

**COMMONWEALTH OF VIRGINIA
DEPARTMENT OF MEDICAL ASSISTANCE SERVICES**

**Medallion II
Data Book and Capitation Rates
Fiscal Year 2011**

**Rate Period Effective
October 1, 2010 - June 30, 2011**

Submitted by:

**PricewaterhouseCoopers LLP
Three Embarcadero Center
San Francisco, CA 94111**

September 2010



September 1, 2010

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

Dear Bill:

Re: FY 2011 Medallion II Data Book and Capitation Rates

Rates Effective October 1, 2010

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,

PricewaterhouseCoopers

PricewaterhouseCoopers LLP

**Actuarial Certification of
Proposed FY 2011 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 2011 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

September 1, 2010
Date

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2011 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 MCOs 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 MCOs is limited to State plan services
AA.2.5 Services that may be covered out of contract savings	NA	Data submitted by participating MCOs is limited to State plan services
AA.3.0 Adjustments to Base Year Data	Section IV, Pages 12-18 Exh 2a-2h, 3a-3c, Pages 18-21, Exh 6	Program and Policy Adjustments and CDPS Risk Adjustment
AA.3.1 Benefit Differences	NA	

Virginia Department of Medical Assistance Services
Crosswalk from CMS Rate Setting Checklist to 2011 Medallion II Report

Item	Location	Comments
AA.3.2 Administrative Cost Allowance Calculations	Pages 15-16, 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 16-18, 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 16-18, 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 2011 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	NAs	
AA.5.2 Cost-neutral data smoothing adjustment	Page 11	Use two years of base data
AA.5.3 Risk Adjustment	Pages 18-21, Exh 6, 7a-7f	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

TABLE OF CONTENTS

Actuarial Certification.....	A
Crosswalk from CMS Rate Setting Checklist	A i
Introduction.....	1
I. Background.....	3
II. Data Book	4
III. Capitation Rate Calculations	12
IV. Base Rate Legislative and Program Adjustments.....	13
V. Trend and IBNR Adjustments	17
VI. Base Capitation Rates	19
VII. Health Plan Risk Adjusted Capitation Rates	19

TABLE OF EXHIBITS

EXHIBIT 1a	Historical Eligibility and Claims – Health Plan Encounter Data – LIFC
EXHIBIT 1b	Historical Eligibility and Claims – Health Plan Encounter Data – ABAD
EXHIBIT 2a	Pharmacy Adjustment
EXHIBIT 2b	Exempt Infant Formula Carve out Adjustment
EXHIBIT 2c	Durable Medical Equipment Fee Reduction Adjustment
EXHIBIT 2d	Clinical Lab Fee Reduction Adjustment
EXHIBIT 2e	Outpatient Rehabilitation Adjustment
EXHIBIT 2f	Hospital Inpatient Adjustments
EXHIBIT 2g	Freestanding Psychiatric Hospital Rate Reduction Adjustment
EXHIBIT 2h	Provider Incentive Payment Adjustment
EXHIBIT 2i	Administrative Cost Adjustment
EXHIBIT 3a	IBNR, Policy / Program and Trend Adjustments – LIFC Child Under 21
EXHIBIT 3b	IBNR, Policy / Program and Trend Adjustments – LIFC Adult 21 and Over
EXHIBIT 3c	IBNR, Policy / Program and Trend Adjustments – ABAD
EXHIBIT 4a	Capitation Rate Calculations – Health Plan Encounter Data – LIFC
EXHIBIT 4b	Capitation Rate Calculations – Health Plan Encounter Data – ABAD
EXHIBIT 5a	Summary of FY 2011 Base Capitation Rates – Before CDPS Adjustment
EXHIBIT 5b	Mental Health Parity Adjustment
EXHIBIT 5c	Summary of FY 2011 Base Capitation Rates with MH Parity Adjustment – Before CDPS Adjustment
EXHIBIT 5d	Comparison of FY 2010 and FY 2011 Base Capitation Rates – Before CDPS Adjustment
EXHIBIT 5e	May 2010 Member Month Distribution
EXHIBIT 6	CDPS Rates Summary of Difference in Implied Cost
EXHIBIT 7a	AmeriGroup Medallion II Capitation Rates with CDPS Adjustment
EXHIBIT 7b	Anthem Medallion II Capitation Rates with CDPS Adjustment
EXHIBIT 7c	CareNet Medallion II Capitation Rates with CDPS Adjustment
EXHIBIT 7d	Optima Medallion II Capitation Rates with CDPS Adjustment
EXHIBIT 7e	Premier Medallion II Capitation Rates with CDPS Adjustment

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 2011
For Rates Effective October 1, 2010
Prepared by PricewaterhouseCoopers LLP
September 2010

PricewaterhouseCoopers LLP (PwC) has revised the calculation of the capitation rates for the Virginia Medicaid Medallion II program for State Fiscal Year 2011 for rates effective October 1, 2010. This report updates the Medallion II Data Book and Capitation Rates Fiscal Year 2011 that was issued in May 2010 with rates effective July 1, 2010.

Rate reductions effective July 1, 2010 were included in adjustments to the capitation rates as required by the Virginia General Assembly Appropriation Act. The Appropriation Act also directed DMAS to reverse some of these rate reductions if Congress extended through June 30, 2011 the additional federal funding for Medicaid included in the American Recovery and Reinvestment Act of 2009. In early August, Congress passed an extension of the federal funding, but at a lower level than anticipated. The Appropriation Act authorized modifications consistent with available funding and the decision has been made to rescind the reimbursement cuts effective for dates of service on or after October 1, 2010 through June 30, 2011.

Effective for dates of service on or after October 1, 2010, the following cuts will be rescinded and the capitation rates have been modified to reflect these changes:

- 3.8% reduction to inpatient operating rates and 4% reduction to inpatient capital rates;
- 3.75% reduction to outpatient rates;
- 3.0% reduction to physician rates.

These changes also affect the adjustments for the provider incentive payment and the administrative cost adjustment which are calculated as a percentage of the weighted average adjusted and trended base PMPM.

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 May 2010 in Exhibit 5e.

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

- **Eligibility Group.** Members eligible for participation in these programs include: Low Income Families with Children (LIFC) and related groups and Aged, Blind, and Disabled (ABAD).
- **Demographics.** Capitation rates will be paid separately for the following age 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 members through both a mandatory and voluntary enrollment mechanism. In most areas where Medallion II operates, all eligible Medicaid members must choose a managed care plan. In areas where only one plan is available, members have the option of enrolling in the Managed Care Organization (MCO) program or the Primary Care Case Management (PCCM) program. Rates are shown separately by eligibility category and age group, to allow for automatic adjustment to payments when enrollment changes. In that way, any variation in the mix of enrollment by rate cell is automatically reflected in the payment amounts to the health plans.

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

Payments to managed care plans for Medallion II are subject to federal rules. As a Medicaid program, the state must comply with federal regulations set forth by CMS regarding payment levels. Specifically, payments to managed care plans must be actuarially sound. To develop proposed capitation rates, we analyzed the health plan encounter data from the established plans in the Medallion II program. Individual health plan data were separately reviewed by rate category and region 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.

II. Data Book

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

Rate Setting Data Sources

A first step in developing capitation rates is to identify the data that will be used for the calculations. The CMS 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.

The historical data used to develop the FY 2011 base rates includes health plan incurred claims and subcapitation payments for FY 2008 and FY 2009 (July 1, 2007 to June 30, 2009), with run-out through October 31, 2009.

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.

Managed Care Expansions and Changes in MCO Service Areas During the Base Data Period

There were two 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 2011 Medallion II base rates.

The two expansions were:

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

Two of the contracting health plans have withdrawn from selected counties and reduced their service area since the end of the base data period. The members affected by these withdrawals have been re-enrolled in other health plans, and therefore, this does not affect the historical encounter data used for the base rate setting.

Overview of Health Plan Encounter Data Processing

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

Last year, 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 technical revision to the processing program changed the calculation of age to the first of the month rather than the last of the month. This can shift some eligibility and the associated costs into the lower age rate cell. Proportionately, the largest impact was an increase in the member months in the age 0 to 1 rate cells.

After initial cleaning to remove duplicate claims and claims incurred outside of the historical base data period, members and their associated claims may be dropped due to missing or invalid ID, assignment to an aid category that is not included in the Medallion II program, or claims that were incurred outside of the member eligibility period. We

have also included all claims and eligibility periods for members with an overlapping Medicare-Medicaid or other significant TPL segment.¹

Newborn processing incorporates the 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 to assign aid category and region. If we identified a mother who was enrolled in the health plan at the time of the birth, but had missing aid category and region information, the newborn was assigned based on the health plan encounter record information. This two step process did not allow us to categorize all newborn claims submitted by the plan, primarily due to missing region information. Therefore, the remaining non-matched 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 reported member months are those calculated by PwC from the DMAS capitation payment file, rather than those provided by the health plans.

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

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

PwC summarized the health plan encounter data by 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 slight changes to the service category definitions for FY 2011. As in the past, service categories are primarily defined by bill type, CPT, and revenue code fields in the claims records. For FY 2011, we have updated provider identification numbers with the National Provider Identifiers and modified CPT ranges to refine selected service categories. As a result, there are changes to the providers and codes that are included in a number of the service lines. These include:

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.

1. Added FQHC/RHC clinic provider ID codes,
2. Home health agency services reported on hospital outpatient department UB92 claims have been moved from outpatient hospital to the home health service line in Exhibits 1, 2 and 4. Home health services continue to be included with Outpatient Hospital services for IBNR and trend calculations.
3. Outpatient hospital emergency department costs include the ED visit and the associated services reported on the UB92 claims detail, and
4. Durable medical equipment HCPCS codes reported on CMS 1500 professional claim detail lines have been move to the DME service line.

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 five years.

In the summarization process, unit counts were determined for each service category. Table 1, Service Unit Definitions, describes the types of units that were counted for each detailed service category. In the table, "Units" indicates the actual unit counts that were recorded on each claim; in particular, the methodology for deriving unit counts for professional services may vary by data source and health plan. "Claims" or "Prescriptions" or "Record Counts" refers to a count of "1" for each claim record in the historical database. This count is used for services in which recorded units are not meaningful, such as for pharmacy where the units recorded are often the number of pills dispensed. "Admits" are used for inpatient units, 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 members² who are eligible for the managed care program based on their eligibility category and service use during the data period.

Review of the Health Plan Encounter Data

The base capitation rates for Medallion II for FY 2011 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

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

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 2008 - FY 2009 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 2008 - FY 2009 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) for validation purposes.

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 cost of the services on a PMPM basis. The PMPM amount represented either the actual contractual PMPM paid, or the contractual total dollar payments divided by the covered member months for the time period.

The financial information may or may not have been accompanied by encounter data for those services. All health plans submitted complete claims data for outpatient pharmacy services. Health plans provide encounter data for laboratory, vision, transportation, and mental health, the service categories that were most often capitated. The dollars for the capitated and subcontractor services are incorporated into the historical data, but we cannot confirm that all encounters are reported and measures such as utilization rates and cost per unit for these services may not be accurate.

Behavioral and Mental Health Capitated Subcontractor Services

Capitation payments for Behavioral and Mental Health services were distributed differently than other reported capitated services. Health plans report mental health services both as FFS paid claims and as capitation amounts for contracted services. Prior to the FY 2008 rate setting, 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. LIFC). Approximately 38% of mental health dollars are paid by the plans under subcapitation arrangements.

Beginning with the FY 2008 rates, we analyzed mental health claims level detail provided by the three plans that do not capitate, Anthem, Virginia Premier, and AmeriGroup, by service type and aid category to determine a distribution of the capitated mental health service dollars.

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 LIFC. Overall, the historical encounter paid claims showed the ABAD mental health PMPM was approximately ten times the LIFC mental health PMPM, or \$39.43 PMPM compared to \$4.06 PMPM. For ABAD, the distribution of dollars was 79.8% inpatient and 20.2% professional while the LIFC distribution was 52.4% inpatient and 47.6% professional.

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

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 since FY 2006.

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; therefore, the ABAD Age Under 1 category is developed as a single statewide rate cell. We also combine the historical data for Child 6-14, Female 15-20 and Male 15-20. 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.

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 below. These exhibits show, for informational purposes:

- Member months for fiscal years 2008 and 2009 based on DMAS capitation payment files;
- Total dollar value of claims and capitated services for fiscal years 2008 and 2009 (health plan encounter data only); and
- Costs per member per month (PMPM) for fiscal years 2008 and 2009.

III. Capitation Rate Calculations

The capitation rates for fiscal year 2011 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 2008 - FY 2009 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 General Assembly. Each of these adjustments, as well as adjustments for other services not included in the source data, is described in detail. Adjustments for the base data are presented in Exhibits 2a through 2h.
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 2011 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 2i.
7. 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 2009, the proportion of generic scripts in the LIFC population was over 77% (74% LIFC Child and 81% LIFC Adult) and it was 74% 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 2011.

Separate pharmacy adjustment factors were developed for the LIFC and the ABAD eligibility categories, as shown in Exhibit 2a. The factors are a reduction of -3.8% for LIFC and -3.9% for ABAD.

Exempt Infant Formula Carveout Adjustment

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 2b and is applied to the full base period to Professional-E&M, Professional-Specialist and All Other Professional service lines in Exhibits 4a and 4b under the column labeled "Policy and Program Adjustments".

Durable Medical Equipment Fee Reduction Adjustment

This adjustment reflects a reduction in durable medical equipment payment rates. DMAS provided reductions by product category and modifiers for new or rented equipment. Adjustments ranged from no decrease to a 15% decrease. The reductions were applied by major aid code and reflect the weighted average impact based on the mix of affected DME codes reported in the health plan encounter data.

This adjustment is shown in Exhibit 2c and is applied to the full base period to the DME service lines in Exhibits 4a and 4b under the column labeled "Policy and Program Adjustments".

Clinical Laboratory Fee Reduction Adjustment

For FY2011, DMAS will reduce clinical laboratory fees by an average of 5%. The affected clinical laboratory codes are similar to the Medicare clinical laboratory schedule. We compared health plan clinical laboratory payments rates to the DMAS payment rates, estimated at 88% of Medicare payment, for the mix of clinical laboratory services used by the Medallion II, FAMIS and FAMIS Moms population. Our analysis indicated that approximately one third of health plan clinical laboratory payments were already lower than 83% of the CMS Medicare fee schedule. The average 5% reduction is applied to the proportion of clinical laboratory payments that are at or above 88% of the Medicare schedule. Payments between 83% and 88% of the Medicare schedule were reduced proportionately to meet the 83% payment level.

This adjustment is shown in Exhibit 2d and is applied to the full base period to the Lab service lines in Exhibits 4a and 4b under the column labeled "Policy and Program Adjustments".

Outpatient Rehabilitation Adjustment

DMAS will not extend a cost per unit increase to outpatient rehabilitation agencies in FY 2011. Health plan savings are estimated to be \$60,000.

This adjustment is shown in Exhibit 2e and is applied to the full base period to the Outpatient Other service lines in Exhibits 4a and 4b under the column labeled "Policy and Program Adjustments".

Hospital Inpatient Adjustments

The hospital inpatient adjustment factor reflects no allowance for a cost per unit increase in FY 2010 and FY 2011 as mandated in the budget passed by the General Assembly. Based on projected inpatient cost trend for Virginia, this rate freeze reduces the operating cost component by 4.0% in FY 2010 and 2.7% in FY 2011³. An additional FY 2010 reduction is a capital reimbursement rate reduction from 80% to 75% of cost, which is

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

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. These changes apply to both inpatient medical/surgical and inpatient psychiatric.

For inpatient medical/surgical, the negative adjustment is -6.0%. For inpatient psychiatric in acute care hospitals, the negative adjustment is -6.0%. The inpatient psychiatric factor is applied to mental health claims that are submitted with FFS payment detail and the allocated inpatient mental health subcapitation dollars. Inpatient psychiatric claims include claims that are submitted with encounter detail and the allocated mental health subcapitation dollars but exclude payments to freestanding psychiatric hospitals. These adjustment factors are shown in Exhibit 2f and applied to all hospital inpatient service categories in Exhibits 4a and 4b under the column labeled "Policy and Program Adjustments".

Freestanding Inpatient Psychiatric Hospital Adjustment

The General Assembly also mandated similar reductions in payments to freestanding psychiatric hospitals, as well as a rebasing adjustment that was effective for FY 2010. The impact on the Medallion II program was estimated to apply to 18.3% of the total Psychiatric inpatient services. This is allocated across all age groups.

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

Provider Incentive Adjustment

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

The estimated weighted average value of the case management and provider incentive programs paid outside of the encounter data is \$3.02 PMPM, or 1.1% 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 2010 health plan base rates. This percentage is shown in Exhibit 2h and is presented as the dollar value of the

percentage applicable to each rate cell in the line labeled Provider Incentive Payment in Exhibits 4a 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 2009, 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 member month 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.

We incorporate the changes made last year in how the administrative allowance is trended and applied. Prior to the FY 2010 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 and trends it to the contract period 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 0.08% of the administrative expense. The administrative dollar PMPM is apportioned across the four eligibility groups enrolled in the Virginia Medicaid managed care programs - ABAD, LIFC, FAMIS and FAMIS MOMS using the ratio of the adjusted and trended base PMPM for each aid group. The resulting CY 2009 ABAD administrative PMPM is \$59.06 and the LIFC administrative PMPM is \$13.40.

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 2011 contract period. The salary component is trended using the Bureau of Labor Statistics 2009 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 2009 calendar year Consumer Price Index for All Urban Consumers (CPI-U).

The trended value is then increased by a 1.50% contribution to reserves. The allowance for a contribution to reserve has been increased from 0.75% in last year's rate setting. Last year, the contribution to reserve was increased from 0.50% to 0.75% to offset a reduction in health plan invested assets that was 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 \$60.99 for ABAD and \$13.84 for LIFC. This value is converted to an administrative allowance percentage of the base capitation rate, a value of 6.27%. The contribution to reserves is added to determine the final administrative factor of 7.77%.

The administrative factor adjustment is shown in Exhibit 2i. 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.

V. Trend and IBNR Adjustments

The data for the trend calculations reflect experience in the Virginia Medallion II program during FY 2007 through FY 2009. These data must be adjusted to reflect the contract period of FY 2011 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 2008 to FY 2009. The historical data were evaluated using a PricewaterhouseCoopers model that calculates IBNR amounts using a variety of actuarially accepted methods, and estimates trend using a least-squares regression methodology. Trend and IBNR factors were developed separately for LIFC Under 21, LIFC 21 and Over, and ABAD and for the following service categories: Hospital Inpatient, Hospital Outpatient, Practitioner, Prescription Drug, and Other (Transportation, DME, Lab/X-Ray). In prior years, DME encounters were included in the Practitioner service category.

Trend adjustments are applied to move the historical data from the midpoint of the data period (July 1, 2008) to the midpoint of the contract period (January 1, 2011), 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 developed to reflect our best estimate of trend in the future and are based primarily on the three year historical trends and include

analysis of additional health plan paid claims paid through February 2010. 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 increases provided by DMAS and other sources, as well as the overall rate of change, to derive recommended trend assumptions.

Both data and contract period trends were evaluated including adjustments for changes 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 for FY 2007. The 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 Acute Hospital Inpatient, Hospital Outpatient or Pharmacy.

Table I				
Summary of Adjustments to Trend Models				
Service	FY	ABAD	LIFC	
			CHILD	ADULT
Professional	FY07	1.0518	1.0733	1.0313
	FY08	1.0000	1.0000	1.0000
	FY09	1.0000	1.0000	1.0000
Psych Inpt	FY07	1.0432	1.0432	1.0432
	FY08	1.0432	1.0432	1.0432
	FY09	1.0000	1.0000	1.0000

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, labeled "Completion Factor Adjustment".

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

Utilization and cost trend are presented separately for the base period and as a combined trend for the contract period. Overall, data period trend is higher than the applied contract period trend. The data period trend is about 0.9% higher than the contract period trend for the LIFC Child, 0.9% higher for LIFC Adult and 0.1% higher for ABAD. Since the data used in this data period analysis has run-out through October 2009, or four months past the

end of the data reporting period, the resulting IBNR factors are generally small, with a weighted average of 1% to 2%.

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

VI. Base Capitation Rates

The health plan base capitation rates for FY 2011 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 May 2010 health plan eligible months as weights, which are shown in Exhibit 5e.

Mental Health Parity Adjustment

New regulations mandated by the Federal Mental Health Parity Act of 2008 will be effective July 1, 2010. The general requirement under parity states that health plans must ensure that benefit limitations applied to mental health and substance abuse services are the same as those applied to medical/surgical services. We performed an analysis of the mental health encounter data and each health plan submitted supplemental data on the number of mental health/substance abuse cases which were denied due to benefit limitations. In general, plans reported denials due to benefit limitations for inpatient mental health/substance services, but did not report such denials for professional services. Discussions with the plans also indicated that benefits were not restricted for children up to age 19 covered under EPSDT. We have estimated that implementation of the act will result in \$1.8 million in additional expenditure that will cover approximately 2,000 inpatient days for adults ages 21 and over. Projected expenditures are allocated 12% to LIFC and 88% to ABAD based on historical utilization differences and the May 2010 member month distribution. The adjustment is presented in Exhibit 5b.

Comparison of FY 2010 and FY 2011 Health Plan Base Capitation Rates

Weighted average base rates have been calculated for FY 2010 and FY 2011 health plan capitation rates using managed care enrollee member months for May 2010 as weights. The year-to-year comparisons using current FY 2010 base rates are shown in Exhibit 5b.

The average base rate for the LIFC groups is 7.15% higher than current FY 2010 rates, while the average base rate for the ABAD groups is 11.6% higher than current rates. This comparison shows a year-to-year combined weighted average increase of 8.71%.

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 result in an increase in payments for a given health plan that must be offset by a lower risk score and a reduction in payments to other health plan(s) within the region.

DMAS policy for development of the person-level risk scores uses all the diagnosis codes included on the health plan encounter data and applies the most recent CDPS version.

The FY 2010 Medallion II rate setting used CDPS Version 5.0 with Virginia specific weights. 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 FY 2006 to FY 2009 health plan encounter data and compared the results to those obtained using the national weights. Based upon review of the alternative model results, the CDPS risk assessment scores derived from the Med/Surg plus Pharmacy model using Virginia specific weights provided the best fit to the Medallion II health plan encounter data. More detail on the CDPS V5.0 testing and re-calibration using Virginia data was described in the memo attached as an appendix to the FY2010 Medallion II rate setting report.

FY 2011 rate setting used a new CDPS model, Version 5.1. Each new version of the grouper updates diagnosis categories in the CDPS assessment. Testing CDPS V5.0 versus CDPS V5.1 with national and the FY2010 Virginia specific weights indicated that there is very little change due to new diagnoses or modifications in the grouper. We also updated the Virginia specific weight calculations using FY 2007 to FY 2009 health plan encounter data.

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 LIFC children, LIFC adults, and ABAD. The different models use largely the same risk status classification system, but the value attached to each characteristic varies among the models. There are also slight differences in the medical conditions included in the various models. For example, a larger percentage of the ABAD population has claims and an identifiable medical condition than does the LIFC population. Consequently, the base values for age and gender contribute less to the risk score for the ABAD population than for the LIFC population, and the value associated with the various medical conditions represents a larger contribution to the risk score.

A health plan score is calculated based on an aggregation of the individual scores for the plan's enrollees using claims for the second year of the data period and assigned to the health plan of enrollment as of the most recent date known (May 2010 if still enrolled). Risk scores for a health plan are developed first at the rate cell level and then by summing the scores for all enrollees in the region and dividing by the number of eligible people. Average scores for each health plan are compared to the average score across all plans for the eligibility category in a region and a relative risk score is developed for each health plan.

CDPS Analysis Results

The FY 2011 analysis builds upon the CDPS Version 5.1 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 2011 base rates:

- Use calculations based on the most recent year of both MCO and DMAS FFS data, FY 2009, 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. These relative risk scores use health plan enrollment as of May 1, 2010. This reflects all plan reassignments due to exits from localities by Optima and Premier during FY 2010.

Health Plan FY 2011 CDPS Adjusted Rates

The FY 2011 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 5c 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 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age Under 1								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	100,766	101,423						
Service Type								
DME/Supplies	\$342,744	\$392,411	\$3.40	\$3.87	510	667	\$80.02	\$69.59
FQHC / RHC	\$67,545	\$61,541	\$0.67	\$0.61	335	302	\$23.98	\$24.09
Home Health	\$39,345	\$23,838	\$0.39	\$0.24	12	10	\$393.45	\$290.70
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$9,232,602	\$11,102,215	\$91.62	\$109.46	310	334	\$3,544.14	\$3,938.00
IP - Other	\$3,706,668	\$3,819,471	\$36.78	\$37.66	86	79	\$5,104.27	\$5,726.34
IP - Psych	\$3,568	\$3,529	\$0.04	\$0.03	0	0	-	-
Lab	\$145,457	\$154,775	\$1.44	\$1.53	1,565	1,886	\$11.07	\$9.71
OP - Emergency Room & Related	\$1,525,785	\$1,567,650	\$15.14	\$15.46	954	947	\$190.53	\$195.91
OP - Other	\$802,858	\$986,845	\$7.97	\$9.73	465	376	\$205.43	\$310.43
Pharmacy	\$2,272,479	\$2,595,129	\$22.55	\$25.59	5,487	5,327	\$49.32	\$57.64
Prof - Anesthesia	\$106,351	\$115,748	\$1.06	\$1.14	58	59	\$217.40	\$231.50
Prof - Child EPSDT	\$989,590	\$841,272	\$9.82	\$8.29	9,374	8,235	\$12.57	\$12.09
Prof - Evaluation & Management	\$7,856,202	\$8,395,566	\$77.96	\$82.78	13,009	13,439	\$71.92	\$73.91
Prof - Maternity	\$0	\$1,128	\$0.00	\$0.01	0	0	-	\$1,127.62
Prof - Other	\$892,884	\$1,092,422	\$8.86	\$10.77	7,142	7,398	\$14.89	\$17.47
Prof - Psych	\$3,329	\$3,509	\$0.03	\$0.03	0	0	\$3,329.39	\$877.23
Prof - Specialist	\$418,355	\$451,538	\$4.15	\$4.45	396	392	\$125.87	\$136.21
Prof - Vision	\$143,021	\$145,768	\$1.42	\$1.44	122	123	\$139.52	\$140.03
Radiology	\$136,894	\$142,223	\$1.36	\$1.40	1,102	1,147	\$14.79	\$14.67
Transportation/Ambulance	\$404,368	\$383,573	\$4.01	\$3.78	368	366	\$130.77	\$124.10
Total	\$29,090,046	\$32,280,150	\$288.69	\$318.27				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 1-5								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	309,755	354,142						
Service Type								
DME/Supplies	\$440,149	\$470,588	\$1.42	\$1.33	185	195	\$92.33	\$81.81
FQHC / RHC	\$117,999	\$146,281	\$0.38	\$0.41	161	170	\$28.45	\$29.19
Home Health	\$9,379	\$1,366	\$0.03	\$0.00	1	0	\$302.56	\$170.77
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,021,788	\$4,472,317	\$12.98	\$12.63	28	26	\$5,554.96	\$5,900.15
IP - Psych	\$16,310	\$21,434	\$0.05	\$0.06	0	1	\$1,631.04	\$1,428.95
Lab	\$518,678	\$617,845	\$1.67	\$1.74	1,750	2,219	\$11.48	\$9.43
OP - Emergency Room & Related	\$2,654,238	\$3,462,117	\$8.57	\$9.78	546	584	\$188.20	\$200.75
OP - Other	\$2,584,601	\$3,156,467	\$8.34	\$8.91	238	204	\$420.94	\$523.81
Pharmacy	\$5,072,184	\$5,518,785	\$16.37	\$15.58	4,758	4,706	\$41.30	\$39.73
Prof - Anesthesia	\$253,984	\$282,268	\$0.82	\$0.80	56	60	\$174.68	\$160.74
Prof - Child EPSDT	\$591,534	\$633,031	\$1.91	\$1.79	1,944	1,918	\$11.79	\$11.18
Prof - Evaluation & Management	\$9,924,396	\$11,637,220	\$32.04	\$32.86	5,838	5,970	\$65.85	\$66.05
Prof - Maternity	\$30	\$0	\$0.00	\$0.00	0	0	\$30.00	-
Prof - Other	\$1,206,454	\$1,529,439	\$3.89	\$4.32	3,197	3,495	\$14.62	\$14.83
Prof - Psych	\$62,685	\$71,310	\$0.20	\$0.20	35	33	\$69.73	\$73.90
Prof - Specialist	\$728,181	\$755,872	\$2.35	\$2.13	222	213	\$127.13	\$119.98
Prof - Vision	\$394,134	\$483,563	\$1.27	\$1.37	100	109	\$152.00	\$150.74
Radiology	\$180,510	\$198,684	\$0.58	\$0.56	397	395	\$17.62	\$17.05
Transportation/Ambulance	\$951,139	\$1,018,004	\$3.07	\$2.87	195	211	\$188.94	\$163.25
Total	\$29,728,374	\$34,476,591	\$95.97	\$97.35				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 6-14								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	309,540	356,421						
Service Type								
DME/Supplies	\$215,157	\$221,115	\$0.70	\$0.62	67	75	\$125.16	\$99.24
FQHC / RHC	\$49,650	\$69,175	\$0.16	\$0.19	72	84	\$26.85	\$27.68
Home Health	\$4,788	\$1,884	\$0.02	\$0.01	1	0	\$265.97	\$376.88
IP - Maternity	\$8,782	\$22,260	\$0.03	\$0.06	0	0	\$2,927.37	\$2,226.02
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,344,367	\$3,063,521	\$7.57	\$8.60	14	13	\$6,717.38	\$8,019.69
IP - Psych	\$341,712	\$497,995	\$1.10	\$1.40	17	21	\$764.46	\$816.39
Lab	\$430,365	\$537,940	\$1.39	\$1.51	1,251	1,581	\$13.33	\$11.46
OP - Emergency Room & Related	\$1,858,608	\$2,553,276	\$6.00	\$7.16	292	325	\$247.02	\$264.40
OP - Other	\$1,675,233	\$2,235,741	\$5.41	\$6.27	155	161	\$418.29	\$466.56
Pharmacy	\$6,243,000	\$6,673,369	\$20.17	\$18.72	3,807	3,908	\$63.57	\$57.49
Prof - Anesthesia	\$143,922	\$184,335	\$0.46	\$0.52	30	35	\$186.43	\$176.57
Prof - Child EPSDT	\$147,591	\$170,689	\$0.48	\$0.48	510	548	\$11.22	\$10.49
Prof - Evaluation & Management	\$5,881,531	\$7,291,129	\$19.00	\$20.46	3,186	3,464	\$71.57	\$70.87
Prof - Maternity	\$1,176	\$15,077	\$0.00	\$0.04	0	1	\$195.93	\$1,005.15
Prof - Other	\$2,755,182	\$2,938,331	\$8.90	\$8.24	9,293	10,132	\$11.49	\$9.76
Prof - Psych	\$453,011	\$478,889	\$1.46	\$1.34	287	262	\$61.14	\$61.59
Prof - Specialist	\$531,332	\$658,930	\$1.72	\$1.85	149	161	\$138.40	\$137.65
Prof - Vision	\$427,711	\$546,889	\$1.38	\$1.53	453	409	\$36.61	\$45.01
Radiology	\$226,495	\$290,912	\$0.73	\$0.82	349	390	\$25.17	\$25.12
Transportation/Ambulance	\$865,365	\$960,603	\$2.80	\$2.70	169	163	\$198.66	\$198.97
Total	\$24,604,977	\$29,412,060	\$79.49	\$82.52				

