	(\$23,136)	\$672,288	1.148	\$772,076	\$46.09
Prof - Anesthesia	\$22,549	\$136	\$343	\$23,028	1.123	\$25,869	\$1.54
Prof - Child EPSDT	\$3,979	\$24	\$61	\$4,063	1.123	\$4,564	\$0.27
Prof - Evaluation & Management	\$352,951	\$2,128	\$8,193	\$363,272	1.123	\$408,092	\$24.36
Prof - Maternity	\$0	\$0		\$0	1.123	\$0	\$0.00
Prof - Other	\$120,970	\$729	\$1,840	\$123,540	1.123	\$138,782	\$8.29
Prof - Psych	\$40,550	\$245	\$859	\$41,654	1.123	\$46,793	\$2.79
Prof - Specialist	\$142,726	\$861	\$2,776	\$146,363	1.123	\$164,420	\$9.82
Prof - Vision	\$20,321	\$123	\$309	\$20,752	1.123	\$23,313	\$1.39
Radiology	\$81,960	\$379		\$82,339	1.466	\$120,726	\$7.21
Transportation/Ambulance	\$78,357	\$362		\$78,719	1.466	\$115,419	\$6.89
Provider Incentive Payment Adjustment							\$3.12
Total	\$3,791,288	\$16,149	(\$69,506)	\$3,737,932		\$4,456,351	\$269.17
Admin Cost Adjustment							\$21.15
State Budget Cap Adjustment							(\$7.33)
Medallion II Capitation Rate							\$283.00

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 45 and Over							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$151,956	\$916		\$152,872	1.123	\$171,733	\$6.60
FQHC / RHC	\$52,733	\$318		\$53,051	1.123	\$59,596	\$2.29
Home Health	\$36	\$0		\$36	1.270	\$46	\$0.00
IP - Maternity	\$2,050	\$7	(\$133)	\$1,924	1.076	\$2,071	\$0.08
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$2,476,171	\$9,047	(\$160,669)	\$2,324,549	1.076	\$2,501,645	\$96.15
IP - Psych	\$173,817	\$592	(\$12,938)	\$161,471	1.652	\$266,702	\$10.25
Lab	\$101,065	\$467		\$101,532	1.466	\$148,867	\$5.72
OP - Emergency Room	\$315,096	\$1,886		\$316,982	1.270	\$402,475	\$15.47
OP - Other	\$2,874,489	\$17,205		\$2,891,695	1.270	\$3,671,614	\$141.12
Pharmacy	\$2,813,201	\$94	(\$93,596)	\$2,719,699	1.148	\$3,123,383	\$120.05
Prof - Anesthesia	\$55,954	\$337	\$851	\$57,143	1.123	\$64,193	\$2.47
Prof - Child EPSDT	\$6,936	\$42	\$106	\$7,084	1.123	\$7,958	\$0.31
Prof - Evaluation & Management	\$908,080	\$5,476	\$21,078	\$934,634	1.123	\$1,049,947	\$40.35
Prof - Maternity	\$1,106	\$7		\$1,113	1.123	\$1,250	\$0.05
Prof - Other	\$462,615	\$2,790	\$7,037	\$472,442	1.123	\$530,730	\$20.40
Prof - Psych	\$92,239	\$556	\$1,955	\$94,750	1.123	\$106,440	\$4.09
Prof - Specialist	\$439,737	\$2,652	\$8,553	\$450,942	1.123	\$506,578	\$19.47
Prof - Vision	\$49,111	\$296	\$747	\$50,155	1.123	\$56,343	\$2.17
Radiology	\$249,650	\$1,153		\$250,803	1.466	\$367,730	\$14.13
Transportation/Ambulance	\$151,398	\$699		\$152,097	1.466	\$223,006	\$8.57
Provider Incentive Payment Adjustment							\$5.98
Total	\$11,377,440	\$44,541	(\$227,009)	\$11,194,972		\$13,262,306	\$515.72
Admin Cost Adjustment							\$40.53
State Budget Cap Adjustment							(\$14.04)
Medallion II Capitation Rate							\$542.21

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

All Age Categories							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$3,289,129	\$17,963	(\$63,101)	\$3,243,990	1.194	\$3,871,945	\$2.00
FQHC / RHC	\$1,239,311	\$7,034	\$15,992	\$1,262,338	1.168	\$1,474,430	\$0.76
Home Health	\$718	\$4		\$723	1.265	\$914	\$0.00
IP - Maternity	\$23,552,062	\$153,223	(\$1,532,541)	\$22,172,744	1.073	\$23,780,612	\$12.28
IP - Newborn	\$24,224,541	\$363,131	(\$1,589,587)	\$22,998,084	1.062	\$24,417,541	\$12.60
IP - Other	\$31,870,075	\$335,894	(\$2,082,108)	\$30,123,860	1.067	\$32,153,025	\$16.60
IP - Psych	\$4,800,333	\$12,662	(\$357,040)	\$4,455,954	1.380	\$6,149,798	\$3.17
Lab	\$4,372,926	\$19,225		\$4,392,150	1.480	\$6,502,190	\$3.36
OP - Emergency Room	\$15,613,497	\$95,058		\$15,708,554	1.267	\$19,896,360	\$10.27
OP - Other	\$57,516,239	\$349,289		\$57,865,527	1.267	\$73,318,989	\$37.85
Pharmacy	\$50,420,007	\$926	(\$1,677,464)	\$48,743,469	1.244	\$60,632,909	\$31.30
Prof - Anesthesia	\$3,361,835	\$19,179	\$57,978	\$3,438,992	1.164	\$4,002,592	\$2.07
Prof - Child EPSDT	\$2,870,650	\$15,225	\$56,709	\$2,942,584	1.214	\$3,571,272	\$1.84
Prof - Evaluation & Management	\$48,009,981	\$260,284	\$1,936,660	\$50,206,925	1.199	\$60,213,553	\$31.08
Prof - Maternity	\$12,031,749	\$70,181		\$12,101,930	1.148	\$13,891,562	\$7.17
Prof - Other	\$9,355,883	\$51,569	\$172,638	\$9,580,090	1.188	\$11,379,636	\$5.87
Prof - Psych	\$4,127,662	\$22,394	\$87,388	\$4,237,444	1.199	\$5,078,603	\$2.62
Prof - Specialist	\$8,081,834	\$45,323	\$172,357	\$8,299,514	1.176	\$9,759,384	\$5.04
Prof - Vision	\$2,149,731	\$11,614	\$41,140	\$2,202,485	1.201	\$2,646,120	\$1.37
Radiology	\$4,606,016	\$20,685		\$4,626,701	1.474	\$6,821,436	\$3.52
Transportation/Ambulance	\$7,285,764	\$31,788		\$7,317,552	1.483	\$10,848,580	\$5.60
Provider Incentive Payment Adjustment							\$2.31
Total	\$318,779,940	\$1,902,648	(\$4,760,979)	\$315,921,609		\$380,411,451	\$198.67
Admin Cost Adjustment							\$15.61
State Budget Cap Adjustment							(\$5.41)
Medallion II Capitation Rate							\$208.87

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age Under 1							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$431,107	\$2,270	(\$10,701)	\$422,675	1.218	\$515,004	\$5.42
FQHC / RHC	\$386,369	\$2,034	\$10,769	\$399,173	1.218	\$486,367	\$5.12
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$19,388,805	\$290,642	(\$1,272,272)	\$18,407,176	1.062	\$19,543,278	\$205.80
IP - Other	\$3,292,800	\$49,360	(\$201,911)	\$3,140,248	1.062	\$3,334,067	\$35.11
IP - Psych	\$76,037	\$173	(\$5,653)	\$70,557	1.253	\$88,412	\$0.93
Lab	\$256,564	\$1,096		\$257,659	1.488	\$383,517	\$4.04
OP - Emergency Room	\$744,400	\$4,577		\$748,977	1.265	\$947,276	\$9.98
OP - Other	\$2,142,595	\$13,174		\$2,155,769	1.265	\$2,726,529	\$28.71
Pharmacy	\$1,823,813	\$19	(\$60,677)	\$1,763,155	1.294	\$2,282,030	\$24.03
Prof - Anesthesia	\$125,350	\$660	\$2,507	\$128,516	1.218	\$156,589	\$1.65
Prof - Child EPSDT	\$796,162	\$4,192	\$15,921	\$816,275	1.218	\$994,580	\$10.47
Prof - Evaluation & Management	\$8,174,840	\$43,040	\$358,548	\$8,576,428	1.218	\$10,449,846	\$110.04
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$1,103,210	\$5,808	\$22,060	\$1,131,079	1.218	\$1,378,149	\$14.51
Prof - Psych	\$75,071	\$395	\$1,589	\$77,056	1.218	\$93,888	\$0.99
Prof - Specialist	\$785,927	\$4,138	\$17,958	\$808,023	1.218	\$984,526	\$10.37
Prof - Vision	\$113,590	\$598	\$2,271	\$116,460	1.218	\$141,899	\$1.49
Radiology	\$383,250	\$1,637		\$384,887	1.488	\$572,891	\$6.03
Transportation/Ambulance	\$465,616	\$1,988		\$467,604	1.488	\$696,013	\$7.33
Provider Incentive Payment Adjustment							\$5.66
Total	\$40,565,507	\$425,801	(\$1,119,592)	\$39,871,716		\$45,774,861	\$487.69
Admin Cost Adjustment							\$38.32
State Budget Cap Adjustment							(\$13.28)
Medallion II Capitation Rate							\$512.73

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 1-5							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$278,879	\$1,468	(\$6,923)	\$273,425	1.218	\$333,151	\$1.02
FQHC / RHC	\$498,860	\$2,626	\$13,905	\$515,391	1.218	\$627,972	\$1.93
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$3,322,029	\$49,798	(\$203,703)	\$3,168,124	1.062	\$3,363,662	\$10.33
IP - Psych	\$285,263	\$650	(\$21,210)	\$264,703	1.253	\$331,692	\$1.02
Lab	\$764,318	\$3,264		\$767,582	1.488	\$1,142,519	\$3.51
OP - Emergency Room	\$1,723,511	\$10,597		\$1,734,109	1.265	\$2,193,230	\$6.74
OP - Other	\$5,362,348	\$32,971		\$5,395,319	1.265	\$6,823,779	\$20.96
Pharmacy	\$4,736,237	\$50	(\$157,572)	\$4,578,714	1.294	\$5,926,175	\$18.20
Prof - Anesthesia	\$291,687	\$1,536	\$5,833	\$299,055	1.218	\$364,380	\$1.12
Prof - Child EPSDT	\$563,448	\$2,967	\$11,267	\$577,682	1.218	\$703,870	\$2.16
Prof - Evaluation & Management	\$7,593,135	\$39,977	\$335,684	\$7,968,797	1.218	\$9,709,485	\$29.82
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$1,367,190	\$7,198	\$27,339	\$1,401,728	1.218	\$1,707,918	\$5.25
Prof - Psych	\$373,175	\$1,965	\$7,898	\$383,038	1.218	\$466,708	\$1.43
Prof - Specialist	\$878,025	\$4,623	\$20,062	\$902,710	1.218	\$1,099,896	\$3.38
Prof - Vision	\$366,931	\$1,932	\$7,337	\$376,200	1.218	\$458,376	\$1.41
Radiology	\$275,237	\$1,175		\$276,412	1.488	\$411,430	\$1.26
Transportation/Ambulance	\$1,021,690	\$4,363		\$1,026,053	1.488	\$1,527,245	\$4.69
Provider Incentive Payment Adjustment							\$1.34
Total	\$29,701,963	\$167,160	\$39,918	\$29,909,041		\$37,191,490	\$115.57
Admin Cost Adjustment							\$9.08
State Budget Cap Adjustment							(\$3.15)
Medallion II Capitation Rate							\$121.51

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 6-14							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$274,863	\$1,447	(\$7,666)	\$268,644	1.218	\$327,326	\$0.81
FQHC / RHC	\$354,531	\$1,867	\$9,882	\$366,280	1.218	\$446,289	\$1.10
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$29,740	\$446	(\$1,952)	\$28,234	1.062	\$29,977	\$0.07
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$2,855,507	\$42,805	(\$175,097)	\$2,723,215	1.062	\$2,891,293	\$7.12
IP - Psych	\$813,044	\$1,852	(\$60,451)	\$754,445	1.253	\$945,372	\$2.33
Lab	\$812,061	\$3,468		\$815,529	1.488	\$1,213,887	\$2.99
OP - Emergency Room	\$1,458,520	\$8,968		\$1,467,488	1.265	\$1,856,019	\$4.57
OP - Other	\$5,044,384	\$31,016		\$5,075,400	1.265	\$6,419,158	\$15.82
Pharmacy	\$10,281,762	\$108	(\$342,070)	\$9,939,800	1.294	\$12,864,965	\$31.70
Prof - Anesthesia	\$193,466	\$1,019	\$3,869	\$198,353	1.218	\$241,681	\$0.60
Prof - Child EPSDT	\$85,297	\$449	\$1,706	\$87,452	1.218	\$106,555	\$0.26
Prof - Evaluation & Management	\$5,716,963	\$30,099	\$263,513	\$6,010,575	1.218	\$7,323,513	\$18.05
Prof - Maternity	\$16,876	\$89		\$16,965	1.218	\$20,671	\$0.05
Prof - Other	\$1,008,769	\$5,311	\$20,172	\$1,034,252	1.218	\$1,260,172	\$3.11
Prof - Psych	\$1,094,365	\$5,762	\$23,163	\$1,123,290	1.218	\$1,368,659	\$3.37
Prof - Specialist	\$868,423	\$4,572	\$19,843	\$892,838	1.218	\$1,087,868	\$2.68
Prof - Vision	\$456,948	\$2,406	\$9,137	\$468,491	1.218	\$570,827	\$1.41
Radiology	\$284,040	\$1,213		\$285,253	1.488	\$424,590	\$1.05
Transportation/Ambulance	\$1,229,372	\$5,250		\$1,234,622	1.488	\$1,837,693	\$4.53
Provider Incentive Payment Adjustment							\$1.19
Total	\$32,878,930	\$148,145	(\$235,951)	\$32,791,125		\$41,236,515	\$102.81
Admin Cost Adjustment							\$8.08
State Budget Cap Adjustment							(\$2.80)
Medallion II Capitation Rate							\$108.09

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Female							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$73,587	\$387	(\$2,052)	\$71,922	1.218	\$87,633	\$0.92
FQHC / RHC	\$426,458	\$2,245	\$11,887	\$440,590	1.218	\$536,832	\$5.65
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$4,489,683	\$67,301	(\$294,608)	\$4,262,376	1.062	\$4,525,453	\$47.64
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$972,472	\$14,578	(\$59,631)	\$927,418	1.062	\$984,659	\$10.37
IP - Psych	\$231,069	\$526	(\$17,180)	\$214,415	1.253	\$268,677	\$2.83
Lab	\$491,525	\$2,099		\$493,624	1.488	\$734,743	\$7.73
OP - Emergency Room	\$757,845	\$4,660		\$762,505	1.265	\$964,385	\$10.15
OP - Other	\$2,906,503	\$17,871		\$2,924,374	1.265	\$3,698,629	\$38.94
Pharmacy	\$2,669,154	\$28	(\$88,802)	\$2,580,380	1.294	\$3,339,756	\$35.16
Prof - Anesthesia	\$319,861	\$1,684	\$6,396	\$327,941	1.218	\$399,576	\$4.21
Prof - Child EPSDT	\$99,839	\$526	\$1,996	\$102,361	1.218	\$124,721	\$1.31
Prof - Evaluation & Management	\$2,212,564	\$11,649	\$101,984	\$2,326,197	1.218	\$2,834,326	\$29.84
Prof - Maternity	\$2,572,590	\$13,545		\$2,586,135	1.218	\$3,151,045	\$33.17
Prof - Other	\$383,541	\$2,019	\$7,670	\$393,230	1.218	\$479,126	\$5.04
Prof - Psych	\$242,940	\$1,279	\$5,142	\$249,361	1.218	\$303,831	\$3.20
Prof - Specialist	\$369,658	\$1,946	\$8,446	\$380,051	1.218	\$463,068	\$4.87
Prof - Vision	\$109,102	\$574	\$2,182	\$111,858	1.218	\$136,292	\$1.43
Radiology	\$510,899	\$2,182		\$513,080	1.488	\$763,703	\$8.04
Transportation/Ambulance	\$388,508	\$1,659		\$390,167	1.488	\$580,751	\$6.11
Provider Incentive Payment Adjustment							\$3.01
Total	\$20,227,799	\$146,759	(\$316,570)	\$20,057,987		\$24,377,206	\$259.64
Admin Cost Adjustment							\$20.40
State Budget Cap Adjustment							(\$7.07)
Medallion II Capitation Rate							\$272.97

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Female							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$444,872	\$2,683		\$447,555	1.123	\$502,773	\$3.48
FQHC / RHC	\$999,376	\$6,027		\$1,005,403	1.123	\$1,129,447	\$7.82
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$12,322,409	\$45,023	(\$799,552)	\$11,567,880	1.076	\$12,449,180	\$86.16
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$6,176,467	\$22,567	(\$374,504)	\$5,824,530	1.076	\$6,268,273	\$43.38
IP - Psych	\$527,542	\$1,798	(\$39,268)	\$490,072	1.652	\$809,452	\$5.60
Lab	\$1,113,952	\$5,145		\$1,119,096	1.466	\$1,640,829	\$11.36
OP - Emergency Room	\$2,146,972	\$12,851		\$2,159,823	1.270	\$2,742,349	\$18.98
OP - Other	\$10,762,962	\$64,422		\$10,827,384	1.270	\$13,747,639	\$95.15
Pharmacy	\$8,579,159	\$285	(\$285,431)	\$8,294,013	1.148	\$9,525,091	\$65.92
Prof - Anesthesia	\$940,552	\$5,672	\$14,307	\$960,530	1.123	\$1,079,038	\$7.47
Prof - Child EPSDT	\$154,226	\$930	\$2,346	\$157,502	1.123	\$176,934	\$1.22
Prof - Evaluation & Management	\$4,816,968	\$29,048	\$111,809	\$4,957,825	1.123	\$5,569,510	\$38.55
Prof - Maternity	\$6,441,035	\$38,842		\$6,479,877	1.123	\$7,279,349	\$50.38
Prof - Other	\$1,205,935	\$7,272	\$18,344	\$1,231,552	1.123	\$1,383,498	\$9.58
Prof - Psych	\$391,561	\$2,361	\$8,299	\$402,221	1.123	\$451,846	\$3.13
Prof - Specialist	\$1,994,468	\$12,027	\$38,794	\$2,045,290	1.123	\$2,297,633	\$15.90
Prof - Vision	\$175,345	\$1,057	\$2,667	\$179,069	1.123	\$201,162	\$1.39
Radiology	\$1,638,995	\$7,569		\$1,646,565	1.466	\$2,414,207	\$16.71
Transportation/Ambulance	\$845,477	\$3,905		\$849,381	1.466	\$1,245,370	\$8.62
Provider Incentive Payment Adjustment							\$5.76
Total	\$61,678,273	\$269,485	(\$1,302,188)	\$60,645,569		\$70,913,578	\$496.57
Admin Cost Adjustment							\$39.02
State Budget Cap Adjustment							(\$13.52)
Medallion II Capitation Rate							\$522.07

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Male							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$80,051	\$421	(\$2,233)	\$78,239	1.218	\$95,330	\$1.34
FQHC / RHC	\$69,096	\$364	\$1,926	\$71,386	1.218	\$86,979	\$1.23
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$1,851	\$28	(\$121)	\$1,757	1.062	\$1,866	\$0.03
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,056,743	\$15,841	(\$64,798)	\$1,007,786	1.062	\$1,069,987	\$15.09
IP - Psych	\$160,387	\$365	(\$11,925)	\$148,827	1.253	\$186,491	\$2.63
Lab	\$118,295	\$505		\$118,800	1.488	\$176,829	\$2.49
OP - Emergency Room	\$349,184	\$2,147		\$351,331	1.265	\$444,349	\$6.27
OP - Other	\$1,286,415	\$7,910		\$1,294,325	1.265	\$1,637,010	\$23.08
Pharmacy	\$1,666,119	\$18	(\$55,431)	\$1,610,705	1.294	\$2,084,717	\$29.40
Prof - Anesthesia	\$32,774	\$173	\$655	\$33,602	1.218	\$40,942	\$0.58
Prof - Child EPSDT	\$8,011	\$42	\$160	\$8,213	1.218	\$10,007	\$0.14
Prof - Evaluation & Management	\$890,815	\$4,690	\$39,837	\$935,343	1.218	\$1,139,657	\$16.07
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$162,669	\$856	\$3,253	\$166,779	1.218	\$203,210	\$2.87
Prof - Psych	\$160,735	\$846	\$3,402	\$164,983	1.218	\$201,022	\$2.83
Prof - Specialist	\$244,871	\$1,289	\$5,595	\$251,755	1.218	\$306,748	\$4.33
Prof - Vision	\$80,932	\$426	\$1,618	\$82,976	1.218	\$101,101	\$1.43
Radiology	\$95,185	\$406		\$95,591	1.488	\$142,284	\$2.01
Transportation/Ambulance	\$249,596	\$1,066		\$250,662	1.488	\$373,102	\$5.26
Provider Incentive Payment Adjustment							\$1.37
Total	\$6,713,729	\$37,394	(\$78,061)	\$6,673,062		\$8,301,632	\$118.44
Admin Cost Adjustment							\$9.31
State Budget Cap Adjustment							(\$3.22)
Medallion II Capitation Rate							\$124.52

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Male							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$118,679	\$716		\$119,394	1.123	\$134,125	\$9.72
FQHC / RHC	\$32,651	\$197		\$32,848	1.123	\$36,901	\$2.67
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$1,178,928	\$4,307	(\$71,483)	\$1,111,752	1.076	\$1,196,451	\$86.72
IP - Psych	\$109,581	\$373	(\$8,157)	\$101,797	1.652	\$168,139	\$12.19
Lab	\$55,983	\$259		\$56,241	1.466	\$82,462	\$5.98
OP - Emergency Room	\$184,667	\$1,105		\$185,773	1.270	\$235,877	\$17.10
OP - Other	\$958,290	\$5,736		\$964,026	1.270	\$1,224,033	\$88.72
Pharmacy	\$1,077,411	\$36	(\$35,846)	\$1,041,601	1.148	\$1,196,205	\$86.70
Prof - Anesthesia	\$29,503	\$178	\$449	\$30,129	1.123	\$33,847	\$2.45
Prof - Child EPSDT	\$2,468	\$15	\$38	\$2,521	1.123	\$2,832	\$0.21
Prof - Evaluation & Management	\$371,249	\$2,239	\$8,617	\$382,105	1.123	\$429,248	\$31.11
Prof - Maternity	\$0	\$0		\$0	1.123	\$0	\$0.00
Prof - Other	\$91,181	\$550	\$1,387	\$93,118	1.123	\$104,606	\$7.58
Prof - Psych	\$33,473	\$202	\$709	\$34,384	1.123	\$38,627	\$2.80
Prof - Specialist	\$196,040	\$1,182	\$3,813	\$201,035	1.123	\$225,839	\$16.37
Prof - Vision	\$18,770	\$113	\$286	\$19,169	1.123	\$21,534	\$1.56
Radiology	\$77,233	\$357		\$77,590	1.466	\$113,763	\$8.25
Transportation/Ambulance	\$72,334	\$334		\$72,668	1.466	\$106,547	\$7.72
Provider Incentive Payment Adjustment							\$4.55
Total	\$4,608,441	\$17,899	(\$100,187)	\$4,526,153		\$5,351,035	\$392.39
Admin Cost Adjustment							\$30.83
State Budget Cap Adjustment							(\$10.68)
Medallion II Capitation Rate							\$412.55