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

Exhibit 1a

Age 15-20 Female								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	54,786	60,917						
Service Type								
DME/Supplies	\$38,903	\$56,218	\$0.71	\$0.92	52	60	\$164.84	\$183.72
FQHC / RHC	\$4,376	\$4,146	\$0.08	\$0.07	43	31	\$22.44	\$26.24
Home Health	\$5,117	\$6,419	\$0.09	\$0.11	5	5	\$222.49	\$279.08
IP - Maternity	\$2,045,537	\$2,224,990	\$37.34	\$36.52	158	151	\$2,829.24	\$2,900.90
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$636,210	\$798,522	\$11.61	\$13.11	27	24	\$5,130.73	\$6,492.05
IP - Psych	\$121,887	\$162,866	\$2.22	\$2.67	36	37	\$734.26	\$870.94
Lab	\$147,110	\$175,979	\$2.69	\$2.89	3,197	4,208	\$10.08	\$8.24
OP - Emergency Room & Related	\$1,006,967	\$1,253,454	\$18.38	\$20.58	598	633	\$369.12	\$389.88
OP - Other	\$779,275	\$828,977	\$14.22	\$13.61	451	456	\$378.66	\$358.09
Pharmacy	\$1,066,595	\$1,128,558	\$19.47	\$18.53	5,254	5,556	\$44.47	\$40.01
Prof - Anesthesia	\$238,341	\$254,933	\$4.35	\$4.18	194	197	\$268.70	\$254.93
Prof - Child EPSDT	\$19,755	\$20,703	\$0.36	\$0.34	269	511	\$16.11	\$7.99
Prof - Evaluation & Management	\$1,334,743	\$1,603,812	\$24.36	\$26.33	3,935	4,218	\$74.29	\$74.90
Prof - Maternity	\$1,071,377	\$1,126,585	\$19.56	\$18.49	290	240	\$810.42	\$926.47
Prof - Other	\$235,355	\$350,314	\$4.30	\$5.75	2,918	4,489	\$17.66	\$15.37
Prof - Psych	\$92,446	\$109,580	\$1.69	\$1.80	339	397	\$59.68	\$54.38
Prof - Specialist	\$168,537	\$202,136	\$3.08	\$3.32	310	312	\$119.19	\$127.69
Prof - Vision	\$74,421	\$89,712	\$1.36	\$1.47	620	524	\$26.29	\$33.70
Radiology	\$251,706	\$324,328	\$4.59	\$5.32	1,042	1,165	\$52.90	\$54.85
Transportation/Ambulance	\$168,379	\$186,615	\$3.07	\$3.06	385	469	\$95.89	\$78.41
Total	\$9,507,038	\$10,908,849	\$173.53	\$179.08				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Female								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	70,480	79,980						
Service Type								
DME/Supplies	\$129,639	\$156,872	\$1.84	\$1.96	133	167	\$166.42	\$140.57
FQHC / RHC	\$5,524	\$4,982	\$0.08	\$0.06	31	25	\$30.69	\$29.65
Home Health	\$20,244	\$36,760	\$0.29	\$0.46	11	15	\$326.51	\$356.89
IP - Maternity	\$6,775,225	\$6,993,133	\$96.13	\$87.44	391	345	\$2,953.45	\$3,039.17
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,106,035	\$5,023,129	\$44.07	\$62.80	82	89	\$6,484.42	\$8,485.01
IP - Psych	\$332,495	\$446,625	\$4.72	\$5.58	65	75	\$865.87	\$889.69
Lab	\$296,117	\$391,316	\$4.20	\$4.89	5,963	8,375	\$8.46	\$7.01
OP - Emergency Room & Related	\$3,237,831	\$4,256,384	\$45.94	\$53.22	1,412	1,468	\$390.48	\$435.08
OP - Other	\$2,954,725	\$3,450,886	\$41.92	\$43.15	1,146	1,104	\$439.10	\$468.81
Pharmacy	\$3,922,339	\$4,878,139	\$55.65	\$60.99	15,159	16,471	\$44.05	\$44.44
Prof - Anesthesia	\$785,668	\$842,133	\$11.15	\$10.53	522	529	\$256.25	\$238.63
Prof - Child EPSDT	\$20,507	\$25,704	\$0.29	\$0.32	625	983	\$5.59	\$3.92
Prof - Evaluation & Management	\$2,878,634	\$3,639,496	\$40.84	\$45.51	7,327	7,945	\$66.89	\$68.73
Prof - Maternity	\$3,305,741	\$3,415,999	\$46.90	\$42.71	843	646	\$667.69	\$793.68
Prof - Other	\$658,687	\$805,616	\$9.35	\$10.07	5,915	7,301	\$18.96	\$16.56
Prof - Psych	\$204,801	\$250,403	\$2.91	\$3.13	759	979	\$45.95	\$38.37
Prof - Specialist	\$885,666	\$1,267,514	\$12.57	\$15.85	914	1,067	\$164.90	\$178.20
Prof - Vision	\$74,330	\$91,764	\$1.05	\$1.15	206	205	\$61.38	\$67.23
Radiology	\$980,071	\$1,342,962	\$13.91	\$16.79	3,015	3,425	\$55.35	\$58.83
Transportation/Ambulance	\$269,942	\$314,103	\$3.83	\$3.93	1,198	1,264	\$38.35	\$37.28
Total	\$30,844,222	\$37,633,919	\$437.63	\$470.54				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Male								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	44,566	51,066						
Service Type								
DME/Supplies	\$15,751	\$47,827	\$0.35	\$0.94	38	59	\$110.92	\$191.31
FQHC / RHC	\$3,088	\$2,352	\$0.07	\$0.05	36	16	\$23.22	\$33.60
Home Health	\$855	\$790	\$0.02	\$0.02	1	1	\$427.50	\$197.50
IP - Maternity	\$2,674	\$2,058	\$0.06	\$0.04	0	0	\$2,673.85	\$2,057.96
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$468,191	\$378,735	\$10.51	\$7.42	15	14	\$8,360.55	\$6,419.24
IP - Psych	\$116,254	\$177,781	\$2.61	\$3.48	39	52	\$801.75	\$804.44
Lab	\$53,107	\$66,354	\$1.19	\$1.30	1,089	1,407	\$13.13	\$11.08
OP - Emergency Room & Related	\$432,156	\$517,923	\$9.70	\$10.14	357	359	\$326.16	\$338.95
OP - Other	\$355,382	\$424,578	\$7.97	\$8.31	174	169	\$550.98	\$589.69
Pharmacy	\$892,116	\$1,001,581	\$20.02	\$19.61	3,453	3,634	\$69.57	\$64.77
Prof - Anesthesia	\$28,742	\$37,519	\$0.64	\$0.73	39	45	\$196.86	\$197.47
Prof - Child EPSDT	\$10,589	\$12,057	\$0.24	\$0.24	1,245	281	\$2.29	\$10.07
Prof - Evaluation & Management	\$699,190	\$857,494	\$15.69	\$16.79	2,429	2,603	\$77.51	\$77.40
Prof - Maternity	\$0	\$801	\$0.00	\$0.02	0	0	-	\$800.69
Prof - Other	\$152,826	\$499,348	\$3.43	\$9.78	2,555	2,763	\$16.10	\$42.48
Prof - Psych	\$80,531	\$104,362	\$1.81	\$2.04	339	403	\$64.02	\$60.85
Prof - Specialist	\$135,936	\$146,742	\$3.05	\$2.87	223	217	\$164.17	\$159.16
Prof - Vision	\$57,364	\$71,930	\$1.29	\$1.41	427	364	\$36.21	\$46.44
Radiology	\$58,102	\$77,596	\$1.30	\$1.52	527	563	\$29.66	\$32.41
Transportation/Ambulance	\$132,098	\$149,680	\$2.96	\$2.93	210	240	\$169.36	\$146.60
Total	\$3,694,950	\$4,577,509	\$82.91	\$89.64				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Male								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	5,383	6,981						
Service Type								
DME/Supplies	\$36,853	\$26,791	\$6.85	\$3.84	450	268	\$182.44	\$171.74
FQHC / RHC	\$288	\$63	\$0.05	\$0.01	9	5	\$72.04	\$21.03
Home Health	\$1,884	\$0	\$0.35	\$0.00	18	0	\$235.55	-
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$389,872	\$639,914	\$72.43	\$91.67	109	100	\$7,956.58	\$11,033.00
IP - Psych	\$2,977	\$42,123	\$0.55	\$6.03	7	76	\$992.41	\$957.33
Lab	\$8,702	\$14,225	\$1.62	\$2.04	1,797	3,474	\$10.80	\$7.04
OP - Emergency Room & Related	\$159,839	\$269,798	\$29.69	\$38.65	1,103	1,183	\$322.91	\$392.15
OP - Other	\$127,518	\$248,794	\$23.69	\$35.64	403	468	\$704.52	\$914.68
Pharmacy	\$310,756	\$415,965	\$57.73	\$59.59	13,712	13,958	\$50.52	\$51.23
Prof - Anesthesia	\$9,281	\$16,049	\$1.72	\$2.30	114	144	\$181.97	\$191.06
Prof - Child EPSDT	\$377	\$1,208	\$0.07	\$0.17	791	211	\$1.06	\$9.82
Prof - Evaluation & Management	\$160,391	\$235,856	\$29.80	\$33.79	5,502	5,798	\$64.99	\$69.92
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$42,322	\$64,714	\$7.86	\$9.27	6,458	6,131	\$14.61	\$18.14
Prof - Psych	\$17,458	\$14,142	\$3.24	\$2.03	602	430	\$64.66	\$56.57
Prof - Specialist	\$49,973	\$79,424	\$9.28	\$11.38	704	817	\$158.14	\$167.21
Prof - Vision	\$6,321	\$9,381	\$1.17	\$1.34	241	230	\$58.52	\$70.00
Radiology	\$35,021	\$56,165	\$6.51	\$8.05	1,828	2,011	\$42.71	\$48.00
Transportation/Ambulance	\$18,882	\$22,580	\$3.51	\$3.23	430	280	\$97.83	\$138.53
Total	\$1,378,716	\$2,157,192	\$256.12	\$309.01				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 45 and Over								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	9,155	10,797						
Service Type								
DME/Supplies	\$62,747	\$73,303	\$6.85	\$6.79	510	575	\$161.30	\$141.79
FQHC / RHC	\$1,820	\$2,862	\$0.20	\$0.27	98	112	\$24.27	\$28.33
Home Health	\$17,293	\$14,967	\$1.89	\$1.39	46	28	\$494.09	\$598.68
IP - Maternity	\$8,156	\$26,350	\$0.89	\$2.44	4	9	\$2,718.55	\$3,293.78
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,387,165	\$1,401,731	\$151.52	\$129.83	190	157	\$9,566.65	\$9,941.36
IP - Psych	\$41,464	\$98,424	\$4.53	\$9.12	76	116	\$714.90	\$946.39
Lab	\$37,059	\$55,052	\$4.05	\$5.10	5,946	8,243	\$8.17	\$7.42
OP - Emergency Room & Related	\$374,648	\$429,779	\$40.92	\$39.81	995	911	\$493.61	\$524.12
OP - Other	\$466,650	\$691,390	\$50.97	\$64.04	1,058	1,133	\$578.25	\$678.50
Pharmacy	\$1,251,732	\$1,482,653	\$136.73	\$137.32	30,943	31,795	\$53.02	\$51.83
Prof - Anesthesia	\$32,559	\$49,970	\$3.56	\$4.63	219	295	\$194.97	\$188.57
Prof - Child EPSDT	\$1,854	\$3,261	\$0.20	\$0.30	3,036	2,313	\$0.80	\$1.57
Prof - Evaluation & Management	\$501,040	\$614,228	\$54.73	\$56.89	9,844	10,196	\$66.72	\$66.95
Prof - Maternity	\$5,480	\$9,617	\$0.60	\$0.89	22	13	\$322.33	\$801.45
Prof - Other	\$214,903	\$284,682	\$23.47	\$26.37	41,535	16,019	\$6.78	\$19.75
Prof - Psych	\$35,824	\$42,546	\$3.91	\$3.94	1,043	856	\$45.01	\$55.26
Prof - Specialist	\$178,713	\$276,522	\$19.52	\$25.61	1,302	1,613	\$179.97	\$190.57
Prof - Vision	\$23,623	\$29,156	\$2.58	\$2.70	637	590	\$48.61	\$54.91
Radiology	\$150,177	\$206,084	\$16.40	\$19.09	3,766	3,900	\$52.27	\$58.73
Transportation/Ambulance	\$46,613	\$58,959	\$5.09	\$5.46	1,612	2,069	\$37.90	\$31.66
Total	\$4,839,520	\$5,851,537	\$528.62	\$541.96				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

All Age Categories								
Northern Virginia	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	904,431	1,021,727						
Service Type								
DME/Supplies	\$1,281,943	\$1,445,126	\$1.42	\$1.41	166	187	\$102.41	\$90.52
FQHC / RHC	\$250,290	\$291,401	\$0.28	\$0.29	125	124	\$26.62	\$27.58
Home Health	\$98,905	\$86,024	\$0.11	\$0.08	4	3	\$354.50	\$344.10
IP - Maternity	\$8,840,374	\$9,268,791	\$9.77	\$9.07	40	36	\$2,923.40	\$3,002.52
IP - Newborn	\$9,232,602	\$11,102,215	\$10.21	\$10.87	35	33	\$3,544.14	\$3,938.00
IP - Other	\$16,060,297	\$19,597,341	\$17.76	\$19.18	35	33	\$6,055.49	\$7,049.40
IP - Psych	\$976,667	\$1,450,777	\$1.08	\$1.42	16	20	\$805.17	\$862.02
Lab	\$1,636,595	\$2,013,486	\$1.81	\$1.97	1,985	2,595	\$10.94	\$9.11
OP - Emergency Room & Related	\$11,250,073	\$14,310,381	\$12.44	\$14.01	574	598	\$260.21	\$280.93
OP - Other	\$9,746,242	\$12,023,678	\$10.78	\$11.77	325	302	\$398.24	\$468.14
Pharmacy	\$21,031,202	\$23,694,178	\$23.25	\$23.19	5,608	5,757	\$49.76	\$48.34
Prof - Anesthesia	\$1,598,848	\$1,782,956	\$1.77	\$1.75	93	98	\$227.36	\$213.07
Prof - Child EPSDT	\$1,781,799	\$1,707,925	\$1.97	\$1.67	2,046	1,821	\$11.55	\$11.02
Prof - Evaluation & Management	\$29,236,127	\$34,274,802	\$32.33	\$33.55	5,601	5,762	\$69.26	\$69.86
Prof - Maternity	\$4,383,803	\$4,569,208	\$4.85	\$4.47	84	65	\$696.17	\$823.43
Prof - Other	\$6,158,613	\$7,564,865	\$6.81	\$7.40	6,294	6,669	\$12.98	\$13.32
Prof - Psych	\$950,086	\$1,074,741	\$1.05	\$1.05	221	235	\$57.10	\$53.68
Prof - Specialist	\$3,096,692	\$3,838,679	\$3.42	\$3.76	289	305	\$141.97	\$147.95
Prof - Vision	\$1,200,924	\$1,468,161	\$1.33	\$1.44	286	266	\$55.80	\$64.85
Radiology	\$2,018,975	\$2,638,953	\$2.23	\$2.58	751	807	\$35.66	\$38.39
Transportation/Ambulance	\$2,856,786	\$3,094,117	\$3.16	\$3.03	312	329	\$121.67	\$110.48
Total	\$133,687,844	\$157,297,806	\$147.81	\$153.95				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age Under 1								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	57,082	63,238						
Service Type								
DME/Supplies	\$199,202	\$253,750	\$3.49	\$4.01	514	543	\$81.55	\$88.63
FQHC / RHC	\$196,142	\$289,836	\$3.44	\$4.58	1,113	1,614	\$37.06	\$34.07
Home Health	\$41,495	\$30,162	\$0.73	\$0.48	39	22	\$221.90	\$262.28
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$9,411,426	\$11,113,753	\$164.88	\$175.74	672	662	\$2,943.09	\$3,183.54
IP - Other	\$1,648,594	\$1,646,321	\$28.88	\$26.03	100	91	\$3,474.52	\$3,451.41
IP - Psych	\$35,749	\$43,764	\$0.63	\$0.69	0	0	-	-
Lab	\$185,538	\$220,823	\$3.25	\$3.49	3,542	4,169	\$11.01	\$10.05
OP - Emergency Room & Related	\$644,604	\$738,492	\$11.29	\$11.68	1,214	1,226	\$111.65	\$114.26
OP - Other	\$612,470	\$683,752	\$10.73	\$10.81	468	529	\$275.33	\$245.16
Pharmacy	\$1,128,186	\$1,109,573	\$19.76	\$17.55	5,030	5,020	\$47.16	\$41.94
Prof - Anesthesia	\$52,603	\$64,845	\$0.92	\$1.03	71	76	\$156.86	\$161.31
Prof - Child EPSDT	\$531,116	\$503,012	\$9.30	\$7.95	9,160	7,716	\$12.19	\$12.37
Prof - Evaluation & Management	\$4,609,004	\$5,300,994	\$80.74	\$83.83	13,094	13,373	\$74.00	\$75.22
Prof - Maternity	\$1,754	\$0	\$0.03	\$0.00	0	0	\$1,754.22	-
Prof - Other	\$818,558	\$911,793	\$14.34	\$14.42	10,927	11,313	\$15.75	\$15.29
Prof - Psych	\$33,377	\$41,053	\$0.58	\$0.65	2	2	\$4,172.17	\$3,732.06
Prof - Specialist	\$375,695	\$501,792	\$6.58	\$7.93	898	883	\$87.97	\$107.87
Prof - Vision	\$73,844	\$80,122	\$1.29	\$1.27	55	51	\$281.72	\$298.96
Radiology	\$82,792	\$92,657	\$1.45	\$1.47	1,336	1,347	\$13.02	\$13.05
Transportation/Ambulance	\$198,217	\$206,960	\$3.47	\$3.27	331	346	\$126.04	\$113.53
Total	\$20,880,367	\$23,833,454	\$365.80	\$376.89				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 1-5								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	168,837	201,745						
Service Type								
DME/Supplies	\$178,298	\$190,239	\$1.06	\$0.94	174	171	\$72.83	\$66.10
FQHC / RHC	\$176,857	\$333,939	\$1.05	\$1.66	401	716	\$31.36	\$27.73
Home Health	\$12,459	\$14,414	\$0.07	\$0.07	2	2	\$366.45	\$514.80
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,771,880	\$2,033,647	\$10.49	\$10.08	32	33	\$3,928.78	\$3,711.03
IP - Psych	\$131,567	\$160,559	\$0.78	\$0.80	2	1	\$5,720.32	\$7,298.12
Lab	\$337,481	\$376,589	\$2.00	\$1.87	1,625	1,767	\$14.76	\$12.68
OP - Emergency Room & Related	\$1,278,492	\$1,624,377	\$7.57	\$8.05	767	767	\$118.48	\$126.00
OP - Other	\$1,728,481	\$2,281,037	\$10.24	\$11.31	362	431	\$339.12	\$315.15
Pharmacy	\$2,071,937	\$2,947,059	\$12.27	\$14.61	4,456	4,327	\$33.05	\$40.51
Prof - Anesthesia	\$134,026	\$166,809	\$0.79	\$0.83	81	80	\$116.95	\$123.29
Prof - Child EPSDT	\$265,612	\$343,661	\$1.57	\$1.70	1,841	1,829	\$10.26	\$11.18
Prof - Evaluation & Management	\$3,827,897	\$4,731,639	\$22.67	\$23.45	4,498	4,496	\$60.49	\$62.60
Prof - Maternity	\$0	\$32	\$0.00	\$0.00	0	0	-	\$31.67
Prof - Other	\$936,448	\$1,280,782	\$5.55	\$6.35	3,253	3,147	\$20.46	\$24.21
Prof - Psych	\$230,513	\$279,436	\$1.37	\$1.39	165	157	\$99.36	\$105.65
Prof - Specialist	\$606,232	\$644,031	\$3.59	\$3.19	449	434	\$95.97	\$88.18
Prof - Vision	\$206,121	\$245,570	\$1.22	\$1.22	52	59	\$279.68	\$249.31
Radiology	\$85,880	\$114,852	\$0.51	\$0.57	412	425	\$14.80	\$16.09
Transportation/Ambulance	\$399,075	\$497,733	\$2.36	\$2.47	200	215	\$142.07	\$137.99
Total	\$14,379,257	\$18,266,404	\$85.17	\$90.54				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 6-14								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	194,019	229,359						
Service Type								
DME/Supplies	\$196,020	\$248,876	\$1.01	\$1.09	109	111	\$110.81	\$117.56
FQHC / RHC	\$169,560	\$251,094	\$0.87	\$1.09	313	431	\$33.56	\$30.46
Home Health	\$27,918	\$8,151	\$0.14	\$0.04	2	1	\$845.99	\$429.02
IP - Maternity	\$30,319	\$12,821	\$0.16	\$0.06	1	0	\$2,332.21	\$2,136.83
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,201,953	\$1,244,152	\$6.20	\$5.42	13	12	\$5,723.58	\$5,249.59
IP - Psych	\$454,789	\$896,603	\$2.34	\$3.91	33	51	\$848.49	\$911.18
Lab	\$359,853	\$431,474	\$1.85	\$1.88	1,386	1,606	\$16.06	\$14.06
OP - Emergency Room & Related	\$1,163,170	\$1,440,491	\$6.00	\$6.28	449	441	\$160.30	\$170.90
OP - Other	\$1,344,853	\$1,613,083	\$6.93	\$7.03	234	275	\$354.75	\$306.96
Pharmacy	\$5,099,757	\$6,211,924	\$26.28	\$27.08	5,175	5,301	\$60.95	\$61.31
Prof - Anesthesia	\$81,360	\$95,187	\$0.42	\$0.42	39	41	\$130.38	\$121.41
Prof - Child EPSDT	\$71,575	\$75,800	\$0.37	\$0.33	428	359	\$10.35	\$11.03
Prof - Evaluation & Management	\$2,826,105	\$3,545,133	\$14.57	\$15.46	2,809	2,905	\$62.22	\$63.84
Prof - Maternity	\$22,096	\$10,138	\$0.11	\$0.04	4	1	\$374.51	\$633.59
Prof - Other	\$523,004	\$691,319	\$2.70	\$3.01	1,923	1,858	\$16.82	\$19.47
Prof - Psych	\$721,007	\$903,359	\$3.72	\$3.94	785	800	\$56.80	\$59.10
Prof - Specialist	\$461,216	\$510,900	\$2.38	\$2.23	283	295	\$100.75	\$90.75
Prof - Vision	\$253,345	\$307,456	\$1.31	\$1.34	206	219	\$76.06	\$73.43
Radiology	\$154,999	\$205,739	\$0.80	\$0.90	478	493	\$20.04	\$21.82
Transportation/Ambulance	\$489,330	\$603,099	\$2.52	\$2.63	360	345	\$84.14	\$91.49
Total	\$15,652,227	\$19,306,798	\$80.67	\$84.18				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Female								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	44,077	51,123						
Service Type								
DME/Supplies	\$34,943	\$37,662	\$0.79	\$0.74	96	70	\$98.71	\$125.96
FQHC / RHC	\$118,122	\$148,263	\$2.68	\$2.90	913	973	\$35.23	\$35.76
Home Health	\$40,009	\$32,994	\$0.91	\$0.65	49	41	\$222.27	\$190.72
IP - Maternity	\$2,312,962	\$2,644,010	\$52.48	\$51.72	263	244	\$2,394.37	\$2,547.22
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$740,274	\$738,809	\$16.80	\$14.45	28	27	\$7,187.12	\$6,369.04
IP - Psych	\$189,534	\$273,167	\$4.30	\$5.34	79	88	\$651.32	\$730.39
Lab	\$382,310	\$571,025	\$8.67	\$11.17	7,320	9,069	\$14.22	\$14.78
OP - Emergency Room & Related	\$925,155	\$1,087,053	\$20.99	\$21.26	1,091	1,069	\$230.83	\$238.76
OP - Other	\$743,897	\$969,960	\$16.88	\$18.97	944	980	\$214.63	\$232.27
Pharmacy	\$1,322,395	\$1,661,792	\$30.00	\$32.51	9,279	9,823	\$38.80	\$39.71
Prof - Anesthesia	\$177,556	\$193,809	\$4.03	\$3.79	267	247	\$180.81	\$184.23
Prof - Child EPSDT	\$40,701	\$39,459	\$0.92	\$0.77	613	501	\$18.07	\$18.47
Prof - Evaluation & Management	\$1,130,675	\$1,413,756	\$25.65	\$27.65	4,870	5,168	\$63.21	\$64.22
Prof - Maternity	\$1,388,391	\$1,560,446	\$31.50	\$30.52	941	839	\$401.73	\$436.61
Prof - Other	\$268,141	\$322,193	\$6.08	\$6.30	6,064	5,223	\$12.04	\$14.48
Prof - Psych	\$131,938	\$192,418	\$2.99	\$3.76	616	785	\$58.30	\$57.51
Prof - Specialist	\$205,258	\$248,344	\$4.66	\$4.86	933	977	\$59.89	\$59.67
Prof - Vision	\$57,859	\$71,937	\$1.31	\$1.41	269	307	\$58.62	\$54.96
Radiology	\$282,279	\$374,612	\$6.40	\$7.33	1,469	1,569	\$52.31	\$56.04
Transportation/Ambulance	\$179,076	\$213,724	\$4.06	\$4.18	491	507	\$99.32	\$98.90
Total	\$10,671,475	\$12,795,433	\$242.11	\$250.29				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Female								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	81,363	95,420						
Service Type								
DME/Supplies	\$184,964	\$250,817	\$2.27	\$2.63	263	306	\$103.74	\$103.05
FQHC / RHC	\$366,525	\$431,712	\$4.50	\$4.52	1,325	1,508	\$40.79	\$36.00
Home Health	\$141,766	\$121,243	\$1.74	\$1.27	68	52	\$305.53	\$294.28
IP - Maternity	\$5,950,879	\$6,876,117	\$73.14	\$72.06	338	322	\$2,597.50	\$2,689.13
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,407,756	\$4,564,923	\$41.88	\$47.84	77	82	\$6,566.00	\$7,033.78
IP - Psych	\$498,888	\$629,722	\$6.13	\$6.60	101	107	\$725.13	\$743.47
Lab	\$968,498	\$1,410,208	\$11.90	\$14.78	10,146	11,940	\$14.08	\$14.85
OP - Emergency Room & Related	\$3,082,878	\$3,655,364	\$37.89	\$38.31	1,814	1,772	\$250.70	\$259.37
OP - Other	\$3,555,609	\$4,192,642	\$43.70	\$43.94	1,478	1,629	\$354.85	\$323.68
Pharmacy	\$5,202,675	\$7,154,616	\$63.94	\$74.98	20,032	21,587	\$38.31	\$41.68
Prof - Anesthesia	\$463,437	\$542,818	\$5.70	\$5.69	416	404	\$164.34	\$168.84
Prof - Child EPSDT	\$71,472	\$80,721	\$0.88	\$0.85	1,091	1,067	\$9.67	\$9.51
Prof - Evaluation & Management	\$2,795,166	\$3,563,043	\$34.35	\$37.34	6,905	7,487	\$59.70	\$59.85
Prof - Maternity	\$3,232,736	\$3,778,393	\$39.73	\$39.60	1,158	1,109	\$411.81	\$428.29
Prof - Other	\$831,553	\$963,758	\$10.22	\$10.10	16,211	6,863	\$7.57	\$17.66
Prof - Psych	\$258,873	\$308,573	\$3.18	\$3.23	695	702	\$54.95	\$55.27
Prof - Specialist	\$1,185,150	\$1,470,371	\$14.57	\$15.41	1,717	1,815	\$101.78	\$101.85
Prof - Vision	\$111,164	\$135,217	\$1.37	\$1.42	114	134	\$144.37	\$126.49
Radiology	\$959,408	\$1,303,198	\$11.79	\$13.66	2,799	3,033	\$50.56	\$54.03
Transportation/Ambulance	\$427,891	\$578,302	\$5.26	\$6.06	916	1,046	\$68.90	\$69.50
Total	\$33,697,289	\$42,011,757	\$414.16	\$440.28				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Male								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	30,535	35,558						
Service Type								
DME/Supplies	\$49,064	\$45,845	\$1.61	\$1.29	118	112	\$163.55	\$138.09
FQHC / RHC	\$23,579	\$37,463	\$0.77	\$1.05	257	356	\$36.00	\$35.51
Home Health	\$4,886	\$2,323	\$0.16	\$0.07	4	2	\$444.15	\$387.22
IP - Maternity	\$0	\$2,348	\$0.00	\$0.07	0	0	-	\$2,348.38
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$700,499	\$1,477,492	\$22.94	\$41.55	24	20	\$11,483.59	\$25,042.23
IP - Psych	\$135,481	\$274,722	\$4.44	\$7.73	64	105	\$826.10	\$883.35
Lab	\$59,291	\$74,499	\$1.94	\$2.10	1,438	1,807	\$16.20	\$13.92
OP - Emergency Room & Related	\$340,975	\$421,426	\$11.17	\$11.85	607	613	\$220.70	\$232.06
OP - Other	\$391,959	\$434,073	\$12.84	\$12.21	308	344	\$500.59	\$425.56
Pharmacy	\$733,957	\$926,872	\$24.04	\$26.07	4,947	5,289	\$58.31	\$59.14
Prof - Anesthesia	\$17,190	\$18,869	\$0.56	\$0.53	48	47	\$142.06	\$135.75
Prof - Child EPSDT	\$5,084	\$5,482	\$0.17	\$0.15	303	211	\$6.59	\$8.76
Prof - Evaluation & Management	\$433,957	\$543,274	\$14.21	\$15.28	2,616	2,782	\$65.19	\$65.91
Prof - Maternity	\$409	\$1,028	\$0.01	\$0.03	0	2	\$409.21	\$205.61
Prof - Other	\$73,627	\$113,743	\$2.41	\$3.20	1,443	1,787	\$20.05	\$21.49
Prof - Psych	\$95,081	\$132,190	\$3.11	\$3.72	623	770	\$59.95	\$57.90
Prof - Specialist	\$123,603	\$132,465	\$4.05	\$3.73	367	390	\$132.34	\$114.49
Prof - Vision	\$38,019	\$44,088	\$1.25	\$1.24	183	183	\$81.76	\$81.49
Radiology	\$62,750	\$69,839	\$2.06	\$1.96	883	881	\$27.91	\$26.76
Transportation/Ambulance	\$95,294	\$103,123	\$3.12	\$2.90	402	342	\$93.06	\$101.90
Total	\$3,384,704	\$4,861,164	\$110.85	\$136.71				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Male								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	7,449	9,389						
Service Type								
DME/Supplies	\$51,938	\$101,994	\$6.97	\$10.86	532	615	\$157.39	\$212.05
FQHC / RHC	\$46,781	\$37,461	\$6.28	\$3.99	1,658	1,520	\$45.46	\$31.51
Home Health	\$2,688	\$18,730	\$0.36	\$1.99	13	33	\$336.02	\$720.40
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$666,334	\$747,937	\$89.45	\$79.66	130	109	\$8,226.34	\$8,799.26
IP - Psych	\$72,405	\$80,233	\$9.72	\$8.55	156	130	\$746.45	\$786.60
Lab	\$42,055	\$57,962	\$5.65	\$6.17	5,091	5,832	\$13.31	\$12.70
OP - Emergency Room & Related	\$280,546	\$328,658	\$37.66	\$35.00	1,803	1,649	\$250.71	\$254.77
OP - Other	\$362,493	\$473,313	\$48.66	\$50.41	957	1,034	\$610.26	\$585.06
Pharmacy	\$500,982	\$716,855	\$67.25	\$76.35	19,610	20,695	\$41.16	\$44.27
Prof - Anesthesia	\$15,787	\$18,591	\$2.12	\$1.98	142	153	\$179.39	\$154.92
Prof - Child EPSDT	\$1,535	\$3,763	\$0.21	\$0.40	2,299	1,247	\$1.08	\$3.86
Prof - Evaluation & Management	\$214,673	\$290,741	\$28.82	\$30.97	5,783	6,128	\$59.80	\$60.63
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$51,624	\$99,617	\$6.93	\$10.61	3,145	4,806	\$26.45	\$26.49
Prof - Psych	\$17,840	\$31,948	\$2.40	\$3.40	536	714	\$53.57	\$57.15
Prof - Specialist	\$129,259	\$159,447	\$17.35	\$16.98	2,030	1,581	\$102.59	\$128.90
Prof - Vision	\$11,465	\$13,309	\$1.54	\$1.42	95	93	\$194.33	\$182.31
Radiology	\$54,422	\$79,799	\$7.31	\$8.50	2,557	2,657	\$34.29	\$38.38
Transportation/Ambulance	\$30,721	\$59,566	\$4.12	\$6.34	712	900	\$69.50	\$84.61
Total	\$2,553,549	\$3,319,924	\$342.80	\$353.60				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 45 and Over								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	7,173	8,430						
Service Type								
DME/Supplies	\$51,921	\$109,392	\$7.24	\$12.98	873	1,969	\$99.47	\$79.10
FQHC / RHC	\$32,651	\$45,643	\$4.55	\$5.41	1,629	2,037	\$33.52	\$31.90
Home Health	\$13,243	\$12,985	\$1.85	\$1.54	27	37	\$827.67	\$499.42
IP - Maternity	\$2,472	\$2,348	\$0.34	\$0.28	2	1	\$2,472.00	\$2,348.38
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$900,706	\$1,130,535	\$125.57	\$134.11	181	206	\$8,339.87	\$7,796.79
IP - Psych	\$42,627	\$86,636	\$5.94	\$10.28	109	148	\$655.80	\$833.04
Lab	\$67,806	\$104,810	\$9.45	\$12.43	7,665	10,218	\$14.80	\$14.60
OP - Emergency Room & Related	\$200,954	\$258,364	\$28.02	\$30.65	1,109	1,147	\$303.10	\$320.55
OP - Other	\$491,418	\$623,822	\$68.51	\$74.00	1,619	1,890	\$507.66	\$469.75
Pharmacy	\$928,757	\$1,259,147	\$129.48	\$149.37	36,253	40,326	\$42.86	\$44.45
Prof - Anesthesia	\$18,727	\$22,151	\$2.61	\$2.63	187	209	\$167.21	\$150.68
Prof - Child EPSDT	\$2,668	\$4,057	\$0.37	\$0.48	1,146	3,254	\$3.89	\$1.77
Prof - Evaluation & Management	\$277,022	\$369,021	\$38.62	\$43.77	7,578	8,478	\$61.15	\$61.96
Prof - Maternity	\$74	\$1,067	\$0.01	\$0.13	3	3	\$36.89	\$533.50
Prof - Other	\$132,939	\$323,996	\$18.53	\$38.43	7,597	31,802	\$29.28	\$14.50
Prof - Psych	\$30,840	\$35,814	\$4.30	\$4.25	960	996	\$53.73	\$51.16
Prof - Specialist	\$163,582	\$217,841	\$22.81	\$25.84	2,407	3,051	\$113.68	\$101.65
Prof - Vision	\$15,216	\$16,293	\$2.12	\$1.93	268	214	\$95.10	\$108.62
Radiology	\$90,114	\$112,256	\$12.56	\$13.32	3,548	3,738	\$42.49	\$42.75
Transportation/Ambulance	\$52,171	\$57,213	\$7.27	\$6.79	1,954	2,010	\$44.67	\$40.52
Total	\$3,515,908	\$4,793,390	\$490.16	\$568.61				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