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 45 and Over							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$134,729	\$812		\$135,541	1.123	\$152,264	\$11.09
FQHC / RHC	\$48,297	\$291		\$48,589	1.123	\$54,583	\$3.98
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$9,661	\$35	(\$627)	\$9,069	1.076	\$9,760	\$0.71
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$1,524,338	\$5,570	(\$92,427)	\$1,437,481	1.076	\$1,546,996	\$112.69
IP - Psych	\$84,838	\$289	(\$6,315)	\$78,812	1.652	\$130,174	\$9.48
Lab	\$96,270	\$445		\$96,715	1.466	\$141,804	\$10.33
OP - Emergency Room	\$154,075	\$922		\$154,998	1.270	\$196,802	\$14.34
OP - Other	\$1,507,321	\$9,022		\$1,516,343	1.270	\$1,925,316	\$140.25
Pharmacy	\$2,005,898	\$67	(\$66,737)	\$1,939,228	1.148	\$2,227,067	\$162.23
Prof - Anesthesia	\$42,304	\$255	\$643	\$43,202	1.123	\$48,533	\$3.54
Prof - Child EPSDT	\$5,559	\$34	\$85	\$5,677	1.123	\$6,377	\$0.46
Prof - Evaluation & Management	\$536,728	\$3,237	\$12,458	\$552,423	1.123	\$620,580	\$45.21
Prof - Maternity	\$6,141	\$37		\$6,178	1.123	\$6,941	\$0.51
Prof - Other	\$203,884	\$1,230	\$3,101	\$208,215	1.123	\$233,904	\$17.04
Prof - Psych	\$60,836	\$367	\$1,289	\$62,493	1.123	\$70,203	\$5.11
Prof - Specialist	\$316,488	\$1,909	\$6,156	\$324,552	1.123	\$364,595	\$26.56
Prof - Vision	\$27,038	\$163	\$411	\$27,613	1.123	\$31,020	\$2.26
Radiology	\$160,039	\$739		\$160,778	1.466	\$235,734	\$17.17
Transportation/Ambulance	\$118,610	\$548		\$119,158	1.466	\$174,711	\$12.73
Provider Incentive Payment Adjustment							\$6.99
Total	\$7,043,055	\$25,971	(\$141,961)	\$6,927,065		\$8,177,362	\$602.66
Admin Cost Adjustment							\$47.36
State Budget Cap Adjustment							(\$16.41)
Medallion II Capitation Rate							\$633.61

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

All Age Categories							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,836,766	\$10,205	(\$29,576)	\$1,817,396	1.182	\$2,147,605	\$1.84
FQHC / RHC	\$2,815,640	\$15,651	\$48,368	\$2,879,659	1.183	\$3,405,371	\$2.92
Home Health	\$0	\$0		\$0	1.000	\$0	\$0.00
IP - Maternity	\$16,853,344	\$112,833	(\$1,096,859)	\$15,869,317	1.072	\$17,016,236	\$14.62
IP - Newborn	\$19,388,805	\$290,642	(\$1,272,272)	\$18,407,176	1.062	\$19,543,278	\$16.79
IP - Other	\$20,379,285	\$204,825	(\$1,243,554)	\$19,340,555	1.068	\$20,655,388	\$17.74
IP - Psych	\$2,287,761	\$6,027	(\$170,159)	\$2,123,629	1.379	\$2,928,410	\$2.52
Lab	\$3,708,967	\$16,279		\$3,725,246	1.481	\$5,516,590	\$4.74
OP - Emergency Room	\$7,519,176	\$45,827		\$7,565,003	1.266	\$9,580,287	\$8.23
OP - Other	\$29,970,817	\$182,121		\$30,152,938	1.267	\$38,202,091	\$32.81
Pharmacy	\$32,839,552	\$611	(\$1,092,566)	\$31,747,597	1.242	\$39,446,005	\$33.88
Prof - Anesthesia	\$1,975,496	\$11,176	\$34,659	\$2,021,330	1.170	\$2,364,586	\$2.03
Prof - Child EPSDT	\$1,715,011	\$9,154	\$33,518	\$1,757,683	1.209	\$2,125,876	\$1.83
Prof - Evaluation & Management	\$30,313,263	\$163,980	\$1,232,450	\$31,709,693	1.201	\$38,076,166	\$32.70
Prof - Maternity	\$9,036,643	\$52,512		\$9,089,155	1.151	\$10,458,005	\$8.98
Prof - Other	\$5,526,379	\$30,245	\$103,326	\$5,659,951	1.193	\$6,750,582	\$5.80
Prof - Psych	\$2,432,157	\$13,177	\$51,491	\$2,496,826	1.199	\$2,994,783	\$2.57
Prof - Specialist	\$5,653,899	\$31,686	\$120,669	\$5,806,254	1.176	\$6,830,172	\$5.87
Prof - Vision	\$1,348,655	\$7,270	\$25,910	\$1,381,835	1.203	\$1,662,211	\$1.43
Radiology	\$3,424,877	\$15,278		\$3,440,156	1.476	\$5,078,601	\$4.36
Transportation/Ambulance	\$4,391,204	\$19,113		\$4,410,316	1.483	\$6,541,432	\$5.62
Provider Incentive Payment Adjustment							\$2.43
Total	\$203,417,697	\$1,238,612	(\$3,254,594)	\$201,401,716		\$241,323,678	\$209.71
Admin Cost Adjustment							\$16.48
State Budget Cap Adjustment							(\$5.71)
Medallion II Capitation Rate							\$220.48

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age Under 1							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$641,285	\$3,376	(\$15,919)	\$628,742	1.218	\$766,083	\$4.66
FQHC / RHC	\$343,010	\$1,806	\$9,561	\$354,376	1.218	\$431,785	\$2.63
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$33,887,438	\$507,980	(\$2,223,656)	\$32,171,762	1.062	\$34,157,423	\$207.69
IP - Other	\$4,774,705	\$71,574	(\$313,311)	\$4,532,968	1.062	\$4,812,745	\$29.26
IP - Psych	\$168,779	\$384	(\$12,549)	\$156,614	1.253	\$196,248	\$1.19
Lab	\$276,133	\$1,179		\$277,312	1.488	\$412,770	\$2.51
OP - Emergency Room	\$1,817,807	\$11,177		\$1,828,984	1.265	\$2,313,225	\$14.07
OP - Other	\$4,465,197	\$27,455		\$4,492,652	1.265	\$5,682,122	\$34.55
Pharmacy	\$3,055,891	\$32	(\$101,668)	\$2,954,255	1.294	\$3,823,657	\$23.25
Prof - Anesthesia	\$286,099	\$1,506	\$5,721	\$293,326	1.218	\$357,400	\$2.17
Prof - Child EPSDT	\$1,633,544	\$8,601	\$32,665	\$1,674,810	1.218	\$2,040,652	\$12.41
Prof - Evaluation & Management	\$15,578,612	\$82,020	\$683,276	\$16,343,909	1.218	\$19,914,041	\$121.08
Prof - Maternity	\$996	\$5		\$1,002	1.218	\$1,220	\$0.01
Prof - Other	\$1,837,175	\$9,673	\$36,737	\$1,883,584	1.218	\$2,295,031	\$13.95
Prof - Psych	\$170,198	\$896	\$3,602	\$174,696	1.218	\$212,857	\$1.29
Prof - Specialist	\$1,509,258	\$7,946	\$34,486	\$1,551,690	1.218	\$1,890,639	\$11.50
Prof - Vision	\$184,937	\$974	\$3,698	\$189,609	1.218	\$231,027	\$1.40
Radiology	\$277,113	\$1,183		\$278,296	1.488	\$414,235	\$2.52
Transportation/Ambulance	\$552,207	\$2,358		\$554,565	1.488	\$825,451	\$5.02
Provider Incentive Payment Adjustment							\$5.77
Total	\$71,460,383	\$740,126	(\$1,857,355)	\$70,343,153		\$80,778,611	\$496.92
Admin Cost Adjustment							\$39.05
State Budget Cap Adjustment							(\$13.53)
Medallion II Capitation Rate							\$522.44

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)**

Exhibit 4a

Age 1-5							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$619,126	\$3,260	(\$15,369)	\$607,017	1.218	\$739,613	\$1.18
FQHC / RHC	\$449,963	\$2,369	\$12,542	\$464,873	1.218	\$566,419	\$0.91
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$7,420	\$111	(\$487)	\$7,045	1.062	\$7,479	\$0.01
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$4,395,834	\$65,894	(\$288,450)	\$4,173,279	1.062	\$4,430,856	\$7.09
IP - Psych	\$710,661	\$1,619	(\$52,839)	\$659,441	1.253	\$826,326	\$1.32
Lab	\$1,085,227	\$4,634		\$1,089,862	1.488	\$1,622,222	\$2.59
OP - Emergency Room	\$4,486,925	\$27,588		\$4,514,514	1.265	\$5,709,773	\$9.13
OP - Other	\$10,876,394	\$66,875		\$10,943,269	1.265	\$13,840,600	\$22.13
Pharmacy	\$8,308,496	\$87	(\$276,420)	\$8,032,164	1.294	\$10,395,933	\$16.62
Prof - Anesthesia	\$527,120	\$2,775	\$10,541	\$540,436	1.218	\$658,488	\$1.05
Prof - Child EPSDT	\$1,268,448	\$6,678	\$25,365	\$1,300,491	1.218	\$1,584,568	\$2.53
Prof - Evaluation & Management	\$14,259,069	\$75,073	\$630,378	\$14,964,520	1.218	\$18,233,341	\$29.16
Prof - Maternity	\$3,787	\$20		\$3,807	1.218	\$4,638	\$0.01
Prof - Other	\$3,860,447	\$20,325	\$77,196	\$3,957,968	1.218	\$4,822,539	\$7.71
Prof - Psych	\$873,767	\$4,600	\$18,494	\$896,861	1.218	\$1,092,770	\$1.75
Prof - Specialist	\$1,611,330	\$8,484	\$36,818	\$1,656,631	1.218	\$2,018,503	\$3.23
Prof - Vision	\$632,075	\$3,328	\$12,639	\$648,042	1.218	\$789,599	\$1.26
Radiology	\$281,780	\$1,203		\$282,983	1.488	\$421,210	\$0.67
Transportation/Ambulance	\$1,890,716	\$8,074		\$1,898,790	1.488	\$2,826,285	\$4.52
Provider Incentive Payment Adjustment							\$1.33
Total	\$56,148,587	\$302,999	\$190,408	\$56,641,993		\$70,591,164	\$114.21
Admin Cost Adjustment							\$8.97
State Budget Cap Adjustment							(\$3.11)
Medallion II Capitation Rate							\$120.07

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 6-14							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$622,120	\$3,275	(\$17,352)	\$608,043	1.218	\$740,863	\$0.89
FQHC / RHC	\$348,699	\$1,836	\$9,719	\$360,254	1.218	\$438,947	\$0.53
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$136,876	\$2,052	(\$8,982)	\$129,946	1.062	\$137,966	\$0.17
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$4,117,380	\$61,720	(\$270,178)	\$3,908,923	1.062	\$4,150,184	\$4.97
IP - Psych	\$1,671,809	\$3,808	(\$124,302)	\$1,551,315	1.253	\$1,943,908	\$2.33
Lab	\$1,168,481	\$4,990		\$1,173,471	1.488	\$1,746,671	\$2.09
OP - Emergency Room	\$3,627,512	\$22,304		\$3,649,816	1.265	\$4,616,139	\$5.52
OP - Other	\$10,113,454	\$62,184		\$10,175,638	1.265	\$12,869,731	\$15.40
Pharmacy	\$19,094,466	\$201	(\$635,264)	\$18,459,402	1.294	\$23,891,784	\$28.59
Prof - Anesthesia	\$369,739	\$1,947	\$7,394	\$379,079	1.218	\$461,884	\$0.55
Prof - Child EPSDT	\$320,007	\$1,685	\$6,399	\$328,091	1.218	\$399,759	\$0.48
Prof - Evaluation & Management	\$11,165,937	\$58,788	\$514,673	\$11,739,398	1.218	\$14,303,729	\$17.12
Prof - Maternity	\$71,359	\$376		\$71,735	1.218	\$87,405	\$0.10
Prof - Other	\$3,606,529	\$18,988	\$72,118	\$3,697,636	1.218	\$4,505,340	\$5.39
Prof - Psych	\$2,327,883	\$12,256	\$49,271	\$2,389,410	1.218	\$2,911,348	\$3.48
Prof - Specialist	\$1,605,271	\$8,452	\$36,680	\$1,650,403	1.218	\$2,010,913	\$2.41
Prof - Vision	\$876,466	\$4,615	\$17,526	\$898,607	1.218	\$1,094,896	\$1.31
Radiology	\$442,761	\$1,891		\$444,652	1.488	\$661,849	\$0.79
Transportation/Ambulance	\$2,500,710	\$10,679		\$2,511,389	1.488	\$3,738,117	\$4.47
Provider Incentive Payment Adjustment							\$1.13
Total	\$64,187,458	\$282,045	(\$342,297)	\$64,127,206		\$80,711,434	\$97.72
Admin Cost Adjustment							\$7.68
State Budget Cap Adjustment							(\$2.66)
Medallion II Capitation Rate							\$102.74

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Female							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$120,675	\$635	(\$3,366)	\$117,945	1.218	\$143,708	\$0.77
FQHC / RHC	\$339,350	\$1,787	\$9,459	\$350,595	1.218	\$427,178	\$2.29
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$7,885,707	\$118,208	(\$517,451)	\$7,486,464	1.062	\$7,948,534	\$42.61
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$936,612	\$14,040	(\$61,459)	\$889,192	1.062	\$944,074	\$5.06
IP - Psych	\$429,958	\$979	(\$31,968)	\$398,970	1.253	\$499,937	\$2.68
Lab	\$491,489	\$2,099		\$493,588	1.488	\$734,689	\$3.94
OP - Emergency Room	\$2,291,034	\$14,087		\$2,305,120	1.265	\$2,915,422	\$15.63
OP - Other	\$5,243,794	\$32,242		\$5,276,036	1.265	\$6,672,916	\$35.77
Pharmacy	\$3,959,263	\$42	(\$131,723)	\$3,827,582	1.294	\$4,953,994	\$26.56
Prof - Anesthesia	\$827,320	\$4,356	\$16,544	\$848,219	1.218	\$1,033,502	\$5.54
Prof - Child EPSDT	\$211,135	\$1,112	\$4,222	\$216,469	1.218	\$263,754	\$1.41
Prof - Evaluation & Management	\$3,551,009	\$18,696	\$163,677	\$3,733,382	1.218	\$4,548,895	\$24.39
Prof - Maternity	\$4,008,084	\$21,102		\$4,029,186	1.218	\$4,909,314	\$26.32
Prof - Other	\$725,414	\$3,819	\$14,506	\$743,739	1.218	\$906,200	\$4.86
Prof - Psych	\$422,964	\$2,227	\$8,952	\$434,143	1.218	\$528,977	\$2.84
Prof - Specialist	\$674,391	\$3,551	\$15,409	\$693,351	1.218	\$844,805	\$4.53
Prof - Vision	\$194,789	\$1,026	\$3,895	\$199,709	1.218	\$243,334	\$1.30
Radiology	\$940,110	\$4,015		\$944,125	1.488	\$1,405,298	\$7.53
Transportation/Ambulance	\$647,601	\$2,766		\$650,366	1.488	\$968,048	\$5.19
Provider Incentive Payment Adjustment							\$2.57
Total	\$33,900,700	\$246,787	(\$509,303)	\$33,638,183		\$40,892,579	\$221.79
Admin Cost Adjustment							\$17.43
State Budget Cap Adjustment							(\$6.04)
Medallion II Capitation Rate							\$233.18

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Female							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$954,768	\$5,758		\$960,526	1.123	\$1,079,033	\$2.99
FQHC / RHC	\$1,218,584	\$7,349		\$1,225,932	1.123	\$1,377,185	\$3.81
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$23,322,338	\$85,214	(\$1,513,293)	\$21,894,259	1.076	\$23,562,275	\$65.25
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$7,795,974	\$28,484	(\$505,849)	\$7,318,609	1.076	\$7,876,178	\$21.81
IP - Psych	\$1,157,359	\$3,944	(\$86,148)	\$1,075,154	1.652	\$1,775,831	\$4.92
Lab	\$1,210,331	\$5,590		\$1,215,920	1.466	\$1,782,793	\$4.94
OP - Emergency Room	\$8,215,124	\$49,172		\$8,264,296	1.270	\$10,493,260	\$29.06
OP - Other	\$22,793,054	\$136,428		\$22,929,482	1.270	\$29,113,795	\$80.62
Pharmacy	\$16,020,873	\$533	(\$533,019)	\$15,488,387	1.148	\$17,787,324	\$49.26
Prof - Anesthesia	\$2,703,166	\$16,301	\$41,119	\$2,760,586	1.123	\$3,101,181	\$8.59
Prof - Child EPSDT	\$298,620	\$1,801	\$4,542	\$304,963	1.123	\$342,589	\$0.95
Prof - Evaluation & Management	\$10,026,027	\$60,461	\$232,719	\$10,319,208	1.123	\$11,592,366	\$32.10
Prof - Maternity	\$12,532,806	\$75,578		\$12,608,384	1.123	\$14,163,976	\$39.22
Prof - Other	\$3,831,210	\$23,104	\$58,278	\$3,912,592	1.123	\$4,395,318	\$12.17
Prof - Psych	\$969,927	\$5,849	\$20,557	\$996,333	1.123	\$1,119,258	\$3.10
Prof - Specialist	\$4,141,318	\$24,974	\$80,553	\$4,246,844	1.123	\$4,770,809	\$13.21
Prof - Vision	\$407,550	\$2,458	\$6,199	\$416,207	1.123	\$467,557	\$1.29
Radiology	\$3,808,457	\$17,589		\$3,826,046	1.466	\$5,609,782	\$15.54
Transportation/Ambulance	\$1,373,603	\$6,344		\$1,379,946	1.466	\$2,023,289	\$5.60
Provider Incentive Payment Adjustment							\$4.63
Total	\$122,781,089	\$556,929	(\$2,194,343)	\$121,143,675		\$142,433,797	\$399.07
Admin Cost Adjustment							\$31.36
State Budget Cap Adjustment							(\$10.86)
Medallion II Capitation Rate							\$419.56

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 15-20 Male							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$156,810	\$826	(\$4,374)	\$153,262	1.218	\$186,740	\$1.38
FQHC / RHC	\$55,254	\$291	\$1,540	\$57,085	1.218	\$69,555	\$0.51
Home Health	\$0	\$0		\$0	1.265	\$0	\$0.00
IP - Maternity	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.062	\$0	\$0.00
IP - Other	\$1,165,573	\$17,472	(\$76,484)	\$1,106,562	1.062	\$1,174,859	\$8.66
IP - Psych	\$334,170	\$761	(\$24,846)	\$310,085	1.253	\$388,559	\$2.87
Lab	\$170,128	\$727		\$170,854	1.488	\$254,311	\$1.88
OP - Emergency Room	\$826,063	\$5,079		\$831,142	1.265	\$1,051,194	\$7.75
OP - Other	\$2,599,501	\$15,983		\$2,615,484	1.265	\$3,307,958	\$24.39
Pharmacy	\$3,158,104	\$33	(\$105,069)	\$3,053,069	1.294	\$3,951,550	\$29.14
Prof - Anesthesia	\$83,282	\$438	\$1,665	\$85,386	1.218	\$104,038	\$0.77
Prof - Child EPSDT	\$28,546	\$150	\$571	\$29,267	1.218	\$35,660	\$0.26
Prof - Evaluation & Management	\$1,512,219	\$7,962	\$67,627	\$1,587,807	1.218	\$1,934,645	\$14.27
Prof - Maternity	\$0	\$0		\$0	1.218	\$0	\$0.00
Prof - Other	\$1,558,266	\$8,204	\$31,160	\$1,597,630	1.218	\$1,946,614	\$14.35
Prof - Psych	\$343,730	\$1,810	\$7,275	\$352,815	1.218	\$429,883	\$3.17
Prof - Specialist	\$446,176	\$2,349	\$10,195	\$458,720	1.218	\$558,922	\$4.12
Prof - Vision	\$138,780	\$731	\$2,775	\$142,286	1.218	\$173,367	\$1.28
Radiology	\$133,960	\$572		\$134,532	1.488	\$200,246	\$1.48
Transportation/Ambulance	\$422,709	\$1,805		\$424,514	1.488	\$631,875	\$4.66
Provider Incentive Payment Adjustment							\$1.42
Total	\$13,133,271	\$65,193	(\$87,964)	\$13,110,501		\$16,399,976	\$122.35
Admin Cost Adjustment							\$9.61
State Budget Cap Adjustment							(\$3.33)
Medallion II Capitation Rate							\$128.63

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 21-44 Male							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$142,871	\$862		\$143,732	1.123	\$161,465	\$10.43
FQHC / RHC	\$22,947	\$138		\$23,086	1.123	\$25,934	\$1.68
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$3,711	\$14	(\$241)	\$3,484	1.076	\$3,749	\$0.24
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$671,541	\$2,454	(\$43,574)	\$630,421	1.076	\$678,450	\$43.84
IP - Psych	\$53,641	\$183	(\$3,993)	\$49,831	1.652	\$82,306	\$5.32
Lab	\$25,384	\$117		\$25,501	1.466	\$37,390	\$2.42
OP - Emergency Room	\$292,571	\$1,751		\$294,322	1.270	\$373,704	\$24.15
OP - Other	\$953,587	\$5,708		\$959,295	1.270	\$1,218,026	\$78.70
Pharmacy	\$799,633	\$27	(\$26,604)	\$773,055	1.148	\$887,800	\$57.37
Prof - Anesthesia	\$27,148	\$164	\$413	\$27,725	1.123	\$31,146	\$2.01
Prof - Child EPSDT	\$2,718	\$16	\$41	\$2,776	1.123	\$3,119	\$0.20
Prof - Evaluation & Management	\$362,341	\$2,185	\$8,410	\$372,936	1.123	\$418,948	\$27.07
Prof - Maternity	\$743	\$4		\$748	1.123	\$840	\$0.05
Prof - Other	\$275,029	\$1,659	\$4,184	\$280,871	1.123	\$315,524	\$20.39
Prof - Psych	\$32,811	\$198	\$695	\$33,704	1.123	\$37,862	\$2.45
Prof - Specialist	\$218,581	\$1,318	\$4,252	\$224,151	1.123	\$251,806	\$16.27
Prof - Vision	\$21,986	\$133	\$334	\$22,453	1.123	\$25,224	\$1.63
Radiology	\$81,018	\$374		\$81,393	1.466	\$119,339	\$7.71
Transportation/Ambulance	\$54,840	\$253		\$55,093	1.466	\$80,778	\$5.22
Provider Incentive Payment Adjustment							\$3.61
Total	\$4,043,101	\$17,557	(\$56,081)	\$4,004,577		\$4,753,409	\$310.75
Admin Cost Adjustment							\$24.42
State Budget Cap Adjustment							(\$8.46)
Medallion II Capitation Rate							\$326.71

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Temporary Assistance to Needy Families (TANF)

Exhibit 4a

Age 45 and Over							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$365,108	\$2,202		\$367,310	1.123	\$412,627	\$13.91
FQHC / RHC	\$140,271	\$846		\$141,117	1.123	\$158,528	\$5.34
Home Health	\$0	\$0		\$0	1.270	\$0	\$0.00
IP - Maternity	\$11,604	\$42	(\$753)	\$10,893	1.076	\$11,723	\$0.40
IP - Newborn	\$0	\$0		\$0	1.076	\$0	\$0.00
IP - Other	\$2,249,561	\$8,219	(\$145,965)	\$2,111,815	1.076	\$2,272,704	\$76.60
IP - Psych	\$117,214	\$399	(\$8,725)	\$108,888	1.652	\$179,851	\$6.06
Lab	\$94,065	\$434		\$94,499	1.466	\$138,556	\$4.67
OP - Emergency Room	\$625,740	\$3,745		\$629,486	1.270	\$799,264	\$26.94
OP - Other	\$3,586,653	\$21,468		\$3,608,121	1.270	\$4,581,267	\$154.41
Pharmacy	\$3,860,475	\$128	(\$128,439)	\$3,732,164	1.148	\$4,286,128	\$144.46
Prof - Anesthesia	\$101,342	\$611	\$1,542	\$103,495	1.123	\$116,264	\$3.92
Prof - Child EPSDT	\$12,212	\$74	\$186	\$12,472	1.123	\$14,010	\$0.47
Prof - Evaluation & Management	\$1,245,134	\$7,509	\$28,901	\$1,281,544	1.123	\$1,439,658	\$48.52
Prof - Maternity	\$909	\$5		\$915	1.123	\$1,028	\$0.03
Prof - Other	\$751,536	\$4,532	\$11,432	\$767,499	1.123	\$862,192	\$29.06
Prof - Psych	\$115,730	\$698	\$2,453	\$118,880	1.123	\$133,548	\$4.50
Prof - Specialist	\$703,591	\$4,243	\$13,686	\$721,519	1.123	\$810,538	\$27.32
Prof - Vision	\$60,039	\$362	\$913	\$61,315	1.123	\$68,880	\$2.32
Radiology	\$329,289	\$1,521		\$330,810	1.466	\$485,036	\$16.35
Transportation/Ambulance	\$122,594	\$566		\$123,161	1.466	\$180,579	\$6.09
Provider Incentive Payment Adjustment							\$6.71
Total	\$14,493,067	\$57,606	(\$224,770)	\$14,325,903		\$16,952,381	\$578.09
Admin Cost Adjustment							\$45.43
State Budget Cap Adjustment							(\$15.74)
Medallion II Capitation Rate							\$607.78

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Capitation Rate Calculations - Health Plan Encounter Data
Temporary Assistance to Needy Families (TANF)

Exhibit 4a

All Age Categories							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$3,622,762	\$20,193	(\$56,379)	\$3,586,577	1.179	\$4,230,133	\$1.80
FQHC / RHC	\$2,918,077	\$16,421	\$42,820	\$2,977,318	1.174	\$3,495,531	\$1.49
Home Health	\$0	\$0		\$0	1.000	\$0	\$0.00
IP - Maternity	\$31,367,656	\$205,641	(\$2,041,206)	\$29,532,091	1.072	\$31,671,727	\$13.46
IP - Newborn	\$33,887,438	\$507,980	(\$2,223,656)	\$32,171,762	1.062	\$34,157,423	\$14.51
IP - Other	\$26,107,179	\$269,858	(\$1,705,269)	\$24,671,768	1.068	\$26,340,049	\$11.19
IP - Psych	\$4,643,591	\$12,078	(\$345,369)	\$4,310,299	1.367	\$5,892,966	\$2.50
Lab	\$4,521,238	\$19,770		\$4,541,008	1.482	\$6,729,403	\$2.86
OP - Emergency Room	\$22,182,776	\$134,904		\$22,317,680	1.267	\$28,271,980	\$12.01
OP - Other	\$60,631,634	\$368,343		\$60,999,977	1.267	\$77,286,416	\$32.83
Pharmacy	\$58,257,201	\$1,083	(\$1,938,206)	\$56,320,078	1.243	\$69,978,170	\$29.73
Prof - Anesthesia	\$4,925,216	\$28,098	\$84,938	\$5,038,252	1.164	\$5,863,902	\$2.49
Prof - Child EPSDT	\$3,775,232	\$20,116	\$73,992	\$3,869,340	1.211	\$4,684,112	\$1.99
Prof - Evaluation & Management	\$57,700,349	\$312,694	\$2,329,662	\$60,342,705	1.200	\$72,385,623	\$30.75
Prof - Maternity	\$16,618,685	\$97,091		\$16,715,776	1.147	\$19,168,421	\$8.14
Prof - Other	\$16,445,606	\$90,304	\$305,611	\$16,841,520	1.190	\$20,048,758	\$8.52
Prof - Psych	\$5,257,010	\$28,534	\$111,299	\$5,396,843	1.198	\$6,466,502	\$2.75
Prof - Specialist	\$10,909,915	\$61,316	\$232,077	\$11,203,309	1.174	\$13,156,935	\$5.59
Prof - Vision	\$2,516,622	\$13,625	\$47,981	\$2,578,228	1.200	\$3,093,883	\$1.31
Radiology	\$6,294,488	\$28,348		\$6,322,836	1.474	\$9,316,994	\$3.96
Transportation/Ambulance	\$7,564,979	\$32,845		\$7,597,825	1.484	\$11,274,423	\$4.79
Provider Incentive Payment Adjustment							\$2.26
Total	\$380,147,656	\$2,269,241	(\$5,081,706)	\$377,335,191		\$453,513,350	\$194.93
Admin Cost Adjustment							\$15.32
State Budget Cap Adjustment							(\$5.31)
Medallion II Capitation Rate							\$204.94

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$108,800	\$1,184	(\$9,094)	\$100,889	1.170	\$118,066	\$80.26
FQHC / RHC	\$27,871	\$303	\$781	\$28,955	1.170	\$33,885	\$23.04
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$461.95
IP - Other	\$905,478	\$7,904	(\$54,887)	\$858,495	1.190	\$1,021,242	\$694.25
IP - Psych	\$19,186	\$134	(\$1,433)	\$17,887	1.279	\$22,872	\$15.55
Lab	\$8,962	\$47		\$9,009	1.417	\$12,765	\$8.68
OP - Emergency Room	\$33,466	\$284		\$33,751	1.221	\$41,204	\$28.01
OP - Other	\$263,777	\$2,240		\$266,018	1.221	\$324,768	\$220.78
Pharmacy	\$400,232	\$8	(\$13,607)	\$386,633	1.107	\$428,003	\$290.96
Prof - Anesthesia	\$20,184	\$220	\$406	\$20,809	1.170	\$24,352	\$16.55
Prof - Child EPSDT	\$8,392	\$91	\$169	\$8,652	1.170	\$10,125	\$6.88
Prof - Evaluation & Management	\$383,578	\$4,173	\$16,918	\$404,668	1.170	\$473,568	\$321.94
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$334,632	\$3,641	\$6,729	\$345,002	1.170	\$403,742	\$274.47
Prof - Psych	\$5,222	\$57	\$117	\$5,396	1.170	\$6,314	\$4.29
Prof - Specialist	\$72,721	\$791	\$1,671	\$75,183	1.170	\$87,984	\$59.81
Prof - Vision	\$9,168	\$100	\$184	\$9,452	1.170	\$11,062	\$7.52
Radiology	\$12,042	\$63		\$12,105	1.417	\$17,152	\$11.66
Transportation/Ambulance	\$27,599	\$145		\$27,744	1.417	\$39,311	\$26.72
Provider Incentive Payment Adjustment							\$29.98
Total	\$3,246,738	\$26,669	(\$91,529)	\$3,181,878		\$3,755,936	\$2,583.30
Admin Cost Adjustment							\$202.99
State Budget CAP Adjustment							(\$70.33)
Medallion II Capitation Rate							\$2,715.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$338,569	\$3,683	(\$28,300)	\$313,952	1.170	\$367,406	\$66.04
FQHC / RHC	\$0			\$0	1.170	\$0	\$0.00
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$1,068,023	\$9,322	(\$69,650)	\$1,007,695	1.190	\$1,198,726	\$215.48
IP - Psych	\$6,150	\$43	(\$459)	\$5,734	1.279	\$7,332	\$1.32
Lab	\$12,941	\$68		\$13,009	1.417	\$18,433	\$3.31
OP - Emergency Room	\$54,579	\$464		\$55,043	1.221	\$67,199	\$12.08
OP - Other	\$1,194,608	\$10,147		\$1,204,755	1.221	\$1,470,824	\$264.39
Pharmacy	\$818,695	\$17	(\$27,834)	\$790,878	1.107	\$875,501	\$157.38
Prof - Anesthesia	\$46,450	\$505	\$934	\$47,889	1.170	\$56,043	\$10.07
Prof - Child EPSDT	\$8,610	\$94	\$173	\$8,877	1.170	\$10,389	\$1.87
Prof - Evaluation & Management	\$372,822	\$4,056	\$16,574	\$393,452	1.170	\$460,442	\$82.77
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$217,705	\$2,368	\$4,378	\$224,451	1.170	\$262,666	\$47.22
Prof - Psych	\$8,295	\$90	\$186	\$8,572	1.170	\$10,031	\$1.80
Prof - Specialist	\$81,786	\$890	\$1,879	\$84,555	1.170	\$98,952	\$17.79
Prof - Vision	\$17,395	\$189	\$350	\$17,934	1.170	\$20,987	\$3.77
Radiology	\$20,683	\$108		\$20,792	1.417	\$29,460	\$5.30
Transportation/Ambulance	\$24,729	\$130		\$24,859	1.417	\$35,223	\$6.33
Provider Incentive Payment Adjustment							\$10.53
Total	\$4,292,042	\$32,174	(\$101,769)	\$4,222,447		\$4,989,616	\$907.46
Admin Cost Adjustment							\$71.31
State Budget CAP Adjustment							(\$24.70)
Medallion II Capitation Rate							\$954.06

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$514,217	\$5,594	(\$63,451)	\$456,360	1.170	\$534,061	\$17.75
FQHC / RHC	\$219	\$2	\$6	\$227	1.170	\$266	\$0.01
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$85,819	\$749	(\$5,597)	\$80,972	1.190	\$96,322	\$3.20
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$3,480,555	\$30,381	(\$226,981)	\$3,283,954	1.190	\$3,906,501	\$129.82
IP - Psych	\$376,470	\$2,625	(\$28,122)	\$350,973	1.279	\$448,792	\$14.91
Lab	\$55,825	\$293		\$56,118	1.417	\$79,515	\$2.64
OP - Emergency Room	\$208,217	\$1,769		\$209,986	1.221	\$256,361	\$8.52
OP - Other	\$1,612,370	\$13,695		\$1,626,065	1.221	\$1,985,180	\$65.97
Pharmacy	\$5,568,664	\$113	(\$189,321)	\$5,379,456	1.107	\$5,955,056	\$197.89
Prof - Anesthesia	\$77,283	\$841	\$1,554	\$79,677	1.170	\$93,243	\$3.10
Prof - Child EPSDT	\$11,098	\$121	\$223	\$11,442	1.170	\$13,390	\$0.44
Prof - Evaluation & Management	\$959,328	\$10,437	\$43,784	\$1,013,549	1.170	\$1,186,117	\$39.42
Prof - Maternity	\$38,701	\$421		\$39,122	1.170	\$45,784	\$1.52
Prof - Other	\$1,912,121	\$20,802	\$38,450	\$1,971,373	1.170	\$2,307,022	\$76.67
Prof - Psych	\$196,914	\$2,142	\$4,425	\$203,481	1.170	\$238,126	\$7.91
Prof - Specialist	\$158,602	\$1,725	\$3,644	\$163,972	1.170	\$191,890	\$6.38
Prof - Vision	\$42,361	\$461	\$852	\$43,673	1.170	\$51,109	\$1.70
Radiology	\$81,173	\$425		\$81,599	1.417	\$115,619	\$3.84
Transportation/Ambulance	\$128,009	\$671		\$128,680	1.417	\$182,331	\$6.06
Provider Incentive Payment Adjustment							\$6.90
Total	\$15,507,944	\$93,268	(\$420,534)	\$15,180,678		\$17,686,684	\$594.65
Admin Cost Adjustment							\$46.73
State Budget CAP Adjustment							(\$16.19)
Medallion II Capitation Rate							\$625.19

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Female							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$247,677	\$2,695		\$250,372	1.170	\$293,001	\$13.61
FQHC / RHC	\$0			\$0	1.170	\$0	\$0.00
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$256,406	\$2,238	(\$16,721)	\$241,923	1.190	\$287,785	\$13.37
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,208,332	\$36,733	(\$274,442)	\$3,970,623	1.190	\$4,723,343	\$219.39
IP - Psych	\$1,072,913	\$7,482	(\$80,146)	\$1,000,248	1.279	\$1,279,027	\$59.41
Lab	\$99,262	\$520		\$99,782	1.417	\$141,384	\$6.57
OP - Emergency Room	\$506,811	\$4,305		\$511,116	1.221	\$623,995	\$28.98
OP - Other	\$2,411,364	\$20,482		\$2,431,845	1.221	\$2,968,917	\$137.90
Pharmacy	\$6,730,405	\$137	(\$228,818)	\$6,501,724	1.107	\$7,197,406	\$334.31
Prof - Anesthesia	\$83,724	\$911	\$1,280	\$85,914	1.170	\$100,542	\$4.67
Prof - Child EPSDT	\$8,898	\$97	\$136	\$9,131	1.170	\$10,686	\$0.50
Prof - Evaluation & Management	\$1,297,881	\$14,120	\$30,271	\$1,342,272	1.170	\$1,570,809	\$72.96
Prof - Maternity	\$100,224	\$1,090		\$101,315	1.170	\$118,565	\$5.51
Prof - Other	\$436,726	\$4,751	\$6,675	\$448,153	1.170	\$524,456	\$24.36
Prof - Psych	\$260,524	\$2,834	\$5,363	\$268,721	1.170	\$314,474	\$14.61
Prof - Specialist	\$308,649	\$3,358	\$6,032	\$318,039	1.170	\$372,189	\$17.29
Prof - Vision	\$34,682	\$377	\$530	\$35,590	1.170	\$41,649	\$1.93
Radiology	\$268,304	\$1,406		\$269,710	1.417	\$382,160	\$17.75
Transportation/Ambulance	\$184,467	\$967		\$185,434	1.417	\$262,746	\$12.20
Provider Incentive Payment Adjustment							\$11.57
Total	\$18,517,249	\$104,503	(\$549,840)	\$18,071,912		\$21,213,134	\$996.90
Admin Cost Adjustment							\$78.34
State Budget CAP Adjustment							(\$27.14)
Medallion II Capitation Rate							\$1,048.09

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$120,492	\$1,311		\$121,803	1.170	\$142,541	\$7.09
FQHC / RHC	\$140	\$2		\$142	1.170	\$166	\$0.01
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$3,631,306	\$31,697	(\$236,812)	\$3,426,190	1.190	\$4,075,700	\$202.62
IP - Psych	\$935,683	\$6,525	(\$69,895)	\$872,313	1.279	\$1,115,435	\$55.45
Lab	\$51,949	\$272		\$52,221	1.417	\$73,994	\$3.68
OP - Emergency Room	\$240,952	\$2,047		\$242,998	1.221	\$296,664	\$14.75
OP - Other	\$1,844,687	\$15,668		\$1,860,356	1.221	\$2,271,214	\$112.91
Pharmacy	\$6,045,503	\$123	(\$205,533)	\$5,840,093	1.107	\$6,464,981	\$321.40
Prof - Anesthesia	\$40,177	\$437	\$614	\$41,228	1.170	\$48,248	\$2.40
Prof - Child EPSDT	\$22,938	\$250	\$351	\$23,539	1.170	\$27,546	\$1.37
Prof - Evaluation & Management	\$737,471	\$8,023	\$17,200	\$762,695	1.170	\$892,553	\$44.37
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$311,402	\$3,388	\$4,760	\$319,550	1.170	\$373,957	\$18.59
Prof - Psych	\$205,134	\$2,232	\$4,223	\$211,589	1.170	\$247,614	\$12.31
Prof - Specialist	\$214,638	\$2,335	\$4,195	\$221,168	1.170	\$258,825	\$12.87
Prof - Vision	\$23,353	\$254	\$357	\$23,964	1.170	\$28,044	\$1.39
Radiology	\$142,058	\$745		\$142,803	1.417	\$202,342	\$10.06
Transportation/Ambulance	\$146,497	\$768		\$147,264	1.417	\$208,663	\$10.37
Provider Incentive Payment Adjustment							\$9.76
Total	\$14,714,382	\$76,075	(\$480,541)	\$14,309,916		\$16,728,487	\$841.41
Admin Cost Adjustment							\$66.12
State Budget CAP Adjustment							(\$22.91)
Medallion II Capitation Rate							\$884.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Exhibit 4b

Age 45 and Over							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$864,233	\$9,402		\$873,635	1.170	\$1,022,382	\$11.25
FQHC / RHC	\$662	\$7		\$669	1.170	\$783	\$0.01
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$26,397,072	\$230,412	(\$1,721,461)	\$24,906,024	1.190	\$29,627,513	\$325.92
IP - Psych	\$1,543,608	\$10,765	(\$115,307)	\$1,439,066	1.279	\$1,840,147	\$20.24
Lab	\$438,556	\$2,299		\$440,855	1.417	\$624,659	\$6.87
OP - Emergency Room	\$937,563	\$7,963		\$945,527	1.221	\$1,154,346	\$12.70
OP - Other	\$10,430,368	\$88,593		\$10,518,961	1.221	\$12,842,066	\$141.27
Pharmacy	\$26,399,795	\$537	(\$897,530)	\$25,502,802	1.107	\$28,231,592	\$310.56
Prof - Anesthesia	\$349,839	\$3,806	\$5,347	\$358,992	1.170	\$420,114	\$4.62
Prof - Child EPSDT	\$48,689	\$530	\$744	\$49,963	1.170	\$58,470	\$0.64
Prof - Evaluation & Management	\$5,803,616	\$63,139	\$135,360	\$6,002,115	1.170	\$7,024,046	\$77.27
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$2,955,292	\$32,151	\$45,171	\$3,032,614	1.170	\$3,548,953	\$39.04
Prof - Psych	\$524,245	\$5,703	\$10,793	\$540,741	1.170	\$632,809	\$6.96
Prof - Specialist	\$2,132,503	\$23,200	\$41,679	\$2,197,382	1.170	\$2,571,512	\$28.29
Prof - Vision	\$292,581	\$3,183	\$4,472	\$300,237	1.170	\$351,355	\$3.87
Radiology	\$1,603,172	\$8,403		\$1,611,574	1.417	\$2,283,484	\$25.12
Transportation/Ambulance	\$739,630	\$3,877		\$743,507	1.417	\$1,053,495	\$11.59
Provider Incentive Payment Adjustment							\$12.05
Total	\$81,461,426	\$493,970	(\$2,490,733)	\$79,464,664		\$93,287,727	\$1,038.27
Admin Cost Adjustment							\$81.59
State Budget CAP Adjustment							(\$28.27)
Medallion II Capitation Rate							\$1,091.59

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

All Age Categories ²							
Northern Virginia	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$2,193,988	\$23,869	(\$100,846)	\$2,117,011	1.170	\$2,477,458	\$14.60
FQHC / RHC	\$28,892	\$314	\$787	\$29,993	1.170	\$35,100	\$0.21
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$342,225	\$2,987	(\$22,318)	\$322,895	1.190	\$384,106	\$2.26
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$4.00
IP - Other	\$39,690,765	\$346,449	(\$2,584,233)	\$37,452,981	1.190	\$44,553,025	\$262.58
IP - Psych	\$3,954,010	\$27,574	(\$295,364)	\$3,686,220	1.279	\$4,713,606	\$27.78
Lab	\$667,496	\$3,499		\$670,994	1.417	\$950,750	\$5.60
OP - Emergency Room	\$1,981,589	\$16,831		\$1,998,420	1.221	\$2,439,770	\$14.38
OP - Other	\$17,757,174	\$150,826		\$17,908,000	1.221	\$21,862,968	\$128.85
Pharmacy	\$45,963,293	\$936	(\$1,562,643)	\$44,401,585	1.107	\$49,152,539	\$289.69
Prof - Anesthesia	\$617,655	\$6,720	\$10,135	\$634,510	1.170	\$742,542	\$4.38
Prof - Child EPSDT	\$108,626	\$1,182	\$1,796	\$111,604	1.170	\$130,605	\$0.77
Prof - Evaluation & Management	\$9,554,696	\$103,947	\$260,107	\$9,918,750	1.170	\$11,607,535	\$68.41
Prof - Maternity	\$138,926	\$1,511		\$140,437	1.170	\$164,348	\$0.97
Prof - Other	\$6,167,878	\$67,102	\$106,162	\$6,341,142	1.170	\$7,420,796	\$43.74
Prof - Psych	\$1,200,334	\$13,059	\$25,108	\$1,238,500	1.170	\$1,449,369	\$8.54
Prof - Specialist	\$2,968,899	\$32,299	\$59,101	\$3,060,300	1.170	\$3,581,352	\$21.11
Prof - Vision	\$419,540	\$4,564	\$6,745	\$430,849	1.170	\$504,207	\$2.97
Radiology	\$2,127,433	\$11,150		\$2,138,583	1.417	\$3,030,218	\$17.86
Transportation/Ambulance	\$1,250,932	\$6,556		\$1,257,488	1.417	\$1,781,769	\$10.50
Provider Incentive Payment Adjustment							\$10.91
Total	\$137,739,781	\$826,660	(\$4,134,946)	\$134,431,495		\$157,661,585	\$940.11
Admin Cost Adjustment							\$73.87
State Budget CAP Adjustment							(\$25.59)
Medallion II Capitation Rate							\$988.39