All Age Categories								
Other MSA	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	590,535	694,262						
Service Type								
DME/Supplies	\$946,351	\$1,238,576	\$1.60	\$1.78	202	221	\$95.12	\$96.86
FQHC / RHC	\$1,130,216	\$1,575,411	\$1.91	\$2.27	630	840	\$36.48	\$32.41
Home Health	\$284,465	\$241,004	\$0.48	\$0.35	19	14	\$304.89	\$299.38
IP - Maternity	\$8,296,632	\$9,537,645	\$14.05	\$13.74	66	62	\$2,536.42	\$2,647.14
IP - Newborn	\$9,411,426	\$11,113,753	\$15.94	\$16.01	65	60	\$2,943.09	\$3,183.54
IP - Other	\$11,037,995	\$13,583,815	\$18.69	\$19.57	41	40	\$5,498.43	\$5,865.20
IP - Psych	\$1,561,041	\$2,445,405	\$2.64	\$3.52	38	47	\$837.47	\$891.18
Lab	\$2,402,832	\$3,247,391	\$4.07	\$4.68	3,438	4,028	\$14.20	\$13.94
OP - Emergency Room & Related	\$7,916,775	\$9,554,224	\$13.41	\$13.76	883	870	\$182.19	\$189.79
OP - Other	\$9,231,181	\$11,271,682	\$15.63	\$16.24	548	615	\$342.61	\$316.91
Pharmacy	\$16,988,646	\$21,987,838	\$28.77	\$31.67	7,857	8,197	\$43.94	\$46.36
Prof - Anesthesia	\$960,685	\$1,123,077	\$1.63	\$1.62	127	125	\$154.24	\$155.72
Prof - Child EPSDT	\$989,763	\$1,055,956	\$1.68	\$1.52	1,807	1,604	\$11.13	\$11.38
Prof - Evaluation & Management	\$16,114,499	\$19,757,601	\$27.29	\$28.46	5,090	5,222	\$64.34	\$65.39
Prof - Maternity	\$4,645,460	\$5,351,103	\$7.87	\$7.71	231	215	\$408.61	\$430.85
Prof - Other	\$3,635,895	\$4,707,201	\$6.16	\$6.78	5,511	4,429	\$13.41	\$18.37
Prof - Psych	\$1,519,470	\$1,924,790	\$2.57	\$2.77	498	526	\$62.05	\$63.29
Prof - Specialist	\$3,249,995	\$3,885,191	\$5.50	\$5.60	688	704	\$95.96	\$95.41
Prof - Vision	\$767,034	\$913,991	\$1.30	\$1.32	138	148	\$113.28	\$106.50
Radiology	\$1,772,643	\$2,352,952	\$3.00	\$3.39	1,021	1,068	\$35.30	\$38.08
Transportation/Ambulance	\$1,871,774	\$2,319,719	\$3.17	\$3.34	424	443	\$89.80	\$90.50
Total	\$104,734,776	\$129,188,323	\$177.36	\$186.08				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age Under 1								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	76,115	79,209						
Service Type								
DME/Supplies	\$522,773	\$502,923	\$6.87	\$6.35	907	967	\$90.85	\$78.79
FQHC / RHC	\$74,608	\$65,727	\$0.98	\$0.83	263	260	\$44.70	\$38.24
Home Health	\$27,234	\$31,045	\$0.36	\$0.39	13	13	\$328.13	\$356.84
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$11,338,376	\$12,790,751	\$148.96	\$161.48	373	408	\$4,787.07	\$4,750.96
IP - Other	\$3,366,400	\$3,232,734	\$44.23	\$40.81	129	100	\$4,101.86	\$4,875.92
IP - Psych	\$81,271	\$92,948	\$1.07	\$1.17	0	0	-	-
Lab	\$144,956	\$130,244	\$1.90	\$1.64	2,074	2,151	\$11.02	\$9.17
OP - Emergency Room & Related	\$1,581,363	\$1,708,302	\$20.78	\$21.57	1,248	1,274	\$199.70	\$203.08
OP - Other	\$1,324,376	\$1,307,326	\$17.40	\$16.50	872	861	\$239.38	\$229.92
Pharmacy	\$1,483,773	\$1,260,305	\$19.49	\$15.91	5,152	4,609	\$45.41	\$41.43
Prof - Anesthesia	\$85,293	\$76,418	\$1.12	\$0.96	73	63	\$185.21	\$185.03
Prof - Child EPSDT	\$763,688	\$677,087	\$10.03	\$8.55	9,827	8,561	\$12.25	\$11.98
Prof - Evaluation & Management	\$6,638,951	\$6,773,291	\$87.22	\$85.51	14,052	13,894	\$74.49	\$73.86
Prof - Maternity	\$2,795	\$0	\$0.04	\$0.00	0	0	\$931.62	-
Prof - Other	\$968,328	\$988,757	\$12.72	\$12.48	8,163	13,061	\$18.70	\$11.47
Prof - Psych	\$74,974	\$85,709	\$0.99	\$1.08	2	3	\$4,998.28	\$4,285.44
Prof - Specialist	\$532,214	\$567,745	\$6.99	\$7.17	747	747	\$112.38	\$115.16
Prof - Vision	\$84,432	\$90,609	\$1.11	\$1.14	45	50	\$296.07	\$272.92
Radiology	\$114,791	\$118,914	\$1.51	\$1.50	1,274	1,270	\$14.20	\$14.18
Transportation/Ambulance	\$304,037	\$320,348	\$3.99	\$4.04	462	474	\$103.74	\$102.31
Total	\$29,514,634	\$30,821,183	\$387.76	\$389.11				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 1-5								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	262,891	285,686						
Service Type								
DME/Supplies	\$447,301	\$487,122	\$1.70	\$1.71	268	334	\$76.05	\$61.33
FQHC / RHC	\$87,523	\$98,447	\$0.33	\$0.34	121	122	\$32.92	\$33.88
Home Health	\$9,418	\$68,129	\$0.04	\$0.24	1	3	\$294.32	\$933.28
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,035,442	\$4,574,548	\$11.55	\$16.01	37	35	\$3,729.04	\$5,426.51
IP - Psych	\$286,064	\$311,845	\$1.09	\$1.09	1	1	\$9,864.27	\$14,849.77
Lab	\$391,899	\$399,190	\$1.49	\$1.40	1,495	1,661	\$11.97	\$10.10
OP - Emergency Room & Related	\$3,358,269	\$4,010,531	\$12.77	\$14.04	756	804	\$202.71	\$209.54
OP - Other	\$4,508,316	\$5,737,797	\$17.15	\$20.08	441	456	\$466.60	\$529.02
Pharmacy	\$4,934,101	\$5,010,827	\$18.77	\$17.54	4,454	4,333	\$50.56	\$48.58
Prof - Anesthesia	\$189,164	\$255,134	\$0.72	\$0.89	59	67	\$146.53	\$159.16
Prof - Child EPSDT	\$491,274	\$514,435	\$1.87	\$1.80	2,088	1,976	\$10.74	\$10.93
Prof - Evaluation & Management	\$6,685,938	\$7,453,590	\$25.43	\$26.09	4,744	4,848	\$64.33	\$64.57
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,108,916	\$1,319,236	\$4.22	\$4.62	3,254	3,015	\$15.55	\$18.38
Prof - Psych	\$329,060	\$389,023	\$1.25	\$1.36	98	115	\$153.62	\$142.03
Prof - Specialist	\$723,244	\$841,159	\$2.75	\$2.94	296	344	\$111.58	\$102.81
Prof - Vision	\$299,239	\$331,207	\$1.14	\$1.16	96	89	\$141.89	\$156.82
Radiology	\$130,573	\$153,680	\$0.50	\$0.54	403	410	\$14.78	\$15.73
Transportation/Ambulance	\$870,262	\$953,399	\$3.31	\$3.34	289	320	\$137.50	\$125.13
Total	\$27,886,004	\$32,909,299	\$106.07	\$115.19				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 6-14								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	342,981	365,019						
Service Type								
DME/Supplies	\$327,209	\$369,122	\$0.95	\$1.01	126	147	\$91.17	\$82.39
FQHC / RHC	\$93,186	\$100,990	\$0.27	\$0.28	83	87	\$39.45	\$38.31
Home Health	\$6,424	\$13,125	\$0.02	\$0.04	1	2	\$214.12	\$238.63
IP - Maternity	\$16,660	\$34,959	\$0.05	\$0.10	0	0	\$2,776.73	\$3,495.93
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,397,536	\$2,826,000	\$6.99	\$7.74	17	15	\$5,079.53	\$6,224.67
IP - Psych	\$839,209	\$1,090,980	\$2.45	\$2.99	48	40	\$607.24	\$893.51
Lab	\$424,328	\$427,806	\$1.24	\$1.17	1,005	1,126	\$14.78	\$12.50
OP - Emergency Room & Related	\$2,883,063	\$3,555,287	\$8.41	\$9.74	390	436	\$258.62	\$268.08
OP - Other	\$3,124,264	\$3,638,730	\$9.11	\$9.97	269	276	\$407.07	\$432.72
Pharmacy	\$8,160,811	\$8,474,365	\$23.79	\$23.22	4,509	4,485	\$63.33	\$62.12
Prof - Anesthesia	\$123,525	\$154,394	\$0.36	\$0.42	28	30	\$156.36	\$169.11
Prof - Child EPSDT	\$140,697	\$147,473	\$0.41	\$0.40	454	449	\$10.85	\$10.81
Prof - Evaluation & Management	\$5,147,295	\$5,733,000	\$15.01	\$15.71	2,673	2,778	\$67.38	\$67.85
Prof - Maternity	\$11,977	\$14,826	\$0.03	\$0.04	1	4	\$570.35	\$109.02
Prof - Other	\$934,694	\$1,019,978	\$2.73	\$2.79	2,888	2,816	\$11.32	\$11.91
Prof - Psych	\$944,767	\$1,012,829	\$2.75	\$2.77	567	563	\$58.26	\$59.13
Prof - Specialist	\$648,918	\$746,052	\$1.89	\$2.04	188	207	\$120.68	\$118.59
Prof - Vision	\$401,935	\$445,161	\$1.17	\$1.22	351	341	\$40.10	\$42.93
Radiology	\$213,936	\$250,127	\$0.62	\$0.69	383	412	\$19.54	\$19.97
Transportation/Ambulance	\$1,005,408	\$1,105,580	\$2.93	\$3.03	296	328	\$118.66	\$110.71
Total	\$27,845,839	\$31,160,782	\$81.19	\$85.37				

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

Exhibit 1a

Age 15-20 Female								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	76,017	80,680						
Service Type								
DME/Supplies	\$60,119	\$112,534	\$0.79	\$1.39	65	103	\$145.92	\$163.09
FQHC / RHC	\$82,135	\$107,132	\$1.08	\$1.33	302	395	\$42.93	\$40.37
Home Health	\$8,506	\$16,746	\$0.11	\$0.21	4	6	\$303.78	\$429.38
IP - Maternity	\$3,002,579	\$3,304,674	\$39.50	\$40.96	186	177	\$2,553.21	\$2,784.06
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$751,707	\$736,536	\$9.89	\$9.13	22	21	\$5,369.33	\$5,260.97
IP - Psych	\$242,331	\$352,927	\$3.19	\$4.37	75	74	\$512.33	\$707.27
Lab	\$329,298	\$388,901	\$4.33	\$4.82	4,446	5,060	\$11.69	\$11.43
OP - Emergency Room & Related	\$1,924,980	\$2,443,984	\$25.32	\$30.29	909	993	\$334.31	\$366.14
OP - Other	\$1,616,846	\$2,020,634	\$21.27	\$25.05	869	879	\$293.60	\$341.73
Pharmacy	\$1,774,709	\$1,935,396	\$23.35	\$23.99	7,289	7,690	\$38.44	\$37.43
Prof - Anesthesia	\$303,135	\$309,662	\$3.99	\$3.84	178	174	\$269.21	\$264.89
Prof - Child EPSDT	\$54,873	\$58,518	\$0.72	\$0.73	381	404	\$22.74	\$21.55
Prof - Evaluation & Management	\$1,750,360	\$1,998,224	\$23.03	\$24.77	4,221	4,488	\$65.46	\$66.22
Prof - Maternity	\$1,615,130	\$1,673,509	\$21.25	\$20.74	397	408	\$642.20	\$609.66
Prof - Other	\$416,905	\$457,243	\$5.48	\$5.67	3,396	7,341	\$19.38	\$9.26
Prof - Psych	\$191,304	\$211,923	\$2.52	\$2.63	500	526	\$60.41	\$59.92
Prof - Specialist	\$264,953	\$294,505	\$3.49	\$3.65	406	436	\$103.09	\$100.45
Prof - Vision	\$84,832	\$99,624	\$1.12	\$1.23	495	484	\$27.04	\$30.64
Radiology	\$324,265	\$408,925	\$4.27	\$5.07	1,057	1,223	\$48.44	\$49.75
Transportation/Ambulance	\$356,817	\$380,823	\$4.69	\$4.72	692	761	\$81.43	\$74.47
Total	\$15,155,783	\$17,312,420	\$199.37	\$214.58				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Female								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	144,881	154,848						
Service Type								
DME/Supplies	\$372,734	\$454,085	\$2.57	\$2.93	216	229	\$142.70	\$153.87
FQHC / RHC	\$395,652	\$458,191	\$2.73	\$2.96	730	849	\$44.87	\$41.81
Home Health	\$99,238	\$100,144	\$0.68	\$0.65	21	18	\$392.24	\$424.34
IP - Maternity	\$8,523,844	\$9,459,989	\$58.83	\$61.09	270	262	\$2,617.89	\$2,795.51
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$5,029,328	\$6,238,118	\$34.71	\$40.29	72	73	\$5,787.49	\$6,615.18
IP - Psych	\$764,560	\$687,598	\$5.28	\$4.44	100	88	\$630.30	\$606.88
Lab	\$840,131	\$1,037,987	\$5.80	\$6.70	6,088	7,349	\$11.43	\$10.95
OP - Emergency Room & Related	\$7,745,098	\$9,112,900	\$53.46	\$58.85	1,719	1,774	\$373.17	\$398.08
OP - Other	\$7,903,119	\$9,066,430	\$54.55	\$58.55	1,563	1,572	\$418.80	\$446.84
Pharmacy	\$7,341,885	\$8,644,699	\$50.68	\$55.83	15,914	17,115	\$38.21	\$39.14
Prof - Anesthesia	\$919,726	\$966,172	\$6.35	\$6.24	320	318	\$237.72	\$235.65
Prof - Child EPSDT	\$67,838	\$67,263	\$0.47	\$0.43	537	558	\$10.46	\$9.34
Prof - Evaluation & Management	\$4,676,123	\$5,487,548	\$32.28	\$35.44	6,301	6,773	\$61.47	\$62.79
Prof - Maternity	\$4,444,558	\$4,756,921	\$30.68	\$30.72	615	607	\$598.92	\$607.60
Prof - Other	\$1,220,020	\$1,474,633	\$8.42	\$9.52	5,036	6,075	\$20.07	\$18.81
Prof - Psych	\$381,089	\$477,238	\$2.63	\$3.08	583	704	\$54.13	\$52.53
Prof - Specialist	\$1,613,558	\$1,838,789	\$11.14	\$11.87	851	959	\$157.01	\$148.57
Prof - Vision	\$152,988	\$174,075	\$1.06	\$1.12	195	183	\$64.91	\$73.76
Radiology	\$1,373,424	\$1,743,646	\$9.48	\$11.26	2,492	2,770	\$45.65	\$48.78
Transportation/Ambulance	\$897,532	\$961,787	\$6.19	\$6.21	1,218	1,339	\$61.05	\$55.66
Total	\$54,762,445	\$63,208,211	\$377.98	\$408.20				

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

Exhibit 1a

Age 15-20 Male								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	54,835	59,543						
Service Type								
DME/Supplies	\$76,633	\$61,890	\$1.40	\$1.04	101	95	\$165.87	\$131.40
FQHC / RHC	\$21,209	\$19,692	\$0.39	\$0.33	126	114	\$36.76	\$34.79
Home Health	\$9,546	\$3,336	\$0.17	\$0.06	3	2	\$734.33	\$333.56
IP - Maternity	\$3,198	\$5,900	\$0.06	\$0.10	0	0	\$3,198.44	\$2,950.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$837,131	\$948,196	\$15.27	\$15.92	23	20	\$8,127.49	\$9,675.47
IP - Psych	\$202,849	\$227,532	\$3.70	\$3.82	74	76	\$601.92	\$603.53
Lab	\$59,942	\$66,141	\$1.09	\$1.11	895	1,079	\$14.66	\$12.35
OP - Emergency Room & Related	\$788,034	\$948,064	\$14.37	\$15.92	478	518	\$360.49	\$369.04
OP - Other	\$740,788	\$781,657	\$13.51	\$13.13	285	301	\$568.53	\$523.55
Pharmacy	\$1,222,266	\$1,470,750	\$22.29	\$24.70	3,789	4,021	\$70.59	\$73.72
Prof - Anesthesia	\$28,543	\$32,125	\$0.52	\$0.54	37	34	\$166.92	\$191.22
Prof - Child EPSDT	\$9,693	\$14,096	\$0.18	\$0.24	212	291	\$9.99	\$9.77
Prof - Evaluation & Management	\$700,692	\$827,848	\$12.78	\$13.90	2,103	2,342	\$72.90	\$71.25
Prof - Maternity	\$1,912	\$2,680	\$0.03	\$0.05	2	1	\$273.09	\$669.89
Prof - Other	\$120,571	\$153,955	\$2.20	\$2.59	1,354	1,551	\$19.49	\$20.00
Prof - Psych	\$142,590	\$167,421	\$2.60	\$2.81	571	626	\$54.63	\$53.94
Prof - Specialist	\$185,284	\$191,285	\$3.38	\$3.21	251	268	\$161.82	\$143.93
Prof - Vision	\$60,079	\$70,345	\$1.10	\$1.18	300	297	\$43.82	\$47.72
Radiology	\$63,554	\$85,439	\$1.16	\$1.43	639	707	\$21.75	\$24.36
Transportation/Ambulance	\$169,753	\$209,816	\$3.10	\$3.52	267	446	\$139.37	\$94.77
Total	\$5,444,267	\$6,288,166	\$99.28	\$105.61				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Male								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	8,469	9,795						
Service Type								
DME/Supplies	\$51,758	\$71,327	\$6.11	\$7.28	336	393	\$218.39	\$222.20
FQHC / RHC	\$7,551	\$11,134	\$0.89	\$1.14	275	327	\$38.92	\$41.70
Home Health	\$10,293	\$7,354	\$1.22	\$0.75	26	22	\$571.86	\$408.57
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$374,193	\$814,153	\$44.18	\$83.12	88	78	\$6,035.37	\$12,721.14
IP - Psych	\$47,589	\$46,148	\$5.62	\$4.71	262	108	\$257.24	\$524.41
Lab	\$16,771	\$23,802	\$1.98	\$2.43	1,764	2,230	\$13.47	\$13.08
OP - Emergency Room & Related	\$287,701	\$409,644	\$33.97	\$41.82	1,084	1,132	\$376.08	\$443.34
OP - Other	\$315,841	\$554,638	\$37.29	\$56.62	786	1,047	\$569.08	\$648.70
Pharmacy	\$327,007	\$486,019	\$38.61	\$49.62	11,216	13,025	\$41.31	\$45.71
Prof - Anesthesia	\$11,674	\$24,278	\$1.38	\$2.48	85	99	\$194.57	\$299.73
Prof - Child EPSDT	\$2,067	\$1,207	\$0.24	\$0.12	1,186	289	\$2.47	\$5.11
Prof - Evaluation & Management	\$182,338	\$258,059	\$21.53	\$26.35	4,136	4,604	\$62.47	\$68.67
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$42,805	\$68,594	\$5.05	\$7.00	3,204	17,932	\$18.93	\$4.69
Prof - Psych	\$19,881	\$22,143	\$2.35	\$2.26	538	543	\$52.32	\$49.99
Prof - Specialist	\$77,479	\$123,410	\$9.15	\$12.60	738	795	\$148.71	\$190.15
Prof - Vision	\$8,876	\$13,671	\$1.05	\$1.40	137	137	\$91.50	\$122.06
Radiology	\$43,865	\$56,566	\$5.18	\$5.77	1,594	1,974	\$38.99	\$35.11
Transportation/Ambulance	\$41,588	\$41,944	\$4.91	\$4.28	602	723	\$97.85	\$71.09
Total	\$1,869,276	\$3,034,090	\$220.72	\$309.76				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 45 and Over								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	13,333	14,927						
Service Type								
DME/Supplies	\$100,220	\$165,210	\$7.52	\$11.07	626	1,175	\$144.20	\$113.08
FQHC / RHC	\$27,424	\$37,331	\$2.06	\$2.50	796	1,228	\$31.02	\$24.43
Home Health	\$19,336	\$46,890	\$1.45	\$3.14	60	57	\$288.60	\$660.42
IP - Maternity	\$0	\$2,526	\$0.00	\$0.17	0	1	-	\$2,526.17
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,435,613	\$1,685,272	\$107.67	\$112.90	171	171	\$7,555.86	\$7,912.07
IP - Psych	\$99,903	\$106,405	\$7.49	\$7.13	130	105	\$693.77	\$818.50
Lab	\$59,622	\$70,952	\$4.47	\$4.75	4,886	5,494	\$10.98	\$10.38
OP - Emergency Room & Related	\$525,592	\$710,404	\$39.42	\$47.59	1,057	1,118	\$447.69	\$510.71
OP - Other	\$1,197,026	\$1,410,567	\$89.78	\$94.50	1,898	1,983	\$567.58	\$571.77
Pharmacy	\$1,543,478	\$1,743,165	\$115.76	\$116.78	29,889	31,645	\$46.48	\$44.28
Prof - Anesthesia	\$30,303	\$41,696	\$2.27	\$2.79	152	162	\$179.30	\$207.44
Prof - Child EPSDT	\$4,189	\$5,070	\$0.31	\$0.34	964	2,201	\$3.91	\$1.85
Prof - Evaluation & Management	\$498,867	\$610,647	\$37.42	\$40.91	7,089	7,523	\$63.34	\$65.25
Prof - Maternity	\$31	\$3,126	\$0.00	\$0.21	1	2	\$31.29	\$1,042.01
Prof - Other	\$224,703	\$360,233	\$16.85	\$24.13	10,515	21,333	\$19.23	\$13.58
Prof - Psych	\$47,683	\$53,557	\$3.58	\$3.59	1,008	896	\$42.57	\$48.03
Prof - Specialist	\$235,560	\$305,855	\$17.67	\$20.49	1,212	1,464	\$174.88	\$167.96
Prof - Vision	\$26,181	\$28,588	\$1.96	\$1.92	376	352	\$62.63	\$65.27
Radiology	\$138,830	\$172,154	\$10.41	\$11.53	3,400	3,458	\$36.75	\$40.02
Transportation/Ambulance	\$83,226	\$97,423	\$6.24	\$6.53	2,285	2,835	\$32.78	\$27.63
Total	\$6,297,787	\$7,657,071	\$472.35	\$512.97				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

All Age Categories								
Richmond/Charlottesville	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	979,522	1,049,707						
Service Type								
DME/Supplies	\$1,958,746	\$2,224,212	\$2.00	\$2.12	241	282	\$99.72	\$90.05
FQHC / RHC	\$789,287	\$898,643	\$0.81	\$0.86	234	266	\$41.38	\$38.68
Home Health	\$189,996	\$286,768	\$0.19	\$0.27	6	7	\$362.59	\$486.87
IP - Maternity	\$11,546,282	\$12,808,049	\$11.79	\$12.20	54	52	\$2,601.10	\$2,794.08
IP - Newborn	\$11,338,376	\$12,790,751	\$11.58	\$12.19	29	31	\$4,787.07	\$4,750.96
IP - Other	\$17,227,350	\$21,055,557	\$17.59	\$20.06	43	39	\$4,963.65	\$6,160.20
IP - Psych	\$2,563,774	\$2,916,383	\$2.62	\$2.78	46	40	\$681.31	\$840.70
Lab	\$2,266,948	\$2,545,023	\$2.31	\$2.42	2,292	2,639	\$12.12	\$11.03
OP - Emergency Room & Related	\$19,094,100	\$22,899,114	\$19.49	\$21.81	812	860	\$288.12	\$304.25
OP - Other	\$20,730,576	\$24,517,777	\$21.16	\$23.36	627	640	\$404.78	\$438.14
Pharmacy	\$26,788,030	\$29,025,526	\$27.35	\$27.65	6,810	7,002	\$48.19	\$47.39
Prof - Anesthesia	\$1,691,364	\$1,859,879	\$1.73	\$1.77	97	99	\$213.11	\$215.06
Prof - Child EPSDT	\$1,534,319	\$1,485,150	\$1.57	\$1.41	1,627	1,504	\$11.55	\$11.29
Prof - Evaluation & Management	\$26,280,563	\$29,142,206	\$26.83	\$27.76	4,810	4,961	\$66.93	\$67.16
Prof - Maternity	\$6,076,403	\$6,451,062	\$6.20	\$6.15	122	123	\$609.59	\$601.95
Prof - Other	\$5,036,942	\$5,842,630	\$5.14	\$5.57	3,774	4,804	\$16.35	\$13.90
Prof - Psych	\$2,131,348	\$2,419,843	\$2.18	\$2.31	400	425	\$65.20	\$65.10
Prof - Specialist	\$4,281,209	\$4,908,800	\$4.37	\$4.68	398	440	\$131.91	\$127.46
Prof - Vision	\$1,118,563	\$1,253,279	\$1.14	\$1.19	243	234	\$56.50	\$61.29
Radiology	\$2,403,238	\$2,989,451	\$2.45	\$2.85	888	961	\$33.16	\$35.56
Transportation/Ambulance	\$3,728,621	\$4,071,119	\$3.81	\$3.88	502	565	\$90.95	\$82.31
Total	\$168,776,036	\$192,391,222	\$172.30	\$183.28				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age Under 1								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	53,289	54,235						
Service Type								
DME/Supplies	\$317,101	\$261,427	\$5.95	\$4.82	606	587	\$117.84	\$98.46
FQHC / RHC	\$264,014	\$275,846	\$4.95	\$5.09	2,079	2,208	\$28.59	\$27.64
Home Health	\$48,170	\$39,532	\$0.90	\$0.73	48	37	\$224.05	\$235.31
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$11,467,456	\$9,573,506	\$215.19	\$176.52	612	586	\$4,217.34	\$3,612.35
IP - Other	\$1,963,498	\$1,606,016	\$36.85	\$29.61	117	110	\$3,777.95	\$3,237.93
IP - Psych	\$47,465	\$52,698	\$0.89	\$0.97	0	0	\$23,732.28	-
Lab	\$152,545	\$145,865	\$2.86	\$2.69	2,985	2,892	\$11.51	\$11.16
OP - Emergency Room & Related	\$723,423	\$810,203	\$13.58	\$14.94	1,206	1,248	\$135.10	\$143.65
OP - Other	\$773,968	\$893,152	\$14.52	\$16.47	812	798	\$214.74	\$247.61
Pharmacy	\$1,055,788	\$1,035,504	\$19.81	\$19.09	5,451	5,459	\$43.61	\$41.97
Prof - Anesthesia	\$77,739	\$67,301	\$1.46	\$1.24	82	84	\$213.87	\$176.64
Prof - Child EPSDT	\$457,674	\$369,447	\$8.59	\$6.81	8,924	6,942	\$11.55	\$11.77
Prof - Evaluation & Management	\$4,857,533	\$4,809,039	\$91.15	\$88.67	14,700	14,461	\$74.41	\$73.58
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$813,309	\$963,073	\$15.26	\$17.76	18,937	19,672	\$9.67	\$10.83
Prof - Psych	\$42,247	\$48,086	\$0.79	\$0.89	1	1	\$14,082.22	\$16,028.54
Prof - Specialist	\$411,630	\$437,466	\$7.72	\$8.07	817	858	\$113.46	\$112.80
Prof - Vision	\$68,382	\$68,300	\$1.28	\$1.26	56	58	\$274.45	\$262.67
Radiology	\$93,450	\$89,437	\$1.75	\$1.65	1,631	1,468	\$12.90	\$13.48
Transportation/Ambulance	\$256,798	\$251,280	\$4.82	\$4.63	537	643	\$107.63	\$86.44
Total	\$23,892,192	\$21,797,176	\$448.35	\$401.90				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 1-5								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	166,428	186,049						
Service Type								
DME/Supplies	\$186,302	\$218,322	\$1.12	\$1.17	168	203	\$79.79	\$69.49
FQHC / RHC	\$323,264	\$303,307	\$1.94	\$1.63	1,083	749	\$21.52	\$26.10
Home Health	\$40,404	\$40,440	\$0.24	\$0.22	15	13	\$197.09	\$204.24
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,601,594	\$2,623,794	\$9.62	\$14.10	32	38	\$3,631.73	\$4,508.24
IP - Psych	\$158,452	\$177,539	\$0.95	\$0.95	2	2	\$6,338.08	\$5,548.09
Lab	\$356,207	\$382,385	\$2.14	\$2.06	1,928	1,994	\$13.32	\$12.37
OP - Emergency Room & Related	\$1,518,680	\$1,893,004	\$9.13	\$10.17	771	785	\$142.01	\$155.53
OP - Other	\$2,254,640	\$2,778,072	\$13.55	\$14.93	388	452	\$418.69	\$396.24
Pharmacy	\$2,516,471	\$3,176,662	\$15.12	\$17.07	4,829	4,818	\$37.57	\$42.53
Prof - Anesthesia	\$163,062	\$187,749	\$0.98	\$1.01	79	84	\$148.78	\$144.09
Prof - Child EPSDT	\$261,913	\$283,350	\$1.57	\$1.52	1,778	1,714	\$10.62	\$10.66
Prof - Evaluation & Management	\$4,046,063	\$4,941,279	\$24.31	\$26.56	4,789	5,038	\$60.92	\$63.26
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$737,662	\$886,728	\$4.43	\$4.77	5,218	4,895	\$10.19	\$11.68
Prof - Psych	\$194,313	\$212,385	\$1.17	\$1.14	109	92	\$129.11	\$148.31
Prof - Specialist	\$483,458	\$536,848	\$2.90	\$2.89	385	426	\$90.43	\$81.30
Prof - Vision	\$196,390	\$223,551	\$1.18	\$1.20	66	72	\$213.24	\$201.22
Radiology	\$87,112	\$101,868	\$0.52	\$0.55	409	446	\$15.35	\$14.74
Transportation/Ambulance	\$545,531	\$611,870	\$3.28	\$3.29	351	396	\$112.00	\$99.60
Total	\$15,671,516	\$19,579,149	\$94.16	\$105.24				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 6-14								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	205,781	226,935						
Service Type								
DME/Supplies	\$195,441	\$238,587	\$0.95	\$1.05	97	106	\$117.52	\$119.11
FQHC / RHC	\$250,963	\$238,705	\$1.22	\$1.05	437	369	\$33.48	\$34.22
Home Health	\$57,353	\$29,808	\$0.28	\$0.13	10	7	\$337.37	\$229.29
IP - Maternity	\$8,649	\$14,608	\$0.04	\$0.06	0	0	\$2,162.18	\$2,434.69
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,713,026	\$1,482,888	\$8.32	\$6.53	18	15	\$5,653.55	\$5,095.83
IP - Psych	\$407,165	\$463,531	\$1.98	\$2.04	25	27	\$942.51	\$894.85
Lab	\$377,318	\$379,752	\$1.83	\$1.67	1,384	1,464	\$15.90	\$13.72
OP - Emergency Room & Related	\$1,502,269	\$1,788,392	\$7.30	\$7.88	465	452	\$188.42	\$209.34
OP - Other	\$1,903,882	\$2,035,285	\$9.25	\$8.97	325	353	\$341.63	\$304.64
Pharmacy	\$5,395,416	\$6,257,798	\$26.22	\$27.58	5,260	5,389	\$59.81	\$61.40
Prof - Anesthesia	\$102,019	\$103,577	\$0.50	\$0.46	40	36	\$148.93	\$150.77
Prof - Child EPSDT	\$47,987	\$61,150	\$0.23	\$0.27	349	320	\$8.02	\$10.11
Prof - Evaluation & Management	\$3,120,982	\$3,611,695	\$15.17	\$15.92	2,924	2,989	\$62.24	\$63.89
Prof - Maternity	\$8,174	\$8,222	\$0.04	\$0.04	1	1	\$430.23	\$513.87
Prof - Other	\$550,961	\$668,927	\$2.68	\$2.95	3,682	1,806	\$8.73	\$19.58
Prof - Psych	\$542,566	\$629,991	\$2.64	\$2.78	612	629	\$51.70	\$52.93
Prof - Specialist	\$456,829	\$452,595	\$2.22	\$1.99	275	256	\$96.85	\$93.47
Prof - Vision	\$245,036	\$279,512	\$1.19	\$1.23	267	289	\$53.43	\$51.06
Radiology	\$152,208	\$166,097	\$0.74	\$0.73	448	463	\$19.82	\$18.96
Transportation/Ambulance	\$627,318	\$663,047	\$3.05	\$2.92	408	483	\$89.73	\$72.54
Total	\$17,665,562	\$19,574,168	\$85.85	\$86.25				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Female								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	47,714	51,126						
Service Type								
DME/Supplies	\$30,676	\$48,554	\$0.64	\$0.95	62	84	\$123.69	\$135.25
FQHC / RHC	\$275,500	\$193,831	\$5.77	\$3.79	1,606	1,284	\$43.15	\$35.44
Home Health	\$43,957	\$35,737	\$0.92	\$0.70	33	26	\$330.50	\$327.86
IP - Maternity	\$2,329,562	\$2,236,578	\$48.82	\$43.75	236	208	\$2,483.54	\$2,518.67
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$421,169	\$706,533	\$8.83	\$13.82	20	23	\$5,331.25	\$7,065.33
IP - Psych	\$147,782	\$242,102	\$3.10	\$4.74	45	76	\$830.24	\$747.23
Lab	\$275,011	\$369,798	\$5.76	\$7.23	5,336	6,499	\$12.96	\$13.36
OP - Emergency Room & Related	\$848,629	\$1,111,150	\$17.79	\$21.73	1,012	1,051	\$210.89	\$248.08
OP - Other	\$1,096,201	\$1,297,266	\$22.97	\$25.37	1,016	1,120	\$271.34	\$271.85
Pharmacy	\$1,464,691	\$1,588,771	\$30.70	\$31.08	8,917	9,371	\$41.31	\$39.79
Prof - Anesthesia	\$172,543	\$175,821	\$3.62	\$3.44	215	209	\$202.04	\$197.77
Prof - Child EPSDT	\$49,444	\$42,799	\$1.04	\$0.84	458	469	\$27.17	\$21.42
Prof - Evaluation & Management	\$1,176,523	\$1,384,336	\$24.66	\$27.08	4,806	5,163	\$61.57	\$62.93
Prof - Maternity	\$1,336,017	\$1,281,649	\$28.00	\$25.07	940	801	\$357.41	\$375.41
Prof - Other	\$257,442	\$309,266	\$5.40	\$6.05	4,998	5,783	\$12.95	\$12.55
Prof - Psych	\$120,408	\$133,496	\$2.52	\$2.61	472	596	\$64.18	\$52.58
Prof - Specialist	\$210,044	\$221,381	\$4.40	\$4.33	691	732	\$76.44	\$70.98
Prof - Vision	\$57,928	\$64,191	\$1.21	\$1.26	392	425	\$37.18	\$35.45
Radiology	\$256,165	\$318,299	\$5.37	\$6.23	1,224	1,400	\$52.62	\$53.37
Transportation/Ambulance	\$195,780	\$213,602	\$4.10	\$4.18	782	1,053	\$62.95	\$47.62
Total	\$10,765,474	\$11,975,162	\$225.63	\$234.23				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Female								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	75,635	84,160						
Service Type								
DME/Supplies	\$305,733	\$328,481	\$4.04	\$3.90	273	306	\$177.65	\$153.14
FQHC / RHC	\$625,482	\$517,790	\$8.27	\$6.15	2,204	1,979	\$45.02	\$37.31
Home Health	\$193,696	\$120,945	\$2.56	\$1.44	59	50	\$516.52	\$344.57
IP - Maternity	\$6,287,611	\$6,095,447	\$83.13	\$72.43	366	315	\$2,723.09	\$2,759.37
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,339,324	\$4,256,070	\$44.15	\$50.57	87	81	\$6,104.80	\$7,479.91
IP - Psych	\$297,620	\$405,912	\$3.93	\$4.82	65	81	\$722.38	\$718.43
Lab	\$649,518	\$860,367	\$8.59	\$10.22	8,002	9,187	\$12.88	\$13.35
OP - Emergency Room & Related	\$2,770,585	\$3,501,066	\$36.63	\$41.60	1,687	1,725	\$260.61	\$289.32
OP - Other	\$4,222,007	\$5,243,175	\$55.82	\$62.30	1,793	1,958	\$373.50	\$381.88
Pharmacy	\$4,664,738	\$5,698,354	\$61.67	\$67.71	19,240	20,648	\$38.47	\$39.35
Prof - Anesthesia	\$499,522	\$486,650	\$6.60	\$5.78	410	384	\$193.31	\$180.78
Prof - Child EPSDT	\$76,734	\$73,523	\$1.01	\$0.87	1,154	1,612	\$10.55	\$6.50
Prof - Evaluation & Management	\$2,598,057	\$3,100,350	\$34.35	\$36.84	6,954	7,389	\$59.27	\$59.83
Prof - Maternity	\$3,246,499	\$3,204,122	\$42.92	\$38.07	1,456	1,216	\$353.76	\$375.72
Prof - Other	\$721,118	\$879,761	\$9.53	\$10.45	8,485	9,738	\$13.48	\$12.88
Prof - Psych	\$197,894	\$265,194	\$2.62	\$3.15	618	771	\$50.79	\$49.04
Prof - Specialist	\$1,103,158	\$1,257,864	\$14.59	\$14.95	1,437	1,510	\$121.82	\$118.81
Prof - Vision	\$94,328	\$111,765	\$1.25	\$1.33	130	142	\$115.17	\$112.55
Radiology	\$873,229	\$1,037,235	\$11.55	\$12.32	2,627	2,833	\$52.73	\$52.21
Transportation/Ambulance	\$446,454	\$526,395	\$5.90	\$6.25	1,434	1,602	\$49.40	\$46.85
Total	\$33,213,306	\$37,970,465	\$439.13	\$451.17				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Male								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	34,567	37,510						
Service Type								
DME/Supplies	\$50,660	\$45,155	\$1.47	\$1.20	100	113	\$175.90	\$127.92
FQHC / RHC	\$47,622	\$38,180	\$1.38	\$1.02	458	343	\$36.13	\$35.62
Home Health	\$4,688	\$10,250	\$0.14	\$0.27	7	10	\$223.25	\$320.32
IP - Maternity	\$1,851	\$0	\$0.05	\$0.00	0	0	\$1,850.87	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$387,335	\$308,994	\$11.21	\$8.24	21	22	\$6,455.58	\$4,414.20
IP - Psych	\$118,262	\$123,336	\$3.42	\$3.29	54	42	\$762.98	\$934.36
Lab	\$53,156	\$65,610	\$1.54	\$1.75	1,141	1,378	\$16.17	\$15.23
OP - Emergency Room & Related	\$399,858	\$473,330	\$11.57	\$12.62	579	565	\$239.72	\$268.18
OP - Other	\$415,784	\$468,105	\$12.03	\$12.48	325	396	\$444.69	\$377.81
Pharmacy	\$893,114	\$1,104,301	\$25.84	\$29.44	5,002	5,058	\$61.98	\$69.84
Prof - Anesthesia	\$15,683	\$16,700	\$0.45	\$0.45	32	36	\$170.47	\$147.79
Prof - Child EPSDT	\$4,278	\$4,612	\$0.12	\$0.12	195	200	\$7.63	\$7.37
Prof - Evaluation & Management	\$471,921	\$534,710	\$13.65	\$14.26	2,715	2,580	\$60.33	\$66.31
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$78,895	\$83,035	\$2.28	\$2.21	1,581	1,261	\$17.33	\$21.06
Prof - Psych	\$78,597	\$89,720	\$2.27	\$2.39	551	529	\$49.53	\$54.24
Prof - Specialist	\$116,649	\$114,169	\$3.37	\$3.04	323	341	\$125.56	\$107.10
Prof - Vision	\$42,195	\$43,881	\$1.22	\$1.17	284	248	\$51.65	\$56.62
Radiology	\$47,489	\$52,848	\$1.37	\$1.41	731	764	\$22.56	\$22.14
Transportation/Ambulance	\$129,481	\$120,722	\$3.75	\$3.22	459	474	\$97.87	\$81.46
Total	\$3,357,517	\$3,697,657	\$97.13	\$98.58				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Male								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	6,944	8,711						
Service Type								
DME/Supplies	\$56,031	\$77,247	\$8.07	\$8.87	596	681	\$162.41	\$156.37
FQHC / RHC	\$24,361	\$18,759	\$3.51	\$2.15	1,054	725	\$39.94	\$35.66
Home Health	\$8,214	\$5,635	\$1.18	\$0.65	22	25	\$631.83	\$313.07
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$740,980	\$788,172	\$106.71	\$90.48	112	150	\$11,399.69	\$7,230.93
IP - Psych	\$62,560	\$60,687	\$9.01	\$6.97	190	145	\$568.73	\$577.97
Lab	\$29,934	\$43,290	\$4.31	\$4.97	3,772	4,491	\$13.71	\$13.28
OP - Emergency Room & Related	\$230,919	\$411,680	\$33.25	\$47.26	1,529	1,701	\$260.93	\$333.34
OP - Other	\$352,060	\$475,571	\$50.70	\$54.59	1,120	1,265	\$543.30	\$518.05
Pharmacy	\$568,293	\$698,315	\$81.84	\$80.16	21,007	22,402	\$46.75	\$42.94
Prof - Anesthesia	\$15,540	\$18,708	\$2.24	\$2.15	128	149	\$210.00	\$173.22
Prof - Child EPSDT	\$1,011	\$1,271	\$0.15	\$0.15	1,151	459	\$1.52	\$3.82
Prof - Evaluation & Management	\$188,647	\$282,809	\$27.17	\$32.47	5,214	6,455	\$62.53	\$60.35
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$35,093	\$60,800	\$5.05	\$6.98	3,919	4,062	\$15.47	\$20.62
Prof - Psych	\$15,870	\$22,648	\$2.29	\$2.60	484	665	\$56.68	\$46.89
Prof - Specialist	\$96,224	\$138,081	\$13.86	\$15.85	1,101	1,416	\$151.06	\$134.32
Prof - Vision	\$9,502	\$11,812	\$1.37	\$1.36	107	113	\$153.26	\$144.05
Radiology	\$38,699	\$66,160	\$5.57	\$7.60	2,181	2,635	\$30.67	\$34.58
Transportation/Ambulance	\$32,515	\$50,381	\$4.68	\$5.78	667	827	\$84.24	\$83.97
Total	\$2,506,454	\$3,232,026	\$360.95	\$371.03				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 45 and Over								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	6,923	8,620						
Service Type								
DME/Supplies	\$77,580	\$102,789	\$11.21	\$11.92	990	1,052	\$135.87	\$135.96
FQHC / RHC	\$36,271	\$60,512	\$5.24	\$7.02	1,837	2,282	\$34.22	\$36.92
Home Health	\$12,257	\$21,819	\$1.77	\$2.53	57	52	\$371.41	\$589.71
IP - Maternity	\$6,909	\$1,925	\$1.00	\$0.22	2	1	\$6,909.34	\$1,925.42
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$761,028	\$892,642	\$109.93	\$103.55	154	171	\$8,550.87	\$7,257.25
IP - Psych	\$57,156	\$71,181	\$8.26	\$8.26	133	127	\$742.28	\$782.21
Lab	\$50,790	\$80,605	\$7.34	\$9.35	6,939	8,560	\$12.69	\$13.11
OP - Emergency Room & Related	\$197,892	\$293,390	\$28.58	\$34.04	1,030	1,077	\$333.15	\$379.06
OP - Other	\$732,563	\$965,550	\$105.82	\$112.01	2,427	2,738	\$523.26	\$490.87
Pharmacy	\$1,029,156	\$1,287,462	\$148.66	\$149.36	38,354	41,460	\$46.51	\$43.23
Prof - Anesthesia	\$22,599	\$29,066	\$3.26	\$3.37	210	258	\$186.77	\$157.11
Prof - Child EPSDT	\$6,052	\$6,010	\$0.87	\$0.70	5,044	1,971	\$2.08	\$4.24
Prof - Evaluation & Management	\$266,775	\$364,268	\$38.53	\$42.26	7,531	8,142	\$61.40	\$62.28
Prof - Maternity	\$1,732	\$1,646	\$0.25	\$0.19	3	4	\$866.21	\$548.72
Prof - Other	\$113,307	\$201,215	\$16.37	\$23.34	37,087	7,311	\$5.30	\$38.31
Prof - Psych	\$31,394	\$38,471	\$4.53	\$4.46	1,184	1,165	\$45.96	\$45.96
Prof - Specialist	\$170,471	\$226,258	\$24.62	\$26.25	2,281	2,348	\$129.54	\$134.12
Prof - Vision	\$14,707	\$18,010	\$2.12	\$2.09	291	294	\$87.54	\$85.36
Radiology	\$86,287	\$105,640	\$12.46	\$12.26	3,488	3,606	\$42.89	\$40.79
Transportation/Ambulance	\$46,283	\$66,276	\$6.69	\$7.69	3,832	4,100	\$20.93	\$22.50
Total	\$3,721,210	\$4,834,735	\$537.51	\$560.87				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

All Age Categories								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	597,281	657,346						
Service Type								
DME/Supplies	\$1,219,523	\$1,320,561	\$2.04	\$2.01	198	217	\$123.66	\$110.91
FQHC / RHC	\$1,847,478	\$1,646,928	\$3.09	\$2.51	1,105	934	\$33.58	\$32.19
Home Health	\$408,738	\$304,166	\$0.68	\$0.46	23	19	\$350.85	\$291.63
IP - Maternity	\$8,634,582	\$8,348,558	\$14.46	\$12.70	65	57	\$2,654.34	\$2,689.61
IP - Newborn	\$11,467,456	\$9,573,506	\$19.20	\$14.56	55	48	\$4,217.34	\$3,612.35
IP - Other	\$10,927,953	\$12,665,108	\$18.30	\$19.27	42	43	\$5,194.57	\$5,412.44
IP - Psych	\$1,296,463	\$1,596,986	\$2.17	\$2.43	28	32	\$932.04	\$903.78
Lab	\$1,944,478	\$2,327,672	\$3.26	\$3.54	2,910	3,240	\$13.42	\$13.11
OP - Emergency Room & Related	\$8,192,256	\$10,282,214	\$13.72	\$15.64	840	853	\$195.88	\$220.14
OP - Other	\$11,751,103	\$14,156,176	\$19.67	\$21.54	661	729	\$357.29	\$354.57
Pharmacy	\$17,587,668	\$20,847,167	\$29.45	\$31.71	7,771	8,176	\$45.47	\$46.55
Prof - Anesthesia	\$1,068,708	\$1,085,572	\$1.79	\$1.65	118	116	\$182.08	\$170.74
Prof - Child EPSDT	\$905,094	\$842,160	\$1.52	\$1.28	1,678	1,455	\$10.84	\$10.57
Prof - Evaluation & Management	\$16,726,502	\$19,028,485	\$28.00	\$28.95	5,223	5,338	\$64.34	\$65.07
Prof - Maternity	\$4,592,423	\$4,495,639	\$7.69	\$6.84	260	218	\$355.01	\$375.86
Prof - Other	\$3,307,788	\$4,052,806	\$5.54	\$6.17	6,453	5,550	\$10.30	\$13.33
Prof - Psych	\$1,223,289	\$1,439,990	\$2.05	\$2.19	408	443	\$60.19	\$59.36
Prof - Specialist	\$3,048,463	\$3,384,662	\$5.10	\$5.15	570	599	\$107.43	\$103.16
Prof - Vision	\$728,468	\$821,022	\$1.22	\$1.25	184	196	\$79.35	\$76.61
Radiology	\$1,634,639	\$1,937,584	\$2.74	\$2.95	952	1,004	\$34.48	\$35.21
Transportation/Ambulance	\$2,280,159	\$2,503,573	\$3.82	\$3.81	609	711	\$75.21	\$64.30
Total	\$110,793,233	\$122,660,536	\$185.50	\$186.60				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age Under 1								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	90,950	92,872						
Service Type								
DME/Supplies	\$333,639	\$362,527	\$3.67	\$3.90	314	315	\$140.31	\$148.70
FQHC / RHC	\$176,567	\$117,487	\$1.94	\$1.27	831	375	\$28.03	\$40.48
Home Health	\$46,383	\$85,001	\$0.51	\$0.92	27	37	\$223.00	\$293.11
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$16,061,687	\$17,521,514	\$176.60	\$188.66	305	402	\$6,948.60	\$5,633.42
IP - Other	\$2,054,836	\$3,444,946	\$22.59	\$37.09	66	58	\$4,094.09	\$7,621.56
IP - Psych	\$99,271	\$107,050	\$1.09	\$1.15	0	0	-	-
Lab	\$172,274	\$188,523	\$1.89	\$2.03	1,150	1,336	\$19.76	\$18.23
OP - Emergency Room & Related	\$1,778,869	\$1,953,753	\$19.56	\$21.04	1,323	1,344	\$177.37	\$187.90
OP - Other	\$1,680,669	\$1,796,478	\$18.48	\$19.34	486	543	\$455.89	\$427.43
Pharmacy	\$1,756,903	\$1,414,976	\$19.32	\$15.24	4,750	4,563	\$48.80	\$40.07
Prof - Anesthesia	\$144,886	\$155,013	\$1.59	\$1.67	101	102	\$190.03	\$196.22
Prof - Child EPSDT	\$965,335	\$809,783	\$10.61	\$8.72	10,689	8,930	\$11.92	\$11.72
Prof - Evaluation & Management	\$8,366,673	\$9,079,282	\$91.99	\$97.76	14,226	14,850	\$77.60	\$79.00
Prof - Maternity	\$996	\$0	\$0.01	\$0.00	0	0	\$498.13	-
Prof - Other	\$1,138,235	\$1,230,575	\$12.51	\$13.25	7,033	8,050	\$21.35	\$19.75
Prof - Psych	\$90,262	\$97,375	\$0.99	\$1.05	0	0	-	\$97,374.72
Prof - Specialist	\$756,197	\$766,414	\$8.31	\$8.25	832	914	\$119.91	\$108.36
Prof - Vision	\$112,934	\$115,485	\$1.24	\$1.24	60	62	\$249.59	\$242.62
Radiology	\$114,894	\$133,167	\$1.26	\$1.43	1,069	1,183	\$14.18	\$14.55
Transportation/Ambulance	\$293,286	\$313,212	\$3.22	\$3.37	589	710	\$65.72	\$57.02
Total	\$36,144,798	\$39,692,561	\$397.41	\$427.39				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 1-5								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	308,461	326,529						
Service Type								
DME/Supplies	\$353,822	\$475,398	\$1.15	\$1.46	141	142	\$97.85	\$122.78
FQHC / RHC	\$213,802	\$127,841	\$0.69	\$0.39	370	141	\$22.46	\$33.40
Home Health	\$22,059	\$19,200	\$0.07	\$0.06	5	5	\$180.81	\$156.09
IP - Maternity	\$3,934	\$0	\$0.01	\$0.00	0	0	\$3,934.21	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,646,990	\$3,524,391	\$8.58	\$10.79	21	17	\$5,022.75	\$7,546.88
IP - Psych	\$369,873	\$410,991	\$1.20	\$1.26	1	1	\$10,274.24	\$10,538.24
Lab	\$596,750	\$668,175	\$1.93	\$2.05	1,234	1,391	\$18.81	\$17.65
OP - Emergency Room & Related	\$4,015,976	\$4,535,628	\$13.02	\$13.89	838	876	\$186.50	\$190.30
OP - Other	\$4,070,787	\$4,747,822	\$13.20	\$14.54	309	329	\$513.02	\$529.83
Pharmacy	\$4,302,954	\$4,523,188	\$13.95	\$13.85	4,008	3,904	\$41.77	\$42.57
Prof - Anesthesia	\$264,913	\$288,276	\$0.86	\$0.88	70	69	\$148.00	\$153.01
Prof - Child EPSDT	\$595,945	\$642,330	\$1.93	\$1.97	2,043	2,100	\$11.35	\$11.24
Prof - Evaluation & Management	\$7,428,933	\$8,358,431	\$24.08	\$25.60	4,348	4,598	\$66.48	\$66.80
Prof - Maternity	\$2,050	\$0	\$0.01	\$0.00	0	0	\$1,025.05	-
Prof - Other	\$2,215,317	\$2,131,689	\$7.18	\$6.53	4,229	3,581	\$20.38	\$21.87
Prof - Psych	\$425,321	\$456,447	\$1.38	\$1.40	134	131	\$123.17	\$127.78
Prof - Specialist	\$851,355	\$910,317	\$2.76	\$2.79	355	381	\$93.27	\$87.83
Prof - Vision	\$349,867	\$368,271	\$1.13	\$1.13	76	78	\$177.96	\$174.62
Radiology	\$128,633	\$159,422	\$0.42	\$0.49	338	378	\$14.81	\$15.49
Transportation/Ambulance	\$905,376	\$980,720	\$2.94	\$3.00	350	415	\$100.61	\$86.94
Total	\$29,764,658	\$33,328,539	\$96.49	\$102.07				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 6-14								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	411,388	427,035						
Service Type								
DME/Supplies	\$389,799	\$395,804	\$0.95	\$0.93	94	92	\$121.43	\$120.82
FQHC / RHC	\$180,742	\$125,422	\$0.44	\$0.29	223	113	\$23.60	\$31.09
Home Health	\$29,463	\$8,017	\$0.07	\$0.02	4	2	\$193.83	\$105.49
IP - Maternity	\$68,262	\$76,842	\$0.17	\$0.18	1	1	\$2,275.39	\$2,561.40
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,286,638	\$1,755,121	\$5.56	\$4.11	10	9	\$6,627.94	\$5,698.45
IP - Psych	\$933,009	\$1,024,781	\$2.27	\$2.40	30	33	\$920.13	\$884.96
Lab	\$666,542	\$729,032	\$1.62	\$1.71	776	940	\$25.04	\$21.80
OP - Emergency Room & Related	\$3,409,441	\$3,869,376	\$8.29	\$9.06	436	448	\$228.24	\$242.79
OP - Other	\$3,962,817	\$4,489,669	\$9.63	\$10.51	214	247	\$541.22	\$511.18
Pharmacy	\$9,873,282	\$10,594,908	\$24.00	\$24.81	4,271	4,307	\$67.43	\$69.12
Prof - Anesthesia	\$190,855	\$193,423	\$0.46	\$0.45	35	35	\$157.73	\$157.51
Prof - Child EPSDT	\$184,057	\$195,373	\$0.45	\$0.46	470	483	\$11.42	\$11.37
Prof - Evaluation & Management	\$5,924,070	\$6,531,522	\$14.40	\$15.30	2,468	2,650	\$70.01	\$69.27
Prof - Maternity	\$40,283	\$31,989	\$0.10	\$0.07	2	1	\$706.72	\$761.64
Prof - Other	\$1,849,607	\$2,082,363	\$4.50	\$4.88	7,873	8,840	\$6.85	\$6.62
Prof - Psych	\$1,142,078	\$1,263,235	\$2.78	\$2.96	735	781	\$45.35	\$45.46
Prof - Specialist	\$834,551	\$851,954	\$2.03	\$2.00	224	234	\$108.64	\$102.15
Prof - Vision	\$490,114	\$505,841	\$1.19	\$1.18	426	437	\$33.56	\$32.55
Radiology	\$227,471	\$259,204	\$0.55	\$0.61	345	369	\$19.23	\$19.74
Transportation/Ambulance	\$1,196,087	\$1,265,292	\$2.91	\$2.96	330	438	\$105.73	\$81.26
Total	\$33,879,167	\$36,249,167	\$82.35	\$84.89				

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

Exhibit 1a

Age 15-20 Female								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	91,065	95,196						
Service Type								
DME/Supplies	\$85,086	\$86,164	\$0.93	\$0.91	72	69	\$155.27	\$158.10
FQHC / RHC	\$168,895	\$151,842	\$1.85	\$1.60	521	430	\$42.69	\$44.54
Home Health	\$19,665	\$23,866	\$0.22	\$0.25	14	12	\$190.92	\$259.41
IP - Maternity	\$3,860,295	\$3,755,705	\$42.39	\$39.45	203	190	\$2,503.43	\$2,497.14
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$627,118	\$792,791	\$6.89	\$8.33	16	17	\$5,269.90	\$6,005.99
IP - Psych	\$209,083	\$271,219	\$2.30	\$2.85	59	63	\$465.66	\$539.20
Lab	\$268,686	\$298,616	\$2.95	\$3.14	2,971	3,400	\$11.92	\$11.07
OP - Emergency Room & Related	\$2,292,266	\$2,523,507	\$25.17	\$26.51	935	913	\$322.95	\$348.31
OP - Other	\$1,776,864	\$1,927,608	\$19.51	\$20.25	534	538	\$438.62	\$451.85
Pharmacy	\$2,072,835	\$2,411,448	\$22.76	\$25.33	6,542	6,795	\$41.75	\$44.73
Prof - Anesthesia	\$443,473	\$429,219	\$4.87	\$4.51	252	242	\$231.70	\$223.55
Prof - Child EPSDT	\$103,908	\$105,719	\$1.14	\$1.11	621	555	\$22.04	\$24.03
Prof - Evaluation & Management	\$1,904,508	\$2,027,358	\$20.91	\$21.30	3,717	3,800	\$67.52	\$67.26
Prof - Maternity	\$2,130,283	\$2,121,756	\$23.39	\$22.29	436	426	\$644.37	\$627.18
Prof - Other	\$438,518	\$540,186	\$4.82	\$5.67	3,855	3,684	\$14.99	\$18.48
Prof - Psych	\$208,299	\$229,533	\$2.29	\$2.41	584	646	\$46.98	\$44.76
Prof - Specialist	\$356,079	\$355,758	\$3.91	\$3.74	548	510	\$85.64	\$88.02
Prof - Vision	\$109,150	\$112,024	\$1.20	\$1.18	593	566	\$24.26	\$24.95
Radiology	\$484,516	\$547,105	\$5.32	\$5.75	1,016	1,043	\$62.84	\$66.13
Transportation/Ambulance	\$315,813	\$327,557	\$3.47	\$3.44	801	999	\$51.93	\$41.33
Total	\$17,875,343	\$19,038,980	\$196.29	\$200.00				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Female								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	178,979	185,090						
Service Type								
DME/Supplies	\$641,262	\$704,689	\$3.58	\$3.81	236	279	\$182.28	\$163.92
FQHC / RHC	\$684,205	\$587,539	\$3.82	\$3.17	935	785	\$49.05	\$48.51
Home Health	\$87,235	\$138,431	\$0.49	\$0.75	23	24	\$258.86	\$380.31
IP - Maternity	\$11,292,623	\$12,296,717	\$63.09	\$66.44	304	299	\$2,490.65	\$2,663.93
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,621,677	\$5,616,377	\$25.82	\$30.34	63	66	\$4,942.97	\$5,517.07
IP - Psych	\$694,086	\$589,050	\$3.88	\$3.18	73	64	\$636.19	\$594.40
Lab	\$650,624	\$746,778	\$3.64	\$4.03	3,860	5,085	\$11.30	\$9.52
OP - Emergency Room & Related	\$8,306,328	\$9,643,844	\$46.41	\$52.10	1,520	1,561	\$366.30	\$400.62
OP - Other	\$8,044,058	\$9,134,858	\$44.94	\$49.35	913	1,013	\$590.61	\$584.67
Pharmacy	\$8,031,215	\$9,343,114	\$44.87	\$50.48	13,548	14,584	\$39.74	\$41.53
Prof - Anesthesia	\$1,387,948	\$1,453,552	\$7.75	\$7.85	446	460	\$208.49	\$204.90
Prof - Child EPSDT	\$146,403	\$141,777	\$0.82	\$0.77	688	738	\$14.27	\$12.45
Prof - Evaluation & Management	\$5,235,436	\$5,771,792	\$29.25	\$31.18	5,747	6,084	\$61.08	\$61.50
Prof - Maternity	\$6,429,884	\$6,802,388	\$35.93	\$36.75	733	786	\$587.79	\$561.02
Prof - Other	\$1,978,940	\$2,079,761	\$11.06	\$11.24	7,218	7,952	\$18.38	\$16.96
Prof - Psych	\$491,061	\$548,782	\$2.74	\$2.96	721	828	\$45.68	\$42.95
Prof - Specialist	\$2,147,849	\$2,460,624	\$12.00	\$13.29	1,077	1,111	\$133.77	\$143.54
Prof - Vision	\$211,865	\$211,812	\$1.18	\$1.14	167	133	\$85.19	\$103.63
Radiology	\$1,969,691	\$2,309,273	\$11.01	\$12.48	2,165	2,443	\$60.99	\$61.29
Transportation/Ambulance	\$672,861	\$717,496	\$3.76	\$3.88	1,319	1,835	\$34.20	\$25.34
Total	\$63,725,250	\$71,298,652	\$356.05	\$385.21				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 15-20 Male								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	65,190	68,221						
Service Type								
DME/Supplies	\$117,890	\$112,330	\$1.81	\$1.65	96	112	\$225.84	\$175.79
FQHC / RHC	\$30,089	\$20,670	\$0.46	\$0.30	218	124	\$25.46	\$29.32
Home Health	\$10,379	\$13,308	\$0.16	\$0.20	3	5	\$576.62	\$511.86
IP - Maternity	\$0	\$4,339	\$0.00	\$0.06	0	0	-	\$2,169.69
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$678,965	\$986,233	\$10.42	\$14.46	18	21	\$6,999.64	\$8,150.69
IP - Psych	\$176,758	\$195,457	\$2.71	\$2.87	48	50	\$682.46	\$681.03
Lab	\$97,188	\$106,720	\$1.49	\$1.56	585	724	\$30.58	\$25.94
OP - Emergency Room & Related	\$826,749	\$993,137	\$12.68	\$14.56	481	491	\$316.64	\$355.71
OP - Other	\$977,168	\$1,099,704	\$14.99	\$16.12	239	280	\$752.83	\$692.07
Pharmacy	\$1,778,321	\$1,712,706	\$27.28	\$25.11	3,706	3,910	\$88.33	\$77.04
Prof - Anesthesia	\$35,763	\$48,643	\$0.55	\$0.71	40	50	\$162.56	\$171.28
Prof - Child EPSDT	\$14,917	\$15,568	\$0.23	\$0.23	274	278	\$10.01	\$9.84
Prof - Evaluation & Management	\$807,589	\$911,574	\$12.39	\$13.36	2,018	2,213	\$73.66	\$72.45
Prof - Maternity	\$0	\$2,497	\$0.00	\$0.04	0	1	-	\$832.28
Prof - Other	\$803,345	\$646,163	\$12.32	\$9.47	12,898	16,562	\$11.46	\$6.86
Prof - Psych	\$162,637	\$177,873	\$2.49	\$2.61	613	674	\$48.85	\$46.41
Prof - Specialist	\$223,354	\$243,228	\$3.43	\$3.57	299	307	\$137.36	\$139.39
Prof - Vision	\$76,986	\$78,000	\$1.18	\$1.14	355	348	\$39.87	\$39.37
Radiology	\$67,556	\$79,215	\$1.04	\$1.16	532	605	\$23.39	\$23.02
Transportation/Ambulance	\$198,087	\$212,914	\$3.04	\$3.12	365	383	\$99.84	\$97.71
Total	\$7,083,743	\$7,660,280	\$108.66	\$112.29				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 21-44 Male								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	7,720	8,580						
Service Type								
DME/Supplies	\$86,584	\$80,677	\$11.22	\$9.40	538	462	\$250.24	\$244.48
FQHC / RHC	\$10,162	\$8,325	\$1.32	\$0.97	407	343	\$38.78	\$33.98
Home Health	\$3,829	\$8,330	\$0.50	\$0.97	30	14	\$201.50	\$833.00
IP - Maternity	\$1,599	\$0	\$0.21	\$0.00	2	0	\$1,599.00	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$432,773	\$748,731	\$56.06	\$87.26	96	112	\$6,980.21	\$9,359.13
IP - Psych	\$32,013	\$56,932	\$4.15	\$6.64	165	120	\$302.01	\$662.00
Lab	\$14,839	\$17,198	\$1.92	\$2.00	1,318	1,738	\$17.50	\$13.84
OP - Emergency Room & Related	\$313,715	\$379,685	\$40.64	\$44.25	1,233	1,305	\$395.61	\$406.95
OP - Other	\$335,868	\$444,782	\$43.51	\$51.84	603	724	\$865.64	\$858.65
Pharmacy	\$411,289	\$484,196	\$53.28	\$56.43	13,248	14,183	\$48.26	\$47.75
Prof - Anesthesia	\$15,505	\$21,125	\$2.01	\$2.46	152	159	\$158.22	\$185.31
Prof - Child EPSDT	\$1,309	\$1,369	\$0.17	\$0.16	2,552	407	\$0.80	\$4.71
Prof - Evaluation & Management	\$190,153	\$255,330	\$24.63	\$29.76	4,502	5,399	\$65.66	\$66.15
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$65,395	\$74,338	\$8.47	\$8.66	7,556	4,028	\$13.45	\$25.81
Prof - Psych	\$18,331	\$20,181	\$2.37	\$2.35	754	669	\$37.80	\$42.22
Prof - Specialist	\$81,687	\$107,550	\$10.58	\$12.54	841	1,021	\$150.99	\$147.33
Prof - Vision	\$13,934	\$12,660	\$1.80	\$1.48	107	102	\$201.94	\$173.42
Radiology	\$42,371	\$52,774	\$5.49	\$6.15	1,760	2,243	\$37.43	\$32.90
Transportation/Ambulance	\$27,808	\$29,936	\$3.60	\$3.49	863	1,137	\$50.11	\$36.82
Total	\$2,099,163	\$2,804,119	\$271.91	\$326.82				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

Age 45 and Over								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	14,393	15,063						
Service Type								
DME/Supplies	\$213,326	\$221,919	\$14.82	\$14.73	1,037	1,063	\$171.48	\$166.36
FQHC / RHC	\$77,781	\$109,837	\$5.40	\$7.29	4,873	2,907	\$13.31	\$30.10
Home Health	\$30,052	\$34,709	\$2.09	\$2.30	53	40	\$477.01	\$694.18
IP - Maternity	\$9,702	\$1,130	\$0.67	\$0.08	1	1	\$9,702.00	\$1,130.00
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,209,571	\$1,740,294	\$84.04	\$115.53	184	193	\$5,473.17	\$7,191.30
IP - Psych	\$55,734	\$43,804	\$3.87	\$2.91	87	102	\$535.90	\$342.22
Lab	\$52,895	\$58,085	\$3.68	\$3.86	3,408	4,844	\$12.94	\$9.55
OP - Emergency Room & Related	\$622,472	\$820,128	\$43.25	\$54.45	1,159	1,244	\$447.82	\$525.39
OP - Other	\$1,463,573	\$1,793,421	\$101.69	\$119.06	1,785	1,967	\$683.59	\$726.38
Pharmacy	\$1,920,779	\$2,084,799	\$133.45	\$138.41	33,824	34,117	\$47.35	\$48.68
Prof - Anesthesia	\$53,341	\$66,602	\$3.71	\$4.42	245	300	\$181.43	\$177.13
Prof - Child EPSDT	\$5,979	\$7,484	\$0.42	\$0.50	1,155	1,988	\$4.32	\$3.00
Prof - Evaluation & Management	\$663,844	\$779,174	\$46.12	\$51.73	8,873	9,679	\$62.38	\$64.13
Prof - Maternity	\$87	\$1,578	\$0.01	\$0.10	2	3	\$43.35	\$394.54
Prof - Other	\$352,877	\$389,464	\$24.52	\$25.86	32,440	15,768	\$9.07	\$19.68
Prof - Psych	\$57,402	\$60,055	\$3.99	\$3.99	1,340	1,313	\$35.72	\$36.44
Prof - Specialist	\$368,392	\$429,846	\$25.60	\$28.54	1,922	2,031	\$159.82	\$168.63
Prof - Vision	\$30,423	\$34,358	\$2.11	\$2.28	419	385	\$60.60	\$71.13
Radiology	\$176,313	\$207,710	\$12.25	\$13.79	3,791	4,272	\$38.78	\$38.73
Transportation/Ambulance	\$60,669	\$68,221	\$4.22	\$4.53	4,159	5,219	\$12.16	\$10.41
Total	\$7,425,211	\$8,952,616	\$515.89	\$594.34				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Low Income Families with Children (LIFC)

Exhibit 1a

All Age Categories								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	1,168,146	1,218,586						
Service Type								
DME/Supplies	\$2,221,409	\$2,439,508	\$1.90	\$2.00	158	165	\$144.42	\$145.79
FQHC / RHC	\$1,542,244	\$1,248,962	\$1.32	\$1.02	500	304	\$31.69	\$40.44
Home Health	\$249,065	\$330,862	\$0.21	\$0.27	10	10	\$243.70	\$320.91
IP - Maternity	\$15,236,415	\$16,134,733	\$13.04	\$13.24	63	61	\$2,494.09	\$2,622.25
IP - Newborn	\$16,061,687	\$17,521,514	\$13.75	\$14.38	24	31	\$6,948.60	\$5,633.42
IP - Other	\$14,558,569	\$18,608,884	\$12.46	\$15.27	29	28	\$5,184.86	\$6,598.90
IP - Psych	\$2,569,826	\$2,699,284	\$2.20	\$2.22	31	31	\$840.09	\$845.64
Lab	\$2,519,798	\$2,813,126	\$2.16	\$2.31	1,595	1,954	\$16.23	\$14.17
OP - Emergency Room & Related	\$21,565,815	\$24,719,057	\$18.46	\$20.29	833	854	\$266.02	\$284.87
OP - Other	\$22,311,803	\$25,434,343	\$19.10	\$20.87	415	457	\$551.70	\$548.00
Pharmacy	\$30,147,578	\$32,569,335	\$25.81	\$26.73	6,229	6,390	\$49.72	\$50.19
Prof - Anesthesia	\$2,536,685	\$2,655,854	\$2.17	\$2.18	133	135	\$195.95	\$194.00
Prof - Child EPSDT	\$2,017,855	\$1,919,404	\$1.73	\$1.58	1,737	1,611	\$11.93	\$11.73
Prof - Evaluation & Management	\$30,521,207	\$33,714,463	\$26.13	\$27.67	4,547	4,795	\$68.96	\$69.24
Prof - Maternity	\$8,603,584	\$8,960,208	\$7.37	\$7.35	147	153	\$601.31	\$575.96
Prof - Other	\$8,842,235	\$9,174,539	\$7.57	\$7.53	7,013	7,317	\$12.95	\$12.35
Prof - Psych	\$2,595,391	\$2,853,480	\$2.22	\$2.34	506	544	\$52.71	\$51.67
Prof - Specialist	\$5,619,463	\$6,125,691	\$4.81	\$5.03	491	512	\$117.56	\$117.84
Prof - Vision	\$1,395,274	\$1,438,450	\$1.19	\$1.18	272	268	\$52.63	\$52.89
Radiology	\$3,211,446	\$3,747,870	\$2.75	\$3.08	793	876	\$41.61	\$42.14
Transportation/Ambulance	\$3,669,988	\$3,915,348	\$3.14	\$3.21	596	769	\$63.21	\$50.12
Total	\$197,997,333	\$219,024,914	\$169.50	\$179.74				