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

² Statewide Age Under 1 is included in the regional all age summaries.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$108,800	\$1,184	(\$9,094)	\$100,889	1.170	\$118,066	\$80.26
FQHC / RHC	\$27,871	\$303	\$781	\$28,955	1.170	\$33,885	\$23.04
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$461.95
IP - Other	\$905,478	\$7,904	(\$54,887)	\$858,495	1.190	\$1,021,242	\$694.25
IP - Psych	\$19,186	\$134	(\$1,433)	\$17,887	1.279	\$22,872	\$15.55
Lab	\$8,962	\$47		\$9,009	1.417	\$12,765	\$8.68
OP - Emergency Room	\$33,466	\$284		\$33,751	1.221	\$41,204	\$28.01
OP - Other	\$263,777	\$2,240		\$266,018	1.221	\$324,768	\$220.78
Pharmacy	\$400,232	\$8	(\$13,607)	\$386,633	1.107	\$428,003	\$290.96
Prof - Anesthesia	\$20,184	\$220	\$406	\$20,809	1.170	\$24,352	\$16.55
Prof - Child EPSDT	\$8,392	\$91	\$169	\$8,652	1.170	\$10,125	\$6.88
Prof - Evaluation & Management	\$383,578	\$4,173	\$16,918	\$404,668	1.170	\$473,568	\$321.94
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$334,632	\$3,641	\$6,729	\$345,002	1.170	\$403,742	\$274.47
Prof - Psych	\$5,222	\$57	\$117	\$5,396	1.170	\$6,314	\$4.29
Prof - Specialist	\$72,721	\$791	\$1,671	\$75,183	1.170	\$87,984	\$59.81
Prof - Vision	\$9,168	\$100	\$184	\$9,452	1.170	\$11,062	\$7.52
Radiology	\$12,042	\$63		\$12,105	1.417	\$17,152	\$11.66
Transportation/Ambulance	\$27,599	\$145		\$27,744	1.417	\$39,311	\$26.72
Provider Incentive Payment Adjustment							\$29.98
Total	\$3,246,738	\$26,669	(\$91,529)	\$3,181,878		\$3,755,936	\$2,583.30
Admin Cost Adjustment							\$202.99
State Budget CAP Adjustment							(\$70.33)
Medallion II Capitation Rate							\$2,715.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$304,051	\$3,308	(\$25,415)	\$281,943	1.170	\$329,948	\$56.05
FQHC / RHC	\$5,586	\$61	\$157	\$5,803	1.170	\$6,791	\$1.15
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$1,694,260	\$14,789	(\$109,940)	\$1,599,109	1.190	\$1,902,256	\$323.13
IP - Psych	\$58,830	\$410	(\$4,395)	\$54,846	1.279	\$70,132	\$11.91
Lab	\$38,002	\$199		\$38,201	1.417	\$54,128	\$9.19
OP - Emergency Room	\$47,963	\$407		\$48,370	1.221	\$59,053	\$10.03
OP - Other	\$1,099,896	\$9,342		\$1,109,239	1.221	\$1,354,213	\$230.03
Pharmacy	\$568,680	\$12	(\$19,334)	\$549,358	1.107	\$608,139	\$103.30
Prof - Anesthesia	\$38,194	\$416	\$768	\$39,378	1.170	\$46,082	\$7.83
Prof - Child EPSDT	\$10,621	\$116	\$214	\$10,950	1.170	\$12,814	\$2.18
Prof - Evaluation & Management	\$339,813	\$3,697	\$15,107	\$358,617	1.170	\$419,675	\$71.29
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$508,411	\$5,531	\$10,223	\$524,166	1.170	\$613,411	\$104.20
Prof - Psych	\$29,307	\$319	\$659	\$30,284	1.170	\$35,440	\$6.02
Prof - Specialist	\$111,242	\$1,210	\$2,556	\$115,008	1.170	\$134,589	\$22.86
Prof - Vision	\$13,086	\$142	\$263	\$13,491	1.170	\$15,789	\$2.68
Radiology	\$24,641	\$129		\$24,770	1.417	\$35,098	\$5.96
Transportation/Ambulance	\$66,087	\$346		\$66,433	1.417	\$94,131	\$15.99
Provider Incentive Payment Adjustment							\$11.55
Total	\$4,958,669	\$40,434	(\$129,138)	\$4,869,965		\$5,791,688	\$995.36
Admin Cost Adjustment							\$78.22
State Budget CAP Adjustment							(\$27.10)
Medallion II Capitation Rate							\$1,046.48

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$407,255	\$4,431	(\$50,252)	\$361,433	1.170	\$422,971	\$11.35
FQHC / RHC	\$22,594	\$246	\$633	\$23,473	1.170	\$27,469	\$0.74
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$103,390	\$902	(\$6,742)	\$97,550	1.190	\$116,043	\$3.11
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$1,490,411	\$13,009	(\$96,712)	\$1,406,708	1.190	\$1,673,381	\$44.91
IP - Psych	\$711,615	\$4,963	(\$53,158)	\$663,420	1.279	\$848,321	\$22.77
Lab	\$165,234	\$866		\$166,100	1.417	\$235,352	\$6.32
OP - Emergency Room	\$242,657	\$2,061		\$244,718	1.221	\$298,764	\$8.02
OP - Other	\$1,447,596	\$12,296		\$1,459,891	1.221	\$1,782,307	\$47.83
Pharmacy	\$4,849,644	\$99	(\$164,876)	\$4,684,867	1.107	\$5,186,146	\$139.18
Prof - Anesthesia	\$48,731	\$530	\$980	\$50,241	1.170	\$58,795	\$1.58
Prof - Child EPSDT	\$20,116	\$219	\$404	\$20,739	1.170	\$24,270	\$0.65
Prof - Evaluation & Management	\$856,550	\$9,319	\$39,093	\$904,962	1.170	\$1,059,043	\$28.42
Prof - Maternity	\$46,540	\$506		\$47,046	1.170	\$55,057	\$1.48
Prof - Other	\$458,161	\$4,984	\$9,213	\$472,358	1.170	\$552,783	\$14.83
Prof - Psych	\$371,650	\$4,043	\$8,352	\$384,044	1.170	\$449,433	\$12.06
Prof - Specialist	\$188,663	\$2,053	\$4,335	\$195,051	1.170	\$228,260	\$6.13
Prof - Vision	\$56,676	\$617	\$1,140	\$58,432	1.170	\$68,381	\$1.84
Radiology	\$88,827	\$466		\$89,293	1.417	\$126,521	\$3.40
Transportation/Ambulance	\$263,934	\$1,383		\$265,317	1.417	\$375,935	\$10.09
Provider Incentive Payment Adjustment							\$4.28
Total	\$11,840,242	\$62,992	(\$307,591)	\$11,595,643		\$13,589,231	\$368.97
Admin Cost Adjustment							\$28.99
State Budget CAP Adjustment							(\$10.04)
Medallion II Capitation Rate							\$387.91

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Female							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$504,925	\$5,493		\$510,418	1.170	\$597,323	\$20.60
FQHC / RHC	\$48,614	\$529		\$49,143	1.170	\$57,510	\$1.98
Home Health	\$563	\$5		\$567	1.221	\$693	\$0.02
IP - Maternity	\$436,468	\$3,810	(\$28,464)	\$411,814	1.190	\$489,882	\$16.89
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,491,187	\$39,202	(\$291,431)	\$4,238,958	1.190	\$5,042,547	\$173.89
IP - Psych	\$916,659	\$6,392	(\$68,474)	\$854,577	1.279	\$1,092,756	\$37.68
Lab	\$407,669	\$2,137		\$409,806	1.417	\$580,665	\$20.02
OP - Emergency Room	\$602,593	\$5,118		\$607,712	1.221	\$741,924	\$25.58
OP - Other	\$2,970,656	\$25,232		\$2,995,889	1.221	\$3,657,528	\$126.13
Pharmacy	\$6,417,498	\$131	(\$218,180)	\$6,199,449	1.107	\$6,862,787	\$236.66
Prof - Anesthesia	\$95,914	\$1,043	\$1,466	\$98,424	1.170	\$115,182	\$3.97
Prof - Child EPSDT	\$25,481	\$277	\$389	\$26,148	1.170	\$30,600	\$1.06
Prof - Evaluation & Management	\$1,514,521	\$16,477	\$35,324	\$1,566,322	1.170	\$1,833,007	\$63.21
Prof - Maternity	\$178,779	\$1,945		\$180,724	1.170	\$211,494	\$7.29
Prof - Other	\$684,695	\$7,449	\$10,465	\$702,609	1.170	\$822,236	\$28.35
Prof - Psych	\$304,814	\$3,316	\$6,275	\$314,405	1.170	\$367,936	\$12.69
Prof - Specialist	\$576,083	\$6,267	\$11,259	\$593,610	1.170	\$694,679	\$23.96
Prof - Vision	\$51,492	\$560	\$787	\$52,839	1.170	\$61,836	\$2.13
Radiology	\$358,575	\$1,879		\$360,455	1.417	\$510,738	\$17.61
Transportation/Ambulance	\$535,371	\$2,806		\$538,177	1.417	\$762,558	\$26.30
Provider Incentive Payment Adjustment							\$9.93
Total	\$21,122,557	\$130,070	(\$540,583)	\$20,712,044		\$24,533,881	\$855.96
Admin Cost Adjustment							\$67.26
State Budget CAP Adjustment							(\$23.30)
Medallion II Capitation Rate							\$899.92

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$251,338	\$2,734		\$254,072	1.170	\$297,331	\$14.24
FQHC / RHC	\$22,840	\$248		\$23,088	1.170	\$27,019	\$1.29
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$2,755,997	\$24,056	(\$178,836)	\$2,601,218	1.190	\$3,094,336	\$148.22
IP - Psych	\$898,171	\$6,264	(\$67,093)	\$837,341	1.279	\$1,070,716	\$51.29
Lab	\$141,728	\$743		\$142,471	1.417	\$201,871	\$9.67
OP - Emergency Room	\$258,873	\$2,199		\$261,072	1.221	\$318,730	\$15.27
OP - Other	\$1,261,694	\$10,717		\$1,272,411	1.221	\$1,553,422	\$74.41
Pharmacy	\$4,190,765	\$85	(\$142,476)	\$4,048,374	1.107	\$4,481,549	\$214.66
Prof - Anesthesia	\$27,010	\$294	\$413	\$27,716	1.170	\$32,435	\$1.55
Prof - Child EPSDT	\$10,839	\$118	\$166	\$11,122	1.170	\$13,016	\$0.62
Prof - Evaluation & Management	\$720,317	\$7,836	\$16,800	\$744,954	1.170	\$871,791	\$41.76
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$576,291	\$6,270	\$8,808	\$591,369	1.170	\$692,056	\$33.15
Prof - Psych	\$146,467	\$1,593	\$3,015	\$151,076	1.170	\$176,799	\$8.47
Prof - Specialist	\$213,177	\$2,319	\$4,166	\$219,663	1.170	\$257,063	\$12.31
Prof - Vision	\$32,278	\$351	\$493	\$33,123	1.170	\$38,762	\$1.86
Radiology	\$131,728	\$690		\$132,418	1.417	\$187,627	\$8.99
Transportation/Ambulance	\$227,862	\$1,194		\$229,056	1.417	\$324,556	\$15.55
Provider Incentive Payment Adjustment							\$7.67
Total	\$11,867,374	\$67,713	(\$354,543)	\$11,580,544		\$13,639,078	\$660.98
Admin Cost Adjustment							\$51.94
State Budget CAP Adjustment							(\$17.99)
Medallion II Capitation Rate							\$694.92

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,761,909	\$19,168		\$1,781,078	1.170	\$2,084,327	\$30.66
FQHC / RHC	\$94,711	\$1,030		\$95,741	1.170	\$112,043	\$1.65
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$19,264,813	\$168,157	(\$1,250,086)	\$18,182,884	1.190	\$21,629,853	\$318.20
IP - Psych	\$1,845,031	\$12,867	(\$137,824)	\$1,720,074	1.279	\$2,199,476	\$32.36
Lab	\$949,340	\$4,976		\$954,316	1.417	\$1,352,196	\$19.89
OP - Emergency Room	\$790,075	\$6,711		\$796,785	1.221	\$972,755	\$14.31
OP - Other	\$7,874,225	\$66,882		\$7,941,107	1.221	\$9,694,894	\$142.62
Pharmacy	\$19,312,605	\$393	(\$656,583)	\$18,656,416	1.107	\$20,652,645	\$303.82
Prof - Anesthesia	\$206,097	\$2,242	\$3,150	\$211,489	1.170	\$247,497	\$3.64
Prof - Child EPSDT	\$63,309	\$689	\$968	\$64,965	1.170	\$76,026	\$1.12
Prof - Evaluation & Management	\$3,886,983	\$42,287	\$90,658	\$4,019,928	1.170	\$4,704,368	\$69.21
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$2,956,399	\$32,163	\$45,188	\$3,033,750	1.170	\$3,550,281	\$52.23
Prof - Psych	\$438,786	\$4,774	\$9,033	\$452,593	1.170	\$529,652	\$7.79
Prof - Specialist	\$1,783,672	\$19,405	\$34,861	\$1,837,938	1.170	\$2,150,869	\$31.64
Prof - Vision	\$180,560	\$1,964	\$2,760	\$185,284	1.170	\$216,831	\$3.19
Radiology	\$1,012,369	\$5,306		\$1,017,675	1.417	\$1,441,972	\$21.21
Transportation/Ambulance	\$1,101,762	\$5,775		\$1,107,537	1.417	\$1,569,299	\$23.09
Provider Incentive Payment Adjustment							\$12.64
Total	\$63,522,646	\$394,789	(\$1,857,875)	\$62,059,559		\$73,184,985	\$1,089.27
Admin Cost Adjustment							\$85.59
State Budget CAP Adjustment							(\$29.65)
Medallion II Capitation Rate							\$1,145.21

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)**

Exhibit 4b

All Age Categories ²							
Other MSA	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$3,338,277	\$36,318	(\$84,762)	\$3,289,833	1.170	\$3,849,966	\$23.70
FQHC / RHC	\$222,214	\$2,418	\$1,571	\$226,203	1.170	\$264,717	\$1.63
Home Health	\$563	\$5		\$567	1.221	\$693	\$0.00
IP - Maternity	\$539,858	\$4,712	(\$35,206)	\$509,364	1.190	\$605,925	\$3.73
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$4.18
IP - Other	\$30,602,147	\$267,117	(\$1,981,892)	\$28,887,372	1.190	\$34,363,614	\$211.50
IP - Psych	\$4,449,491	\$31,029	(\$332,377)	\$4,148,144	1.279	\$5,304,272	\$32.65
Lab	\$1,710,935	\$8,967		\$1,719,902	1.417	\$2,436,977	\$15.00
OP - Emergency Room	\$1,975,627	\$16,781		\$1,992,408	1.221	\$2,432,429	\$14.97
OP - Other	\$14,917,844	\$126,709		\$15,044,553	1.221	\$18,367,132	\$113.05
Pharmacy	\$35,739,424	\$728	(\$1,215,056)	\$34,525,096	1.107	\$38,219,269	\$235.23
Prof - Anesthesia	\$436,129	\$4,745	\$7,183	\$448,056	1.170	\$524,343	\$3.23
Prof - Child EPSDT	\$138,757	\$1,510	\$2,310	\$142,576	1.170	\$166,851	\$1.03
Prof - Evaluation & Management	\$7,701,762	\$83,789	\$213,899	\$7,999,450	1.170	\$9,361,451	\$57.62
Prof - Maternity	\$225,319	\$2,451		\$227,770	1.170	\$266,551	\$1.64
Prof - Other	\$5,518,589	\$60,038	\$90,626	\$5,669,253	1.170	\$6,634,510	\$40.83
Prof - Psych	\$1,296,245	\$14,102	\$27,451	\$1,337,799	1.170	\$1,565,575	\$9.64
Prof - Specialist	\$2,945,559	\$32,045	\$58,849	\$3,036,453	1.170	\$3,553,445	\$21.87
Prof - Vision	\$343,259	\$3,734	\$5,627	\$352,621	1.170	\$412,659	\$2.54
Radiology	\$1,628,183	\$8,534		\$1,636,717	1.417	\$2,319,109	\$14.27
Transportation/Ambulance	\$2,222,615	\$11,649		\$2,234,264	1.417	\$3,165,791	\$19.49
Provider Incentive Payment Adjustment							\$9.72
Total	\$116,558,227	\$722,665	(\$3,281,258)	\$113,999,633		\$134,494,799	\$837.52
Admin Cost Adjustment							\$65.81
State Budget CAP Adjustment							(\$22.80)
Medallion II Capitation Rate							\$880.53

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

² Statewide Age Under 1 is included in the regional all age summaries.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$108,800	\$1,184	(\$9,094)	\$100,889	1.170	\$118,066	\$80.26
FQHC / RHC	\$27,871	\$303	\$781	\$28,955	1.170	\$33,885	\$23.04
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$461.95
IP - Other	\$905,478	\$7,904	(\$54,887)	\$858,495	1.190	\$1,021,242	\$694.25
IP - Psych	\$19,186	\$134	(\$1,433)	\$17,887	1.279	\$22,872	\$15.55
Lab	\$8,962	\$47		\$9,009	1.417	\$12,765	\$8.68
OP - Emergency Room	\$33,466	\$284		\$33,751	1.221	\$41,204	\$28.01
OP - Other	\$263,777	\$2,240		\$266,018	1.221	\$324,768	\$220.78
Pharmacy	\$400,232	\$8	(\$13,607)	\$386,633	1.107	\$428,003	\$290.96
Prof - Anesthesia	\$20,184	\$220	\$406	\$20,809	1.170	\$24,352	\$16.55
Prof - Child EPSDT	\$8,392	\$91	\$169	\$8,652	1.170	\$10,125	\$6.88
Prof - Evaluation & Management	\$383,578	\$4,173	\$16,918	\$404,668	1.170	\$473,568	\$321.94
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$334,632	\$3,641	\$6,729	\$345,002	1.170	\$403,742	\$274.47
Prof - Psych	\$5,222	\$57	\$117	\$5,396	1.170	\$6,314	\$4.29
Prof - Specialist	\$72,721	\$791	\$1,671	\$75,183	1.170	\$87,984	\$59.81
Prof - Vision	\$9,168	\$100	\$184	\$9,452	1.170	\$11,062	\$7.52
Radiology	\$12,042	\$63		\$12,105	1.417	\$17,152	\$11.66
Transportation/Ambulance	\$27,599	\$145		\$27,744	1.417	\$39,311	\$26.72
Provider Incentive Payment Adjustment							\$29.98
Total	\$3,246,738	\$26,669	(\$91,529)	\$3,181,878		\$3,755,936	\$2,583.30
Admin Cost Adjustment							\$202.99
State Budget CAP Adjustment							(\$70.33)
Medallion II Capitation Rate							\$2,715.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$429,726	\$4,675	(\$35,920)	\$398,481	1.170	\$466,327	\$41.11
FQHC / RHC	\$7,268	\$79	\$204	\$7,550	1.170	\$8,836	\$0.78
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$1,226,201	\$10,703	(\$79,966)	\$1,156,939	1.190	\$1,376,262	\$121.33
IP - Psych	\$170,965	\$1,192	(\$12,771)	\$159,386	1.279	\$203,808	\$17.97
Lab	\$27,201	\$143		\$27,343	1.417	\$38,744	\$3.42
OP - Emergency Room	\$126,746	\$1,077		\$127,823	1.221	\$156,052	\$13.76
OP - Other	\$2,054,855	\$17,454		\$2,072,309	1.221	\$2,529,977	\$223.04
Pharmacy	\$1,038,700	\$21	(\$35,313)	\$1,003,408	1.107	\$1,110,772	\$97.93
Prof - Anesthesia	\$56,694	\$617	\$1,140	\$58,451	1.170	\$68,403	\$6.03
Prof - Child EPSDT	\$17,293	\$188	\$348	\$17,829	1.170	\$20,865	\$1.84
Prof - Evaluation & Management	\$537,458	\$5,847	\$23,893	\$567,198	1.170	\$663,771	\$58.52
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$476,278	\$5,182	\$9,577	\$491,036	1.170	\$574,641	\$50.66
Prof - Psych	\$72,192	\$785	\$1,622	\$74,599	1.170	\$87,301	\$7.70
Prof - Specialist	\$176,047	\$1,915	\$4,045	\$182,008	1.170	\$212,997	\$18.78
Prof - Vision	\$37,103	\$404	\$746	\$38,253	1.170	\$44,766	\$3.95
Radiology	\$47,005	\$246		\$47,252	1.417	\$66,952	\$5.90
Transportation/Ambulance	\$59,916	\$314		\$60,230	1.417	\$85,341	\$7.52
Provider Incentive Payment Adjustment							\$7.99
Total	\$6,561,648	\$50,842	(\$122,395)	\$6,490,094		\$7,715,814	\$688.21
Admin Cost Adjustment							\$54.08
State Budget CAP Adjustment							(\$18.74)
Medallion II Capitation Rate							\$723.56

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$970,197	\$10,555	(\$119,715)	\$861,036	1.170	\$1,007,638	\$9.78
FQHC / RHC	\$23,362	\$254	\$655	\$24,271	1.170	\$28,404	\$0.28
Home Health	\$195	\$2		\$197	1.221	\$240	\$0.00
IP - Maternity	\$349,296	\$3,049	(\$22,779)	\$329,566	1.190	\$392,042	\$3.81
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,182,595	\$36,509	(\$272,764)	\$3,946,339	1.190	\$4,694,456	\$45.59
IP - Psych	\$2,553,761	\$17,809	(\$190,766)	\$2,380,804	1.279	\$3,044,358	\$29.56
Lab	\$190,605	\$999		\$191,604	1.417	\$271,489	\$2.64
OP - Emergency Room	\$845,352	\$7,180		\$852,532	1.221	\$1,040,813	\$10.11
OP - Other	\$5,007,899	\$42,536		\$5,050,435	1.221	\$6,165,820	\$59.87
Pharmacy	\$9,215,726	\$188	(\$313,313)	\$8,902,601	1.107	\$9,855,176	\$95.70
Prof - Anesthesia	\$143,972	\$1,566	\$2,895	\$148,433	1.170	\$173,706	\$1.69
Prof - Child EPSDT	\$48,719	\$530	\$980	\$50,228	1.170	\$58,780	\$0.57
Prof - Evaluation & Management	\$2,209,559	\$24,038	\$100,846	\$2,334,443	1.170	\$2,731,910	\$26.53
Prof - Maternity	\$177,354	\$1,929		\$179,284	1.170	\$209,809	\$2.04
Prof - Other	\$2,183,848	\$23,759	\$43,914	\$2,251,520	1.170	\$2,634,868	\$25.59
Prof - Psych	\$958,764	\$10,431	\$21,545	\$990,740	1.170	\$1,159,425	\$11.26
Prof - Specialist	\$476,246	\$5,181	\$10,943	\$492,370	1.170	\$576,201	\$5.60
Prof - Vision	\$144,220	\$1,569	\$2,900	\$148,689	1.170	\$174,005	\$1.69
Radiology	\$195,528	\$1,025		\$196,553	1.417	\$278,501	\$2.70
Transportation/Ambulance	\$484,064	\$2,537		\$486,601	1.417	\$689,479	\$6.70
Provider Incentive Payment Adjustment							\$4.01
Total	\$30,361,264	\$191,646	(\$734,660)	\$29,818,249		\$35,187,122	\$345.69
Admin Cost Adjustment							\$27.16
State Budget CAP Adjustment							(\$9.41)
Medallion II Capitation Rate							\$363.45

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Female							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$646,036	\$7,028		\$653,064	1.170	\$764,256	\$15.22
FQHC / RHC	\$182,958	\$1,990		\$184,949	1.170	\$216,438	\$4.31
Home Health	\$36	\$0		\$36	1.221	\$44	\$0.00
IP - Maternity	\$725,607	\$6,334	(\$47,320)	\$684,621	1.190	\$814,406	\$16.22
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$8,374,301	\$73,097	(\$546,122)	\$7,901,276	1.190	\$9,399,138	\$187.15
IP - Psych	\$3,008,780	\$20,982	(\$224,756)	\$2,805,007	1.279	\$3,586,790	\$71.42
Lab	\$279,237	\$1,464		\$280,700	1.417	\$397,732	\$7.92
OP - Emergency Room	\$1,381,350	\$11,733		\$1,393,083	1.221	\$1,700,744	\$33.86
OP - Other	\$7,029,519	\$59,707		\$7,089,226	1.221	\$8,654,877	\$172.33
Pharmacy	\$11,065,746	\$225	(\$376,209)	\$10,689,762	1.107	\$11,833,562	\$235.63
Prof - Anesthesia	\$163,448	\$1,778	\$2,498	\$167,724	1.170	\$196,281	\$3.91
Prof - Child EPSDT	\$43,784	\$476	\$669	\$44,929	1.170	\$52,579	\$1.05
Prof - Evaluation & Management	\$2,690,598	\$29,272	\$62,754	\$2,782,623	1.170	\$3,256,398	\$64.84
Prof - Maternity	\$293,471	\$3,193		\$296,664	1.170	\$347,174	\$6.91
Prof - Other	\$1,865,887	\$20,299	\$28,519	\$1,914,706	1.170	\$2,240,707	\$44.62
Prof - Psych	\$523,594	\$5,696	\$10,779	\$540,069	1.170	\$632,023	\$12.58
Prof - Specialist	\$845,572	\$9,199	\$16,526	\$871,297	1.170	\$1,019,646	\$20.30
Prof - Vision	\$91,595	\$996	\$1,400	\$93,991	1.170	\$109,994	\$2.19
Radiology	\$553,904	\$2,903		\$556,807	1.417	\$788,955	\$15.71
Transportation/Ambulance	\$861,222	\$4,514		\$865,736	1.417	\$1,226,684	\$24.43
Provider Incentive Payment Adjustment							\$11.04
Total	\$40,626,641	\$260,888	(\$1,071,260)	\$39,816,269		\$47,238,427	\$951.64
Admin Cost Adjustment							\$74.78
State Budget CAP Adjustment							(\$25.91)
Medallion II Capitation Rate							\$1,000.51