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Historical Eligibility and Claims - Low Income Families with Children (LIFC)**

Exhibit 1a

All Age Categories								
All Regions	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	4,239,915	4,641,628						
Service Type								
DME/Supplies	\$7,627,973	\$8,667,985	\$1.80	\$1.87	191	212	\$113.25	\$105.59
FQHC / RHC	\$5,559,515	\$5,661,345	\$1.31	\$1.22	462	425	\$34.08	\$34.43
Home Health	\$1,231,169	\$1,248,824	\$0.29	\$0.27	11	10	\$313.83	\$335.89
IP - Maternity	\$52,554,285	\$56,097,776	\$12.40	\$12.09	57	53	\$2,615.16	\$2,732.35
IP - Newborn	\$57,511,548	\$62,101,739	\$13.56	\$13.38	37	38	\$4,356.28	\$4,206.58
IP - Other	\$69,812,164	\$85,510,706	\$16.47	\$18.42	37	35	\$5,352.87	\$6,253.53
IP - Psych	\$8,967,771	\$11,108,835	\$2.12	\$2.39	32	33	\$794.31	\$864.16
Lab	\$10,770,651	\$12,946,698	\$2.54	\$2.79	2,281	2,743	\$13.36	\$12.20
OP - Emergency Room & Related	\$68,019,017	\$81,764,990	\$16.04	\$17.62	781	802	\$246.58	\$263.74
OP - Other	\$73,770,905	\$87,403,656	\$17.40	\$18.83	498	526	\$419.24	\$429.40
Pharmacy	\$112,543,125	\$128,124,042	\$26.54	\$27.60	6,675	6,912	\$47.72	\$47.92
Prof - Anesthesia	\$7,856,291	\$8,507,339	\$1.85	\$1.83	113	114	\$196.35	\$192.14
Prof - Child EPSDT	\$7,228,829	\$7,010,594	\$1.70	\$1.51	1,779	1,610	\$11.50	\$11.26
Prof - Evaluation & Management	\$118,878,897	\$135,917,556	\$28.04	\$29.28	5,003	5,186	\$67.24	\$67.75
Prof - Maternity	\$28,301,673	\$29,827,219	\$6.68	\$6.43	155	145	\$515.72	\$530.70
Prof - Other	\$26,981,473	\$31,342,041	\$6.36	\$6.75	5,823	5,924	\$13.11	\$13.68
Prof - Psych	\$8,419,584	\$9,712,844	\$1.99	\$2.09	406	432	\$58.72	\$58.13
Prof - Specialist	\$19,295,823	\$22,143,023	\$4.55	\$4.77	465	491	\$117.43	\$116.56
Prof - Vision	\$5,210,263	\$5,894,902	\$1.23	\$1.27	237	232	\$62.19	\$65.80
Radiology	\$11,040,940	\$13,666,811	\$2.60	\$2.94	860	927	\$36.33	\$38.12
Transportation/Ambulance	\$14,407,328	\$15,903,877	\$3.40	\$3.43	492	569	\$82.95	\$72.24
Total	\$715,989,223	\$820,562,801	\$168.87	\$176.78				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	131	83						
Service Type								
DME/Supplies	\$4,641	\$31,821	\$35.43	\$383.39	3,206	10,843	\$132.60	\$424.28
FQHC / RHC	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Home Health	\$1,140	\$0	\$8.70	\$0.00	275	0	\$380.00	-
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$27,177	\$743	\$207.46	\$8.95	275	145	\$9,058.90	\$742.96
IP - Other	\$178,217	\$66,616	\$1,360.44	\$802.61	733	1,012	\$22,277.13	\$9,516.62
IP - Psych	\$0	\$111	\$0.00	\$1.33	0	0	-	-
Lab	\$314	\$133	\$2.40	\$1.61	1,374	1,012	\$20.93	\$19.05
OP - Emergency Room & Related	\$5,963	\$4,526	\$45.52	\$54.53	1,282	1,301	\$425.90	\$502.86
OP - Other	\$3,973	\$112,274	\$30.33	\$1,352.70	1,649	10,265	\$220.72	\$1,581.33
Pharmacy	\$47,998	\$50,096	\$366.39	\$603.56	17,679	24,000	\$248.69	\$301.78
Prof - Anesthesia	\$1,515	\$1,394	\$11.56	\$16.80	733	1,157	\$189.34	\$174.27
Prof - Child EPSDT	\$435	\$552	\$3.32	\$6.65	3,298	37,880	\$12.08	\$2.11
Prof - Evaluation & Management	\$64,131	\$22,085	\$489.55	\$266.08	40,214	41,205	\$146.09	\$77.49
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$8,992	\$49,154	\$68.64	\$592.22	32,702	200,675	\$25.19	\$35.41
Prof - Psych	\$0	\$28	\$0.00	\$0.34	0	0	-	-
Prof - Specialist	\$6,766	\$4,017	\$51.65	\$48.40	2,290	1,880	\$270.65	\$308.99
Prof - Vision	\$390	\$711	\$2.98	\$8.56	366	1,446	\$97.48	\$71.08
Radiology	\$1,388	\$918	\$10.59	\$11.07	9,802	5,928	\$12.97	\$22.40
Transportation/Ambulance	\$7,608	\$650	\$58.08	\$7.83	3,573	6,651	\$195.08	\$14.12
Total	\$360,647	\$345,830	\$2,753.03	\$4,166.62				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	2,760	2,863						
Service Type								
DME/Supplies	\$219,106	\$335,695	\$79.39	\$117.25	5,170	7,042	\$184.28	\$199.82
FQHC / RHC	\$1,362	\$803	\$0.49	\$0.28	152	109	\$38.93	\$30.87
Home Health	\$37,300	\$93,213	\$13.51	\$32.56	217	319	\$746.01	\$1,226.48
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,067,990	\$518,574	\$386.95	\$181.13	287	272	\$16,181.66	\$7,978.06
IP - Psych	\$8,263	\$1,810	\$2.99	\$0.63	35	0	\$1,032.84	-
Lab	\$7,495	\$6,667	\$2.72	\$2.33	2,413	2,926	\$13.50	\$9.55
OP - Emergency Room & Related	\$59,289	\$73,216	\$21.48	\$25.57	1,039	1,073	\$248.07	\$286.00
OP - Other	\$351,237	\$696,477	\$127.26	\$243.27	2,539	3,160	\$601.43	\$923.71
Pharmacy	\$446,493	\$603,201	\$161.77	\$210.69	12,265	13,262	\$158.27	\$190.64
Prof - Anesthesia	\$19,244	\$25,679	\$6.97	\$8.97	370	507	\$226.40	\$212.23
Prof - Child EPSDT	\$4,498	\$4,327	\$1.63	\$1.51	1,939	3,693	\$10.08	\$4.91
Prof - Evaluation & Management	\$210,892	\$221,581	\$76.41	\$77.39	12,200	12,407	\$75.16	\$74.86
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$101,934	\$107,253	\$36.93	\$37.46	24,135	35,195	\$18.36	\$12.77
Prof - Psych	\$3,582	\$9,058	\$1.30	\$3.16	248	549	\$62.84	\$69.14
Prof - Specialist	\$36,428	\$50,364	\$13.20	\$17.59	987	1,035	\$160.48	\$203.90
Prof - Vision	\$10,408	\$12,572	\$3.77	\$4.39	504	608	\$89.73	\$86.70
Radiology	\$9,817	\$8,263	\$3.56	\$2.89	2,191	1,970	\$19.48	\$17.58
Transportation/Ambulance	\$10,684	\$14,956	\$3.87	\$5.22	2,078	3,366	\$22.35	\$18.63
Total	\$2,606,021	\$2,783,708	\$944.21	\$972.30				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	15,583	16,376						
Service Type								
DME/Supplies	\$410,076	\$483,860	\$26.32	\$29.55	1,716	1,778	\$184.06	\$199.45
FQHC / RHC	\$1,746	\$1,902	\$0.11	\$0.12	45	34	\$30.11	\$40.48
Home Health	\$3,109	\$1,707	\$0.20	\$0.10	6	4	\$388.65	\$341.33
IP - Maternity	\$54,092	\$64,027	\$3.47	\$3.91	15	15	\$2,846.94	\$3,048.88
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,478,711	\$1,212,398	\$94.89	\$74.04	95	86	\$12,022.04	\$10,274.56
IP - Psych	\$254,313	\$183,844	\$16.32	\$11.23	210	152	\$931.55	\$888.13
Lab	\$28,526	\$31,133	\$1.83	\$1.90	1,966	2,148	\$11.17	\$10.62
OP - Emergency Room & Related	\$261,082	\$275,015	\$16.75	\$16.79	611	622	\$328.82	\$323.93
OP - Other	\$638,515	\$564,674	\$40.98	\$34.48	945	1,005	\$520.39	\$411.57
Pharmacy	\$2,710,241	\$2,429,818	\$173.92	\$148.38	13,048	13,046	\$159.95	\$136.48
Prof - Anesthesia	\$38,360	\$40,140	\$2.46	\$2.45	132	128	\$224.33	\$229.37
Prof - Child EPSDT	\$5,435	\$6,016	\$0.35	\$0.37	858	441	\$4.88	\$9.99
Prof - Evaluation & Management	\$535,941	\$550,712	\$34.39	\$33.63	5,529	5,231	\$74.64	\$77.14
Prof - Maternity	\$23,807	\$21,645	\$1.53	\$1.32	19	22	\$952.28	\$721.51
Prof - Other	\$1,704,372	\$1,818,330	\$109.37	\$111.04	23,800	26,831	\$55.15	\$49.66
Prof - Psych	\$102,049	\$106,594	\$6.55	\$6.51	1,466	1,422	\$53.60	\$54.95
Prof - Specialist	\$84,658	\$80,100	\$5.43	\$4.89	454	359	\$143.49	\$163.47
Prof - Vision	\$24,979	\$30,976	\$1.60	\$1.89	403	440	\$47.76	\$51.63
Radiology	\$45,087	\$47,355	\$2.89	\$2.89	1,131	1,060	\$30.69	\$32.73
Transportation/Ambulance	\$64,035	\$60,518	\$4.11	\$3.70	1,375	1,883	\$35.85	\$23.55
Total	\$8,469,136	\$8,010,765	\$543.49	\$489.18				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	10,647	10,750						
Service Type								
DME/Supplies	\$178,893	\$183,633	\$16.80	\$17.08	1,618	1,448	\$124.58	\$141.58
FQHC / RHC	\$972	\$919	\$0.09	\$0.09	66	33	\$16.47	\$30.64
Home Health	\$15,235	\$26,115	\$1.43	\$2.43	41	58	\$423.19	\$502.21
IP - Maternity	\$133,072	\$224,141	\$12.50	\$20.85	48	54	\$3,094.69	\$4,669.60
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,975,753	\$2,203,092	\$185.57	\$204.94	252	260	\$8,820.33	\$9,455.33
IP - Psych	\$587,188	\$549,991	\$55.15	\$51.16	810	672	\$816.67	\$913.61
Lab	\$55,549	\$61,792	\$5.22	\$5.75	6,863	9,841	\$9.12	\$7.01
OP - Emergency Room & Related	\$806,707	\$851,033	\$75.77	\$79.17	2,048	1,983	\$443.98	\$479.19
OP - Other	\$719,622	\$694,414	\$67.59	\$64.60	1,023	1,054	\$792.54	\$735.61
Pharmacy	\$3,582,487	\$2,927,584	\$336.48	\$272.33	35,033	36,413	\$115.26	\$89.75
Prof - Anesthesia	\$43,871	\$53,248	\$4.12	\$4.95	249	262	\$198.51	\$226.59
Prof - Child EPSDT	\$5,004	\$3,928	\$0.47	\$0.37	2,064	1,219	\$2.73	\$3.60
Prof - Evaluation & Management	\$660,099	\$706,746	\$62.00	\$65.74	10,934	11,571	\$68.04	\$68.18
Prof - Maternity	\$54,567	\$63,252	\$5.13	\$5.88	85	129	\$727.56	\$545.27
Prof - Other	\$223,786	\$254,897	\$21.02	\$23.71	28,300	25,551	\$8.91	\$11.14
Prof - Psych	\$133,300	\$124,730	\$12.52	\$11.60	2,883	2,801	\$52.11	\$49.71
Prof - Specialist	\$156,876	\$198,977	\$14.73	\$18.51	1,307	1,326	\$135.24	\$167.49
Prof - Vision	\$15,779	\$21,746	\$1.48	\$2.02	343	276	\$51.90	\$88.04
Radiology	\$150,708	\$204,139	\$14.15	\$18.99	3,609	4,285	\$47.07	\$53.17
Transportation/Ambulance	\$95,816	\$108,833	\$9.00	\$10.12	10,029	12,137	\$10.77	\$10.01
Total	\$9,595,282	\$9,463,211	\$901.22	\$880.30				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	10,111	10,528						
Service Type								
DME/Supplies	\$143,032	\$196,939	\$14.15	\$18.71	1,202	1,607	\$141.20	\$139.67
FQHC / RHC	\$796	\$443	\$0.08	\$0.04	40	25	\$23.42	\$20.12
Home Health	\$9,056	\$17,912	\$0.90	\$1.70	28	35	\$377.34	\$577.81
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,182,979	\$2,764,805	\$215.90	\$262.61	247	211	\$10,495.09	\$14,944.89
IP - Psych	\$537,074	\$670,235	\$53.12	\$63.66	783	878	\$813.75	\$870.44
Lab	\$31,736	\$41,570	\$3.14	\$3.95	3,748	6,406	\$10.05	\$7.40
OP - Emergency Room & Related	\$360,037	\$473,359	\$35.61	\$44.96	1,012	1,171	\$422.08	\$460.91
OP - Other	\$498,460	\$441,224	\$49.30	\$41.91	769	682	\$769.23	\$737.83
Pharmacy	\$3,490,012	\$2,976,830	\$345.17	\$282.75	26,666	26,452	\$155.33	\$128.27
Prof - Anesthesia	\$17,795	\$24,200	\$1.76	\$2.30	112	115	\$189.31	\$239.60
Prof - Child EPSDT	\$3,132	\$1,702	\$0.31	\$0.16	3,009	1,132	\$1.24	\$1.71
Prof - Evaluation & Management	\$396,716	\$421,951	\$39.24	\$40.08	6,843	7,022	\$68.80	\$68.49
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$116,983	\$168,094	\$11.57	\$15.97	20,239	25,771	\$6.86	\$7.43
Prof - Psych	\$104,525	\$101,667	\$10.34	\$9.66	2,574	2,481	\$48.19	\$46.70
Prof - Specialist	\$129,065	\$128,127	\$12.76	\$12.17	853	782	\$179.51	\$186.77
Prof - Vision	\$10,575	\$12,431	\$1.05	\$1.18	174	129	\$71.94	\$110.01
Radiology	\$74,460	\$71,220	\$7.36	\$6.76	2,192	2,127	\$40.31	\$38.17
Transportation/Ambulance	\$66,215	\$72,907	\$6.55	\$6.93	7,572	10,477	\$10.38	\$7.93
Total	\$8,172,648	\$8,585,615	\$808.29	\$815.50				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	44,713	44,518						
Service Type								
DME/Supplies	\$584,553	\$706,081	\$13.07	\$15.86	1,260	1,630	\$124.51	\$116.75
FQHC / RHC	\$12,028	\$10,745	\$0.27	\$0.24	157	148	\$20.53	\$19.54
Home Health	\$221,308	\$219,800	\$4.95	\$4.94	114	117	\$521.95	\$507.62
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$12,066,709	\$14,503,117	\$269.87	\$325.78	319	328	\$10,165.72	\$11,907.32
IP - Psych	\$993,357	\$1,121,293	\$22.22	\$25.19	333	327	\$800.45	\$924.40
Lab	\$238,661	\$267,331	\$5.34	\$6.01	6,990	10,487	\$9.16	\$6.87
OP - Emergency Room & Related	\$1,569,532	\$1,934,233	\$35.10	\$43.45	807	861	\$521.96	\$605.77
OP - Other	\$3,582,831	\$4,354,536	\$80.13	\$97.82	1,425	1,536	\$674.99	\$764.22
Pharmacy	\$13,626,814	\$14,003,898	\$304.76	\$314.57	52,359	54,314	\$69.85	\$69.50
Prof - Anesthesia	\$169,509	\$203,976	\$3.79	\$4.58	227	282	\$200.37	\$195.19
Prof - Child EPSDT	\$16,675	\$18,644	\$0.37	\$0.42	3,010	3,174	\$1.49	\$1.58
Prof - Evaluation & Management	\$2,945,411	\$3,192,196	\$65.87	\$71.71	11,987	12,949	\$65.95	\$66.45
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,524,178	\$1,537,334	\$34.09	\$34.53	35,516	65,459	\$11.52	\$6.33
Prof - Psych	\$273,106	\$278,677	\$6.11	\$6.26	1,475	1,594	\$49.70	\$47.11
Prof - Specialist	\$1,093,719	\$1,190,446	\$24.46	\$26.74	1,740	1,821	\$168.73	\$176.23
Prof - Vision	\$150,003	\$180,185	\$3.35	\$4.05	753	1,481	\$53.48	\$32.78
Radiology	\$839,394	\$954,623	\$18.77	\$21.44	4,316	4,937	\$52.20	\$52.13
Transportation/Ambulance	\$347,418	\$312,496	\$7.77	\$7.02	8,805	9,519	\$10.59	\$8.85
Total	\$40,255,205	\$44,989,609	\$900.30	\$1,010.59				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	83,945	85,118						
Service Type								
DME/Supplies	\$1,540,302	\$1,938,029	\$18.35	\$22.77	1,515	1,824	\$145.37	\$149.82
FQHC / RHC	\$16,905	\$14,812	\$0.20	\$0.17	110	95	\$21.90	\$21.94
Home Health	\$287,148	\$358,746	\$3.42	\$4.21	78	84	\$526.88	\$600.92
IP - Maternity	\$187,163	\$288,167	\$2.23	\$3.39	9	10	\$3,018.76	\$4,176.34
IP - Newborn	\$27,177	\$743	\$0.32	\$0.01	0	0	\$9,058.90	\$742.96
IP - Other	\$18,950,358	\$21,268,602	\$225.75	\$249.87	260	257	\$10,435.22	\$11,647.65
IP - Psych	\$2,380,193	\$2,527,284	\$28.35	\$29.69	415	394	\$820.47	\$905.19
Lab	\$362,281	\$408,626	\$4.32	\$4.80	5,491	8,033	\$9.43	\$7.17
OP - Emergency Room & Related	\$3,062,610	\$3,611,382	\$36.48	\$42.43	961	1,002	\$455.47	\$507.93
OP - Other	\$5,794,639	\$6,863,601	\$69.03	\$80.64	1,243	1,330	\$666.59	\$727.31
Pharmacy	\$23,904,044	\$22,991,426	\$284.76	\$270.11	38,397	39,257	\$88.99	\$82.57
Prof - Anesthesia	\$290,294	\$348,637	\$3.46	\$4.10	204	238	\$203.71	\$206.91
Prof - Child EPSDT	\$35,180	\$35,169	\$0.42	\$0.41	2,456	2,200	\$2.05	\$2.25
Prof - Evaluation & Management	\$4,813,190	\$5,115,270	\$57.34	\$60.10	10,086	10,566	\$68.22	\$68.25
Prof - Maternity	\$78,374	\$84,897	\$0.93	\$1.00	14	21	\$783.74	\$581.49
Prof - Other	\$3,680,245	\$3,935,062	\$43.84	\$46.23	30,207	47,192	\$17.42	\$11.76
Prof - Psych	\$616,562	\$620,755	\$7.34	\$7.29	1,742	1,787	\$50.61	\$48.99
Prof - Specialist	\$1,507,513	\$1,652,031	\$17.96	\$19.41	1,316	1,322	\$163.81	\$176.14
Prof - Vision	\$212,133	\$258,620	\$2.53	\$3.04	557	932	\$54.41	\$39.12
Radiology	\$1,120,853	\$1,286,518	\$13.35	\$15.11	3,318	3,662	\$48.29	\$49.53
Transportation/Ambulance	\$591,776	\$570,360	\$7.05	\$6.70	7,203	8,289	\$11.74	\$9.70
Total	\$69,458,939	\$74,178,738	\$827.43	\$871.48				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	158	193						
Service Type								
DME/Supplies	\$11,203	\$12,022	\$70.90	\$62.29	6,152	7,523	\$138.30	\$99.35
FQHC / RHC	\$10,842	\$3,427	\$68.62	\$17.76	3,797	870	\$216.84	\$244.80
Home Health	\$2,653	\$3,584	\$16.79	\$18.57	684	870	\$294.76	\$256.00
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$209,808	\$157,764	\$1,327.90	\$817.43	1,443	497	\$11,042.53	\$19,720.46
IP - Other	\$25,980	\$111,818	\$164.43	\$579.37	380	373	\$5,196.02	\$18,636.40
IP - Psych	\$1,312	\$2,259	\$8.31	\$11.71	0	0	-	-
Lab	\$2,061	\$2,348	\$13.04	\$12.16	11,241	19,026	\$13.93	\$7.67
OP - Emergency Room & Related	\$3,185	\$4,806	\$20.16	\$24.90	1,443	1,554	\$167.62	\$192.25
OP - Other	\$15,090	\$44,607	\$95.51	\$231.13	3,949	6,218	\$290.20	\$446.07
Pharmacy	\$60,528	\$67,384	\$383.09	\$349.14	14,962	14,611	\$307.25	\$286.74
Prof - Anesthesia	\$1,016	\$3,837	\$6.43	\$19.88	456	933	\$169.25	\$255.81
Prof - Child EPSDT	\$1,345	\$1,245	\$8.51	\$6.45	8,051	6,218	\$12.69	\$12.45
Prof - Evaluation & Management	\$40,504	\$36,609	\$256.36	\$189.68	26,810	22,756	\$114.74	\$100.02
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$27,648	\$39,708	\$174.99	\$205.74	38,506	74,798	\$54.53	\$33.01
Prof - Psych	\$332	\$823	\$2.10	\$4.27	0	124	-	\$411.72
Prof - Specialist	\$5,299	\$8,544	\$33.54	\$44.27	2,886	2,238	\$139.44	\$237.34
Prof - Vision	\$598	\$790	\$3.78	\$4.09	456	870	\$99.60	\$56.45
Radiology	\$478	\$1,625	\$3.03	\$8.42	2,127	5,472	\$17.08	\$18.47
Transportation/Ambulance	\$1,473	\$353	\$9.32	\$1.83	2,886	2,922	\$38.75	\$7.50
Total	\$421,354	\$503,555	\$2,666.80	\$2,609.09				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	3,471	4,301						
Service Type								
DME/Supplies	\$234,721	\$267,771	\$67.62	\$62.26	4,615	3,875	\$175.82	\$192.78
FQHC / RHC	\$14,263	\$18,685	\$4.11	\$4.34	1,220	1,155	\$40.40	\$45.13
Home Health	\$48,128	\$11,914	\$13.87	\$2.77	249	92	\$668.44	\$361.03
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,207,460	\$946,696	\$347.87	\$220.11	304	285	\$13,721.14	\$9,281.33
IP - Psych	\$37,324	\$51,500	\$10.75	\$11.97	35	28	\$3,732.36	\$5,150.00
Lab	\$22,788	\$27,090	\$6.57	\$6.30	5,421	5,873	\$14.53	\$12.87
OP - Emergency Room & Related	\$57,199	\$77,099	\$16.48	\$17.93	968	988	\$204.28	\$217.79
OP - Other	\$511,906	\$429,323	\$147.48	\$99.82	4,038	2,980	\$438.28	\$401.99
Pharmacy	\$346,068	\$363,700	\$99.70	\$84.56	13,162	12,678	\$90.90	\$80.04
Prof - Anesthesia	\$23,793	\$21,066	\$6.85	\$4.90	463	385	\$177.56	\$152.65
Prof - Child EPSDT	\$5,548	\$7,831	\$1.60	\$1.82	8,311	1,814	\$2.31	\$12.05
Prof - Evaluation & Management	\$204,552	\$256,927	\$58.93	\$59.74	10,123	9,790	\$69.86	\$73.22
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$222,450	\$284,705	\$64.09	\$66.19	30,009	29,600	\$25.63	\$26.84
Prof - Psych	\$14,959	\$19,964	\$4.31	\$4.64	467	485	\$110.81	\$114.74
Prof - Specialist	\$70,957	\$49,931	\$20.44	\$11.61	1,248	1,074	\$196.56	\$129.69
Prof - Vision	\$7,628	\$8,354	\$2.20	\$1.94	270	187	\$97.79	\$124.69
Radiology	\$15,055	\$14,604	\$4.34	\$3.40	2,354	1,772	\$22.11	\$23.00
Transportation/Ambulance	\$38,717	\$53,924	\$11.15	\$12.54	1,583	1,680	\$84.53	\$89.58
Total	\$3,083,515	\$2,911,083	\$888.37	\$676.84				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	21,963	25,250						
Service Type								
DME/Supplies	\$301,803	\$375,508	\$13.74	\$14.87	1,100	1,097	\$149.93	\$162.70
FQHC / RHC	\$36,516	\$54,540	\$1.66	\$2.16	516	749	\$38.68	\$34.61
Home Health	\$25,775	\$20,914	\$1.17	\$0.83	25	21	\$560.33	\$464.74
IP - Maternity	\$45,355	\$74,502	\$2.07	\$2.95	10	13	\$2,519.74	\$2,660.80
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,038,670	\$797,120	\$47.29	\$31.57	57	52	\$9,892.09	\$7,246.54
IP - Psych	\$425,687	\$609,074	\$19.38	\$24.12	158	174	\$1,472.96	\$1,659.60
Lab	\$101,253	\$117,678	\$4.61	\$4.66	3,547	3,876	\$15.60	\$14.43
OP - Emergency Room & Related	\$293,422	\$405,008	\$13.36	\$16.04	727	785	\$220.45	\$245.31
OP - Other	\$674,905	\$745,720	\$30.73	\$29.53	1,016	1,060	\$363.05	\$334.40
Pharmacy	\$2,846,597	\$3,048,495	\$129.61	\$120.73	14,008	14,489	\$111.03	\$99.99
Prof - Anesthesia	\$28,113	\$31,380	\$1.28	\$1.24	99	96	\$154.47	\$155.35
Prof - Child EPSDT	\$11,650	\$10,518	\$0.53	\$0.42	1,333	1,023	\$4.77	\$4.89
Prof - Evaluation & Management	\$517,782	\$613,150	\$23.58	\$24.28	4,393	4,430	\$64.39	\$65.77
Prof - Maternity	\$23,760	\$41,043	\$1.08	\$1.63	24	47	\$540.01	\$414.58
Prof - Other	\$241,821	\$429,448	\$11.01	\$17.01	5,827	6,248	\$22.68	\$32.67
Prof - Psych	\$224,336	\$256,848	\$10.21	\$10.17	1,975	2,029	\$62.06	\$60.17
Prof - Specialist	\$118,874	\$126,615	\$5.41	\$5.01	621	646	\$104.55	\$93.10
Prof - Vision	\$35,394	\$41,229	\$1.61	\$1.63	282	254	\$68.46	\$77.21
Radiology	\$49,773	\$61,966	\$2.27	\$2.45	975	981	\$27.90	\$30.02
Transportation/Ambulance	\$152,559	\$161,944	\$6.95	\$6.41	1,575	1,479	\$52.92	\$52.04
Total	\$7,194,047	\$8,022,699	\$327.55	\$317.73				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	16,296	17,509						
Service Type								
DME/Supplies	\$289,503	\$270,556	\$17.77	\$15.45	2,144	1,944	\$99.42	\$95.37
FQHC / RHC	\$102,623	\$91,748	\$6.30	\$5.24	2,143	1,999	\$35.27	\$31.45
Home Health	\$53,553	\$44,097	\$3.29	\$2.52	87	61	\$453.84	\$495.47
IP - Maternity	\$241,246	\$201,752	\$14.80	\$11.52	64	47	\$2,772.94	\$2,923.94
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,464,031	\$3,234,248	\$151.20	\$184.72	247	270	\$7,333.43	\$8,208.75
IP - Psych	\$570,818	\$639,689	\$35.03	\$36.53	552	435	\$761.09	\$1,008.97
Lab	\$244,965	\$306,485	\$15.03	\$17.50	13,219	15,526	\$13.65	\$13.53
OP - Emergency Room & Related	\$960,279	\$997,938	\$58.93	\$57.00	2,428	2,162	\$291.26	\$316.40
OP - Other	\$1,071,952	\$1,222,831	\$65.78	\$69.84	1,742	1,848	\$453.07	\$453.57
Pharmacy	\$3,747,781	\$4,184,416	\$229.98	\$238.99	45,398	46,174	\$60.79	\$62.11
Prof - Anesthesia	\$51,033	\$56,549	\$3.13	\$3.23	237	224	\$158.49	\$172.93
Prof - Child EPSDT	\$12,607	\$11,857	\$0.77	\$0.68	2,982	2,061	\$3.11	\$3.94
Prof - Evaluation & Management	\$859,904	\$951,275	\$52.77	\$54.33	10,497	10,827	\$60.32	\$60.22
Prof - Maternity	\$99,986	\$95,330	\$6.14	\$5.44	177	194	\$416.61	\$336.86
Prof - Other	\$347,681	\$403,305	\$21.34	\$23.03	16,225	20,769	\$15.78	\$13.31
Prof - Psych	\$169,562	\$175,395	\$10.41	\$10.02	2,406	2,245	\$51.89	\$53.56
Prof - Specialist	\$343,116	\$363,636	\$21.06	\$20.77	2,546	2,556	\$99.25	\$97.52
Prof - Vision	\$30,782	\$33,392	\$1.89	\$1.91	183	208	\$124.12	\$109.84
Radiology	\$209,065	\$247,150	\$12.83	\$14.12	3,902	4,044	\$39.45	\$41.88
Transportation/Ambulance	\$297,482	\$289,744	\$18.25	\$16.55	6,342	6,645	\$34.54	\$29.88
Total	\$12,167,967	\$13,821,393	\$746.68	\$789.39				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	11,774	12,961						
Service Type								
DME/Supplies	\$157,367	\$224,579	\$13.37	\$17.33	2,179	2,442	\$73.60	\$85.13
FQHC / RHC	\$43,476	\$29,398	\$3.69	\$2.27	2,667	2,187	\$16.61	\$12.45
Home Health	\$19,913	\$23,542	\$1.69	\$1.82	23	46	\$865.80	\$470.83
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,658,818	\$1,957,765	\$140.89	\$151.05	188	190	\$9,015.31	\$9,550.07
IP - Psych	\$541,147	\$516,018	\$45.96	\$39.81	699	519	\$788.84	\$919.82
Lab	\$83,448	\$104,434	\$7.09	\$8.06	6,609	7,939	\$12.87	\$12.18
OP - Emergency Room & Related	\$402,012	\$469,037	\$34.14	\$36.19	1,547	1,430	\$264.83	\$303.58
OP - Other	\$527,320	\$814,123	\$44.79	\$62.81	1,017	1,156	\$528.38	\$651.82
Pharmacy	\$2,474,229	\$2,724,712	\$210.14	\$210.22	28,150	30,473	\$89.58	\$82.79
Prof - Anesthesia	\$15,589	\$19,141	\$1.32	\$1.48	98	119	\$162.39	\$149.54
Prof - Child EPSDT	\$5,348	\$4,251	\$0.45	\$0.33	5,654	4,283	\$0.96	\$0.92
Prof - Evaluation & Management	\$413,793	\$437,467	\$35.14	\$33.75	6,789	6,498	\$62.12	\$62.34
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$229,578	\$319,369	\$19.50	\$24.64	17,987	47,449	\$13.01	\$6.23
Prof - Psych	\$82,365	\$98,320	\$7.00	\$7.59	1,469	1,647	\$57.16	\$55.27
Prof - Specialist	\$128,299	\$157,641	\$10.90	\$12.16	1,452	1,473	\$90.03	\$99.08
Prof - Vision	\$17,899	\$20,574	\$1.52	\$1.59	118	136	\$154.30	\$139.96
Radiology	\$77,968	\$86,639	\$6.62	\$6.68	2,443	2,391	\$32.53	\$33.56
Transportation/Ambulance	\$127,043	\$161,825	\$10.79	\$12.49	3,724	6,144	\$34.77	\$24.39
Total	\$7,005,611	\$8,168,836	\$595.01	\$630.26				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	38,851	43,088						
Service Type								
DME/Supplies	\$1,122,574	\$1,403,065	\$28.89	\$32.56	3,967	4,357	\$87.41	\$89.68
FQHC / RHC	\$310,049	\$277,342	\$7.98	\$6.44	3,695	3,266	\$25.92	\$23.65
Home Health	\$162,269	\$240,836	\$4.18	\$5.59	126	128	\$396.75	\$522.42
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$11,840,255	\$13,175,820	\$304.76	\$305.79	415	407	\$8,822.84	\$9,018.36
IP - Psych	\$1,136,868	\$1,395,493	\$29.26	\$32.39	372	382	\$943.46	\$1,017.12
Lab	\$580,238	\$734,247	\$14.93	\$17.04	13,382	15,479	\$13.39	\$13.21
OP - Emergency Room & Related	\$1,314,344	\$1,675,924	\$33.83	\$38.90	1,233	1,272	\$329.16	\$366.96
OP - Other	\$3,650,841	\$4,773,700	\$93.97	\$110.79	1,977	2,331	\$570.35	\$570.33
Pharmacy	\$11,443,364	\$13,717,010	\$294.54	\$318.35	67,341	70,965	\$52.49	\$53.83
Prof - Anesthesia	\$119,433	\$128,356	\$3.07	\$2.98	218	220	\$169.41	\$162.27
Prof - Child EPSDT	\$37,411	\$32,268	\$0.96	\$0.75	6,726	4,924	\$1.72	\$1.82
Prof - Evaluation & Management	\$2,242,232	\$2,636,416	\$57.71	\$61.19	11,624	11,800	\$59.58	\$62.22
Prof - Maternity	\$0	\$30	\$0.00	\$0.00	0	0	-	\$30.23
Prof - Other	\$1,442,600	\$1,600,472	\$37.13	\$37.14	31,926	34,285	\$13.96	\$13.00
Prof - Psych	\$251,806	\$290,394	\$6.48	\$6.74	1,212	1,216	\$64.19	\$66.51
Prof - Specialist	\$1,083,033	\$1,227,367	\$27.88	\$28.49	4,120	3,527	\$81.19	\$96.90
Prof - Vision	\$107,701	\$133,904	\$2.77	\$3.11	400	452	\$83.17	\$82.55
Radiology	\$575,766	\$780,281	\$14.82	\$18.11	4,533	4,989	\$39.23	\$43.56
Transportation/Ambulance	\$674,236	\$753,068	\$17.35	\$17.48	6,008	6,858	\$34.66	\$30.58
Total	\$38,095,020	\$44,975,994	\$980.54	\$1,043.82				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	92,513	103,302						
Service Type								
DME/Supplies	\$2,117,172	\$2,553,501	\$22.89	\$24.72	2,766	2,897	\$99.30	\$102.39
FQHC / RHC	\$517,769	\$475,139	\$5.60	\$4.60	2,443	2,208	\$27.49	\$25.00
Home Health	\$312,292	\$344,886	\$3.38	\$3.34	88	80	\$461.29	\$498.39
IP - Maternity	\$286,601	\$276,254	\$3.10	\$2.67	14	11	\$2,729.54	\$2,847.98
IP - Newborn	\$209,808	\$157,764	\$2.27	\$1.53	2	1	\$11,042.53	\$19,720.46
IP - Other	\$18,235,214	\$20,223,467	\$197.11	\$195.77	267	265	\$8,852.05	\$8,877.73
IP - Psych	\$2,713,154	\$3,214,033	\$29.33	\$31.11	381	342	\$922.84	\$1,091.72
Lab	\$1,034,753	\$1,292,282	\$11.18	\$12.51	9,854	11,311	\$13.62	\$13.27
OP - Emergency Room & Related	\$3,030,440	\$3,629,813	\$32.76	\$35.14	1,354	1,312	\$290.33	\$321.34
OP - Other	\$6,452,014	\$8,030,303	\$69.74	\$77.74	1,666	1,825	\$502.34	\$511.06
Pharmacy	\$20,918,567	\$24,105,717	\$226.11	\$233.35	43,704	45,346	\$62.08	\$61.75
Prof - Anesthesia	\$238,977	\$260,330	\$2.58	\$2.52	187	186	\$165.38	\$162.60
Prof - Child EPSDT	\$73,909	\$67,970	\$0.80	\$0.66	4,712	3,278	\$2.03	\$2.41
Prof - Evaluation & Management	\$4,278,768	\$4,931,845	\$46.25	\$47.74	9,063	9,105	\$61.24	\$62.92
Prof - Maternity	\$123,746	\$136,403	\$1.34	\$1.32	37	44	\$435.73	\$356.14
Prof - Other	\$2,511,778	\$3,077,006	\$27.15	\$29.79	21,129	26,673	\$15.42	\$13.40
Prof - Psych	\$743,361	\$841,745	\$8.04	\$8.15	1,606	1,611	\$60.04	\$60.71
Prof - Specialist	\$1,749,578	\$1,933,735	\$18.91	\$18.72	2,563	2,296	\$88.55	\$97.83
Prof - Vision	\$200,001	\$238,244	\$2.16	\$2.31	293	312	\$88.50	\$88.63
Radiology	\$928,105	\$1,192,265	\$10.03	\$11.54	3,225	3,390	\$37.33	\$40.85
Transportation/Ambulance	\$1,291,508	\$1,420,859	\$13.96	\$13.75	4,552	5,194	\$36.80	\$31.78
Total	\$67,967,515	\$78,403,560	\$734.68	\$758.97				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	126	67						
Service Type								
DME/Supplies	\$15,033	\$8,760	\$119.31	\$130.74	7,333	14,507	\$195.24	\$108.14
FQHC / RHC	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Home Health	\$0	\$290	\$0.00	\$4.32	0	537	-	\$96.57
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$70,069	\$19,238	\$556.10	\$287.13	762	716	\$8,758.64	\$4,809.51
IP - Other	\$32,943	\$32,426	\$261.46	\$483.97	667	716	\$4,706.20	\$8,106.55
IP - Psych	\$2,640	\$1,487	\$20.95	\$22.19	0	0	-	-
Lab	\$575	\$417	\$4.56	\$6.22	7,143	10,030	\$7.67	\$7.44
OP - Emergency Room & Related	\$11,401	\$4,652	\$90.49	\$69.43	3,143	2,507	\$345.50	\$332.29
OP - Other	\$10,616	\$15,608	\$84.26	\$232.96	2,857	3,045	\$353.87	\$918.12
Pharmacy	\$11,197	\$11,812	\$88.86	\$176.29	13,619	15,224	\$78.30	\$138.96
Prof - Anesthesia	\$1,733	\$751	\$13.75	\$11.21	571	537	\$288.79	\$250.28
Prof - Child EPSDT	\$955	\$522	\$7.58	\$7.80	10,381	7,522	\$8.76	\$12.44
Prof - Evaluation & Management	\$20,883	\$13,756	\$165.74	\$205.31	26,857	26,149	\$74.05	\$94.22
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$30,804	\$7,858	\$244.47	\$117.28	22,190	37,970	\$132.20	\$37.06
Prof - Psych	\$668	\$376	\$5.30	\$5.62	0	716	-	\$94.10
Prof - Specialist	\$8,703	\$3,053	\$69.07	\$45.57	2,571	1,612	\$322.35	\$339.27
Prof - Vision	\$857	\$559	\$6.80	\$8.34	1,333	1,612	\$61.23	\$62.09
Radiology	\$722	\$432	\$5.73	\$6.46	6,095	7,343	\$11.28	\$10.55
Transportation/Ambulance	\$1,638	\$575	\$13.00	\$8.58	6,190	2,866	\$25.20	\$35.92
Total	\$221,437	\$122,571	\$1,757.44	\$1,829.42				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	5,672	5,304						
Service Type								
DME/Supplies	\$264,632	\$267,781	\$46.66	\$50.49	4,047	4,511	\$138.33	\$134.29
FQHC / RHC	\$1,337	\$381	\$0.24	\$0.07	80	20	\$35.17	\$42.34
Home Health	\$3,471	\$2,321	\$0.61	\$0.44	17	16	\$433.84	\$331.56
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$521,807	\$650,230	\$92.00	\$122.59	207	197	\$5,324.56	\$7,473.91
IP - Psych	\$89,692	\$87,045	\$15.81	\$16.41	32	18	\$5,979.49	\$10,880.63
Lab	\$11,732	\$9,432	\$2.07	\$1.78	2,382	2,828	\$10.42	\$7.55
OP - Emergency Room & Related	\$173,507	\$139,639	\$30.59	\$26.33	1,068	1,059	\$343.58	\$298.37
OP - Other	\$866,788	\$1,055,077	\$152.82	\$198.92	2,179	2,891	\$841.54	\$825.57
Pharmacy	\$526,494	\$621,882	\$92.82	\$117.25	11,336	11,163	\$98.26	\$126.04
Prof - Anesthesia	\$28,964	\$32,824	\$5.11	\$6.19	267	330	\$229.88	\$224.82
Prof - Child EPSDT	\$8,360	\$8,441	\$1.47	\$1.59	1,720	1,889	\$10.28	\$10.11
Prof - Evaluation & Management	\$274,043	\$274,239	\$48.32	\$51.70	8,285	8,606	\$69.98	\$72.09
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$180,851	\$143,974	\$31.88	\$27.14	15,264	17,914	\$25.07	\$18.18
Prof - Psych	\$37,058	\$42,574	\$6.53	\$8.03	709	891	\$110.62	\$108.06
Prof - Specialist	\$84,709	\$77,891	\$14.93	\$14.69	994	973	\$180.23	\$181.14
Prof - Vision	\$22,858	\$14,285	\$4.03	\$2.69	463	502	\$104.38	\$64.34
Radiology	\$26,612	\$14,431	\$4.69	\$2.72	1,568	1,505	\$35.91	\$21.70
Transportation/Ambulance	\$26,177	\$29,872	\$4.62	\$5.63	1,293	1,518	\$42.84	\$44.52
Total	\$3,149,094	\$3,472,317	\$555.20	\$654.66				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	52,906	54,374						
Service Type								
DME/Supplies	\$614,694	\$648,955	\$11.62	\$11.94	970	998	\$143.75	\$143.57
FQHC / RHC	\$17,789	\$26,008	\$0.34	\$0.48	99	156	\$40.71	\$36.84
Home Health	\$13,160	\$35,308	\$0.25	\$0.65	8	14	\$375.99	\$569.49
IP - Maternity	\$158,236	\$149,787	\$2.99	\$2.75	14	14	\$2,594.04	\$2,377.57
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,993,811	\$2,178,126	\$37.69	\$40.06	64	56	\$7,095.41	\$8,541.67
IP - Psych	\$1,285,643	\$1,443,124	\$24.30	\$26.54	275	278	\$1,059.01	\$1,145.34
Lab	\$93,205	\$109,133	\$1.76	\$2.01	1,872	2,199	\$11.29	\$10.95
OP - Emergency Room & Related	\$1,109,162	\$1,239,779	\$20.96	\$22.80	677	761	\$371.58	\$359.56
OP - Other	\$2,120,772	\$2,157,512	\$40.09	\$39.68	759	803	\$633.63	\$592.89
Pharmacy	\$4,910,539	\$5,088,152	\$92.82	\$93.58	11,676	11,918	\$95.39	\$94.22
Prof - Anesthesia	\$79,633	\$76,910	\$1.51	\$1.41	86	82	\$211.23	\$207.86
Prof - Child EPSDT	\$25,765	\$30,021	\$0.49	\$0.55	545	477	\$10.73	\$13.89
Prof - Evaluation & Management	\$1,214,073	\$1,293,915	\$22.95	\$23.80	4,089	4,247	\$67.34	\$67.24
Prof - Maternity	\$86,885	\$82,612	\$1.64	\$1.52	29	34	\$668.35	\$539.95
Prof - Other	\$1,005,383	\$1,325,423	\$19.00	\$24.38	15,010	13,032	\$15.19	\$22.45
Prof - Psych	\$485,086	\$507,904	\$9.17	\$9.34	1,755	1,758	\$62.70	\$63.76
Prof - Specialist	\$271,816	\$253,084	\$5.14	\$4.65	388	393	\$159.05	\$142.02
Prof - Vision	\$71,481	\$82,332	\$1.35	\$1.51	411	380	\$39.41	\$47.81
Radiology	\$97,909	\$122,300	\$1.85	\$2.25	852	930	\$26.07	\$29.04
Transportation/Ambulance	\$245,759	\$295,586	\$4.65	\$5.44	1,223	1,770	\$45.57	\$36.85
Total	\$15,900,799	\$17,145,972	\$300.55	\$315.33				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	25,042	24,954						
Service Type								
DME/Supplies	\$426,481	\$486,732	\$17.03	\$19.51	1,833	1,913	\$111.50	\$122.33
FQHC / RHC	\$78,968	\$69,711	\$3.15	\$2.79	1,592	906	\$23.77	\$37.00
Home Health	\$63,265	\$30,784	\$2.53	\$1.23	71	46	\$427.47	\$324.04
IP - Maternity	\$402,938	\$394,104	\$16.09	\$15.79	70	56	\$2,759.85	\$3,397.45
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$4,309,160	\$4,320,089	\$172.08	\$173.12	308	295	\$6,712.09	\$7,035.98
IP - Psych	\$1,484,795	\$1,579,218	\$59.29	\$63.29	1,066	991	\$667.32	\$766.24
Lab	\$151,885	\$165,654	\$6.07	\$6.64	6,962	8,719	\$10.45	\$9.14
OP - Emergency Room & Related	\$2,094,607	\$2,261,410	\$83.64	\$90.62	2,107	2,242	\$476.26	\$485.07
OP - Other	\$2,287,955	\$2,068,159	\$91.36	\$82.88	2,030	1,871	\$540.12	\$531.66
Pharmacy	\$5,613,461	\$5,859,287	\$224.16	\$234.80	38,546	39,833	\$69.78	\$70.74
Prof - Anesthesia	\$79,600	\$72,891	\$3.18	\$2.92	212	171	\$179.68	\$204.75
Prof - Child EPSDT	\$20,949	\$23,871	\$0.84	\$0.96	20,358	4,028	\$0.49	\$2.85
Prof - Evaluation & Management	\$1,393,258	\$1,506,227	\$55.64	\$60.36	10,663	11,230	\$62.62	\$64.50
Prof - Maternity	\$165,528	\$131,588	\$6.61	\$5.27	131	112	\$604.12	\$564.76
Prof - Other	\$689,498	\$647,776	\$27.53	\$25.96	53,252	62,089	\$6.20	\$5.02
Prof - Psych	\$263,274	\$268,118	\$10.51	\$10.74	2,425	2,490	\$52.03	\$51.79
Prof - Specialist	\$421,587	\$379,461	\$16.84	\$15.21	1,232	1,251	\$163.91	\$145.83
Prof - Vision	\$42,641	\$51,539	\$1.70	\$2.07	327	293	\$62.52	\$84.63
Radiology	\$283,783	\$291,574	\$11.33	\$11.68	3,863	3,864	\$35.20	\$36.28
Transportation/Ambulance	\$423,936	\$406,713	\$16.93	\$16.30	11,846	11,866	\$17.15	\$16.48
Total	\$20,697,569	\$21,014,907	\$826.51	\$842.15				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	16,841	17,632						
Service Type								
DME/Supplies	\$385,003	\$490,551	\$22.86	\$27.82	2,397	2,300	\$114.45	\$145.18
FQHC / RHC	\$26,253	\$41,974	\$1.56	\$2.38	1,581	2,343	\$11.83	\$12.19
Home Health	\$86,682	\$51,549	\$5.15	\$2.92	128	89	\$481.57	\$393.50
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,602,691	\$3,071,779	\$154.54	\$174.22	197	204	\$9,396.00	\$10,239.26
IP - Psych	\$1,156,917	\$1,117,402	\$68.70	\$63.37	1,343	992	\$613.75	\$766.39
Lab	\$56,463	\$75,836	\$3.35	\$4.30	3,697	5,036	\$10.88	\$10.25
OP - Emergency Room & Related	\$727,681	\$936,490	\$43.21	\$53.11	1,329	1,485	\$390.18	\$429.19
OP - Other	\$1,152,812	\$1,307,330	\$68.45	\$74.15	1,039	1,090	\$790.68	\$816.06
Pharmacy	\$3,410,907	\$3,457,308	\$202.54	\$196.08	25,283	25,971	\$96.13	\$90.60
Prof - Anesthesia	\$15,055	\$25,993	\$0.89	\$1.47	76	95	\$140.71	\$187.00
Prof - Child EPSDT	\$2,953	\$3,003	\$0.18	\$0.17	2,542	1,468	\$0.83	\$1.39
Prof - Evaluation & Management	\$621,091	\$690,408	\$36.88	\$39.16	7,192	7,494	\$61.53	\$62.70
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$299,373	\$479,166	\$17.78	\$27.18	42,795	53,588	\$4.98	\$6.09
Prof - Psych	\$149,763	\$160,184	\$8.89	\$9.08	1,983	1,972	\$53.81	\$55.27
Prof - Specialist	\$152,988	\$230,418	\$9.08	\$13.07	707	896	\$154.22	\$174.96
Prof - Vision	\$24,361	\$29,690	\$1.45	\$1.68	164	195	\$105.92	\$103.45
Radiology	\$99,950	\$105,156	\$5.93	\$5.96	2,056	2,239	\$34.63	\$31.96
Transportation/Ambulance	\$377,890	\$342,566	\$22.44	\$19.43	13,672	14,082	\$19.70	\$16.56
Total	\$11,348,830	\$12,616,802	\$673.88	\$715.56				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	56,118	58,975						
Service Type								
DME/Supplies	\$1,851,503	\$2,036,050	\$32.99	\$34.52	3,656	3,876	\$108.30	\$106.90
FQHC / RHC	\$276,706	\$349,720	\$4.93	\$5.93	1,750	4,470	\$33.82	\$15.92
Home Health	\$344,707	\$424,696	\$6.14	\$7.20	227	247	\$324.28	\$350.12
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$16,804,930	\$19,875,634	\$299.46	\$337.02	430	444	\$8,364.82	\$9,117.26
IP - Psych	\$2,826,467	\$2,727,725	\$50.37	\$46.25	889	822	\$680.09	\$675.51
Lab	\$336,789	\$412,606	\$6.00	\$7.00	7,805	9,725	\$9.23	\$8.63
OP - Emergency Room & Related	\$3,261,668	\$3,900,012	\$58.12	\$66.13	1,325	1,348	\$526.42	\$588.86
OP - Other	\$8,424,266	\$9,441,371	\$150.12	\$160.09	2,827	2,853	\$637.14	\$673.28
Pharmacy	\$17,184,008	\$19,418,664	\$306.21	\$329.27	62,765	66,298	\$58.54	\$59.60
Prof - Anesthesia	\$253,022	\$201,205	\$4.51	\$3.41	227	204	\$238.70	\$200.60
Prof - Child EPSDT	\$30,075	\$34,866	\$0.54	\$0.59	3,634	5,276	\$1.77	\$1.34
Prof - Evaluation & Management	\$3,585,863	\$4,063,863	\$63.90	\$68.91	12,325	12,936	\$62.21	\$63.92
Prof - Maternity	\$297	\$560	\$0.01	\$0.01	0	0	\$297.15	\$560.13
Prof - Other	\$2,236,526	\$2,325,213	\$39.85	\$39.43	53,052	58,185	\$9.01	\$8.13
Prof - Psych	\$492,742	\$560,099	\$8.78	\$9.50	1,807	2,062	\$58.32	\$55.26
Prof - Specialist	\$1,714,756	\$1,847,632	\$30.56	\$31.33	1,975	2,222	\$185.62	\$169.23
Prof - Vision	\$161,302	\$185,387	\$2.87	\$3.14	540	543	\$63.93	\$69.46
Radiology	\$960,028	\$1,022,974	\$17.11	\$17.35	4,968	5,258	\$41.33	\$39.59
Transportation/Ambulance	\$1,252,588	\$1,167,357	\$22.32	\$19.79	16,761	19,044	\$15.98	\$12.47
Total	\$61,998,243	\$69,995,636	\$1,104.78	\$1,186.87				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	156,705	161,306						
Service Type								
DME/Supplies	\$3,557,346	\$3,938,828	\$22.70	\$24.42	2,340	2,455	\$116.44	\$119.36
FQHC / RHC	\$401,052	\$487,794	\$2.56	\$3.02	1,087	2,084	\$28.25	\$17.41
Home Health	\$511,285	\$544,949	\$3.26	\$3.38	110	112	\$356.54	\$360.65
IP - Maternity	\$561,174	\$543,891	\$3.58	\$3.37	16	13	\$2,710.99	\$3,038.50
IP - Newborn	\$70,069	\$19,238	\$0.45	\$0.12	1	0	\$8,758.64	\$4,809.51
IP - Other	\$26,265,342	\$30,128,285	\$167.61	\$186.78	254	256	\$7,925.57	\$8,758.22
IP - Psych	\$6,846,154	\$6,956,001	\$43.69	\$43.12	727	657	\$721.03	\$788.22
Lab	\$650,649	\$773,078	\$4.15	\$4.79	5,029	6,293	\$9.91	\$9.14
OP - Emergency Room & Related	\$7,378,026	\$8,481,982	\$47.08	\$52.58	1,224	1,294	\$461.65	\$487.55
OP - Other	\$14,863,209	\$16,045,057	\$94.85	\$99.47	1,786	1,819	\$637.28	\$656.27
Pharmacy	\$31,656,605	\$34,457,105	\$202.01	\$213.61	35,717	37,631	\$67.87	\$68.12
Prof - Anesthesia	\$458,007	\$410,573	\$2.92	\$2.55	162	150	\$216.14	\$203.56
Prof - Child EPSDT	\$89,055	\$100,725	\$0.57	\$0.62	5,082	2,938	\$1.34	\$2.55
Prof - Evaluation & Management	\$7,109,211	\$7,842,407	\$45.37	\$48.62	8,593	9,011	\$63.36	\$64.74
Prof - Maternity	\$252,711	\$214,761	\$1.61	\$1.33	31	29	\$623.98	\$554.94
Prof - Other	\$4,442,435	\$4,929,409	\$28.35	\$30.56	37,746	41,734	\$9.01	\$8.79
Prof - Psych	\$1,428,591	\$1,539,256	\$9.12	\$9.54	1,866	1,977	\$58.64	\$57.92
Prof - Specialist	\$2,654,559	\$2,791,540	\$16.94	\$17.31	1,149	1,269	\$176.88	\$163.65
Prof - Vision	\$323,501	\$363,791	\$2.06	\$2.26	420	410	\$59.01	\$65.93
Radiology	\$1,469,003	\$1,556,868	\$9.37	\$9.65	2,967	3,131	\$37.92	\$36.99
Transportation/Ambulance	\$2,327,988	\$2,242,669	\$14.86	\$13.90	9,829	10,985	\$18.14	\$15.19
Total	\$113,315,971	\$124,368,205	\$723.12	\$771.01				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age Under 1								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	117	118						
Service Type								
DME/Supplies	\$12,285	\$16,380	\$105.00	\$138.81	12,821	18,203	\$98.28	\$91.51
FQHC / RHC	\$1,584	\$959	\$13.54	\$8.13	5,436	10,780	\$29.89	\$9.05
Home Health	\$2,805	\$2,217	\$23.97	\$18.79	2,564	2,034	\$112.20	\$110.85
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$15,341	\$1,758	\$131.12	\$14.90	410	102	\$3,835.26	\$1,757.65
IP - Other	\$35,322	\$31,340	\$301.90	\$265.60	308	814	\$11,773.96	\$3,917.55
IP - Psych	\$2,204	\$1,859	\$18.84	\$15.76	0	0	-	-
Lab	\$421	\$1,222	\$3.60	\$10.36	4,821	12,203	\$8.97	\$10.19
OP - Emergency Room & Related	\$6,212	\$6,210	\$53.09	\$52.63	3,077	1,525	\$207.06	\$414.01
OP - Other	\$25,503	\$6,580	\$217.97	\$55.76	5,128	2,136	\$510.05	\$313.33
Pharmacy	\$37,523	\$12,630	\$320.71	\$107.04	20,410	11,085	\$188.56	\$115.88
Prof - Anesthesia	\$2,457	\$1,177	\$21.00	\$9.97	1,128	508	\$223.35	\$235.37
Prof - Child EPSDT	\$465	\$624	\$3.98	\$5.29	4,718	5,898	\$10.12	\$10.76
Prof - Evaluation & Management	\$32,410	\$51,564	\$277.01	\$436.98	38,051	52,271	\$87.36	\$100.32
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$51,705	\$25,334	\$441.92	\$214.70	88,308	59,695	\$60.05	\$43.16
Prof - Psych	\$558	\$556	\$4.77	\$4.71	205	305	\$278.97	\$185.42
Prof - Specialist	\$7,466	\$3,396	\$63.81	\$28.78	3,077	1,525	\$248.88	\$226.41
Prof - Vision	\$1,228	\$562	\$10.49	\$4.76	1,436	915	\$87.70	\$62.44
Radiology	\$735	\$921	\$6.29	\$7.80	6,769	8,746	\$11.14	\$10.71
Transportation/Ambulance	\$1,492	\$3,434	\$12.75	\$29.10	9,744	6,814	\$15.70	\$51.26
Total	\$237,716	\$168,725	\$2,031.76	\$1,429.87				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age 1-5								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	4,308	4,484						
Service Type								
DME/Supplies	\$174,631	\$256,179	\$40.54	\$57.13	4,042	5,165	\$120.35	\$132.73
FQHC / RHC	\$10,667	\$11,271	\$2.48	\$2.51	847	2,454	\$35.09	\$12.29
Home Health	\$9,671	\$14,643	\$2.24	\$3.27	134	126	\$201.49	\$311.55
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$443,740	\$410,635	\$103.00	\$91.58	212	190	\$5,838.68	\$5,783.59
IP - Psych	\$55,538	\$60,888	\$12.89	\$13.58	3	35	\$55,537.63	\$4,683.73
Lab	\$16,874	\$19,568	\$3.92	\$4.36	3,774	3,664	\$12.45	\$14.29
OP - Emergency Room & Related	\$80,958	\$74,277	\$18.79	\$16.56	1,195	1,062	\$188.71	\$187.10
OP - Other	\$371,405	\$525,889	\$86.21	\$117.28	2,437	2,682	\$424.46	\$524.84
Pharmacy	\$365,212	\$421,217	\$84.78	\$93.94	13,708	12,040	\$74.21	\$93.62
Prof - Anesthesia	\$20,697	\$20,511	\$4.80	\$4.57	318	316	\$181.55	\$173.82
Prof - Child EPSDT	\$6,386	\$5,967	\$1.48	\$1.33	1,830	2,395	\$9.72	\$6.67
Prof - Evaluation & Management	\$221,357	\$234,181	\$51.38	\$52.23	9,546	9,233	\$64.59	\$67.88
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$206,304	\$220,307	\$47.89	\$49.13	25,660	21,760	\$22.40	\$27.09
Prof - Psych	\$17,924	\$24,196	\$4.16	\$5.40	337	661	\$148.13	\$97.96
Prof - Specialist	\$41,323	\$59,713	\$9.59	\$13.32	880	931	\$130.77	\$171.59
Prof - Vision	\$9,783	\$10,377	\$2.27	\$2.31	368	401	\$74.11	\$69.18
Radiology	\$10,784	\$9,824	\$2.50	\$2.19	1,440	1,456	\$20.86	\$18.06
Transportation/Ambulance	\$45,736	\$44,587	\$10.62	\$9.94	2,529	2,489	\$50.37	\$47.94
Total	\$2,108,991	\$2,424,229	\$489.55	\$540.64				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age 6-20								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	27,444	28,068						
Service Type								
DME/Supplies	\$489,461	\$478,384	\$17.83	\$17.04	1,153	1,231	\$185.68	\$166.16
FQHC / RHC	\$111,564	\$100,123	\$4.07	\$3.57	1,328	1,269	\$36.72	\$33.73
Home Health	\$20,125	\$16,300	\$0.73	\$0.58	20	20	\$447.22	\$354.35
IP - Maternity	\$116,191	\$73,751	\$4.23	\$2.63	20	12	\$2,582.02	\$2,543.14
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,491,929	\$1,459,411	\$90.80	\$52.00	80	64	\$13,617.10	\$9,729.41
IP - Psych	\$659,845	\$824,361	\$24.04	\$29.37	163	190	\$1,769.02	\$1,852.50
Lab	\$80,455	\$90,219	\$2.93	\$3.21	2,556	2,991	\$13.76	\$12.89
OP - Emergency Room & Related	\$443,661	\$502,281	\$16.17	\$17.90	765	749	\$253.52	\$286.85
OP - Other	\$1,047,507	\$1,054,986	\$38.17	\$37.59	1,034	1,022	\$443.11	\$441.42
Pharmacy	\$3,353,137	\$3,555,401	\$122.18	\$126.67	14,441	14,648	\$101.53	\$103.77
Prof - Anesthesia	\$54,704	\$35,876	\$1.99	\$1.28	122	88	\$196.07	\$173.31
Prof - Child EPSDT	\$13,326	\$12,966	\$0.49	\$0.46	1,053	529	\$5.53	\$10.48
Prof - Evaluation & Management	\$717,787	\$683,734	\$26.15	\$24.36	4,641	4,507	\$67.62	\$64.85
Prof - Maternity	\$47,671	\$32,081	\$1.74	\$1.14	48	21	\$437.35	\$641.62
Prof - Other	\$362,465	\$355,035	\$13.21	\$12.65	9,115	4,915	\$17.39	\$30.88
Prof - Psych	\$219,385	\$243,859	\$7.99	\$8.69	1,651	1,690	\$58.10	\$61.67
Prof - Specialist	\$162,861	\$130,715	\$5.93	\$4.66	583	498	\$122.08	\$112.20
Prof - Vision	\$38,227	\$40,484	\$1.39	\$1.44	368	389	\$45.40	\$44.49
Radiology	\$59,928	\$56,436	\$2.18	\$2.01	1,115	936	\$23.50	\$25.77
Transportation/Ambulance	\$191,277	\$159,426	\$6.97	\$5.68	2,469	2,694	\$33.88	\$25.30
Total	\$10,681,507	\$9,905,828	\$389.21	\$352.92				

**Virginia Medicaid
 FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	15,621	15,584						
Service Type								
DME/Supplies	\$301,365	\$294,632	\$19.29	\$18.91	2,899	2,711	\$79.85	\$83.68
FQHC / RHC	\$141,252	\$104,335	\$9.04	\$6.69	3,871	2,600	\$28.03	\$30.90
Home Health	\$73,670	\$41,482	\$4.72	\$2.66	108	90	\$526.22	\$354.55
IP - Maternity	\$172,524	\$148,025	\$11.04	\$9.50	47	45	\$2,828.26	\$2,552.16
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,277,849	\$2,199,557	\$145.82	\$141.14	246	242	\$7,118.28	\$7,004.96
IP - Psych	\$498,323	\$570,441	\$31.90	\$36.60	399	520	\$960.16	\$845.10
Lab	\$139,968	\$162,760	\$8.96	\$10.44	8,714	10,292	\$12.34	\$12.18
OP - Emergency Room & Related	\$758,756	\$961,663	\$48.57	\$61.71	1,987	2,071	\$293.30	\$357.50
OP - Other	\$1,471,448	\$1,312,127	\$94.20	\$84.20	2,270	2,297	\$497.95	\$439.87
Pharmacy	\$4,050,625	\$4,143,977	\$259.31	\$265.91	44,406	46,070	\$70.07	\$69.26
Prof - Anesthesia	\$47,984	\$43,815	\$3.07	\$2.81	196	189	\$188.17	\$178.84
Prof - Child EPSDT	\$15,020	\$14,319	\$0.96	\$0.92	6,253	7,529	\$1.85	\$1.46
Prof - Evaluation & Management	\$749,628	\$779,572	\$47.99	\$50.02	9,673	10,167	\$59.53	\$59.04
Prof - Maternity	\$66,849	\$66,112	\$4.28	\$4.24	159	152	\$322.94	\$333.90
Prof - Other	\$265,803	\$264,117	\$17.02	\$16.95	27,710	44,268	\$7.37	\$4.59
Prof - Psych	\$149,196	\$139,993	\$9.55	\$8.98	2,136	2,202	\$53.67	\$48.95
Prof - Specialist	\$300,407	\$282,978	\$19.23	\$18.16	1,814	1,968	\$127.18	\$110.71
Prof - Vision	\$23,237	\$25,411	\$1.49	\$1.63	184	218	\$96.82	\$89.79
Radiology	\$173,981	\$162,900	\$11.14	\$10.45	3,630	3,420	\$36.82	\$36.67
Transportation/Ambulance	\$307,321	\$260,633	\$19.67	\$16.72	13,898	15,152	\$16.99	\$13.25
Total	\$11,985,208	\$11,978,848	\$767.25	\$768.66				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	11,050	11,667						
Service Type								
DME/Supplies	\$215,817	\$205,476	\$19.53	\$17.61	2,213	2,345	\$105.90	\$90.12
FQHC / RHC	\$76,610	\$41,165	\$6.93	\$3.53	3,514	1,580	\$23.67	\$26.80
Home Health	\$38,018	\$22,958	\$3.44	\$1.97	64	76	\$644.37	\$310.25
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,287,758	\$1,715,951	\$116.54	\$147.08	184	181	\$7,619.87	\$9,749.72
IP - Psych	\$420,443	\$484,596	\$38.05	\$41.54	624	654	\$731.20	\$761.94
Lab	\$49,524	\$59,611	\$4.48	\$5.11	4,108	4,788	\$13.09	\$12.81
OP - Emergency Room & Related	\$301,180	\$360,373	\$27.26	\$30.89	1,184	1,084	\$276.31	\$341.91
OP - Other	\$571,151	\$636,370	\$51.69	\$54.54	1,109	1,268	\$559.40	\$516.12
Pharmacy	\$2,264,955	\$2,433,880	\$204.97	\$208.61	27,729	28,219	\$88.70	\$88.71
Prof - Anesthesia	\$15,142	\$17,227	\$1.37	\$1.48	79	94	\$207.42	\$189.31
Prof - Child EPSDT	\$2,840	\$2,683	\$0.26	\$0.23	2,087	2,590	\$1.48	\$1.07
Prof - Evaluation & Management	\$316,638	\$368,960	\$28.66	\$31.62	5,710	6,195	\$60.22	\$61.26
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$157,720	\$175,108	\$14.27	\$15.01	41,718	25,427	\$4.11	\$7.08
Prof - Psych	\$85,889	\$99,582	\$7.77	\$8.54	1,583	1,837	\$58.91	\$55.76
Prof - Specialist	\$97,569	\$114,740	\$8.83	\$9.83	1,054	1,061	\$100.48	\$111.18
Prof - Vision	\$15,258	\$20,041	\$1.38	\$1.72	166	201	\$99.72	\$102.77
Radiology	\$55,903	\$57,276	\$5.06	\$4.91	1,783	1,774	\$34.05	\$33.20
Transportation/Ambulance	\$191,252	\$181,291	\$17.31	\$15.54	11,470	12,064	\$18.11	\$15.46
Total	\$6,163,667	\$6,997,288	\$557.80	\$599.75				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	43,041	44,037						
Service Type								
DME/Supplies	\$1,160,139	\$1,351,515	\$26.95	\$30.69	2,860	3,376	\$113.08	\$109.10
FQHC / RHC	\$458,523	\$319,291	\$10.65	\$7.25	5,027	3,641	\$25.43	\$23.90
Home Health	\$306,152	\$392,095	\$7.11	\$8.90	159	160	\$535.23	\$669.10
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$11,209,562	\$11,707,261	\$260.44	\$265.85	381	373	\$8,212.13	\$8,564.20
IP - Psych	\$1,215,444	\$1,314,188	\$28.24	\$29.84	296	299	\$1,146.65	\$1,195.80
Lab	\$379,510	\$444,863	\$8.82	\$10.10	9,172	10,922	\$11.54	\$11.10
OP - Emergency Room & Related	\$1,592,547	\$1,861,337	\$37.00	\$42.27	1,121	1,185	\$396.06	\$428.19
OP - Other	\$5,443,801	\$6,024,159	\$126.48	\$136.80	2,813	3,071	\$539.52	\$534.53
Pharmacy	\$12,394,870	\$13,532,396	\$287.98	\$307.30	65,600	68,848	\$52.68	\$53.56
Prof - Anesthesia	\$133,537	\$156,153	\$3.10	\$3.55	201	214	\$185.21	\$198.67
Prof - Child EPSDT	\$24,125	\$26,136	\$0.56	\$0.59	3,732	3,706	\$1.80	\$1.92
Prof - Evaluation & Management	\$2,337,319	\$2,556,089	\$54.30	\$58.04	10,916	11,288	\$59.70	\$61.70
Prof - Maternity	\$29	\$863	\$0.00	\$0.02	0	1	\$28.97	\$431.66
Prof - Other	\$1,160,896	\$1,644,492	\$26.97	\$37.34	25,233	42,554	\$12.83	\$10.53
Prof - Psych	\$306,334	\$332,624	\$7.12	\$7.55	1,245	1,307	\$68.59	\$69.35
Prof - Specialist	\$1,080,553	\$1,052,831	\$25.11	\$23.91	2,808	2,779	\$107.28	\$103.24
Prof - Vision	\$123,390	\$130,057	\$2.87	\$2.95	466	474	\$73.89	\$74.83
Radiology	\$596,683	\$623,642	\$13.86	\$14.16	4,251	4,476	\$39.14	\$37.96
Transportation/Ambulance	\$773,685	\$758,396	\$17.98	\$17.22	12,721	13,859	\$16.96	\$14.91
Total	\$40,697,098	\$44,228,389	\$945.54	\$1,004.35				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