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$703,696	\$7,656		\$711,352	1.170	\$832,468	\$24.77
FQHC / RHC	\$50,999	\$555		\$51,554	1.170	\$60,331	\$1.79
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$5,091,731	\$44,444	(\$332,053)	\$4,804,123	1.190	\$5,714,851	\$170.02
IP - Psych	\$2,156,598	\$15,039	(\$161,098)	\$2,010,540	1.279	\$2,570,897	\$76.49
Lab	\$107,841	\$565		\$108,406	1.417	\$153,604	\$4.57
OP - Emergency Room	\$564,525	\$4,795		\$569,320	1.221	\$695,054	\$20.68
OP - Other	\$3,103,296	\$26,359		\$3,129,654	1.221	\$3,820,836	\$113.67
Pharmacy	\$6,535,654	\$133	(\$222,197)	\$6,313,590	1.107	\$6,989,142	\$207.93
Prof - Anesthesia	\$33,315	\$362	\$509	\$34,187	1.170	\$40,008	\$1.19
Prof - Child EPSDT	\$9,861	\$107	\$151	\$10,119	1.170	\$11,842	\$0.35
Prof - Evaluation & Management	\$1,163,163	\$12,654	\$27,129	\$1,202,946	1.170	\$1,407,762	\$41.88
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$777,250	\$8,456	\$11,880	\$797,586	1.170	\$933,384	\$27.77
Prof - Psych	\$301,356	\$3,279	\$6,204	\$310,838	1.170	\$363,762	\$10.82
Prof - Specialist	\$308,727	\$3,359	\$6,034	\$318,120	1.170	\$372,284	\$11.08
Prof - Vision	\$48,184	\$524	\$736	\$49,445	1.170	\$57,863	\$1.72
Radiology	\$184,945	\$969		\$185,915	1.417	\$263,427	\$7.84
Transportation/Ambulance	\$723,181	\$3,790		\$726,971	1.417	\$1,030,065	\$30.64
Provider Incentive Payment Adjustment							\$8.84
Total	\$21,864,322	\$133,047	(\$662,704)	\$21,334,666		\$25,317,581	\$762.05
Admin Cost Adjustment							\$59.88
State Budget CAP Adjustment							(\$20.75)
Medallion II Capitation Rate							\$801.19

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$2,883,231	\$31,367		\$2,914,598	1.170	\$3,410,843	\$30.37
FQHC / RHC	\$476,667	\$5,186		\$481,853	1.170	\$563,894	\$5.02
Home Health	\$36	\$0		\$36	1.221	\$44	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$32,677,068	\$285,229	(\$2,131,005)	\$30,831,292	1.190	\$36,676,047	\$326.61
IP - Psych	\$5,107,093	\$35,615	(\$381,499)	\$4,761,209	1.279	\$6,088,205	\$54.22
Lab	\$628,970	\$3,297		\$632,267	1.417	\$895,876	\$7.98
OP - Emergency Room	\$1,995,236	\$16,947		\$2,012,183	1.221	\$2,456,572	\$21.88
OP - Other	\$20,579,631	\$174,799		\$20,754,430	1.221	\$25,338,031	\$225.64
Pharmacy	\$33,643,251	\$685	(\$1,143,791)	\$32,500,145	1.107	\$35,977,649	\$320.39
Prof - Anesthesia	\$438,691	\$4,773	\$6,705	\$450,169	1.170	\$526,816	\$4.69
Prof - Child EPSDT	\$69,654	\$758	\$1,065	\$71,477	1.170	\$83,646	\$0.74
Prof - Evaluation & Management	\$6,750,752	\$73,443	\$157,450	\$6,981,645	1.170	\$8,170,352	\$72.76
Prof - Maternity	\$297	\$3		\$300	1.170	\$352	\$0.00
Prof - Other	\$4,980,376	\$54,182	\$76,123	\$5,110,682	1.170	\$5,980,835	\$53.26
Prof - Psych	\$962,241	\$10,468	\$19,809	\$992,519	1.170	\$1,161,507	\$10.34
Prof - Specialist	\$3,198,081	\$34,793	\$62,505	\$3,295,379	1.170	\$3,856,456	\$34.34
Prof - Vision	\$320,861	\$3,491	\$4,904	\$329,256	1.170	\$385,316	\$3.43
Radiology	\$1,748,386	\$9,164		\$1,757,549	1.417	\$2,490,320	\$22.18
Transportation/Ambulance	\$2,570,591	\$13,473		\$2,584,064	1.417	\$3,661,432	\$32.61
Provider Incentive Payment Adjustment							\$14.40
Total	\$119,031,112	\$757,672	(\$3,327,732)	\$116,461,052		\$137,724,192	\$1,240.88
Admin Cost Adjustment							\$97.51
State Budget CAP Adjustment							(\$33.78)
Medallion II Capitation Rate							\$1,304.61

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

All Age Categories ²							
Richmond/Charlottesville	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$5,741,684	\$62,465	(\$164,730)	\$5,639,419	1.170	\$6,599,597	\$21.16
FQHC / RHC	\$769,124	\$8,367	\$1,640	\$779,132	1.170	\$911,788	\$2.92
Home Health	\$267	\$2		\$269	1.221	\$328	\$0.00
IP - Maternity	\$1,074,903	\$9,383	(\$70,099)	\$1,014,187	1.190	\$1,206,448	\$3.87
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$2.18
IP - Other	\$52,457,374	\$457,885	(\$3,416,796)	\$49,498,463	1.190	\$58,881,995	\$188.77
IP - Psych	\$13,016,383	\$90,772	(\$972,322)	\$12,134,832	1.279	\$15,516,930	\$49.75
Lab	\$1,242,816	\$6,514		\$1,249,330	1.417	\$1,770,210	\$5.68
OP - Emergency Room	\$4,946,675	\$42,016		\$4,988,691	1.221	\$6,090,440	\$19.53
OP - Other	\$38,038,977	\$323,095		\$38,362,073	1.221	\$46,834,308	\$150.15
Pharmacy	\$61,899,308	\$1,260	(\$2,104,430)	\$59,796,138	1.107	\$66,194,303	\$212.21
Prof - Anesthesia	\$856,304	\$9,316	\$14,154	\$879,774	1.170	\$1,029,566	\$3.30
Prof - Child EPSDT	\$197,703	\$2,151	\$3,381	\$203,234	1.170	\$237,837	\$0.76
Prof - Evaluation & Management	\$13,735,108	\$149,427	\$388,990	\$14,273,524	1.170	\$16,703,761	\$53.55
Prof - Maternity	\$471,122	\$5,125		\$476,248	1.170	\$557,335	\$1.79
Prof - Other	\$10,618,270	\$115,518	\$176,742	\$10,910,531	1.170	\$12,768,178	\$40.93
Prof - Psych	\$2,823,368	\$30,716	\$60,077	\$2,914,162	1.170	\$3,410,332	\$10.93
Prof - Specialist	\$5,077,394	\$55,238	\$101,725	\$5,234,357	1.170	\$6,125,568	\$19.64
Prof - Vision	\$651,132	\$7,084	\$10,871	\$669,087	1.170	\$783,006	\$2.51
Radiology	\$2,741,810	\$14,371		\$2,756,181	1.417	\$3,905,308	\$12.52
Transportation/Ambulance	\$4,726,572	\$24,773		\$4,751,346	1.417	\$6,732,312	\$21.58
Provider Incentive Payment Adjustment							\$9.67
Total	\$221,691,726	\$1,420,763	(\$6,010,280)	\$217,102,209		\$256,939,072	\$833.40
Admin Cost Adjustment							\$65.49
State Budget CAP Adjustment							(\$22.69)
Medallion II Capitation Rate							\$876.20

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

² Statewide Age Under 1 is included in the regional all age summaries.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$108,800	\$1,184	(\$9,094)	\$100,889	1.170	\$118,066	\$80.26
FQHC / RHC	\$27,871	\$303	\$781	\$28,955	1.170	\$33,885	\$23.04
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$461.95
IP - Other	\$905,478	\$7,904	(\$54,887)	\$858,495	1.190	\$1,021,242	\$694.25
IP - Psych	\$19,186	\$134	(\$1,433)	\$17,887	1.279	\$22,872	\$15.55
Lab	\$8,962	\$47		\$9,009	1.417	\$12,765	\$8.68
OP - Emergency Room	\$33,466	\$284		\$33,751	1.221	\$41,204	\$28.01
OP - Other	\$263,777	\$2,240		\$266,018	1.221	\$324,768	\$220.78
Pharmacy	\$400,232	\$8	(\$13,607)	\$386,633	1.107	\$428,003	\$290.96
Prof - Anesthesia	\$20,184	\$220	\$406	\$20,809	1.170	\$24,352	\$16.55
Prof - Child EPSDT	\$8,392	\$91	\$169	\$8,652	1.170	\$10,125	\$6.88
Prof - Evaluation & Management	\$383,578	\$4,173	\$16,918	\$404,668	1.170	\$473,568	\$321.94
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$334,632	\$3,641	\$6,729	\$345,002	1.170	\$403,742	\$274.47
Prof - Psych	\$5,222	\$57	\$117	\$5,396	1.170	\$6,314	\$4.29
Prof - Specialist	\$72,721	\$791	\$1,671	\$75,183	1.170	\$87,984	\$59.81
Prof - Vision	\$9,168	\$100	\$184	\$9,452	1.170	\$11,062	\$7.52
Radiology	\$12,042	\$63		\$12,105	1.417	\$17,152	\$11.66
Transportation/Ambulance	\$27,599	\$145		\$27,744	1.417	\$39,311	\$26.72
Provider Incentive Payment Adjustment							\$29.98
Total	\$3,246,738	\$26,669	(\$91,529)	\$3,181,878		\$3,755,936	\$2,583.30
Admin Cost Adjustment							\$202.99
State Budget CAP Adjustment							(\$70.33)
Medallion II Capitation Rate							\$2,715.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$287,751	\$3,131	(\$24,053)	\$266,829	1.170	\$312,260	\$38.43
FQHC / RHC	\$15,844	\$172	\$444	\$16,460	1.170	\$19,263	\$2.37
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$1,072,617	\$9,363	(\$65,366)	\$1,016,613	1.190	\$1,209,335	\$148.82
IP - Psych	\$104,885	\$731	(\$7,835)	\$97,781	1.279	\$125,034	\$15.39
Lab	\$34,923	\$183		\$35,106	1.417	\$49,743	\$6.12
OP - Emergency Room	\$72,856	\$619		\$73,475	1.221	\$89,702	\$11.04
OP - Other	\$1,010,648	\$8,584		\$1,019,232	1.221	\$1,244,329	\$153.13
Pharmacy	\$713,490	\$15	(\$24,257)	\$689,247	1.107	\$762,997	\$93.90
Prof - Anesthesia	\$44,272	\$482	\$890	\$45,644	1.170	\$53,415	\$6.57
Prof - Child EPSDT	\$12,556	\$137	\$252	\$12,945	1.170	\$15,149	\$1.86
Prof - Evaluation & Management	\$413,453	\$4,498	\$18,380	\$436,331	1.170	\$510,622	\$62.84
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$428,787	\$4,665	\$8,622	\$442,074	1.170	\$517,343	\$63.67
Prof - Psych	\$39,178	\$426	\$880	\$40,485	1.170	\$47,378	\$5.83
Prof - Specialist	\$94,540	\$1,029	\$2,172	\$97,741	1.170	\$114,383	\$14.08
Prof - Vision	\$20,917	\$228	\$421	\$21,565	1.170	\$25,237	\$3.11
Radiology	\$28,246	\$148		\$28,394	1.417	\$40,232	\$4.95
Transportation/Ambulance	\$92,538	\$485		\$93,023	1.417	\$131,807	\$16.22
Provider Incentive Payment Adjustment							\$7.61
Total	\$4,487,502	\$34,894	(\$89,448)	\$4,432,949		\$5,268,229	\$655.93
Admin Cost Adjustment							\$51.54
State Budget CAP Adjustment							(\$17.86)
Medallion II Capitation Rate							\$689.61

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$655,621	\$7,133	(\$80,899)	\$581,854	1.170	\$680,922	\$12.65
FQHC / RHC	\$194,753	\$2,119	\$5,459	\$202,330	1.170	\$236,779	\$4.40
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$213,377	\$1,863	(\$13,915)	\$201,324	1.190	\$239,490	\$4.45
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,144,184	\$36,173	(\$252,549)	\$3,927,808	1.190	\$4,672,411	\$86.82
IP - Psych	\$1,262,234	\$8,802	(\$94,289)	\$1,176,748	1.279	\$1,504,719	\$27.96
Lab	\$183,510	\$962		\$184,472	1.417	\$261,383	\$4.86
OP - Emergency Room	\$386,797	\$3,285		\$390,083	1.221	\$476,232	\$8.85
OP - Other	\$2,430,478	\$20,644		\$2,451,122	1.221	\$2,992,450	\$55.61
Pharmacy	\$6,242,664	\$127	(\$212,236)	\$6,030,555	1.107	\$6,675,823	\$124.05
Prof - Anesthesia	\$91,382	\$994	\$1,838	\$94,213	1.170	\$110,254	\$2.05
Prof - Child EPSDT	\$24,485	\$266	\$492	\$25,244	1.170	\$29,542	\$0.55
Prof - Evaluation & Management	\$1,279,186	\$13,917	\$58,383	\$1,351,485	1.170	\$1,581,591	\$29.39
Prof - Maternity	\$79,281	\$863		\$80,143	1.170	\$93,789	\$1.74
Prof - Other	\$1,005,047	\$10,934	\$20,210	\$1,036,190	1.170	\$1,212,614	\$22.53
Prof - Psych	\$463,152	\$5,039	\$10,408	\$478,599	1.170	\$560,086	\$10.41
Prof - Specialist	\$265,900	\$2,893	\$6,110	\$274,902	1.170	\$321,707	\$5.98
Prof - Vision	\$71,161	\$774	\$1,431	\$73,366	1.170	\$85,857	\$1.60
Radiology	\$117,178	\$614		\$117,792	1.417	\$166,902	\$3.10
Transportation/Ambulance	\$370,028	\$1,939		\$371,968	1.417	\$527,051	\$9.79
Provider Incentive Payment Adjustment							\$4.89
Total	\$19,480,417	\$119,341	(\$549,558)	\$19,050,199		\$22,429,605	\$421.68
Admin Cost Adjustment							\$33.14
State Budget CAP Adjustment							(\$11.48)
Medallion II Capitation Rate							\$443.33

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$537,586	\$5,849		\$543,435	1.170	\$635,961	\$20.28
FQHC / RHC	\$263,240	\$2,864		\$266,104	1.170	\$311,411	\$9.93
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$362,627	\$3,165	(\$23,648)	\$342,144	1.190	\$407,005	\$12.98
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,273,811	\$37,305	(\$260,449)	\$4,050,667	1.190	\$4,818,561	\$153.63
IP - Psych	\$993,419	\$6,928	(\$74,208)	\$926,138	1.279	\$1,184,262	\$37.76
Lab	\$245,412	\$1,286		\$246,699	1.417	\$349,554	\$11.15
OP - Emergency Room	\$609,663	\$5,178		\$614,841	1.221	\$750,629	\$23.93
OP - Other	\$3,740,175	\$31,768		\$3,771,943	1.221	\$4,604,974	\$146.82
Pharmacy	\$7,943,466	\$162	(\$270,059)	\$7,673,569	1.107	\$8,494,638	\$270.84
Prof - Anesthesia	\$116,164	\$1,264	\$1,776	\$119,203	1.170	\$139,499	\$4.45
Prof - Child EPSDT	\$38,807	\$422	\$593	\$39,822	1.170	\$46,603	\$1.49
Prof - Evaluation & Management	\$1,446,454	\$15,736	\$33,736	\$1,495,926	1.170	\$1,750,626	\$55.82
Prof - Maternity	\$136,087	\$1,481		\$137,567	1.170	\$160,990	\$5.13
Prof - Other	\$572,736	\$6,231	\$8,754	\$587,721	1.170	\$687,787	\$21.93
Prof - Psych	\$305,651	\$3,325	\$6,292	\$315,268	1.170	\$368,946	\$11.76
Prof - Specialist	\$548,445	\$5,967	\$10,719	\$565,131	1.170	\$661,352	\$21.09
Prof - Vision	\$47,531	\$517	\$726	\$48,774	1.170	\$57,079	\$1.82
Radiology	\$335,760	\$1,760		\$337,520	1.417	\$478,242	\$15.25
Transportation/Ambulance	\$558,309	\$2,926		\$561,235	1.417	\$795,229	\$25.35
Provider Incentive Payment Adjustment							\$10.00
Total	\$23,075,344	\$134,133	(\$565,768)	\$22,643,710		\$26,703,348	\$861.40
Admin Cost Adjustment							\$67.69
State Budget CAP Adjustment							(\$23.45)
Medallion II Capitation Rate							\$905.63

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$302,466	\$3,291		\$305,756	1.170	\$357,815	\$16.29
FQHC / RHC	\$126,422	\$1,375		\$127,798	1.170	\$149,557	\$6.81
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$3,530,713	\$30,819	(\$215,164)	\$3,346,367	1.190	\$3,980,746	\$181.27
IP - Psych	\$756,598	\$5,276	(\$56,518)	\$705,356	1.279	\$901,946	\$41.07
Lab	\$90,363	\$474		\$90,837	1.417	\$128,709	\$5.86
OP - Emergency Room	\$270,852	\$2,301		\$273,153	1.221	\$333,479	\$15.19
OP - Other	\$1,416,385	\$12,030		\$1,428,415	1.221	\$1,743,880	\$79.41
Pharmacy	\$4,385,609	\$89	(\$149,100)	\$4,236,598	1.107	\$4,689,913	\$213.57
Prof - Anesthesia	\$31,020	\$337	\$474	\$31,831	1.170	\$37,251	\$1.70
Prof - Child EPSDT	\$8,205	\$89	\$125	\$8,419	1.170	\$9,853	\$0.45
Prof - Evaluation & Management	\$610,064	\$6,637	\$14,229	\$630,930	1.170	\$738,353	\$33.62
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$440,138	\$4,788	\$6,727	\$451,654	1.170	\$528,553	\$24.07
Prof - Psych	\$182,339	\$1,984	\$3,754	\$188,076	1.170	\$220,098	\$10.02
Prof - Specialist	\$210,860	\$2,294	\$4,121	\$217,275	1.170	\$254,268	\$11.58
Prof - Vision	\$27,986	\$304	\$428	\$28,718	1.170	\$33,607	\$1.53
Radiology	\$114,303	\$599		\$114,903	1.417	\$162,809	\$7.41
Transportation/Ambulance	\$372,782	\$1,954		\$374,736	1.417	\$530,974	\$24.18
Provider Incentive Payment Adjustment							\$7.91
Total	\$12,877,105	\$74,642	(\$390,924)	\$12,560,824		\$14,801,811	\$681.95
Admin Cost Adjustment							\$53.59
State Budget CAP Adjustment							(\$18.57)
Medallion II Capitation Rate							\$716.97

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 45 and Over							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,999,248	\$21,750		\$2,020,998	1.170	\$2,365,097	\$27.62
FQHC / RHC	\$797,302	\$8,674		\$805,976	1.170	\$943,203	\$11.01
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$2,170	\$19	(\$142)	\$2,047	1.190	\$2,435	\$0.03
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$21,185,843	\$184,925	(\$1,291,079)	\$20,079,689	1.190	\$23,886,240	\$278.90
IP - Psych	\$2,256,313	\$15,735	(\$168,546)	\$2,103,501	1.279	\$2,689,768	\$31.41
Lab	\$709,350	\$3,718		\$713,068	1.417	\$1,010,365	\$11.80
OP - Emergency Room	\$1,134,610	\$9,637		\$1,144,247	1.221	\$1,396,953	\$16.31
OP - Other	\$12,692,147	\$107,804		\$12,799,952	1.221	\$15,626,812	\$182.46
Pharmacy	\$24,689,656	\$503	(\$839,390)	\$23,850,768	1.107	\$26,402,792	\$308.28
Prof - Anesthesia	\$275,697	\$2,999	\$4,214	\$282,910	1.170	\$331,079	\$3.87
Prof - Child EPSDT	\$51,103	\$556	\$781	\$52,440	1.170	\$61,368	\$0.72
Prof - Evaluation & Management	\$4,459,604	\$48,517	\$104,013	\$4,612,134	1.170	\$5,397,404	\$63.02
Prof - Maternity	\$29	\$0		\$29	1.170	\$34	\$0.00
Prof - Other	\$2,306,904	\$25,097	\$35,260	\$2,367,261	1.170	\$2,770,315	\$32.35
Prof - Psych	\$600,368	\$6,532	\$12,360	\$619,259	1.170	\$724,696	\$8.46
Prof - Specialist	\$2,150,236	\$23,393	\$42,026	\$2,215,654	1.170	\$2,592,895	\$30.27
Prof - Vision	\$232,857	\$2,533	\$3,559	\$238,950	1.170	\$279,633	\$3.27
Radiology	\$1,116,175	\$5,850		\$1,122,025	1.417	\$1,589,828	\$18.56
Transportation/Ambulance	\$1,524,762	\$7,992		\$1,532,754	1.417	\$2,171,801	\$25.36
Provider Incentive Payment Adjustment							\$12.37
Total	\$78,184,372	\$476,234	(\$2,096,944)	\$76,563,663		\$90,242,719	\$1,066.05
Admin Cost Adjustment							\$83.77
State Budget CAP Adjustment							(\$29.02)
Medallion II Capitation Rate							\$1,120.80

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

All Age Categories ²							
Rural	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$3,891,472	\$42,336	(\$114,046)	\$3,819,762	1.170	\$4,470,121	\$22.09
FQHC / RHC	\$1,425,432	\$15,508	\$6,684	\$1,447,623	1.170	\$1,694,098	\$8.37
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$578,174	\$5,047	(\$37,705)	\$545,515	1.190	\$648,930	\$3.21
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$3.36
IP - Other	\$35,112,646	\$306,488	(\$2,139,494)	\$33,279,640	1.190	\$39,588,534	\$195.61
IP - Psych	\$5,392,634	\$37,607	(\$402,829)	\$5,027,411	1.279	\$6,428,601	\$31.76
Lab	\$1,272,520	\$6,670		\$1,279,190	1.417	\$1,812,519	\$8.96
OP - Emergency Room	\$2,508,245	\$21,305		\$2,529,550	1.221	\$3,088,199	\$15.26
OP - Other	\$21,553,610	\$183,072		\$21,736,682	1.221	\$26,537,212	\$131.12
Pharmacy	\$44,375,117	\$903	(\$1,508,649)	\$42,867,372	1.107	\$47,454,165	\$234.48
Prof - Anesthesia	\$578,718	\$6,296	\$9,597	\$594,611	1.170	\$695,850	\$3.44
Prof - Child EPSDT	\$143,548	\$1,562	\$2,413	\$147,523	1.170	\$172,640	\$0.85
Prof - Evaluation & Management	\$8,592,338	\$93,478	\$245,659	\$8,931,475	1.170	\$10,452,164	\$51.65
Prof - Maternity	\$215,397	\$2,343		\$217,740	1.170	\$254,813	\$1.26
Prof - Other	\$5,088,243	\$55,356	\$86,303	\$5,229,902	1.170	\$6,120,354	\$30.24
Prof - Psych	\$1,595,910	\$17,362	\$33,811	\$1,647,084	1.170	\$1,927,519	\$9.52
Prof - Specialist	\$3,342,702	\$36,366	\$66,819	\$3,445,886	1.170	\$4,032,589	\$19.93
Prof - Vision	\$409,620	\$4,456	\$6,749	\$420,825	1.170	\$492,476	\$2.43
Radiology	\$1,723,705	\$9,034		\$1,732,739	1.417	\$2,455,166	\$12.13
Transportation/Ambulance	\$2,946,019	\$15,441		\$2,961,460	1.417	\$4,196,173	\$20.73
Provider Incentive Payment Adjustment							\$9.47
Total	\$141,351,479	\$865,913	(\$3,784,170)	\$138,433,222		\$163,201,647	\$815.87
Admin Cost Adjustment							\$64.11
State Budget CAP Adjustment							(\$22.21)
Medallion II Capitation Rate							\$857.77