All Age Categories								
Rural	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	101,581	103,958						
Service Type								
DME/Supplies	\$2,353,698	\$2,602,566	\$23.17	\$25.03	2,396	2,675	\$116.04	\$112.29
FQHC / RHC	\$800,199	\$577,144	\$7.88	\$5.55	3,509	2,570	\$26.94	\$25.92
Home Health	\$450,442	\$489,696	\$4.43	\$4.71	105	103	\$506.68	\$550.22
IP - Maternity	\$288,715	\$221,776	\$2.84	\$2.13	13	10	\$2,723.72	\$2,549.15
IP - Newborn	\$15,341	\$1,758	\$0.15	\$0.02	0	0	\$3,835.26	\$1,757.65
IP - Other	\$17,746,160	\$17,524,155	\$174.70	\$168.57	250	241	\$8,386.65	\$8,400.84
IP - Psych	\$2,851,796	\$3,256,333	\$28.07	\$31.32	299	331	\$1,128.08	\$1,135.40
Lab	\$666,753	\$778,242	\$6.56	\$7.49	6,529	7,686	\$12.06	\$11.69
OP - Emergency Room & Related	\$3,183,314	\$3,766,141	\$31.34	\$36.23	1,170	1,184	\$321.32	\$367.29
OP - Other	\$8,930,815	\$9,560,110	\$87.92	\$91.96	2,050	2,182	\$514.60	\$505.85
Pharmacy	\$22,466,321	\$24,099,501	\$221.17	\$231.82	42,147	43,724	\$62.97	\$63.62
Prof - Anesthesia	\$274,520	\$274,759	\$2.70	\$2.64	172	168	\$188.93	\$189.23
Prof - Child EPSDT	\$62,164	\$62,694	\$0.61	\$0.60	3,138	3,242	\$2.34	\$2.23
Prof - Evaluation & Management	\$4,375,140	\$4,674,100	\$43.07	\$44.96	8,437	8,676	\$61.26	\$62.19
Prof - Maternity	\$114,549	\$99,056	\$1.13	\$0.95	37	29	\$361.35	\$396.22
Prof - Other	\$2,204,893	\$2,684,394	\$21.71	\$25.82	23,143	29,849	\$11.25	\$10.38
Prof - Psych	\$779,286	\$840,812	\$7.67	\$8.09	1,489	1,575	\$61.83	\$61.62
Prof - Specialist	\$1,690,179	\$1,644,372	\$16.64	\$15.82	1,782	1,768	\$112.04	\$107.38
Prof - Vision	\$211,122	\$226,932	\$2.08	\$2.18	360	379	\$69.20	\$69.08
Radiology	\$898,015	\$910,998	\$8.84	\$8.76	2,923	2,934	\$36.29	\$35.85
Transportation/Ambulance	\$1,510,763	\$1,407,767	\$14.87	\$13.54	9,560	10,338	\$18.67	\$15.72
Total	\$71,874,186	\$75,703,306	\$707.56	\$728.21				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age Under 1								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	373	271						
Service Type								
DME/Supplies	\$43,626	\$18,368	\$116.96	\$67.78	3,668	6,863	\$382.69	\$118.50
FQHC / RHC	\$4,140	\$130	\$11.10	\$0.48	1,995	221	\$66.78	\$26.06
Home Health	\$8,053	\$30,830	\$21.59	\$113.76	354	1,328	\$732.06	\$1,027.67
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$38,614	\$130,543	\$103.52	\$481.71	129	310	\$9,653.57	\$18,649.02
IP - Other	\$119,887	\$55,763	\$321.41	\$205.77	418	443	\$9,222.07	\$5,576.26
IP - Psych	\$5,563	\$5,466	\$14.92	\$20.17	0	0	-	-
Lab	\$1,110	\$924	\$2.98	\$3.41	1,480	1,860	\$24.14	\$21.99
OP - Emergency Room & Related	\$13,783	\$13,780	\$36.95	\$50.85	1,673	2,037	\$265.05	\$299.57
OP - Other	\$57,854	\$50,350	\$155.11	\$185.79	2,992	4,162	\$622.09	\$535.64
Pharmacy	\$100,206	\$68,308	\$268.65	\$252.06	14,445	15,100	\$223.18	\$200.32
Prof - Anesthesia	\$5,524	\$3,948	\$14.81	\$14.57	772	886	\$230.17	\$197.40
Prof - Child EPSDT	\$2,769	\$1,567	\$7.42	\$5.78	8,075	5,845	\$11.03	\$11.87
Prof - Evaluation & Management	\$74,665	\$39,891	\$200.17	\$147.20	26,992	21,742	\$88.99	\$81.25
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$84,977	\$89,843	\$227.82	\$331.52	41,405	31,306	\$66.03	\$127.08
Prof - Psych	\$1,408	\$1,383	\$3.78	\$5.11	0	0	-	-
Prof - Specialist	\$16,374	\$15,371	\$43.90	\$56.72	2,509	1,727	\$209.93	\$394.14
Prof - Vision	\$2,489	\$1,572	\$6.67	\$5.80	1,416	1,107	\$56.58	\$62.87
Radiology	\$1,934	\$887	\$5.19	\$3.27	3,925	2,081	\$15.85	\$18.87
Transportation/Ambulance	\$1,751	\$966	\$4.69	\$3.56	1,158	6,066	\$48.63	\$7.05
Total	\$584,728	\$529,890	\$1,567.64	\$1,955.31				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age 1-5								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	7,713	7,979						
Service Type								
DME/Supplies	\$334,433	\$474,012	\$43.36	\$59.41	2,622	3,464	\$198.48	\$205.82
FQHC / RHC	\$9,390	\$1,806	\$1.22	\$0.23	521	101	\$28.03	\$26.95
Home Health	\$11,007	\$16,870	\$1.43	\$2.11	62	63	\$275.19	\$401.67
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$1,189,844	\$1,102,082	\$154.26	\$138.12	199	162	\$9,295.66	\$10,204.47
IP - Psych	\$130,216	\$144,626	\$16.88	\$18.13	0	0	-	-
Lab	\$24,863	\$26,578	\$3.22	\$3.33	2,079	2,364	\$18.61	\$16.91
OP - Emergency Room & Related	\$229,012	\$245,811	\$29.69	\$30.81	1,172	1,257	\$304.13	\$294.03
OP - Other	\$1,141,240	\$1,608,955	\$147.96	\$201.65	2,674	3,294	\$663.90	\$734.68
Pharmacy	\$774,146	\$1,057,139	\$100.37	\$132.49	11,300	11,380	\$106.59	\$139.70
Prof - Anesthesia	\$54,687	\$49,635	\$7.09	\$6.22	426	397	\$199.59	\$188.01
Prof - Child EPSDT	\$14,853	\$13,463	\$1.93	\$1.69	5,400	2,068	\$4.28	\$9.79
Prof - Evaluation & Management	\$462,323	\$510,500	\$59.94	\$63.98	9,192	9,571	\$78.25	\$80.22
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$678,444	\$729,261	\$87.96	\$91.40	45,490	47,838	\$23.20	\$22.93
Prof - Psych	\$37,795	\$42,505	\$4.90	\$5.33	296	307	\$198.92	\$208.36
Prof - Specialist	\$121,936	\$108,976	\$15.81	\$13.66	1,002	932	\$189.34	\$175.77
Prof - Vision	\$19,627	\$20,711	\$2.54	\$2.60	353	459	\$86.46	\$67.91
Radiology	\$20,524	\$24,277	\$2.66	\$3.04	1,512	1,648	\$21.12	\$22.15
Transportation/Ambulance	\$36,305	\$35,180	\$4.71	\$4.41	1,988	2,145	\$28.41	\$24.67
Total	\$5,290,644	\$6,212,387	\$685.94	\$778.59				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

Age 6-20								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	56,800	57,919						
Service Type								
DME/Supplies	\$785,423	\$1,002,022	\$13.83	\$17.30	733	949	\$226.35	\$218.69
FQHC / RHC	\$41,869	\$36,052	\$0.74	\$0.62	385	239	\$22.97	\$31.27
Home Health	\$10,758	\$12,759	\$0.19	\$0.22	10	5	\$228.90	\$490.74
IP - Maternity	\$200,791	\$177,095	\$3.54	\$3.06	16	13	\$2,641.99	\$2,811.03
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,384,204	\$3,857,035	\$41.98	\$66.59	67	70	\$7,544.95	\$11,377.68
IP - Psych	\$1,322,425	\$1,441,878	\$23.28	\$24.89	199	225	\$1,403.85	\$1,327.70
Lab	\$121,816	\$132,196	\$2.14	\$2.28	1,370	1,770	\$18.79	\$15.47
OP - Emergency Room & Related	\$1,161,635	\$1,240,775	\$20.45	\$21.42	715	722	\$343.17	\$356.14
OP - Other	\$2,918,229	\$2,778,144	\$51.38	\$47.97	853	949	\$722.87	\$606.45
Pharmacy	\$6,061,993	\$6,421,430	\$106.73	\$110.87	11,026	11,501	\$116.15	\$115.68
Prof - Anesthesia	\$104,045	\$96,805	\$1.83	\$1.67	108	101	\$203.61	\$198.37
Prof - Child EPSDT	\$31,563	\$31,728	\$0.56	\$0.55	528	556	\$12.62	\$11.83
Prof - Evaluation & Management	\$1,378,716	\$1,539,118	\$24.27	\$26.57	3,958	4,268	\$73.60	\$74.71
Prof - Maternity	\$96,996	\$77,730	\$1.71	\$1.34	37	23	\$548.00	\$700.27
Prof - Other	\$1,720,494	\$1,719,029	\$30.29	\$29.68	26,426	20,294	\$13.75	\$17.55
Prof - Psych	\$513,491	\$534,495	\$9.04	\$9.23	2,105	2,117	\$51.53	\$52.32
Prof - Specialist	\$307,124	\$277,090	\$5.41	\$4.78	404	393	\$160.71	\$146.22
Prof - Vision	\$85,835	\$87,352	\$1.51	\$1.51	452	485	\$40.09	\$37.35
Radiology	\$120,104	\$127,349	\$2.11	\$2.20	798	859	\$31.81	\$30.73
Transportation/Ambulance	\$206,190	\$212,443	\$3.63	\$3.67	1,548	1,866	\$28.15	\$23.59
Total	\$19,573,701	\$21,802,524	\$344.61	\$376.43				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	29,099	28,936						
Service Type								
DME/Supplies	\$638,328	\$593,820	\$21.94	\$20.52	1,421	1,526	\$185.24	\$161.41
FQHC / RHC	\$132,287	\$115,193	\$4.55	\$3.98	1,524	1,189	\$35.79	\$40.16
Home Health	\$68,801	\$65,668	\$2.36	\$2.27	79	56	\$358.34	\$490.06
IP - Maternity	\$346,064	\$582,924	\$11.89	\$20.15	57	73	\$2,507.71	\$3,330.99
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$3,211,781	\$3,361,202	\$110.37	\$116.16	227	208	\$5,829.00	\$6,708.99
IP - Psych	\$1,068,385	\$1,216,498	\$36.72	\$42.04	730	781	\$603.27	\$646.04
Lab	\$100,597	\$124,794	\$3.46	\$4.31	3,944	5,611	\$10.52	\$9.22
OP - Emergency Room & Related	\$2,203,752	\$2,580,926	\$75.73	\$89.19	2,098	2,215	\$433.13	\$483.32
OP - Other	\$2,487,434	\$2,729,047	\$85.48	\$94.31	1,307	1,479	\$784.68	\$765.30
Pharmacy	\$6,230,620	\$6,565,375	\$214.12	\$226.89	33,294	34,135	\$77.17	\$79.76
Prof - Anesthesia	\$108,753	\$110,614	\$3.74	\$3.82	253	271	\$177.41	\$169.13
Prof - Child EPSDT	\$54,686	\$26,708	\$1.88	\$0.92	2,286	1,729	\$9.87	\$6.41
Prof - Evaluation & Management	\$1,547,158	\$1,639,810	\$53.17	\$56.67	10,051	10,674	\$63.48	\$63.71
Prof - Maternity	\$170,598	\$210,436	\$5.86	\$7.27	139	174	\$506.23	\$501.04
Prof - Other	\$1,245,094	\$1,224,562	\$42.79	\$42.32	62,201	66,650	\$8.25	\$7.62
Prof - Psych	\$294,408	\$300,470	\$10.12	\$10.38	2,617	2,682	\$46.40	\$46.46
Prof - Specialist	\$524,563	\$530,100	\$18.03	\$18.32	1,529	1,621	\$141.47	\$135.61
Prof - Vision	\$50,294	\$51,161	\$1.73	\$1.77	271	251	\$76.43	\$84.56
Radiology	\$325,419	\$345,624	\$11.18	\$11.94	3,308	3,668	\$40.57	\$39.08
Transportation/Ambulance	\$256,245	\$239,105	\$8.81	\$8.26	10,200	13,317	\$10.36	\$7.45
Total	\$21,065,268	\$22,614,037	\$723.92	\$781.52				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	20,113	20,981						
Service Type								
DME/Supplies	\$642,605	\$726,864	\$31.95	\$34.64	2,189	2,378	\$175.14	\$174.85
FQHC / RHC	\$70,101	\$44,453	\$3.49	\$2.12	2,119	2,251	\$19.74	\$11.30
Home Health	\$149,942	\$218,862	\$7.45	\$10.43	176	194	\$508.28	\$643.71
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$2,420,210	\$2,881,770	\$120.33	\$137.35	198	185	\$7,289.79	\$8,921.89
IP - Psych	\$927,050	\$917,894	\$46.09	\$43.75	1,019	969	\$542.77	\$541.85
Lab	\$44,383	\$49,523	\$2.21	\$2.36	2,192	2,821	\$12.08	\$10.04
OP - Emergency Room & Related	\$937,959	\$1,092,657	\$46.63	\$52.08	1,221	1,268	\$458.44	\$492.85
OP - Other	\$2,022,939	\$1,866,164	\$100.58	\$88.95	915	1,015	\$1,319.59	\$1,051.95
Pharmacy	\$3,940,160	\$4,201,076	\$195.90	\$200.23	22,404	22,829	\$104.93	\$105.25
Prof - Anesthesia	\$39,984	\$46,685	\$1.99	\$2.23	118	117	\$202.96	\$227.73
Prof - Child EPSDT	\$5,749	\$5,884	\$0.29	\$0.28	4,834	4,398	\$0.71	\$0.77
Prof - Evaluation & Management	\$761,294	\$796,355	\$37.85	\$37.96	7,103	7,102	\$63.94	\$64.13
Prof - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
Prof - Other	\$1,010,765	\$737,067	\$50.25	\$35.13	154,156	142,241	\$3.91	\$2.96
Prof - Psych	\$176,383	\$179,330	\$8.77	\$8.55	2,432	2,205	\$43.26	\$46.51
Prof - Specialist	\$225,689	\$246,458	\$11.22	\$11.75	892	907	\$150.96	\$155.40
Prof - Vision	\$26,714	\$30,284	\$1.33	\$1.44	170	154	\$93.73	\$112.16
Radiology	\$144,067	\$142,403	\$7.16	\$6.79	1,957	2,092	\$43.92	\$38.93
Transportation/Ambulance	\$199,627	\$181,080	\$9.93	\$8.63	12,925	17,484	\$9.21	\$5.92
Total	\$13,745,621	\$14,364,809	\$683.42	\$684.66				

Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	69,578	71,789						
Service Type								
DME/Supplies	\$2,299,131	\$2,818,004	\$33.04	\$39.25	3,080	3,340	\$128.75	\$141.02
FQHC / RHC	\$585,335	\$720,495	\$8.41	\$10.04	3,501	3,897	\$28.84	\$30.91
Home Health	\$449,058	\$708,514	\$6.45	\$9.87	174	196	\$444.61	\$604.53
IP - Maternity	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Newborn	\$0	\$0	\$0.00	\$0.00	0	0	-	-
IP - Other	\$17,940,569	\$19,379,465	\$257.85	\$269.95	430	405	\$7,193.49	\$8,001.43
IP - Psych	\$2,194,729	\$2,483,033	\$31.54	\$34.59	559	549	\$676.76	\$755.64
Lab	\$283,338	\$337,408	\$4.07	\$4.70	4,786	6,400	\$10.21	\$8.81
OP - Emergency Room & Related	\$4,069,644	\$4,996,873	\$58.49	\$69.60	1,322	1,388	\$530.94	\$601.89
OP - Other	\$10,061,567	\$11,005,742	\$144.61	\$153.31	2,247	2,403	\$772.24	\$765.46
Pharmacy	\$20,970,356	\$23,147,126	\$301.39	\$322.43	60,250	62,250	\$60.03	\$62.16
Prof - Anesthesia	\$311,615	\$351,762	\$4.48	\$4.90	294	329	\$182.66	\$178.47
Prof - Child EPSDT	\$41,502	\$49,517	\$0.60	\$0.69	5,890	4,692	\$1.22	\$1.76
Prof - Evaluation & Management	\$5,005,242	\$5,507,958	\$71.94	\$76.72	13,665	14,454	\$63.17	\$63.70
Prof - Maternity	\$129	\$0	\$0.00	\$0.00	0	0	\$129.38	-
Prof - Other	\$4,662,943	\$5,183,119	\$67.02	\$72.20	72,306	90,550	\$11.12	\$9.57
Prof - Psych	\$567,249	\$602,131	\$8.15	\$8.39	1,999	1,943	\$48.95	\$51.81
Prof - Specialist	\$2,235,164	\$2,463,913	\$32.12	\$34.32	2,617	2,755	\$147.30	\$149.52
Prof - Vision	\$218,649	\$239,807	\$3.14	\$3.34	556	588	\$67.86	\$68.18
Radiology	\$1,139,613	\$1,204,635	\$16.38	\$16.78	4,954	5,283	\$39.67	\$38.11
Transportation/Ambulance	\$701,640	\$733,556	\$10.08	\$10.22	15,349	18,123	\$7.88	\$6.77
Total	\$73,737,473	\$81,933,055	\$1,059.78	\$1,141.30				

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Historical Eligibility and Claims - Aged, Blind, and Disabled (ABAD)

Exhibit 1b

All Age Categories								
Tidewater	Total Claims FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	183,676	187,875						
Service Type								
DME/Supplies	\$4,743,545	\$5,633,090	\$25.83	\$29.98	1,976	2,227	\$156.86	\$161.60
FQHC / RHC	\$843,123	\$918,128	\$4.59	\$4.89	1,945	2,002	\$28.33	\$29.30
Home Health	\$697,619	\$1,053,503	\$3.80	\$5.61	104	111	\$437.38	\$604.07
IP - Maternity	\$546,855	\$760,019	\$2.98	\$4.05	14	15	\$2,555.40	\$3,193.36
IP - Newborn	\$38,614	\$130,543	\$0.21	\$0.69	0	0	\$9,653.57	\$18,649.02
IP - Other	\$27,266,496	\$30,637,318	\$148.45	\$163.07	250	237	\$7,111.76	\$8,273.65
IP - Psych	\$5,648,368	\$6,209,395	\$30.75	\$33.05	501	508	\$737.00	\$781.15
Lab	\$576,106	\$671,423	\$3.14	\$3.57	3,192	4,274	\$11.79	\$10.03
OP - Emergency Room & Related	\$8,615,785	\$10,170,822	\$46.91	\$54.14	1,241	1,292	\$453.73	\$502.88
OP - Other	\$18,689,263	\$20,038,403	\$101.75	\$106.66	1,541	1,698	\$792.56	\$753.81
Pharmacy	\$38,077,481	\$41,460,453	\$207.31	\$220.68	34,465	35,644	\$72.18	\$74.29
Prof - Anesthesia	\$624,608	\$659,448	\$3.40	\$3.51	217	230	\$187.85	\$183.08
Prof - Child EPSDT	\$151,123	\$128,867	\$0.82	\$0.69	3,529	2,818	\$2.80	\$2.92
Prof - Evaluation & Management	\$9,229,398	\$10,033,633	\$50.25	\$53.41	9,211	9,714	\$65.46	\$65.98
Prof - Maternity	\$267,723	\$288,166	\$1.46	\$1.53	34	34	\$519.85	\$542.69
Prof - Other	\$9,402,716	\$9,682,880	\$51.19	\$51.54	64,291	69,084	\$9.56	\$8.95
Prof - Psych	\$1,590,735	\$1,660,314	\$8.66	\$8.84	2,101	2,067	\$49.46	\$51.30
Prof - Specialist	\$3,430,850	\$3,641,908	\$18.68	\$19.38	1,503	1,567	\$149.10	\$148.48
Prof - Vision	\$403,608	\$430,886	\$2.20	\$2.29	430	451	\$61.37	\$61.02
Radiology	\$1,751,662	\$1,845,175	\$9.54	\$9.82	2,933	3,155	\$39.01	\$37.36
Transportation/Ambulance	\$1,401,757	\$1,402,330	\$7.63	\$7.46	9,410	11,603	\$9.73	\$7.72
Total	\$133,997,435	\$147,456,702	\$729.53	\$784.87				

**Virginia Medicaid
FY 2011 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 FY08	Total Claims FY09	Unadjusted PMPM FY08	Unadjusted PMPM FY09	Units/1000 FY08	Units/1000 FY09	Cost/Unit FY08	Cost/Unit FY09
Member Months	618,420	641,559						
Service Type								
DME/Supplies	\$14,312,063	\$16,666,014	\$23.14	\$25.98	2,193	2,411	\$126.66	\$129.28
FQHC / RHC	\$2,579,047	\$2,473,016	\$4.17	\$3.85	1,810	1,895	\$27.65	\$24.41
Home Health	\$2,258,786	\$2,791,780	\$3.65	\$4.35	100	102	\$439.45	\$513.76
IP - Maternity	\$1,870,508	\$2,090,108	\$3.02	\$3.26	13	13	\$2,695.26	\$3,119.56
IP - Newborn	\$361,009	\$310,045	\$0.58	\$0.48	1	0	\$9,500.24	\$14,764.07
IP - Other	\$108,463,569	\$119,781,827	\$175.39	\$186.70	255	249	\$8,254.46	\$8,983.86
IP - Psych	\$20,439,666	\$22,163,045	\$33.05	\$34.55	495	475	\$800.68	\$873.32
Lab	\$3,290,542	\$3,923,651	\$5.32	\$6.12	5,514	6,966	\$11.58	\$10.53
OP - Emergency Room & Related	\$25,270,174	\$29,660,139	\$40.86	\$46.23	1,204	1,240	\$407.32	\$447.48
OP - Other	\$54,729,938	\$60,537,473	\$88.50	\$94.36	1,665	1,778	\$637.91	\$636.69
Pharmacy	\$137,023,019	\$147,114,202	\$221.57	\$229.31	37,960	39,495	\$70.04	\$69.67
Prof - Anesthesia	\$1,886,406	\$1,953,747	\$3.05	\$3.05	190	194	\$193.14	\$188.64
Prof - Child EPSDT	\$411,430	\$395,426	\$0.67	\$0.62	3,890	2,909	\$2.05	\$2.54
Prof - Evaluation & Management	\$29,805,708	\$32,597,254	\$48.20	\$50.81	9,024	9,384	\$64.09	\$64.97
Prof - Maternity	\$837,104	\$823,283	\$1.35	\$1.28	31	32	\$516.41	\$485.14
Prof - Other	\$22,242,067	\$24,308,751	\$35.97	\$37.89	39,722	46,116	\$10.87	\$9.86
Prof - Psych	\$5,158,535	\$5,502,882	\$8.34	\$8.58	1,818	1,854	\$55.06	\$55.52
Prof - Specialist	\$11,032,679	\$11,663,585	\$17.84	\$18.18	1,592	1,609	\$134.44	\$135.55
Prof - Vision	\$1,350,366	\$1,518,473	\$2.18	\$2.37	413	471	\$63.49	\$60.35
Radiology	\$6,167,638	\$6,791,824	\$9.97	\$10.59	3,036	3,218	\$39.42	\$39.47
Transportation/Ambulance	\$7,123,792	\$7,043,985	\$11.52	\$10.98	8,515	9,771	\$16.23	\$13.48
Total	\$456,614,047	\$500,110,512	\$738.36	\$779.52				

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Pharmacy Adjustment**

Exhibit 2a

	LIFC	ABAD	Source
1. Health Plan Total Drug Cost PMPM	\$27.10	\$225.51	FY08-FY09 Health Plan Encounter Data
2. Average Managed Care Rebate	4.1%	4.1%	From Plan Data
3. Adjusted PMPM with Managed Care Rebate	\$25.99	\$216.30	= (1.) * (1 - (2.))
4. Average PBM Admin Cost PMPM	\$0.06	\$0.39	From Plan Data
5. Adjusted PMPM with FY11 Pharmacy Pricing Arrangements	\$26.06	\$216.69	= (3.) + (4.)
6. Pharmacy Adjustment	-3.8%	-3.9%	= (5.) / (1.) - 1

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Exempt Infant Formula Carveout Adjustment**

Exhibit 2b

	LIFC Age 0-5	LIFC Age 6-20	ABAD Age 0-5	ABAD Age 6-20	Source
1. Claims Associated with Exempt Infant Formula	\$93,587	\$44,091	\$98,088	\$240,948	FY08-FY09 Health Plan Encounter Data
2. Total Claims in DME/Supplies Service Category	\$6,936,039	\$4,011,033	\$3,003,099	\$5,590,186	FY08-FY09 Health Plan Encounter Data
3. Exempt Infant Formula Carveout Adjustment	-1.3%	-1.1%	-3.3%	-4.3%	= (1.) / (2.)

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 DME/Supplies Fee Reduction Adjustment**

Exhibit 2c

	LIFC Children	LIFC Adults	ABAD	Source
1. FY08-09 Claims Associated with DME HCPCs	\$8,732,047	\$3,497,122	\$20,905,297	FY08-09 Health Plan Encounter Data
2. % Fee Reduction Effective FY11	10.0%	10.0%	10.0%	Provided by DMAS
3. Dollar Decrease	\$873,205	\$349,712	\$2,090,530	= (1.) * (2.)
4. Total claims in DME/Supplies Service Category	\$10,947,072	\$5,348,886	\$30,978,077	FY08-09 Health Plan Encounter Data
5. DME/Supplies Fee Reduction Adjustment	-8.0%	-6.5%	-6.7%	= (3.) / (4.)

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Clinical Lab Fee Reduction Adjustment**

Exhibit 2d

	LIFC	ABAD	Source
1. % Fee Reduction Effective FY11*	3.1%	2.5%	Provided by DMAS
2. Claims Associated with Clinical Lab Procedure Codes	\$9,318,699	\$3,024,451	FY09 Health Plan Encounter Data
3. Dollar Decrease	\$292,341	\$76,159	= (1.) * (2.)
4. Total claims in Lab Service Category	\$12,946,698	\$3,923,651	FY09 Health Plan Encounter Data
5. Clinical Lab Fee Reduction Adjustment	-2.3%	-1.9%	= (3.) / (4.)

* Note:

Reduction of 5% is applied to to claims paid at 88% of CMS Fee Schedule

Fee reduction % calculated as a weighted average based on claims paid above and below 88% of FY09 CMS Fee Schedule

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Outpatient Rehab Adjustment for No Inflation**

Exhibit 2e

	OP - Other	Source
1. Estimated Impact of Adjustment	\$60,911	Provided by DMAS
2. Total Claims in OP - Other Service Category	\$276,441,972	FY08-FY09 Health Plan Encounter Data
3. Outpatient Rehab Adjustment	-0.02%	= (1.) / (2.)

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Hospital Inpatient Adjustments**

Exhibit 2f

	Inpatient Medical/Surgical	Inpatient Psychiatric	Source
1. % Excluded Claims from Exempt Hospitals for FY10*	16.0%	11.4%	FY08-FY09 Health Plan Encounter Data
2. % Excluded Claims from Freestanding Psych Hospitals	0.0%	18.3%	FY08-FY09 Health Plan Encounter Data
3. FY10 Hospital Rate Reduction	4.0%	4.0%	Provided by DMAS
4. FY11 Hospital Rate Reduction	2.7%	2.7%	Provided by DMAS
5. FY10 Hospital Capital Percentage for Exempt Hospitals	10.0%	10.0%	Provided by DMAS
6. FY10 Hospital Capital Percentage for Non-Exempt Hospitals	9.3%	9.3%	Provided by DMAS
7. FY10 Weighted Average Capital Percentage	9.4%	9.5%	= ((1.) + (2.)) * (5.) + (1 - (1.) - (2.)) * (6.)
8. FY11 Hospital Capital Percentage	9.3%	9.3%	Provided by DMAS
9. Hospital Inpatient Adjustment	-6.0%	-6.0%	= ((1 - (3.)) * (1 - (7.)) + (7.)) * ((1 - (4.)) * (1 - (8.)) + (8.)) - 1

*Exempt hospitals are CHKD, UVA, and MCV for FY10.

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Freestanding Psychiatric Hospital Rate Reduction Adjustment**

Exhibit 2g

	Adjustment Values	Source
1. FY08-FY09 Total IP - Psych Claims	\$62,679,317	FY08-FY09 Health Plan Encounter Data
2. % Claims from Freestanding Psych Hospitals	18.3%	FY08-FY09 Health Plan Encounter Data
3. FY08-FY09 Freestanding Hospital Psych Claims	\$11,459,496	= (1.) * (2.)
4. FY10 Hospital Rebasing Adjustment	17.8%	Provided by DMAS
5a. FY10 Hospital Rate Reduction	4.0%	Provided by DMAS
5b. FY11 Hospital Rate Reduction	2.7%	Provided by DMAS
6. FY10-11 Hospital Capital Percentage	10.0%	Provided by DMAS
7. FY10-11 Capital Reimbursement Reduction for Private Hospitals	6.3%	Provided by DMAS
8. Freestanding Psychiatric Hospital Rate Reduction Adjustment	-3.9%	(((1 - (4.)) * (1 - (5a.) * (1 - (5b.)) * (1 - (6.)) + (6.) * (1 - (7.)) - 1) * (2.)

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Provider Incentive Payment Adjustment**

Exhibit 2h

	Adjustment Value	Source
Provider Incentive Payment Adjustment	1.1%	From Plan Data

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Administrative Cost Adjustment**

Exhibit 2i

	LIFC	ABAD	Source
1. Claims Adjustment Expense PMPM	\$2.69	\$11.86	Expense from CY2009 BOI Reports; Member months from capitation payment files
2. General Admin Expense PMPM	\$10.71	\$47.19	Expense from CY2009 BOI Reports; Member months from capitation payment files
3. Claims Adjustment Expense Increase %	2.7%	2.7%	BLS CPI-U
4. General Admin Expense Increase %	2.0%	2.0%	Weighted average of BLS Compensation Trend and CPI
5. Administrative PMPM*	\$13.84	\$60.99	$= (1.) * (1 + (3.)) ^ (18 \text{ months}/12) + (2.) * (1 + (4.)) ^ (18 \text{ months}/12)$
6. Adjusted and Trended Base PMPM	\$203.80	\$897.88	Weighted average of medical component of FY2011 MedII Base Rates
7. Administrative allowance as % of Base Capitation Rate	6.27%	6.27%	$= (5.) / (((5.) + (6.)) / (1 - 1.5\%))$
8. Contribution to Reserves as % of Base Capitation Rate	1.50%	1.50%	Provided by DMAS
9. Administrative Factor as % of Base Capitation Rate	7.77%	7.77%	$= (7.) + (8.)$

*Note:

Administrative increases are applied from midpoint of CY2009 to the midpoint of the contract period (18 months) using compound interest calculations.

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data**

Exhibit 3a

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

Category of Service	LIFC 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	6.0%	-6.0%	-0.4%	12.1%	-1.4%	10.4%	2.7%	1.1498
Inpatient Psychiatric	0.6%	-9.9%	-9.5%	6.2%	25.6%	33.4%	7.4%	1.4853
Outpatient Hospital	0.9%	0.0%	0.9%	4.4%	4.8%	9.5%	10.1%	1.2651
Practitioner	0.8%	0.0%	0.8%	2.1%	1.0%	3.1%	4.1%	1.0950
Prescription Drug	0.0%	-3.8%	-3.8%	0.2%	-0.5%	-0.3%	3.0%	1.0416
Other	1.4%	-2.3%	-1.0%	-3.9%	10.5%	6.2%	9.6%	1.2188
Weighted Average²	2.0%	-2.3%	-0.5%	4.3%	1.8%	6.1%	5.1%	1.1434

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 FY08-FY09), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY08-FY09 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; includes FY08-09 incurred claims paid through October 2

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes July 2006 - October 2009 incurred claims paid through February 2010 for Inpatient Medical/Surgical and incurred through December 2009 for all other service categories.

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

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data**

Exhibit 3b

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

Category of Service	LIFC 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	1.2%	-6.0%	-4.9%	13.2%	-4.6%	8.0%	4.4%	1.1513
Inpatient Psychiatric	0.4%	-9.9%	-9.6%	-0.5%	-3.7%	-4.3%	12.0%	1.1348
Outpatient Hospital	1.1%	0.0%	1.1%	6.1%	4.7%	11.1%	12.8%	1.3307
Practitioner	0.9%	0.0%	0.9%	0.8%	3.7%	4.5%	4.6%	1.1187
Prescription Drug	0.0%	-3.8%	-3.8%	4.2%	7.9%	12.4%	9.1%	1.2817
Other	1.3%	-1.5%	-0.2%	0.7%	17.5%	18.3%	17.2%	1.5018
Weighted Average²	0.9%	-2.4%	-1.5%	5.7%	3.4%	9.1%	8.2%	1.2309

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 FY08-FY09), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY08-FY09 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; includes FY08-09 incurred claims paid through October 2

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes July 2006 - October 2009 incurred claims paid through February 2010 for Inpatient Medical/Surgical and incurred through December 2009 for all other service categories.