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

² Statewide Age Under 1 is included in the regional all age summaries.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$108,800	\$1,184	(\$9,094)	\$100,889	1.170	\$118,066	\$80.26
FQHC / RHC	\$27,871	\$303	\$781	\$28,955	1.170	\$33,885	\$23.04
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$461.95
IP - Other	\$905,478	\$7,904	(\$54,887)	\$858,495	1.190	\$1,021,242	\$694.25
IP - Psych	\$19,186	\$134	(\$1,433)	\$17,887	1.279	\$22,872	\$15.55
Lab	\$8,962	\$47		\$9,009	1.417	\$12,765	\$8.68
OP - Emergency Room	\$33,466	\$284		\$33,751	1.221	\$41,204	\$28.01
OP - Other	\$263,777	\$2,240		\$266,018	1.221	\$324,768	\$220.78
Pharmacy	\$400,232	\$8	(\$13,607)	\$386,633	1.107	\$428,003	\$290.96
Prof - Anesthesia	\$20,184	\$220	\$406	\$20,809	1.170	\$24,352	\$16.55
Prof - Child EPSDT	\$8,392	\$91	\$169	\$8,652	1.170	\$10,125	\$6.88
Prof - Evaluation & Management	\$383,578	\$4,173	\$16,918	\$404,668	1.170	\$473,568	\$321.94
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$334,632	\$3,641	\$6,729	\$345,002	1.170	\$403,742	\$274.47
Prof - Psych	\$5,222	\$57	\$117	\$5,396	1.170	\$6,314	\$4.29
Prof - Specialist	\$72,721	\$791	\$1,671	\$75,183	1.170	\$87,984	\$59.81
Prof - Vision	\$9,168	\$100	\$184	\$9,452	1.170	\$11,062	\$7.52
Radiology	\$12,042	\$63		\$12,105	1.417	\$17,152	\$11.66
Transportation/Ambulance	\$27,599	\$145		\$27,744	1.417	\$39,311	\$26.72
Provider Incentive Payment Adjustment							\$29.98
Total	\$3,246,738	\$26,669	(\$91,529)	\$3,181,878		\$3,755,936	\$2,583.30
Admin Cost Adjustment							\$202.99
State Budget CAP Adjustment							(\$70.33)
Medallion II Capitation Rate							\$2,715.96

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$503,791	\$5,481	(\$42,111)	\$467,161	1.170	\$546,700	\$37.59
FQHC / RHC	\$20,320	\$221	\$570	\$21,111	1.170	\$24,705	\$1.70
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$2,176,378	\$18,997	(\$141,930)	\$2,053,445	1.190	\$2,442,721	\$167.94
IP - Psych	\$247,958	\$1,729	(\$18,522)	\$231,165	1.279	\$295,593	\$20.32
Lab	\$46,976	\$246		\$47,222	1.417	\$66,910	\$4.60
OP - Emergency Room	\$184,264	\$1,565		\$185,829	1.221	\$226,869	\$15.60
OP - Other	\$2,514,024	\$21,354		\$2,535,378	1.221	\$3,095,314	\$212.81
Pharmacy	\$1,291,224	\$26	(\$43,899)	\$1,247,352	1.107	\$1,380,818	\$94.93
Prof - Anesthesia	\$101,840	\$1,108	\$2,048	\$104,995	1.170	\$122,872	\$8.45
Prof - Child EPSDT	\$26,407	\$287	\$531	\$27,226	1.170	\$31,861	\$2.19
Prof - Evaluation & Management	\$880,145	\$9,575	\$39,128	\$928,848	1.170	\$1,086,995	\$74.73
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$1,414,527	\$15,389	\$28,444	\$1,458,360	1.170	\$1,706,663	\$117.34
Prof - Psych	\$78,642	\$856	\$1,767	\$81,265	1.170	\$95,101	\$6.54
Prof - Specialist	\$225,749	\$2,456	\$5,187	\$233,392	1.170	\$273,130	\$18.78
Prof - Vision	\$32,106	\$349	\$646	\$33,101	1.170	\$38,737	\$2.66
Radiology	\$40,381	\$212		\$40,593	1.417	\$57,517	\$3.95
Transportation/Ambulance	\$62,852	\$329		\$63,181	1.417	\$89,523	\$6.15
Provider Incentive Payment Adjustment							\$9.35
Total	\$9,847,584	\$80,181	(\$168,143)	\$9,759,622		\$11,582,029	\$805.64
Admin Cost Adjustment							\$63.31
State Budget CAP Adjustment							(\$21.93)
Medallion II Capitation Rate							\$847.01

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
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Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$1,116,141	\$12,143	(\$137,724)	\$990,560	1.170	\$1,159,215	\$10.24
FQHC / RHC	\$85,267	\$928	\$2,390	\$88,585	1.170	\$103,667	\$0.92
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$396,598	\$3,462	(\$25,864)	\$374,196	1.190	\$445,133	\$3.93
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,358,146	\$38,041	(\$284,212)	\$4,111,975	1.190	\$4,891,491	\$43.20
IP - Psych	\$2,585,514	\$18,031	(\$193,138)	\$2,410,407	1.279	\$3,082,211	\$27.22
Lab	\$221,693	\$1,162		\$222,855	1.417	\$315,769	\$2.79
OP - Emergency Room	\$1,101,834	\$9,359		\$1,111,193	1.221	\$1,356,599	\$11.98
OP - Other	\$6,595,085	\$56,017		\$6,651,102	1.221	\$8,119,993	\$71.71
Pharmacy	\$11,591,720	\$236	(\$394,091)	\$11,197,865	1.107	\$12,396,033	\$109.47
Prof - Anesthesia	\$208,493	\$2,268	\$4,192	\$214,954	1.170	\$251,552	\$2.22
Prof - Child EPSDT	\$60,511	\$658	\$1,217	\$62,386	1.170	\$73,008	\$0.64
Prof - Evaluation & Management	\$2,584,550	\$28,118	\$117,960	\$2,730,628	1.170	\$3,195,550	\$28.22
Prof - Maternity	\$186,347	\$2,027		\$188,374	1.170	\$220,447	\$1.95
Prof - Other	\$3,717,085	\$40,439	\$74,744	\$3,832,268	1.170	\$4,484,757	\$39.60
Prof - Psych	\$1,046,271	\$11,383	\$23,512	\$1,081,165	1.170	\$1,265,247	\$11.17
Prof - Specialist	\$600,869	\$6,537	\$13,806	\$621,212	1.170	\$726,981	\$6.42
Prof - Vision	\$147,453	\$1,604	\$2,965	\$152,022	1.170	\$177,906	\$1.57
Radiology	\$241,964	\$1,268		\$243,232	1.417	\$344,642	\$3.04
Transportation/Ambulance	\$416,781	\$2,184		\$418,965	1.417	\$593,644	\$5.24
Provider Incentive Payment Adjustment							\$4.48
Total	\$37,262,321	\$235,865	(\$794,242)	\$36,703,944		\$43,203,843	\$386.00
Admin Cost Adjustment							\$30.33
State Budget CAP Adjustment							(\$10.51)
Medallion II Capitation Rate							\$405.82

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 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 FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$921,640	\$10,027		\$931,666	1.170	\$1,090,294	\$18.38
FQHC / RHC	\$277,477	\$3,019		\$280,495	1.170	\$328,253	\$5.53
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$759,097	\$6,626	(\$49,504)	\$716,219	1.190	\$851,994	\$14.36
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$6,714,077	\$58,605	(\$437,852)	\$6,334,830	1.190	\$7,535,738	\$127.02
IP - Psych	\$2,197,917	\$15,328	(\$164,184)	\$2,049,060	1.279	\$2,620,154	\$44.17
Lab	\$196,120	\$1,028		\$197,148	1.417	\$279,344	\$4.71
OP - Emergency Room	\$2,162,113	\$18,365		\$2,180,477	1.221	\$2,662,034	\$44.87
OP - Other	\$7,077,314	\$60,113		\$7,137,428	1.221	\$8,713,723	\$146.88
Pharmacy	\$12,672,325	\$258	(\$430,829)	\$12,241,754	1.107	\$13,551,617	\$228.43
Prof - Anesthesia	\$217,585	\$2,367	\$3,326	\$223,278	1.170	\$261,293	\$4.40
Prof - Child EPSDT	\$108,461	\$1,180	\$1,658	\$111,299	1.170	\$130,249	\$2.20
Prof - Evaluation & Management	\$3,026,851	\$32,930	\$70,596	\$3,130,377	1.170	\$3,663,360	\$61.75
Prof - Maternity	\$317,160	\$3,450		\$320,610	1.170	\$375,198	\$6.32
Prof - Other	\$2,362,384	\$25,701	\$36,108	\$2,424,193	1.170	\$2,836,940	\$47.82
Prof - Psych	\$606,607	\$6,599	\$12,488	\$625,695	1.170	\$732,227	\$12.34
Prof - Specialist	\$1,030,848	\$11,215	\$20,148	\$1,062,211	1.170	\$1,243,065	\$20.95
Prof - Vision	\$96,982	\$1,055	\$1,482	\$99,520	1.170	\$116,464	\$1.96
Radiology	\$639,177	\$3,350		\$642,527	1.417	\$910,414	\$15.35
Transportation/Ambulance	\$498,518	\$2,613		\$501,130	1.417	\$710,065	\$11.97
Provider Incentive Payment Adjustment							\$9.62
Total	\$41,882,651	\$263,828	(\$936,563)	\$41,209,916		\$48,612,426	\$829.05
Admin Cost Adjustment							\$65.15
State Budget CAP Adjustment							(\$22.57)
Medallion II Capitation Rate							\$871.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

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FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$935,666	\$10,179		\$945,846	1.170	\$1,106,887	\$27.45
FQHC / RHC	\$120,057	\$1,306		\$121,363	1.170	\$142,027	\$3.52
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$4,609,279	\$40,233	(\$300,590)	\$4,348,922	1.190	\$5,173,357	\$128.27
IP - Psych	\$1,720,259	\$11,997	(\$128,503)	\$1,603,753	1.279	\$2,050,734	\$50.85
Lab	\$76,190	\$399		\$76,589	1.417	\$108,522	\$2.69
OP - Emergency Room	\$902,948	\$7,669		\$910,617	1.221	\$1,111,726	\$27.57
OP - Other	\$4,376,380	\$37,172		\$4,413,552	1.221	\$5,388,282	\$133.60
Pharmacy	\$7,781,759	\$158	(\$264,561)	\$7,517,356	1.107	\$8,321,710	\$206.34
Prof - Anesthesia	\$67,126	\$730	\$1,026	\$68,882	1.170	\$80,610	\$2.00
Prof - Child EPSDT	\$17,742	\$193	\$271	\$18,206	1.170	\$21,306	\$0.53
Prof - Evaluation & Management	\$1,400,757	\$15,239	\$32,670	\$1,448,667	1.170	\$1,695,319	\$42.04
Prof - Maternity	\$0			\$0	1.170	\$0	\$0.00
Prof - Other	\$1,890,799	\$20,570	\$28,900	\$1,940,270	1.170	\$2,270,623	\$56.30
Prof - Psych	\$350,677	\$3,815	\$7,219	\$361,712	1.170	\$423,297	\$10.50
Prof - Specialist	\$417,374	\$4,541	\$8,157	\$430,072	1.170	\$503,297	\$12.48
Prof - Vision	\$54,162	\$589	\$828	\$55,579	1.170	\$65,042	\$1.61
Radiology	\$261,335	\$1,370		\$262,705	1.417	\$372,234	\$9.23
Transportation/Ambulance	\$345,027	\$1,808		\$346,836	1.417	\$491,441	\$12.19
Provider Incentive Payment Adjustment							\$8.54
Total	\$25,327,537	\$157,970	(\$614,582)	\$24,870,925		\$29,326,414	\$735.68
Admin Cost Adjustment							\$57.81
State Budget CAP Adjustment							(\$20.03)
Medallion II Capitation Rate							\$773.46

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
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Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 45 and Over							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$3,809,948	\$41,449.15		\$3,851,397	1.170	\$4,507,143	\$32.74
FQHC / RHC	\$907,067	\$9,868		\$916,935	1.170	\$1,073,054	\$7.80
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$0			\$0	1.190	\$0	\$0.00
IP - Newborn	\$0			\$0	1.190	\$0	\$0.00
IP - Other	\$32,891,055	\$287,096	(\$2,144,960)	\$31,033,192	1.190	\$36,916,222	\$268.18
IP - Psych	\$4,093,439	\$28,546	(\$305,779)	\$3,816,206	1.279	\$4,879,820	\$35.45
Lab	\$506,169	\$2,653		\$508,822	1.417	\$720,964	\$5.24
OP - Emergency Room	\$3,554,125	\$30,188		\$3,584,313	1.221	\$4,375,906	\$31.79
OP - Other	\$23,428,918	\$199,000		\$23,627,918	1.221	\$28,846,127	\$209.55
Pharmacy	\$41,854,314	\$852	(\$1,422,947)	\$40,432,219	1.107	\$44,758,451	\$325.15
Prof - Anesthesia	\$577,551	\$6,283	\$8,828	\$592,661	1.170	\$693,569	\$5.04
Prof - Child EPSDT	\$124,507	\$1,355	\$1,903	\$127,765	1.170	\$149,518	\$1.09
Prof - Evaluation & Management	\$9,415,848	\$102,437	\$219,610	\$9,737,894	1.170	\$11,395,886	\$82.79
Prof - Maternity	\$129	\$1		\$131	1.170	\$153	\$0.00
Prof - Other	\$9,226,808	\$100,380	\$141,029	\$9,468,217	1.170	\$11,080,293	\$80.49
Prof - Psych	\$1,152,299	\$12,536	\$23,722	\$1,188,557	1.170	\$1,390,923	\$10.10
Prof - Specialist	\$4,196,180	\$45,651	\$82,013	\$4,323,844	1.170	\$5,060,030	\$36.76
Prof - Vision	\$419,177	\$4,560	\$6,407	\$430,144	1.170	\$503,381	\$3.66
Radiology	\$2,137,420	\$11,203		\$2,148,623	1.417	\$3,044,443	\$22.12
Transportation/Ambulance	\$1,307,883	\$6,855		\$1,314,738	1.417	\$1,862,889	\$13.53
Provider Incentive Payment Adjustment							\$13.75
Total	\$139,602,837	\$890,915	(\$3,390,175)	\$137,103,576		\$161,258,770	\$1,185.22
Admin Cost Adjustment							\$93.13
State Budget CAP Adjustment							(\$32.27)
Medallion II Capitation Rate							\$1,246.08

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

Virginia Medicaid
FY 2010 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

All Age Categories ²							
Tidewater	Total Base Claims FY07-08	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY07-08	Trend Adjustment	Completed & Trended Claims FY10	PMPM FY10
Service Type							
DME/Supplies	\$7,395,986	\$80,462	(\$188,929)	\$7,287,519	1.170	\$8,528,305	\$23.27
FQHC / RHC	\$1,438,058	\$15,645	\$3,741	\$1,457,443	1.170	\$1,705,590	\$4.65
Home Health	\$0			\$0	1.221	\$0	\$0.00
IP - Maternity	\$1,155,695	\$10,088	(\$75,368)	\$1,090,415	1.190	\$1,297,127	\$3.54
IP - Newborn	\$605,430	\$5,285	(\$39,483)	\$571,232	1.190	\$679,522	\$1.85
IP - Other	\$51,654,413	\$450,876	(\$3,364,431)	\$48,740,858	1.190	\$57,980,769	\$158.17
IP - Psych	\$10,864,273	\$75,764	(\$811,560)	\$10,128,477	1.279	\$12,951,384	\$35.33
Lab	\$1,056,109	\$5,535		\$1,061,644	1.417	\$1,504,273	\$4.10
OP - Emergency Room	\$7,938,750	\$67,430		\$8,006,180	1.221	\$9,774,339	\$26.66
OP - Other	\$44,255,498	\$375,897		\$44,631,396	1.221	\$54,488,207	\$148.64
Pharmacy	\$75,591,574	\$1,539	(\$2,569,934)	\$73,023,178	1.107	\$80,836,632	\$220.52
Prof - Anesthesia	\$1,192,777	\$12,976	\$19,826	\$1,225,579	1.170	\$1,434,248	\$3.91
Prof - Child EPSDT	\$346,020	\$3,764	\$5,749	\$355,533	1.170	\$416,067	\$1.14
Prof - Evaluation & Management	\$17,691,728	\$192,472	\$496,882	\$18,381,082	1.170	\$21,510,678	\$58.68
Prof - Maternity	\$503,636	\$5,479		\$509,115	1.170	\$595,798	\$1.63
Prof - Other	\$18,946,236	\$206,120	\$315,954	\$19,468,310	1.170	\$22,783,019	\$62.15
Prof - Psych	\$3,239,718	\$35,246	\$68,826	\$3,343,789	1.170	\$3,913,109	\$10.67
Prof - Specialist	\$6,543,742	\$71,191	\$130,982	\$6,745,915	1.170	\$7,894,486	\$21.54
Prof - Vision	\$759,048	\$8,258	\$12,512	\$779,818	1.170	\$912,592	\$2.49
Radiology	\$3,332,319	\$17,466		\$3,349,785	1.417	\$4,746,402	\$12.95
Transportation/Ambulance	\$2,658,660	\$13,935		\$2,672,594	1.417	\$3,786,872	\$10.33
Provider Incentive Payment Adjustment							\$9.54
Total	\$257,169,670	\$1,655,427	(\$5,995,234)	\$252,829,862		\$297,739,418	\$821.77
Admin Cost Adjustment							\$64.57
State Budget CAP Adjustment							(\$22.37)
Medallion II Capitation Rate							\$863.97

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.

² Statewide Age Under 1 is included in the regional all age summaries.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Summary of FY 2010 Base Capitation Rates
Before CDPS Adjustment**

Exhibit 5a

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,715.96	\$2,715.96	\$2,715.96	\$2,715.96	\$2,715.96	\$2,715.96
	1-5	\$954.06	\$1,046.48	\$723.56	\$689.61	\$847.01	\$838.19
	6-14	\$625.19	\$387.91	\$363.45	\$443.33	\$405.82	\$416.13
	Female 15-20	\$625.19	\$387.91	\$363.45	\$443.33	\$405.82	\$417.19
	Female 21-44	\$1,048.09	\$899.92	\$1,000.51	\$905.63	\$871.62	\$934.43
	Male 15-20	\$625.19	\$387.91	\$363.45	\$443.33	\$405.82	\$415.65
	Male 21-44	\$884.62	\$694.92	\$801.19	\$716.97	\$773.46	\$773.00
	Over 44	\$1,091.59	\$1,145.21	\$1,304.61	\$1,120.80	\$1,246.08	\$1,195.73
	Average	\$967.88	\$859.47	\$868.31	\$843.46	\$861.67	\$874.05
Temporary Assistance for Needy Families	Under 1	\$366.23	\$450.32	\$503.31	\$512.73	\$522.44	\$464.16
	1-5	\$122.14	\$112.00	\$133.65	\$121.51	\$120.07	\$122.47
	6-14	\$102.39	\$102.76	\$102.14	\$108.09	\$102.74	\$103.29
	Female 15-20	\$216.65	\$295.64	\$241.11	\$272.97	\$233.18	\$247.32
	Female 21-44	\$506.96	\$502.14	\$449.74	\$522.07	\$419.56	\$466.62
	Male 15-20	\$102.56	\$128.98	\$116.62	\$124.52	\$128.63	\$119.91
	Male 21-44	\$308.30	\$378.02	\$283.00	\$412.55	\$326.71	\$342.10
	Over 44	\$589.93	\$606.82	\$542.21	\$633.61	\$607.78	\$591.39
	Average	\$177.52	\$212.96	\$207.67	\$218.33	\$202.03	\$201.84
Weighted Average		\$238.06	\$296.97	\$295.78	\$304.10	\$290.74	\$283.71

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Comparison of FY 2009 and FY 2010 Base Capitation Rates
Before CDPS Adjustment

Exhibit 5b

Aid Category	Age Group	Region								
		FY 2009	FY 2010	% Change 2009-2010	FY 2009	FY 2010	% Change 2009-2010	FY 2009	FY 2010	% Change 2009-2010
		Northern Virginia			Other MSA			Richmond/Charlottesville		
Aged, Blind, and Disabled	Under 1	\$2,824.21	\$2,715.96	-3.83%	\$2,824.21	\$2,715.96	-3.83%	\$2,824.21	\$2,715.96	-3.83%
	1-5	\$863.82	\$954.06	10.45%	\$893.22	\$1,046.48	17.16%	\$696.69	\$723.56	3.86%
	6-14	\$621.05	\$625.19	0.67%	\$363.05	\$387.91	6.85%	\$347.08	\$363.45	4.71%
	Female 15-20	\$621.05	\$625.19	0.67%	\$363.05	\$387.91	6.85%	\$347.08	\$363.45	4.71%
	Female 21-44	\$921.93	\$1,048.09	13.68%	\$836.74	\$899.92	7.55%	\$964.54	\$1,000.51	3.73%
	Male 15-20	\$621.05	\$625.19	0.67%	\$363.05	\$387.91	6.85%	\$347.08	\$363.45	4.71%
	Male 21-44	\$759.18	\$884.62	16.52%	\$655.37	\$694.92	6.03%	\$764.55	\$801.19	4.79%
	Over 44	\$1,049.93	\$1,091.59	3.97%	\$1,049.80	\$1,145.21	9.09%	\$1,206.09	\$1,304.61	8.17%
	Average	\$910.95	\$967.88	6.25%	\$791.77	\$859.47	8.55%	\$816.12	\$868.31	6.39%
Temporary Assistance for Needy Families	Under 1	\$351.70	\$366.23	4.13%	\$452.20	\$450.32	-0.42%	\$536.33	\$503.31	-6.16%
	1-5	\$108.57	\$122.14	12.50%	\$107.21	\$112.00	4.46%	\$120.46	\$133.65	10.95%
	6-14	\$92.20	\$102.39	11.06%	\$94.53	\$102.76	8.70%	\$91.08	\$102.14	12.15%
	Female 15-20	\$205.84	\$216.65	5.25%	\$287.69	\$295.64	2.76%	\$233.42	\$241.11	3.29%
	Female 21-44	\$476.14	\$506.96	6.47%	\$494.37	\$502.14	1.57%	\$428.70	\$449.74	4.91%
	Male 15-20	\$87.61	\$102.56	17.07%	\$109.29	\$128.98	18.02%	\$97.18	\$116.62	20.00%
	Male 21-44	\$311.23	\$308.30	-0.94%	\$326.93	\$378.02	15.63%	\$298.66	\$283.00	-5.24%
	Over 44	\$532.94	\$589.93	10.69%	\$625.06	\$606.82	-2.92%	\$496.27	\$542.21	9.26%
	Average	\$163.42	\$177.52	8.63%	\$205.74	\$212.96	3.51%	\$196.80	\$207.67	5.52%
Weighted Average		\$220.68	\$238.06	7.88%	\$281.89	\$296.97	5.35%	\$279.41	\$295.78	5.86%

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
Comparison of FY 2009 and FY 2010 Base Capitation Rates
Before CDPS Adjustment

Exhibit 5b

Aid Category	Age Group	Region								
		FY 2009	FY 2010	% Change 2009-2010	FY 2009	FY 2010	% Change 2009-2010	FY 2009	FY 2010	% Change 2009-2010
		Rural			Tidewater			Weighted Average		
Aged, Blind, and Disabled	Under 1	\$2,824.21	\$2,715.96	-3.83%	\$2,824.21	\$2,715.96	-3.83%	\$2,824.21	\$2,715.96	-3.83%
	1-5	\$725.59	\$689.61	-4.96%	\$903.64	\$847.01	-6.27%	\$820.64	\$838.19	2.14%
	6-14	\$404.16	\$443.33	9.69%	\$374.13	\$405.82	8.47%	\$391.25	\$416.13	6.36%
	Female 15-20	\$404.16	\$443.33	9.69%	\$374.13	\$405.82	8.47%	\$392.36	\$417.19	6.33%
	Female 21-44	\$848.76	\$905.63	6.70%	\$851.74	\$871.62	2.33%	\$885.09	\$934.43	5.57%
	Male 15-20	\$404.16	\$443.33	9.69%	\$374.13	\$405.82	8.47%	\$390.81	\$415.65	6.36%
	Male 21-44	\$664.27	\$716.97	7.93%	\$722.84	\$773.46	7.00%	\$716.78	\$773.00	7.84%
	Over 44	\$1,063.67	\$1,120.80	5.37%	\$1,197.72	\$1,246.08	4.04%	\$1,127.99	\$1,195.73	6.01%
	Average	\$795.86	\$843.46	5.98%	\$827.11	\$861.67	4.18%	\$824.65	\$874.05	5.99%
Temporary Assistance for Needy Families	Under 1	\$497.99	\$512.73	2.96%	\$561.95	\$522.44	-7.03%	\$474.44	\$464.16	-2.17%
	1-5	\$112.12	\$121.51	8.37%	\$108.21	\$120.07	10.96%	\$111.28	\$122.47	10.06%
	6-14	\$94.35	\$108.09	14.57%	\$91.35	\$102.74	12.46%	\$92.36	\$103.29	11.84%
	Female 15-20	\$264.02	\$272.97	3.39%	\$228.76	\$233.18	1.93%	\$239.76	\$247.32	3.15%
	Female 21-44	\$502.95	\$522.07	3.80%	\$405.34	\$419.56	3.51%	\$448.72	\$466.62	3.99%
	Male 15-20	\$111.29	\$124.52	11.90%	\$110.99	\$128.63	15.89%	\$102.75	\$119.91	16.70%
	Male 21-44	\$368.73	\$412.55	11.88%	\$282.71	\$326.71	15.56%	\$317.88	\$342.10	7.62%
	Over 44	\$588.58	\$633.61	7.65%	\$582.94	\$607.78	4.26%	\$558.24	\$591.39	5.94%
	Average	\$204.63	\$218.33	6.69%	\$193.01	\$202.03	4.67%	\$190.88	\$201.84	5.74%
Weighted Average		\$285.75	\$304.10	6.42%	\$278.28	\$290.74	4.48%	\$268.07	\$283.71	5.83%

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Health Plan Encounter Data
February 2009 Member Month Distribution**

Exhibit 5c

Aid Category	Age Group	Region					Regional Total
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	7	12	3	8	19	49
	1-5	229	356	439	378	658	2,060
	6-14	759	1,191	2,519	1,309	2,715	8,493
	Female 15-20	234	327	736	377	826	2,500
	Female 21-44	911	1,469	2,099	1,311	2,449	8,239
	Male 15-20	386	616	1,332	692	1,364	4,390
	Male 21-44	884	1,103	1,497	992	1,781	6,257
	Over 44	3,751	3,638	5,035	3,745	6,095	22,264
Aid Category Total		7,161	8,712	13,660	8,812	15,907	54,252
Temporary Assistance for Needy Families	Under 1	7,223	4,423	5,542	3,776	6,318	27,282
	1-5	30,484	17,365	24,596	16,003	28,039	116,487
	6-14	30,506	19,534	31,120	19,433	36,233	136,826
	Female 15-20	5,222	4,302	6,927	4,300	8,126	28,877
	Female 21-44	6,931	8,099	13,235	7,167	15,749	51,181
	Male 15-20	4,437	3,081	5,164	3,205	5,875	21,762
	Male 21-44	595	804	866	759	719	3,743
	Over 44	932	722	1,301	774	1,315	5,044
Aid Category Total		86,330	58,330	88,751	55,417	102,374	391,202
Total		93,491	67,042	102,411	64,229	118,281	445,454

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 CDPS Rates Summary of Difference in Implied Cost**

Exhibit 6

	Aged, Blind, and Disabled				
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater
AMERIGROUP Virginia	-1.9%	0.0%	0.0%	0.0%	0.0%
Anthem Blue Cross and Blue Shield (and UniCare)	0.6%	-0.4%	-8.3%	-5.5%	-3.4%
CareNet/Southern Health Services	0.0%	-0.4%	-2.9%	0.0%	0.0%
Optima Family Care	2.2%	-9.2%	-0.2%	-0.4%	3.6%
Virginia Premier Health Plan	2.2%	3.3%	11.2%	3.3%	-3.8%

	Temporary Assistance for Needy Families				
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater
AMERIGROUP Virginia	-6.3%	0.0%	0.0%	0.1%	0.0%
Anthem Blue Cross and Blue Shield (and UniCare)	0.5%	-10.5%	-0.5%	-4.2%	-0.8%
CareNet/Southern Health Services	0.0%	-3.6%	-1.3%	2.3%	0.0%
Optima Family Care	23.6%	-6.0%	-2.1%	-3.3%	1.4%
Virginia Premier Health Plan	8.4%	2.7%	3.8%	4.1%	-3.0%

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Amerigroup Medallion II Capitation Rates
 With CDPS Adjustment**

Exhibit 7a

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,663.17	\$2,715.96	\$2,715.96	\$2,714.86	\$2,715.96	\$2,705.18
	1-5	\$935.52	\$1,046.48	\$723.56	\$689.33	\$847.01	\$923.21
	6-14	\$613.04	\$387.91	\$363.45	\$443.15	\$405.82	\$609.60
	Female 15-20	\$613.04	\$387.91	\$363.45	\$443.15	\$405.82	\$610.11
	Female 21-44	\$1,027.72	\$899.92	\$1,000.51	\$905.26	\$871.62	\$1,025.11
	Male 15-20	\$613.04	\$387.91	\$363.45	\$443.15	\$405.82	\$604.95
	Male 21-44	\$867.42	\$694.92	\$801.19	\$716.68	\$773.46	\$863.59
	Over 44	\$1,070.37	\$1,145.21	\$1,304.61	\$1,120.34	\$1,246.08	\$1,071.09
	Average	\$970.43	\$958.28	\$954.52	\$859.30	\$958.95	\$968.28
Temporary Assistance for Needy Families	Under 1	\$343.25	\$450.32	\$503.31	\$513.26	\$522.44	\$348.38
	1-5	\$114.47	\$112.00	\$133.65	\$121.63	\$120.07	\$114.64
	6-14	\$95.97	\$102.76	\$102.14	\$108.20	\$102.74	\$96.27
	Female 15-20	\$203.06	\$295.64	\$241.11	\$273.25	\$233.18	\$204.47
	Female 21-44	\$475.15	\$502.14	\$449.74	\$522.61	\$419.56	\$477.74
	Male 15-20	\$96.13	\$128.98	\$116.62	\$124.65	\$128.63	\$96.60
	Male 21-44	\$288.96	\$378.02	\$283.00	\$412.97	\$326.71	\$293.80
	Over 44	\$552.91	\$606.82	\$542.21	\$634.26	\$607.78	\$554.37
	Average	\$168.47	\$322.08	\$296.47	\$238.49	\$307.64	\$170.32
Weighted Average		\$241.61	\$640.18	\$625.50	\$280.60	\$633.30	\$242.61

Note:
 Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Anthem Medallion II Capitation Rates
With CDPS Adjustment**

Exhibit 7b

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,731.18	\$2,705.29	\$2,490.97	\$2,566.12	\$2,624.70	\$2,669.34
	1-5	\$959.41	\$1,042.36	\$663.62	\$651.57	\$818.55	\$797.99
	6-14	\$628.70	\$386.39	\$333.34	\$418.87	\$392.19	\$422.23
	Female 15-20	\$628.70	\$386.39	\$333.34	\$418.87	\$392.19	\$421.33
	Female 21-44	\$1,053.97	\$896.38	\$917.62	\$855.67	\$842.33	\$916.00
	Male 15-20	\$628.70	\$386.39	\$333.34	\$418.87	\$392.19	\$417.01
	Male 21-44	\$889.57	\$692.19	\$734.82	\$677.41	\$747.47	\$776.13
	Over 44	\$1,097.71	\$1,140.71	\$1,196.53	\$1,058.97	\$1,204.21	\$1,152.08
	Average	\$969.63	\$858.80	\$771.88	\$809.77	\$851.22	\$857.89
Temporary Assistance for Needy Families	Under 1	\$368.12	\$402.98	\$500.74	\$491.09	\$518.06	\$440.20
	1-5	\$122.77	\$100.23	\$132.97	\$116.38	\$119.07	\$123.31
	6-14	\$102.92	\$91.96	\$101.62	\$103.53	\$101.87	\$102.31
	Female 15-20	\$217.77	\$264.57	\$239.88	\$261.45	\$231.22	\$231.44
	Female 21-44	\$509.58	\$449.36	\$447.45	\$500.04	\$416.04	\$457.37
	Male 15-20	\$103.09	\$115.42	\$116.02	\$119.27	\$127.55	\$114.14
	Male 21-44	\$309.90	\$338.29	\$281.55	\$395.13	\$323.97	\$314.80
	Over 44	\$592.98	\$543.04	\$539.44	\$606.87	\$602.68	\$581.77
	Average	\$174.72	\$173.60	\$204.61	\$207.56	\$203.87	\$191.62
Weighted Average		\$231.54	\$229.61	\$274.55	\$298.89	\$294.83	\$263.92

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
FY 2010 Capitation Rate Development
CareNet Medallion II Capitation Rates
With CDPS Adjustment**

Exhibit 7c

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,715.96	\$2,705.29	\$2,636.28	\$2,714.86	\$2,716.00	\$2,636.28
	1-5	\$954.06	\$1,042.36	\$702.33	\$689.33	\$847.02	\$738.67
	6-14	\$625.19	\$386.39	\$352.78	\$443.15	\$405.83	\$364.28
	Female 15-20	\$625.19	\$386.39	\$352.78	\$443.15	\$405.83	\$360.89
	Female 21-44	\$1,048.09	\$896.38	\$971.15	\$905.26	\$871.63	\$955.90
	Male 15-20	\$625.19	\$386.39	\$352.78	\$443.15	\$405.83	\$361.43
	Male 21-44	\$884.62	\$692.19	\$777.68	\$716.68	\$773.47	\$756.29
	Over 44	\$1,091.59	\$1,140.71	\$1,266.33	\$1,120.34	\$1,246.10	\$1,229.19
	Average	\$1,071.24	\$845.96	\$813.46	\$832.75	\$1,246.10	\$820.31
Temporary Assistance for Needy Families	Under 1	\$366.23	\$434.04	\$496.53	\$524.63	\$522.53	\$490.53
	1-5	\$122.14	\$107.95	\$131.85	\$124.33	\$120.09	\$128.32
	6-14	\$102.39	\$99.04	\$100.77	\$110.60	\$102.75	\$101.51
	Female 15-20	\$216.65	\$284.95	\$237.86	\$279.31	\$233.22	\$248.17
	Female 21-44	\$506.96	\$483.99	\$443.68	\$534.19	\$419.63	\$455.37
	Male 15-20	\$102.56	\$124.32	\$115.05	\$127.42	\$128.65	\$117.38
	Male 21-44	\$308.30	\$364.36	\$279.18	\$422.12	\$326.77	\$312.28
	Over 44	\$589.93	\$584.88	\$534.90	\$648.32	\$607.88	\$548.94
	Average	\$289.39	\$215.66	\$205.85	\$221.04	\$151.70	\$208.23
Weighted Average		\$680.32	\$530.81	\$286.35	\$310.52	\$257.60	\$291.54

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Optima Medallion II Capitation Rates
 With CDPS Adjustment**

Exhibit 7d

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,775.34	\$2,465.25	\$2,709.72	\$2,704.88	\$2,813.82	\$2,699.41
	1-5	\$974.92	\$949.87	\$721.89	\$686.80	\$877.53	\$824.47
	6-14	\$638.86	\$352.10	\$362.61	\$441.52	\$420.45	\$406.46
	Female 15-20	\$638.86	\$352.10	\$362.61	\$441.52	\$420.45	\$408.49
	Female 21-44	\$1,071.01	\$816.84	\$998.20	\$901.94	\$903.03	\$913.66
	Male 15-20	\$638.86	\$352.10	\$362.61	\$441.52	\$420.45	\$407.21
	Male 21-44	\$903.96	\$630.77	\$799.34	\$714.04	\$801.33	\$757.63
	Over 44	\$1,115.46	\$1,039.49	\$1,301.61	\$1,116.23	\$1,290.98	\$1,220.56
	Average	\$980.24	\$758.42	\$900.95	\$817.35	\$883.08	\$857.75
Temporary Assistance for Needy Families	Under 1	\$452.78	\$423.52	\$492.61	\$495.97	\$529.79	\$497.44
	1-5	\$151.00	\$105.34	\$130.81	\$117.54	\$121.76	\$120.95
	6-14	\$126.59	\$96.64	\$99.97	\$104.56	\$104.18	\$102.64
	Female 15-20	\$267.86	\$278.05	\$235.98	\$264.05	\$236.46	\$247.14
	Female 21-44	\$626.76	\$472.26	\$440.18	\$505.00	\$425.47	\$449.28
	Male 15-20	\$126.80	\$121.30	\$114.14	\$120.45	\$130.44	\$124.30
	Male 21-44	\$381.16	\$355.53	\$276.98	\$399.06	\$331.31	\$337.86
	Over 44	\$729.34	\$570.71	\$530.68	\$612.90	\$616.33	\$591.08
	Average	\$252.16	\$202.91	\$208.57	\$210.41	\$202.09	\$205.53
Weighted Average		\$334.99	\$275.08	\$303.89	\$304.98	\$291.53	\$294.75

Note:
 Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
 FY 2010 Capitation Rate Development
 Premier Medallion II Capitation Rates
 With CDPS Adjustment**

Exhibit 7e

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,775.34	\$2,806.35	\$3,019.70	\$2,805.05	\$2,613.32	\$2,765.33
	1-5	\$974.92	\$1,081.30	\$804.47	\$712.24	\$815.00	\$895.25
	6-14	\$638.86	\$400.82	\$404.09	\$457.87	\$390.49	\$419.15
	Female 15-20	\$638.86	\$400.82	\$404.09	\$457.87	\$390.49	\$417.57
	Female 21-44	\$1,071.01	\$929.87	\$1,112.40	\$935.34	\$838.68	\$963.28
	Male 15-20	\$638.86	\$400.82	\$404.09	\$457.87	\$390.49	\$418.90
	Male 21-44	\$903.96	\$718.05	\$890.79	\$740.49	\$744.23	\$771.45
	Over 44	\$1,115.46	\$1,183.32	\$1,450.51	\$1,157.57	\$1,198.99	\$1,238.12
	Average	\$940.76	\$897.83	\$980.92	\$891.78	\$809.62	\$906.11
Temporary Assistance for Needy Families	Under 1	\$396.82	\$462.38	\$522.35	\$533.99	\$506.93	\$489.03
	1-5	\$132.34	\$115.00	\$138.71	\$126.55	\$116.51	\$123.60
	6-14	\$110.94	\$105.51	\$106.01	\$112.57	\$99.68	\$106.83
	Female 15-20	\$234.75	\$303.56	\$250.23	\$284.29	\$226.26	\$274.02
	Female 21-44	\$549.30	\$515.59	\$466.75	\$543.71	\$407.10	\$497.67
	Male 15-20	\$111.13	\$132.43	\$121.03	\$129.69	\$124.81	\$127.06
	Male 21-44	\$334.05	\$388.15	\$293.70	\$429.65	\$317.01	\$376.95
	Over 44	\$639.20	\$623.07	\$562.72	\$659.88	\$589.73	\$616.77
	Average	\$214.12	\$217.56	\$212.15	\$228.39	\$197.04	\$216.03
Weighted Average		\$265.71	\$305.99	\$322.63	\$305.52	\$276.89	\$303.11

Note:
 Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
FY 2010 Capitation Rate Development
Summary of Medallion II Regional Average Capitation Rates
With CDPS Adjustment**

Exhibit 7f

Aid Category	Age Group	Region					FY 2010 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,737.49	\$2,664.22	\$2,660.76	\$2,737.62	\$2,722.44	\$2,709.04
	1-5	\$957.61	\$1,047.43	\$716.26	\$692.11	\$847.63	\$837.85
	6-14	\$627.11	\$385.39	\$362.03	\$443.25	\$406.54	\$415.74
	Female 15-20	\$626.06	\$388.88	\$362.53	\$442.17	\$406.22	\$417.09
	Female 21-44	\$1,048.99	\$902.72	\$996.55	\$905.86	\$872.65	\$934.36
	Male 15-20	\$626.79	\$385.30	\$360.98	\$441.98	\$406.74	\$414.75
	Male 21-44	\$884.39	\$691.78	\$800.04	\$717.17	\$772.19	\$771.80
	Over 44	\$1,090.56	\$1,146.29	\$1,308.76	\$1,120.77	\$1,245.38	\$1,196.48
	Average	\$967.88	\$859.47	\$868.31	\$843.46	\$861.67	\$874.05
Temporary Assistance for Needy Families	Under 1	\$364.26	\$451.01	\$502.86	\$512.75	\$521.84	\$463.52
	1-5	\$121.71	\$112.17	\$133.70	\$121.67	\$119.99	\$122.40
	6-14	\$102.40	\$102.71	\$102.21	\$107.99	\$102.81	\$103.30
	Female 15-20	\$216.98	\$295.39	\$241.17	\$272.13	\$233.48	\$247.32
	Female 21-44	\$510.42	\$501.59	\$449.71	\$522.47	\$419.55	\$467.05
	Male 15-20	\$102.51	\$128.83	\$116.67	\$124.19	\$128.82	\$119.89
	Male 21-44	\$311.30	\$379.74	\$282.71	\$415.02	\$326.16	\$343.27
	Over 44	\$589.59	\$606.14	\$541.52	\$632.61	\$608.26	\$591.03
	Average	\$177.52	\$212.96	\$207.67	\$218.33	\$202.03	\$201.84
Weighted Average		\$238.06	\$296.97	\$295.78	\$304.10	\$290.74	\$283.71

Note:
Average is weighted by health plan enrollment distribution as of February 2009.

**Virginia Medicaid
FY 2010 Capitation Rate Development
County Listing by Region**

Exhibit 8

Northern Virginia	Other MSA	Richmond/Charlottesville	Rural	Tidewater
Alexandria City	Amherst County	Albemarle County	Accomack County	Lexington City
Arlington County	Appomattox County	Amelia County	Alleghany County	Lunenburg County
Clarke County	Bedford City	Caroline County	Augusta County	Madison County
Fairfax City	Bedford County	Charles City County	Bath County	Martinsville City
Fairfax County	Botetourt County	Charlottesville City	Bland County	Mecklenburg County
Falls Church City	Bristol City	Chesterfield County	Brunswick County	Middlesex County
Fauquier County	Campbell County	Colonial Heights City	Buchanan County	Northampton County
Fredericksburg City	Craig County	Cumberland County	Buckingham County	Northumberland County
Loudoun County	Danville City	Dinwiddie County	Buena Vista City	Norton City
Manassas City	Franklin County	Fluvanna County	Carroll County	Nottoway County
Manassas Park City	Frederick County	Goochland County	Charlotte County	Orange County
Prince William County	Giles County	Greene County	Clifton Forge City	Page County
Spotsylvania County	Harrisonburg, City of	Hanover County	Covington City	Patrick County
Stafford County	Lynchburg City	Henrico County	Culpeper County	Prince Edward County
Warren County	Montgomery County	Hopewell City	Dickenson County	Rappahannock County
	Pittsylvania County	King and Queen County	Emporia City	Richmond County
	Pulaski County	King William County	Essex County	Rockbridge County
	Radford, City of	Louisa County	Floyd County	Russell County
	Roanoke City	Nelson County	Franklin City	Shenandoah County
	Roanoke County	New Kent County	Galax City	Smyth County
	Rockingham County	Petersburg City	Grayson County	Southampton County
	Salem City	Powhatan County	Greensville County	Staunton City
	Scott County	Prince George County	Halifax County	Tazewell County
	Washington County	Richmond City	Henry County	Waynesboro City
	Winchester, City of	Sussex County	Highland County	Westmoreland County
			Lancaster County	Wise County
			King George County	Wythe County
			Lee County	

APPENDIX

to: **Bill Lessard, Virginia DMAS**

date: **May 29, 2009**

from: **Pete Davidson**

subject: **Development of Virginia-specific
CDPS Weights**

As requested, we have developed CDPS (Chronic Illness & Disability Payment System) weights based on Virginia Medicaid claims experience. This memo summarizes the process and the results of this analysis.

CDPS Overview

CDPS is a predictive model that uses the diagnoses reported on health care claims, along with demographic information about enrollees, to predict the health care expenditures of individuals. The diagnoses are categorized into groups representing various illnesses and disabilities with a number of severity levels (in terms of expected health care expenditures) within each major diagnostic category. CDPS weights, representing expected average monthly expenditures, are developed using regression analysis of health care expenditure data. Separate CDPS models exist for the Disabled population, TANF Adult, and TANF Children.

We obtained the SAS program code used to categorize diagnoses and perform the regression analyses from the University of California, San Diego (UCSD) researchers who developed the CDPS model. We focused on the most recent CDPS versions -- CDPS version 5.0 (medical-only) and the CDPS-Rx (medical + prescription drug) model, which incorporates prescription drug claim information in addition to diagnoses to predict total health care expenditures. Further, we utilized the Concurrent version of the model, which uses current year health care data to predict current year expenditures, rather than the Prospective version, which uses current year health care data to predict next year's expenditures. The Concurrent CDPS model has been used historically to adjust Medicaid managed care plan capitation rates in Virginia. Note that the two versions of the model differ only in the types of claims that are used to identify each individual's medical condition. Both models aggregate both medical and prescription drug costs to build the relative cost weights.

During the course of this project, we consulted with the UCSD researchers a number of times to ensure we correctly understood the SAS program code they provided, the results

of our analyses, and acceptable approaches to handling certain anomalies and other issues.

Analysis

The data used to calibrate the CDPS model to Virginia was comprised of health care claims information, submitted by the managed care plans participating in the Virginia Medallion II program, and information on enrollment and the demographic characteristics of enrollees in each plan provided by DMAS eligibility and capitation payment files. Encounter data for services that are sub-capitated by the managed care plans, predominantly mental health services, were excluded. Claims data for fiscal years 2006, 2007, and 2008 were combined for the analysis. Each year of data was treated individually and normalized to a single average value level to lessen the impact of inter-year variations.

Upon review of the claims data, a number of individuals with extremely high annual expenditures were identified and their impact on the regression analysis was considered. The issue was discussed with the UCSD researchers. The researchers reported that they did not truncate high-dollar claims when they developed the national CDPS weights because of the large size of the underlying database, but did commonly truncate claims in the development of state-specific CDPS weights. We analyzed the frequency and magnitude of high-cost claimants and settled on a \$250,000 limit on annual expenditures for each individual, with one exception. Due to the extraordinary costs associated with certain hemophilia diagnoses, individuals with diagnoses that grouped into the "Hematological, extra high" illness category or prescribed drugs that grouped into the "Hemophilia/von Willebrands" drug category were limited to \$500,000 per year. Discussions with UCSD researchers confirmed that variable truncation of claims was an acceptable technique to apply in the development of the CDPS weights.

Results

The Virginia claims and enrollment data, with the limitations described above, were run through the SAS regression program, which produced weights for each CDPS illness/disability category. The CDPS weights using Virginia-specific data were generally comparable to the national CDPS weights, though there were categories with significant differences in weights. In a couple of instances, the resulting CDPS weights were anomalous and were adjusted based on direction from the UCSD researchers. Specifically, the CDPS weights for categories related to Developmental Disabilities were negative as compared to positive national weights and were replaced with zero. There were very few observations in these categories, and our supposition is that individuals with severe Developmental Disabilities are generally not enrolled with Virginia Medicaid managed care plans. The attached Exhibit 1 shows the national and Virginia-specific CDPS weights for each illness/disability category along with the number of observations in each category.

To compare the predictive power (i.e., how well the model predicts actual expenditures) of the Virginia-specific CDPS weights to the national CDPS weights, we calculated the coefficient of determination, or R^2 , for each model. R^2 is a statistical measure that, in this instance, represents the proportion of variability in health care expenditures that can be explained by the CDPS model. An R^2 value of 1.0 means that 100% of the variance can be explained by the model, while an R^2 of 0.0 means that none of the variance can be explained by the model. The table below summarizes the calculated R^2 s:

SUMMARY OF RESULTING R^2 FOR RISK ADJUSTMENT APPLICATION TO VIRGINIA MEDICAID CLAIMS DATA			
Risk Adjustment Model	Eligibility Group	R2	
		National Weights	Virginia Weights
CDPS version 5.0	Disabled	0.3628	0.3975
	TANF Child	0.1307	0.1411
	TANF Adult	0.3330	0.4600
CDPS-Rx	Disabled	0.3723	0.4022
	TANF Child	0.1471	0.1645
	TANF Adult	0.3455	0.4672

As shown in the table above, in each instance the Virginia-specific CDPS weights have higher predictive power than the national weights when applied to the Virginia Medicaid claims data. Further, in each instance the CDPS-Rx model has higher predictive power than the CDPS version 5.0 model without Rx. The relatively low R^2 for TANF Children is a result of the relatively low percentage of their health care expenditures being driven by chronic illnesses or disabilities compared to the higher percentage driven by acute conditions, accidents, or routine services such as preventive care.

Based on this analysis, DMAS has directed PwC to use the CDPS-Rx model with Virginia specific weights for the risk adjustment component of the FY 2010 Medallion II rate setting.

* * *

If you have any questions regarding the results of our analysis, please contact me at 415-498-5636 or peter.b.davidson@us.pwc.com.

Virginia Medicaid

VA CDPS+Pharmacy Weight Development

Health Plan Enc Data - Jul 2005 - Jun 2008

FFS Claims Only

R² values

MedSurg+Rx Models			
Aidcat	Model	R ²	Notes
ABAD	VA variable truncation	0.4022	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg+Rx).
	National	0.3723	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.
TANF CHILD	VA variable truncation	0.1645	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg+Rx).
	National	0.1471	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.
TANF ADULT	VA variable truncation	0.4672	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg+Rx).
	National	0.3455	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.
MedSurg Only Models			
Aidcat	Model	R ²	Notes
ABAD	VA variable truncation	0.3975	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg).
	National	0.3628	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.
TANF CHILD	VA variable truncation	0.1411	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg).
	National	0.1307	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.
TANF ADULT	VA variable truncation	0.4600	R-square based on actual expenditure and predicted expenditure calculated from VA specific weights (MedSurg).
	National	0.3330	R-square based on actual expenditure and predicted expenditure calculated by applying national weights to VA data.

CDPSplusRx weights Comparison - VA vs National (weights and R square) HC 2009.05.29.xls

R Square

5/29/2009

Virginia Medicaid

VA CDPS+Pharmacy Weight Development

Health Plan Enc Data - FY06 - FY08

FFS Claims Only

Disabled

		Weights		N (Sample Size)	
Variable	Description	National Weights	VA Weights (3yrs combined with truncation)	N (National)	N (VA 3Yrs combined)
Intercept	Intercept	-0.026	-0.062	5,404,754	153,615
a_under1	age<=1	1.434	1.681	50,222	2,314
a_1_4	1<age<5	0.087	-0.044	147,477	4,963
a_5_14m	5<age<15 male	0.017	-0.021	520,375	18,680
a_5_14f	5<age<15 female	-0.026	-0.033	280,959	8,907
a_15_24m	15<=age<25 male	0.040	0.034	457,764	13,459
a_15_24f	15<=age<25 female	0.013	0.046	314,124	10,819
a_25_44f	25<=age<45 female	-0.014	0.017	814,085	21,638
a_45_64m	45<=age<65 male	-0.069	-0.094	813,265	18,794
a_45_64f	45<=age<65 female	-0.057	-0.044	1,294,242	34,808
a_65	65<=age	-0.119	-0.149	66,539	7,623
CARVH	Cardiovascular, very high	3.612	3.736	31,815	1,398
CARM	Cardiovascular, medium	0.930	0.838	223,433	8,715
CARL	Cardiovascular, low	0.546	0.502	433,849	13,952
CAREL	Cardiovascular, extra low	0.170	0.120	700,529	31,326
PSYH	Psychiatric, high	1.034	0.669	337,125	10,693
PSYM	Psychiatric, medium	0.706	0.428	244,128	8,980
PSYML	Psychiatric, medium low	0.416	0.248	617,065	21,052
PSYL	Psychiatric, low	0.243	0.197	235,493	9,356
SKCM	Skeletal, medium	0.571	0.545	237,165	8,585
SKCL	Skeletal, low	0.261	0.278	265,491	10,909
SKCVL	Skeletal, very low	0.183	0.161	281,999	8,547
CNSH	CNS, high	1.824	1.525	54,260	1,444
CNSM	CNS, medium	0.613	0.326	185,583	4,945
CNSL	CNS, low	0.344	0.296	470,922	19,487
PULVH	Pulmonary, very high	4.590	2.489	30,182	1,871
PULH	Pulmonary, high	2.072	1.845	13,174	396
PULM	Pulmonary, medium	1.757	1.427	130,970	5,429
PULL	Pulmonary, low	0.280	0.168	836,054	32,111
GIH	Gastro, high	1.809	1.874	53,020	2,009
GIM	Gastro, medium	0.568	0.631	119,812	4,753
GIL	Gastro, low	0.387	0.316	482,485	23,237
DIA1H	Diabetes, type 1 high	0.458	0.484	10,613	324
DIA1M	Diabetes, type 1 medium	0.458	0.484	185,522	5,351
DIA2M	Diabetes, type 2 medium	0.202	0.167	61,348	3,317
DIA2L	Diabetes, type 2 low	0.202	0.167	385,697	16,424
SKNH	Skin, high	1.762	1.803	26,984	924
SKNL	Skin, low	0.485	0.353	50,357	1,849
SKNVL	Skin, very low	0.217	0.096	303,850	11,073
RENEH	Renal, extra high	3.563	3.942	14,027	984
RENVH	Renal, very high	1.646	0.910	38,518	3,580
RENM	Renal, medium	0.654	0.382	27,094	875
RENL	Renal, low	0.303	0.169	231,707	8,993
SUBL	Substance abuse, low	0.647	0.489	162,542	4,501
SUBVL	Substance abuse, very low	0.228	0.145	140,022	4,388
CANVH	Cancer, very high	3.113	3.364	33,735	1,067
CANH	Cancer, high	1.463	1.449	57,576	1,830
CANM	Cancer, medium	0.423	0.361	26,873	864
CANL	Cancer, low	0.206	0.310	53,680	1,682
DDM	DD, medium	0.491	0.000	30,889	299
DDL	DD, low	0.262	0.072	184,917	4,943
GENEL	Genital, extra low	0.144	0.187	139,900	5,191
METH	Metabolic, high	1.070	0.972	30,340	2,053
METM	Metabolic, medium	1.070	0.972	81,842	4,068
METVL	Metabolic, very low	0.395	0.193	200,571	10,665
PRGCMP	Pregnancy, complete	0.532	0.541	51,962	2,172
PRGINC	Pregnancy, incomplete	0.136	0.103	31,724	1,126
EYEL	Eye, low	0.286	0.229	27,368	812
EYEVL	Eye, very low	0.068	0.017	209,966	7,225
CERL	Cerebrovascular, low	0.539	0.526	92,956	3,815
AIDSH	AIDS, high	1.784	1.597	95,842	2,303
INFH	Infectious, high	1.784	1.597	4,744	140
HIVM	HIV, medium	1.392	1.450	11,286	991
INFM	Infectious, medium	1.392	1.450	41,359	1,640
INFL	Infectious, low	0.213	0.236	116,071	4,295
HEMEH	Hematological, extra high	11.574	10.361	3,704	102
HEMVH	Hematological, very high	1.730	1.005	27,102	1,345
HEMM	Hematological, medium	1.342	1.066	48,045	2,059
HEML	Hematological, low	0.782	0.889	59,609	2,860
CCARVH	Childrens CARVH	2.783	3.291	7,164	210
CCARM	Childrens CARM	1.604	1.355	13,061	333
CCNSH	Childrens CNSH	0.051	-0.696	34,479	876
CPULVH	Childrens PULVH	1.206	0.512	18,624	437
CPULH	Childrens PULH	1.459	0.652	1,886	58
CGIH	Childrens GIH	0.973	-0.101	28,797	792
CMETH	Childrens METH	0.470	0.157	12,034	419
CHIVM	Childrens HIVM	3.075	1.948	1,834	129
CINFM	Childrens INFM	3.075	1.948	7,126	217
CHEMEH	Childrens HEMEH	4.562	4.197	2,341	64
MRX1	Anti-coagulants	0.930	0.838	78,685	1,977
MRX2	Cardiac	0.170	0.120	491,684	12,770
MRX3	Depression/Psychosis/Bipolar	0.243	0.197	934,954	26,244
MRX4	Diabetes	0.202	0.167	59,604	1,596
MRX5	ESRD / Renal	1.646	0.910	10,811	101
MRX6	Hemophilia/von Willebrands	11.574	10.361	324	3
MRX7	Hepatitis	1.392	1.450	11,507	285
MRX8	HIV	1.392	1.450	9,426	189
MRX9	Infections, high	1.784	1.597	22,901	501
MRX10	Inflammatory /Autoimmune	0.183	0.161	9,612	338
MRX11	Malignancies	0.423	0.361	56,094	2,220
MRX12	Multiple Sclerosis	0.613	0.326	667	28
MRX13	Parkinsons / Tremor	0.344	0.296	143,436	4,992
MRX14	Seizure disorders	0.344	0.296	122,635	4,956
MRX15	Tuberculosis	0.280	0.168	9,172	314

CDPSplusRx weights Comparison - VA vs National (weights and R square) HC 2009.05.29.xls

DADC

5/29/2009

Virginia Medicaid

VA CDPS+Pharmacy Weight Development

Health Plan Enc Data - FY06 - FY08

FFS Claims Only

TANF Child

Variable	Description	Weights		N (Sample Size)	
		National Weights	VA Weights (3yrs combined with truncation)	N (National)	N (VA 3Yrs combined)
Intercept	Intercept	0.311	0.311	18,242,188	771,995
a_under1	age<=1	0.652	0.567	2,519,016	174,212
a_1_4	1<age<5	-0.082	-0.080	3,637,662	169,784
a_5_14m	5<age<15 male	-0.143	-0.080	4,614,311	172,985
a_5_14f	5<age<15 female	-0.149	-0.108	4,540,358	173,776
a_15_24m	15<=age<25 male	0.000	0.000	1,400,004	35,359
a_15_24f	15<=age<25 female	-0.001	-0.021	1,528,108	45,879
CARVH	Cardiovascular, very high	48.195	57.967	4,008	174
CARM	Cardiovascular, medium	7.918	7.106	20,449	1,460
CARL	Cardiovascular, low	4.248	4.124	167,953	8,731
CAREL	Cardiovascular, extra low	1.193	0.645	33,476	2,509
PSYH	Psychiatric, high	7.727	5.696	8,144	164
PSYM	Psychiatric, medium	4.758	2.178	69,478	2,998
PSYML	Psychiatric, medium low	1.683	0.648	1,097,184	43,814
PSYL	Psychiatric, low	0.992	0.659	276,433	8,103
SKCM	Skeletal, medium	2.139	2.308	141,467	6,561
SKCL	Skeletal, low	0.792	0.999	234,474	11,264
SKCVL	Skeletal, very low	0.633	0.843	413,103	18,836
CNSH	CNS, high	12.804	14.176	8,067	252
CNSM	CNS, medium	3.598	3.194	35,538	1,064
CNSL	CNS, low	2.049	1.619	210,942	11,431
PULVH	Pulmonary, very high	0.000	0.000	-	-
PULH	Pulmonary, high	13.328	9.087	23,638	1,285
PULM	Pulmonary, medium	6.839	6.019	75,105	5,359
PULL	Pulmonary, low	0.751	0.621	1,744,849	119,140
GIH	Gastro, high	28.043	26.056	10,139	438
GIM	Gastro, medium	5.223	4.677	21,977	1,358
GIL	Gastro, low	1.879	1.711	325,249	26,435
DIA1H	Diabetes, type 1 high	0.000	0.000	-	-
DIA1M	Diabetes, type 1 medium	0.000	0.000	-	-
DIA2M	Diabetes, type 2 medium	0.000	0.000	-	-
DIA2L	Diabetes, type 2 low	1.481	1.535	45,246	2,277
SKNH	Skin, high	12.142	14.178	1,390	54
SKNL	Skin, low	2.118	1.560	5,242	191
SKNVL	Skin, very low	0.494	0.353	488,788	28,672
RENEH	Renal, extra high	22.236	2.180	326	12
RENVH	Renal, very high	12.695	8.849	1,473	106
RENM	Renal, medium	3.660	2.839	6,952	323
RENL	Renal, low	0.845	0.691	180,830	8,622
SUBL	Substance abuse, low	3.088	6.177	25,396	376
SUBVL	Substance abuse, very low	1.975	1.060	31,254	403
CANVH	Cancer, very high	26.093	26.395	857	42
CANH	Cancer, high	8.103	8.064	10,215	460
CANM	Cancer, medium	1.667	1.185	10,145	731
CANL	Cancer, low	1.667	1.185	5,764	282
DDM	DD, medium	3.453	0.000	3,597	27
DDL	DD, low	2.173	2.988	47,395	761
GENEL	Genital, extra low	1.022	1.163	113,033	5,910
METH	Metabolic, high	5.603	6.433	12,857	769
METM	Metabolic, medium	5.603	6.433	28,274	1,142
METVL	Metabolic, very low	2.184	1.512	201,284	10,577
PRGCMP	Pregnancy, complete	3.480	3.997	150,542	3,566
PRGINC	Pregnancy, incomplete	0.964	0.849	74,440	2,064
EYEL	Eye, low	0.000	0.000	-	-
EYEVL	Eye, very low	1.636	1.167	54,663	2,944
CERL	Cerebrovascular, low	3.945	2.829	7,454	566
AIDSH	AIDS, high	9.551	4.186	7,249	169
INFH	Infectious, high	9.551	4.186	2,159	115
HIVM	HIV, medium	9.551	4.186	4,102	1,340
INFM	Infectious, medium	9.551	4.186	45,356	1,398
INFL	Infectious, low	0.573	0.642	215,080	11,702
HEMEH	Hematological, extra high	33.025	53.129	1,911	121
HEMVH	Hematological, very high	5.474	4.278	17,629	1,235
HEMM	Hematological, medium	2.300	2.106	23,023	1,739
HEML	Hematological, low	2.300	2.106	40,203	1,880
MRX1	Anti-coagulants	7.918	7.106	6,196	50
MRX2	Cardiac	1.193	0.645	191637	8688
MRX3	Depression/Psychosis/Bipolar	0.992	0.659	240048	7297
MRX4	Diabetes	1.481	1.535	9431	618
MRX5	ESRD / Renal	12.695	8.849	424	11
MRX6	Hemophilia/von Willebrands	33.025	53.129	158	4
MRX7	Hepatitis	9.551	4.186	401	5
MRX8	HIV	9.551	4.186	1991	60
MRX9	Infections, high	9.551	4.186	4020	91
MRX10	Inflammatory /Autoimmune	0.633	0.843	2416	128
MRX11	Malignancies	1.667	1.185	4952	293
MRX12	Multiple Sclerosis	3.598	3.194	44	0
MRX13	Parkinsons / Tremor	2.049	1.619	6267	90
MRX14	Seizure disorders	2.049	1.619	34991	1509
MRX15	Tuberculosis	0.751	0.621	13557	656

Virginia Medicaid

VA CDPS+Pharmacy Weight Development

Health Plan Enc Data - FY06 - FY08

FFS Claims Only

TANF Adult

Variable	Description	Weights		N (Sample Size)	
		National Weights	VA Weights (3yrs combined with truncation)	N (National)	N (VA 3Yrs combined)
Intercept	Intercept	0.126	0.177	5,357,965	210,534
a_15_24m	15<=age<25 male	-0.060	-0.092	160,151	9,297
a_15_24f	15<=age<25 female	-0.031	-0.067	1,277,839	76,242
a_25_44m	25<=age<45 male	0.000	0.000	600,583	7,311
a_25_44f	25<=age<45 female	-0.025	-0.066	2,441,800	105,834
a_45_64m	45<=age<65 male	0.009	-0.046	219,913	2,238
a_45_64f	45<=age<65 female	-0.032	-0.065	358,369	9,590
a_65	65<=age	-0.011	-0.450	295,327	22
CARVH	Cardiovascular, very high	9.300	7.613	3,570	185
CARM	Cardiovascular, medium	1.951	1.331	53,105	1,917
CARL	Cardiovascular, low	1.035	0.735	172,293	6,104
CAREL	Cardiovascular, extra low	0.271	0.169	355,502	20,895
PSYH	Psychiatric, high	2.662	1.053	18,809	496
PSYM	Psychiatric, medium	1.390	0.816	51,581	2,993
PSYML	Psychiatric, medium low	0.694	0.392	194,453	10,258
PSYL	Psychiatric, low	0.360	0.209	232,079	11,905
SKCM	Skeletal, medium	0.982	0.741	72,383	3,980
SKCL	Skeletal, low	0.524	0.402	154,220	9,111
SKCVL	Skeletal, very low	0.430	0.396	167,997	6,809
CNSH	CNS, high	5.677	4.911	1,429	65
CNSM	CNS, medium	1.512	1.578	14,392	1,020
CNSL	CNS, low	0.800	0.584	102,928	6,810
PULVH	Pulmonary, very high	0.000	0.000	-	-
PULH	Pulmonary, high	4.846	2.943	5,322	373
PULM	Pulmonary, medium	3.178	2.155	31,757	1,486
PULL	Pulmonary, low	0.463	0.228	375,003	23,691
GIH	Gastro, high	4.803	2.084	3,988	417
GIM	Gastro, medium	1.543	1.324	38,521	1,983
GIL	Gastro, low	0.675	0.463	254,311	16,374
DIA1H	Diabetes, type 1 high	1.026	0.818	1,861	89
DIA1M	Diabetes, type 1 medium	1.026	0.818	54,469	2,055
DIA2M	Diabetes, type 2 medium	0.395	0.285	16,669	639
DIA2L	Diabetes, type 2 low	0.395	0.285	152,819	6,618
SKNH	Skin, high	4.690	5.390	2,758	86
SKNL	Skin, low	1.202	0.857	10,499	369
SKNVL	Skin, very low	0.343	0.124	181,434	11,934
RENEH	Renal, extra high	8.236	7.161	1,390	72
RENVH	Renal, very high	3.476	1.402	6,872	484
RENM	Renal, medium	1.302	1.156	7,113	285
RENL	Renal, low	0.620	0.506	82,565	4,651
SUBL	Substance abuse, low	1.629	0.629	139,025	3,425
SUBVL	Substance abuse, very low	0.630	0.196	73,737	1,750
CANVH	Cancer, very high	6.856	8.541	5,827	119
CANH	Cancer, high	2.598	3.886	16,924	389
CANM	Cancer, medium	1.045	0.736	8,380	261
CANL	Cancer, low	0.672	0.678	23,100	580
DDM	DD, medium	0.000	0.000	-	-
DDL	DD, low	0.254	0.561	3,943	78
GENEL	Genital, extra low	0.507	0.458	224,420	13,280
METH	Metabolic, high	1.878	0.902	6,082	844
METM	Metabolic, medium	1.878	0.902	19,419	958
METVL	Metabolic, very low	0.989	0.699	39,113	3,834
PRGCMP	Pregnancy, complete	1.527	1.553	929,653	52,864
PRGINC	Pregnancy, incomplete	0.323	0.198	252,098	11,880
EYEL	Eye, low	0.604	0.440	10,455	255
EYEVL	Eye, very low	0.186	0.113	77,833	881
CERL	Cerebrovascular, low	1.697	1.093	16,178	624
AIDSH	AIDS, high	2.971	1.789	30,004	763
INFH	Infectious, high	2.971	1.789	1,624	40
HIVM	HIV, medium	2.392	1.506	6,706	711
INFM	Infectious, medium	2.392	1.506	12,985	605
INFL	Infectious, low	0.467	0.225	58,604	2,281
HEMEH	Hematological, extra high	6.237	4.360	291	25
HEMVH	Hematological, very high	2.707	1.544	1,137	86
HEMM	Hematological, medium	2.023	0.647	18,794	1,983
HEML	Hematological, low	1.313	1.012	23,971	1,565
MRX1	Anti-coagulants	1.951	1.331	21,918	875
MRX2	Cardiac	0.271	0.169	245,511	9,053
MRX3	Depression/Psychosis/Bipolar	0.360	0.209	542,713	19,956
MRX4	Diabetes	0.395	0.285	40,232	1,749
MRX5	ESRD / Renal	3.476	1.402	2,594	26
MRX6	Hemophilia/von Willebrands	6.237	4.360	16	-
MRX7	Hepatitis	2.392	1.506	6,157	131
MRX8	HIV	2.392	1.506	4,030	102
MRX9	Infections, high	2.971	1.789	3,928	178
MRX10	Inflammatory /Autoimmune	0.430	0.396	5,493	306
MRX11	Malignancies	1.045	0.736	19,653	844
MRX12	Multiple Sclerosis	1.512	1.578	246	12
MRX13	Parkinsons / Tremor	0.800	0.584	7,599	399
MRX14	Seizure disorders	0.800	0.584	32,877	3,004
MRX15	Tuberculosis	0.463	0.228	10,106	435