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

**Virginia Medicaid
 FY 2011 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	2.5%	-6.0%	-3.7%	9.2%	1.0%	10.3%	9.4%	1.2620
Inpatient Psychiatric	1.2%	-9.9%	-8.8%	3.9%	-1.3%	2.6%	7.1%	1.1367
Outpatient Hospital	1.3%	0.0%	1.3%	4.2%	4.8%	9.2%	11.1%	1.2784
Practitioner	1.3%	0.0%	1.3%	-10.1%	19.3%	7.3%	5.3%	1.1593
Prescription Drug	0.0%	-3.9%	-3.9%	-0.2%	4.1%	3.9%	3.7%	1.0979
Other	1.7%	-3.9%	-2.3%	-2.0%	12.6%	10.4%	9.7%	1.2693
Weighted Average²	1.2%	-3.3%	-2.2%	1.3%	6.4%	7.4%	7.3%	1.1951

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 FY08-FY09), whereas weighted averages for Trends are calculated using a distribution by Service Type, before Trend (Adjusted FY08-FY09 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; includes FY08-09 incurred claims paid through October 2

Contract period trends are applied from the end of the data period to the midpoint of the contract period using compound interest calculations; includes July 2006 - October 2009 incurred claims paid through February 2010 for Inpatient Medical/Surgical and incurred through December 2009 for all other service categories.

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

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age Under 1							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$735,155	\$10,084	(\$69,500)	\$675,739	1.219	\$823,559	\$4.07
FQHC / RHC	\$129,086	\$1,020		\$130,106	1.095	\$142,468	\$0.70
Home Health	\$63,182	\$579		\$63,762	1.241	\$79,112	\$0.39
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$20,334,816	\$1,220,012	(\$1,295,639)	\$20,259,190	1.150	\$23,294,769	\$115.21
IP - Other	\$7,526,140	\$451,540	(\$479,530)	\$7,498,150	1.150	\$8,621,651	\$42.64
IP - Psych	\$7,097	\$39	(\$710)	\$6,427	1.485	\$9,546	\$0.05
Lab	\$300,232	\$4,118	(\$6,872)	\$297,478	1.219	\$362,553	\$1.79
OP - Emergency Room & Related	\$3,093,436	\$28,365		\$3,121,801	1.265	\$3,949,270	\$19.53
OP - Other	\$1,789,703	\$16,411	(\$398)	\$1,805,715	1.265	\$2,284,341	\$11.30
Pharmacy	\$4,867,608	\$19	(\$187,193)	\$4,680,434	1.042	\$4,875,103	\$24.11
Prof - Anesthesia	\$222,100	\$1,755		\$223,855	1.095	\$245,124	\$1.21
Prof - Child EPSDT	\$1,830,862	\$14,470		\$1,845,332	1.095	\$2,020,660	\$9.99
Prof - Evaluation & Management	\$16,251,768	\$128,446		\$16,380,214	1.095	\$17,936,525	\$88.71
Prof - Maternity	\$1,128	\$9		\$1,137	1.095	\$1,245	\$0.01
Prof - Other	\$1,985,305	\$15,691		\$2,000,996	1.095	\$2,191,114	\$10.84
Prof - Psych	\$6,838	\$54		\$6,892	1.095	\$7,547	\$0.04
Prof - Specialist	\$869,893	\$6,875		\$876,768	1.095	\$960,072	\$4.75
Prof - Vision	\$288,789	\$2,282		\$291,071	1.095	\$318,726	\$1.58
Radiology	\$279,117	\$3,829		\$282,946	1.219	\$344,841	\$1.71
Transportation/Ambulance	\$787,941	\$10,808		\$798,749	1.219	\$973,478	\$4.81
Provider Incentive Payment Adjustment							\$3.91
Total	\$61,370,196	\$1,916,409	(\$2,039,842)	\$61,246,762		\$69,441,702	\$347.36
Admin Cost Adjustment							\$29.25
Medallion II Capitation Rate							\$376.61

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 1-5							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$910,737	\$12,493	(\$86,099)	\$837,131	1.219	\$1,020,256	\$1.54
FQHC / RHC	\$264,280	\$2,089		\$266,369	1.095	\$291,677	\$0.44
Home Health	\$10,746	\$99		\$10,844	1.241	\$13,455	\$0.02
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$8,494,105	\$509,614	(\$541,204)	\$8,462,515	1.150	\$9,730,514	\$14.66
IP - Psych	\$37,745	\$209	(\$3,775)	\$34,178	1.485	\$50,766	\$0.08
Lab	\$1,136,523	\$15,590	(\$26,015)	\$1,126,098	1.219	\$1,372,435	\$2.07
OP - Emergency Room & Related	\$6,116,356	\$56,083		\$6,172,439	1.265	\$7,808,516	\$11.76
OP - Other	\$5,741,068	\$52,642	(\$1,277)	\$5,792,434	1.265	\$7,327,785	\$11.04
Pharmacy	\$10,590,969	\$41	(\$407,296)	\$10,183,714	1.042	\$10,607,276	\$15.98
Prof - Anesthesia	\$536,252	\$4,238		\$540,490	1.095	\$591,843	\$0.89
Prof - Child EPSDT	\$1,224,565	\$9,678		\$1,234,244	1.095	\$1,351,511	\$2.04
Prof - Evaluation & Management	\$21,561,616	\$170,413		\$21,732,028	1.095	\$23,796,823	\$35.84
Prof - Maternity	\$30	\$0		\$30	1.095	\$33	\$0.00
Prof - Other	\$2,735,893	\$21,623		\$2,757,516	1.095	\$3,019,512	\$4.55
Prof - Psych	\$133,996	\$1,059		\$135,055	1.095	\$147,886	\$0.22
Prof - Specialist	\$1,484,053	\$11,729		\$1,495,782	1.095	\$1,637,899	\$2.47
Prof - Vision	\$877,697	\$6,937		\$884,634	1.095	\$968,684	\$1.46
Radiology	\$379,194	\$5,202		\$384,395	1.219	\$468,483	\$0.71
Transportation/Ambulance	\$1,969,144	\$27,011		\$1,996,155	1.219	\$2,432,821	\$3.66
Provider Incentive Payment Adjustment							\$1.25
Total	\$64,204,965	\$906,751	(\$1,065,667)	\$64,046,050		\$72,638,175	\$110.66
Admin Cost Adjustment							\$9.32
Medallion II Capitation Rate							\$119.98

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 6-14							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$436,272	\$5,984	(\$40,139)	\$402,118	1.219	\$490,083	\$0.74
FQHC / RHC	\$118,825	\$939		\$119,764	1.095	\$131,143	\$0.20
Home Health	\$6,672	\$61		\$6,733	1.241	\$8,354	\$0.01
IP - Maternity	\$31,042	\$1,862	(\$1,978)	\$30,927	1.150	\$35,561	\$0.05
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$5,407,888	\$324,453	(\$344,565)	\$5,387,776	1.150	\$6,195,065	\$9.30
IP - Psych	\$839,708	\$4,640	(\$83,993)	\$760,354	1.485	\$1,129,385	\$1.70
Lab	\$968,305	\$13,283	(\$22,165)	\$959,423	1.219	\$1,169,300	\$1.76
OP - Emergency Room & Related	\$4,411,884	\$40,454		\$4,452,339	1.265	\$5,632,483	\$8.46
OP - Other	\$3,910,974	\$35,861	(\$870)	\$3,945,966	1.265	\$4,991,890	\$7.50
Pharmacy	\$12,916,369	\$50	(\$496,723)	\$12,419,696	1.042	\$12,936,257	\$19.42
Prof - Anesthesia	\$328,257	\$2,594		\$330,851	1.095	\$362,286	\$0.54
Prof - Child EPSDT	\$318,280	\$2,516		\$320,795	1.095	\$351,275	\$0.53
Prof - Evaluation & Management	\$13,172,660	\$104,110		\$13,276,771	1.095	\$14,538,218	\$21.83
Prof - Maternity	\$16,253	\$128		\$16,381	1.095	\$17,938	\$0.03
Prof - Other	\$5,693,512	\$44,999		\$5,738,511	1.095	\$6,283,736	\$9.44
Prof - Psych	\$931,900	\$7,365		\$939,265	1.095	\$1,028,506	\$1.54
Prof - Specialist	\$1,190,262	\$9,407		\$1,199,669	1.095	\$1,313,652	\$1.97
Prof - Vision	\$974,599	\$7,703		\$982,302	1.095	\$1,075,632	\$1.62
Radiology	\$517,406	\$7,097		\$524,504	1.219	\$639,241	\$0.96
Transportation/Ambulance	\$1,825,969	\$25,047		\$1,851,016	1.219	\$2,255,932	\$3.39
Provider Incentive Payment Adjustment							\$1.04
Total	\$54,017,037	\$638,556	(\$990,432)	\$53,665,162		\$60,585,936	\$92.01
Admin Cost Adjustment							\$7.75
Medallion II Capitation Rate							\$99.76

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Female							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$95,121	\$1,305	(\$8,751)	\$87,674	1.219	\$106,853	\$0.92
FQHC / RHC	\$8,522	\$67		\$8,589	1.095	\$9,405	\$0.08
Home Health	\$11,536	\$106		\$11,642	1.241	\$14,445	\$0.12
IP - Maternity	\$4,270,527	\$256,216	(\$272,098)	\$4,254,645	1.150	\$4,892,149	\$42.28
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,434,733	\$86,079	(\$91,414)	\$1,429,397	1.150	\$1,643,573	\$14.21
IP - Psych	\$284,753	\$1,573	(\$28,483)	\$257,843	1.485	\$382,985	\$3.31
Lab	\$323,089	\$4,432	(\$7,396)	\$320,126	1.219	\$390,154	\$3.37
OP - Emergency Room & Related	\$2,260,421	\$20,727		\$2,281,148	1.265	\$2,885,792	\$24.94
OP - Other	\$1,608,252	\$14,747	(\$358)	\$1,622,642	1.265	\$2,052,742	\$17.74
Pharmacy	\$2,195,153	\$9	(\$84,419)	\$2,110,743	1.042	\$2,198,533	\$19.00
Prof - Anesthesia	\$493,274	\$3,899		\$497,173	1.095	\$544,410	\$4.71
Prof - Child EPSDT	\$40,459	\$320		\$40,778	1.095	\$44,653	\$0.39
Prof - Evaluation & Management	\$2,938,555	\$23,225		\$2,961,780	1.095	\$3,243,184	\$28.03
Prof - Maternity	\$2,197,962	\$17,372		\$2,215,334	1.095	\$2,425,816	\$20.97
Prof - Other	\$585,669	\$4,629		\$590,298	1.095	\$646,383	\$5.59
Prof - Psych	\$202,027	\$1,597		\$203,623	1.095	\$222,970	\$1.93
Prof - Specialist	\$370,674	\$2,930		\$373,603	1.095	\$409,100	\$3.54
Prof - Vision	\$164,132	\$1,297		\$165,430	1.095	\$181,147	\$1.57
Radiology	\$576,034	\$7,902		\$583,936	1.219	\$711,673	\$6.15
Transportation/Ambulance	\$354,994	\$4,870		\$359,863	1.219	\$438,585	\$3.79
Provider Incentive Payment Adjustment							\$2.31
Total	\$20,415,887	\$453,298	(\$492,918)	\$20,376,267		\$23,444,553	\$204.94
Admin Cost Adjustment							\$17.25
Medallion II Capitation Rate							\$222.19

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Female							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$286,512	\$3,614	(\$18,969)	\$271,157	1.502	\$407,221	\$2.71
FQHC / RHC	\$10,506	\$91		\$10,597	1.119	\$11,855	\$0.08
Home Health	\$57,004	\$630		\$57,634	1.291	\$74,404	\$0.49
IP - Maternity	\$13,768,358	\$159,917	(\$837,214)	\$13,091,061	1.151	\$15,072,353	\$100.18
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$8,129,164	\$94,419	(\$494,311)	\$7,729,272	1.151	\$8,899,074	\$59.15
IP - Psych	\$779,120	\$3,191	(\$77,822)	\$704,489	1.135	\$799,466	\$5.31
Lab	\$687,433	\$8,671	(\$15,718)	\$680,385	1.502	\$1,021,797	\$6.79
OP - Emergency Room & Related	\$7,494,215	\$82,854		\$7,577,069	1.331	\$10,082,591	\$67.01
OP - Other	\$6,405,611	\$70,819	(\$1,427)	\$6,475,003	1.331	\$8,616,102	\$57.27
Pharmacy	\$8,800,478	\$79	(\$338,441)	\$8,462,116	1.282	\$10,845,479	\$72.08
Prof - Anesthesia	\$1,627,802	\$14,112		\$1,641,913	1.119	\$1,836,819	\$12.21
Prof - Child EPSDT	\$46,211	\$401		\$46,611	1.119	\$52,145	\$0.35
Prof - Evaluation & Management	\$6,518,130	\$56,506		\$6,574,636	1.119	\$7,355,088	\$48.88
Prof - Maternity	\$6,721,740	\$58,271		\$6,780,012	1.119	\$7,584,843	\$50.41
Prof - Other	\$1,464,303	\$12,694		\$1,476,998	1.119	\$1,652,327	\$10.98
Prof - Psych	\$455,204	\$3,946		\$459,150	1.119	\$513,654	\$3.41
Prof - Specialist	\$2,153,180	\$18,666		\$2,171,846	1.119	\$2,429,658	\$16.15
Prof - Vision	\$166,094	\$1,440		\$167,534	1.119	\$187,421	\$1.25
Radiology	\$2,323,032	\$29,300		\$2,352,333	1.502	\$3,532,713	\$23.48
Transportation/Ambulance	\$584,045	\$7,367		\$591,412	1.502	\$888,177	\$5.90
Provider Incentive Payment Adjustment							\$6.20
Total	\$68,478,141	\$626,988	(\$1,783,902)	\$67,321,227		\$81,863,186	\$550.29
Admin Cost Adjustment							\$46.33
Medallion II Capitation Rate							\$596.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Male							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$63,578	\$872	(\$5,849)	\$58,601	1.219	\$71,420	\$0.75
FQHC / RHC	\$5,440	\$43		\$5,483	1.095	\$6,004	\$0.06
Home Health	\$1,645	\$15		\$1,660	1.241	\$2,060	\$0.02
IP - Maternity	\$4,732	\$284	(\$301)	\$4,714	1.150	\$5,421	\$0.06
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$846,926	\$50,812	(\$53,962)	\$843,776	1.150	\$970,205	\$10.15
IP - Psych	\$294,035	\$1,625	(\$29,411)	\$266,248	1.485	\$395,469	\$4.14
Lab	\$119,461	\$1,639	(\$2,734)	\$118,365	1.219	\$144,258	\$1.51
OP - Emergency Room & Related	\$950,079	\$8,712		\$958,791	1.265	\$1,212,929	\$12.68
OP - Other	\$779,961	\$7,152	(\$173)	\$786,939	1.265	\$995,526	\$10.41
Pharmacy	\$1,893,697	\$7	(\$72,826)	\$1,820,878	1.042	\$1,896,613	\$19.83
Prof - Anesthesia	\$66,261	\$524		\$66,784	1.095	\$73,130	\$0.76
Prof - Child EPSDT	\$22,646	\$179		\$22,825	1.095	\$24,994	\$0.26
Prof - Evaluation & Management	\$1,556,684	\$12,303		\$1,568,988	1.095	\$1,718,060	\$17.97
Prof - Maternity	\$801	\$6		\$807	1.095	\$884	\$0.01
Prof - Other	\$652,174	\$5,154		\$657,329	1.095	\$719,783	\$7.53
Prof - Psych	\$184,893	\$1,461		\$186,355	1.095	\$204,061	\$2.13
Prof - Specialist	\$282,678	\$2,234		\$284,912	1.095	\$311,982	\$3.26
Prof - Vision	\$129,294	\$1,022		\$130,316	1.095	\$142,698	\$1.49
Radiology	\$135,697	\$1,861		\$137,559	1.219	\$167,650	\$1.75
Transportation/Ambulance	\$281,778	\$3,865		\$285,643	1.219	\$348,128	\$3.64
Provider Incentive Payment Adjustment							\$1.12
Total	\$8,272,459	\$99,771	(\$165,258)	\$8,206,973		\$9,411,272	\$99.53
Admin Cost Adjustment							\$8.38
Medallion II Capitation Rate							\$107.91

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Male							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$63,644	\$803	(\$4,214)	\$60,234	1.502	\$90,458	\$7.32
FQHC / RHC	\$351	\$3		\$354	1.119	\$396	\$0.03
Home Health	\$1,884	\$21		\$1,905	1.291	\$2,460	\$0.20
IP - Maternity	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,029,786	\$11,961	(\$62,618)	\$979,129	1.151	\$1,127,317	\$91.18
IP - Psych	\$45,100	\$185	(\$4,505)	\$40,780	1.135	\$46,278	\$3.74
Lab	\$22,927	\$289	(\$524)	\$22,692	1.502	\$34,079	\$2.76
OP - Emergency Room & Related	\$429,637	\$4,750		\$434,387	1.331	\$578,027	\$46.75
OP - Other	\$376,311	\$4,160	(\$84)	\$380,388	1.331	\$506,171	\$40.94
Pharmacy	\$726,721	\$7	(\$27,948)	\$698,780	1.282	\$895,593	\$72.44
Prof - Anesthesia	\$25,330	\$220		\$25,550	1.119	\$28,583	\$2.31
Prof - Child EPSDT	\$1,585	\$14		\$1,599	1.119	\$1,789	\$0.14
Prof - Evaluation & Management	\$396,247	\$3,435		\$399,683	1.119	\$447,127	\$36.16
Prof - Maternity	\$0	\$0		\$0	1.119	\$0	\$0.00
Prof - Other	\$107,037	\$928		\$107,964	1.119	\$120,781	\$9.77
Prof - Psych	\$31,599	\$274		\$31,873	1.119	\$35,657	\$2.88
Prof - Specialist	\$129,397	\$1,122		\$130,519	1.119	\$146,012	\$11.81
Prof - Vision	\$15,701	\$136		\$15,837	1.119	\$17,717	\$1.43
Radiology	\$91,186	\$1,150		\$92,336	1.502	\$138,670	\$11.22
Transportation/Ambulance	\$41,462	\$523		\$41,985	1.502	\$63,053	\$5.10
Provider Incentive Payment Adjustment							\$3.95
Total	\$3,535,908	\$29,979	(\$99,892)	\$3,465,995		\$4,280,166	\$350.12
Admin Cost Adjustment							\$29.48
Medallion II Capitation Rate							\$379.60

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 45 and Over							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$136,051	\$1,716	(\$9,007)	\$128,759	1.502	\$193,370	\$9.69
FQHC / RHC	\$4,682	\$41		\$4,722	1.119	\$5,283	\$0.26
Home Health	\$32,260	\$357		\$32,617	1.291	\$42,108	\$2.11
IP - Maternity	\$34,506	\$401	(\$2,098)	\$32,808	1.151	\$37,774	\$1.89
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$2,788,896	\$32,393	(\$169,585)	\$2,651,704	1.151	\$3,053,031	\$153.02
IP - Psych	\$139,888	\$573	(\$13,973)	\$126,489	1.135	\$143,541	\$7.19
Lab	\$92,111	\$1,162	(\$2,106)	\$91,167	1.502	\$136,913	\$6.86
OP - Emergency Room & Related	\$804,427	\$8,894		\$813,320	1.331	\$1,082,262	\$54.24
OP - Other	\$1,158,040	\$12,803	(\$258)	\$1,170,585	1.331	\$1,557,664	\$78.07
Pharmacy	\$2,734,385	\$25	(\$105,156)	\$2,629,253	1.282	\$3,369,785	\$168.89
Prof - Anesthesia	\$82,529	\$715		\$83,245	1.119	\$93,126	\$4.67
Prof - Child EPSDT	\$5,116	\$44		\$5,160	1.119	\$5,773	\$0.29
Prof - Evaluation & Management	\$1,115,268	\$9,668		\$1,124,936	1.119	\$1,258,474	\$63.08
Prof - Maternity	\$15,097	\$131		\$15,228	1.119	\$17,036	\$0.85
Prof - Other	\$499,585	\$4,331		\$503,916	1.119	\$563,734	\$28.25
Prof - Psych	\$78,371	\$679		\$79,050	1.119	\$88,434	\$4.43
Prof - Specialist	\$455,235	\$3,946		\$459,181	1.119	\$513,689	\$25.75
Prof - Vision	\$52,779	\$458		\$53,236	1.119	\$59,556	\$2.98
Radiology	\$356,261	\$4,494		\$360,754	1.502	\$541,778	\$27.15
Transportation/Ambulance	\$105,572	\$1,332		\$106,903	1.502	\$160,546	\$8.05
Provider Incentive Payment Adjustment							\$7.38
Total	\$10,691,057	\$84,161	(\$302,183)	\$10,473,035		\$12,923,876	\$655.13
Admin Cost Adjustment							\$55.16
Medallion II Capitation Rate							\$710.29

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

All Age Categories							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$2,727,070	\$36,871	(\$242,528)	\$2,521,413	1.270	\$3,203,220	\$1.66
FQHC / RHC	\$541,691	\$4,293		\$545,984	1.096	\$598,230	\$0.31
Home Health	\$184,930	\$1,868		\$186,797	1.266	\$236,397	\$0.12
IP - Maternity	\$18,109,165	\$418,680	(\$1,113,690)	\$17,414,155	1.151	\$20,043,257	\$10.41
IP - Newborn	\$20,334,816	\$1,220,012	(\$1,295,639)	\$20,259,190	1.150	\$23,294,769	\$12.09
IP - Other	\$35,657,638	\$1,561,270	(\$2,237,191)	\$34,981,718	1.150	\$40,240,430	\$20.89
IP - Psych	\$2,427,445	\$12,034	(\$242,671)	\$2,196,808	1.346	\$2,957,436	\$1.54
Lab	\$3,650,081	\$49,183	(\$83,531)	\$3,615,733	1.281	\$4,631,488	\$2.40
OP - Emergency Room & Related	\$25,560,454	\$250,839		\$25,811,293	1.287	\$33,231,870	\$17.25
OP - Other	\$21,769,920	\$214,595	(\$4,844)	\$21,979,670	1.289	\$28,332,222	\$14.71
Pharmacy	\$44,725,380	\$237	(\$1,720,002)	\$43,005,615	1.107	\$47,624,639	\$24.73
Prof - Anesthesia	\$3,381,805	\$28,057		\$3,409,862	1.107	\$3,775,321	\$1.96
Prof - Child EPSDT	\$3,489,724	\$27,622		\$3,517,345	1.095	\$3,852,799	\$2.00
Prof - Evaluation & Management	\$63,510,928	\$508,108		\$64,019,036	1.098	\$70,293,499	\$36.49
Prof - Maternity	\$8,953,011	\$75,918		\$9,028,929	1.113	\$10,047,794	\$5.22
Prof - Other	\$13,723,479	\$110,049		\$13,833,528	1.099	\$15,197,370	\$7.89
Prof - Psych	\$2,024,828	\$16,436		\$2,041,264	1.102	\$2,248,715	\$1.17
Prof - Specialist	\$6,935,371	\$56,910		\$6,992,281	1.104	\$7,722,063	\$4.01
Prof - Vision	\$2,669,085	\$21,275		\$2,690,360	1.097	\$2,951,582	\$1.53
Radiology	\$4,657,927	\$60,835		\$4,718,762	1.387	\$6,545,048	\$3.40
Transportation/Ambulance	\$5,950,904	\$80,823		\$6,031,727	1.253	\$7,560,720	\$3.93
Provider Incentive Payment Adjustment							\$1.98
Total	\$290,985,651	\$4,755,914	(\$6,940,095)	\$288,801,470		\$334,588,867	\$175.69
Admin Cost Adjustment							\$14.79
Medallion II Capitation Rate							\$190.48

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age Under 1							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$452,953	\$6,213	(\$42,821)	\$416,345	1.219	\$507,421	\$4.22
FQHC / RHC	\$485,978	\$3,841		\$489,819	1.095	\$536,357	\$4.46
Home Health	\$71,658	\$657		\$72,315	1.241	\$89,724	\$0.75
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$20,525,179	\$1,231,433	(\$1,307,768)	\$20,448,844	1.150	\$23,512,840	\$195.42
IP - Other	\$3,294,915	\$197,682	(\$209,936)	\$3,282,661	1.150	\$3,774,525	\$31.37
IP - Psych	\$79,513	\$439	(\$7,953)	\$71,999	1.485	\$106,943	\$0.89
Lab	\$406,362	\$5,574	(\$9,302)	\$402,634	1.219	\$490,712	\$4.08
OP - Emergency Room & Related	\$1,383,096	\$12,682		\$1,395,778	1.265	\$1,765,745	\$14.68
OP - Other	\$1,296,221	\$11,886	(\$288)	\$1,307,818	1.265	\$1,654,471	\$13.75
Pharmacy	\$2,237,760	\$9	(\$86,057)	\$2,151,711	1.042	\$2,241,206	\$18.63
Prof - Anesthesia	\$117,448	\$928		\$118,377	1.095	\$129,624	\$1.08
Prof - Child EPSDT	\$1,034,128	\$8,173		\$1,042,302	1.095	\$1,141,332	\$9.49
Prof - Evaluation & Management	\$9,909,997	\$78,324		\$9,988,321	1.095	\$10,937,328	\$90.90
Prof - Maternity	\$1,754	\$14		\$1,768	1.095	\$1,936	\$0.02
Prof - Other	\$1,730,351	\$13,676		\$1,744,027	1.095	\$1,909,730	\$15.87
Prof - Psych	\$74,430	\$588		\$75,018	1.095	\$82,146	\$0.68
Prof - Specialist	\$877,487	\$6,935		\$884,422	1.095	\$968,453	\$8.05
Prof - Vision	\$153,966	\$1,217		\$155,183	1.095	\$169,927	\$1.41
Radiology	\$175,449	\$2,407		\$177,856	1.219	\$216,762	\$1.80
Transportation/Ambulance	\$405,176	\$5,558		\$410,734	1.219	\$500,584	\$4.16
Provider Incentive Payment Adjustment							\$4.81
Total	\$44,713,821	\$1,588,237	(\$1,664,126)	\$44,637,933		\$50,737,766	\$426.50
Admin Cost Adjustment							\$35.91
Medallion II Capitation Rate							\$462.40

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 1-5							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$368,537	\$5,055	(\$34,841)	\$338,752	1.219	\$412,855	\$1.11
FQHC / RHC	\$510,796	\$4,037		\$514,833	1.095	\$563,748	\$1.52
Home Health	\$26,874	\$246		\$27,120	1.241	\$33,649	\$0.09
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$3,805,526	\$228,317	(\$242,470)	\$3,791,373	1.150	\$4,359,462	\$11.76
IP - Psych	\$292,126	\$1,614	(\$29,220)	\$264,520	1.485	\$392,902	\$1.06
Lab	\$714,070	\$9,795	(\$16,345)	\$707,520	1.219	\$862,292	\$2.33
OP - Emergency Room & Related	\$2,902,869	\$26,618		\$2,929,487	1.265	\$3,705,981	\$10.00
OP - Other	\$4,009,518	\$36,765	(\$892)	\$4,045,392	1.265	\$5,117,670	\$13.81
Pharmacy	\$5,018,996	\$20	(\$193,015)	\$4,826,001	1.042	\$5,026,724	\$13.56
Prof - Anesthesia	\$300,835	\$2,378		\$303,213	1.095	\$332,021	\$0.90
Prof - Child EPSDT	\$609,273	\$4,815		\$614,088	1.095	\$672,434	\$1.81
Prof - Evaluation & Management	\$8,559,536	\$67,651		\$8,627,187	1.095	\$9,446,870	\$25.49
Prof - Maternity	\$32	\$0		\$32	1.095	\$35	\$0.00
Prof - Other	\$2,217,229	\$17,524		\$2,234,753	1.095	\$2,447,081	\$6.60
Prof - Psych	\$509,949	\$4,030		\$513,979	1.095	\$562,813	\$1.52
Prof - Specialist	\$1,250,263	\$9,881		\$1,260,144	1.095	\$1,379,873	\$3.72
Prof - Vision	\$451,691	\$3,570		\$455,261	1.095	\$498,516	\$1.35
Radiology	\$200,732	\$2,754		\$203,486	1.219	\$247,999	\$0.67
Transportation/Ambulance	\$896,807	\$12,302		\$909,109	1.219	\$1,107,980	\$2.99
Provider Incentive Payment Adjustment							\$1.14
Total	\$32,645,661	\$437,372	(\$516,783)	\$32,566,250		\$37,170,905	\$101.45
Admin Cost Adjustment							\$8.54
Medallion II Capitation Rate							\$109.99

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 6-14							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$444,896	\$6,103	(\$40,932)	\$410,067	1.219	\$499,770	\$1.18
FQHC / RHC	\$420,654	\$3,325		\$423,978	1.095	\$464,261	\$1.10
Home Health	\$36,069	\$331		\$36,400	1.241	\$45,163	\$0.11
IP - Maternity	\$43,140	\$2,588	(\$2,749)	\$42,979	1.150	\$49,419	\$0.12
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$2,446,105	\$146,757	(\$155,854)	\$2,437,008	1.150	\$2,802,162	\$6.62
IP - Psych	\$1,351,391	\$7,467	(\$135,175)	\$1,223,683	1.485	\$1,817,587	\$4.29
Lab	\$791,327	\$10,855	(\$18,114)	\$784,068	1.219	\$955,586	\$2.26
OP - Emergency Room & Related	\$2,603,660	\$23,874		\$2,627,534	1.265	\$3,323,993	\$7.85
OP - Other	\$2,957,936	\$27,123	(\$658)	\$2,984,401	1.265	\$3,775,451	\$8.92
Pharmacy	\$11,311,681	\$44	(\$435,012)	\$10,876,713	1.042	\$11,329,099	\$26.76
Prof - Anesthesia	\$176,546	\$1,395		\$177,941	1.095	\$194,848	\$0.46
Prof - Child EPSDT	\$147,375	\$1,165		\$148,539	1.095	\$162,652	\$0.38
Prof - Evaluation & Management	\$6,371,238	\$50,355		\$6,421,594	1.095	\$7,031,720	\$16.61
Prof - Maternity	\$32,234	\$255		\$32,488	1.095	\$35,575	\$0.08
Prof - Other	\$1,214,324	\$9,597		\$1,223,921	1.095	\$1,340,208	\$3.17
Prof - Psych	\$1,624,366	\$12,838		\$1,637,204	1.095	\$1,792,758	\$4.23
Prof - Specialist	\$972,116	\$7,683		\$979,799	1.095	\$1,072,891	\$2.53
Prof - Vision	\$560,800	\$4,432		\$565,233	1.095	\$618,936	\$1.46
Radiology	\$360,738	\$4,948		\$365,687	1.219	\$445,682	\$1.05
Transportation/Ambulance	\$1,092,429	\$14,985		\$1,107,414	1.219	\$1,349,665	\$3.19
Provider Incentive Payment Adjustment							\$1.05
Total	\$34,959,025	\$336,121	(\$788,493)	\$34,506,653		\$39,107,425	\$93.42
Admin Cost Adjustment							\$7.87
Medallion II Capitation Rate							\$101.29

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Female							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$72,605	\$996	(\$6,680)	\$66,921	1.219	\$81,560	\$0.86
FQHC / RHC	\$266,385	\$2,105		\$268,491	1.095	\$294,000	\$3.09
Home Health	\$73,003	\$669		\$73,672	1.241	\$91,409	\$0.96
IP - Maternity	\$4,956,973	\$297,400	(\$315,835)	\$4,938,537	1.150	\$5,678,513	\$59.65
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,479,083	\$88,739	(\$94,240)	\$1,473,582	1.150	\$1,694,379	\$17.80
IP - Psych	\$462,701	\$2,557	(\$46,282)	\$418,976	1.485	\$622,322	\$6.54
Lab	\$953,334	\$13,077	(\$21,822)	\$944,590	1.219	\$1,151,222	\$12.09
OP - Emergency Room & Related	\$2,012,208	\$18,451		\$2,030,659	1.265	\$2,568,909	\$26.98
OP - Other	\$1,713,858	\$15,715	(\$381)	\$1,729,192	1.265	\$2,187,534	\$22.98
Pharmacy	\$2,984,187	\$12	(\$114,763)	\$2,869,436	1.042	\$2,988,782	\$31.39
Prof - Anesthesia	\$371,364	\$2,935		\$374,300	1.095	\$409,862	\$4.31
Prof - Child EPSDT	\$80,159	\$634		\$80,793	1.095	\$88,469	\$0.93
Prof - Evaluation & Management	\$2,544,431	\$20,110		\$2,564,541	1.095	\$2,808,203	\$29.50
Prof - Maternity	\$2,948,837	\$23,306		\$2,972,143	1.095	\$3,254,531	\$34.19
Prof - Other	\$590,334	\$4,666		\$594,999	1.095	\$651,531	\$6.84
Prof - Psych	\$324,356	\$2,564		\$326,920	1.095	\$357,981	\$3.76
Prof - Specialist	\$453,602	\$3,585		\$457,187	1.095	\$500,625	\$5.26
Prof - Vision	\$129,796	\$1,026		\$130,822	1.095	\$143,251	\$1.50
Radiology	\$656,891	\$9,011		\$665,902	1.219	\$811,570	\$8.52
Transportation/Ambulance	\$392,800	\$5,388		\$398,188	1.219	\$485,293	\$5.10
Provider Incentive Payment Adjustment							\$3.22
Total	\$23,466,908	\$512,945	(\$600,003)	\$23,379,850		\$26,869,947	\$285.46
Admin Cost Adjustment							\$24.03
Medallion II Capitation Rate							\$309.50

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Female							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$435,782	\$5,497	(\$28,851)	\$412,427	1.502	\$619,380	\$3.50
FQHC / RHC	\$798,237	\$6,920		\$805,157	1.119	\$900,735	\$5.10
Home Health	\$263,009	\$2,908		\$265,917	1.291	\$343,292	\$1.94
IP - Maternity	\$12,826,996	\$148,983	(\$779,973)	\$12,196,007	1.151	\$14,041,835	\$79.43
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$7,972,679	\$92,601	(\$484,796)	\$7,580,484	1.151	\$8,727,768	\$49.37
IP - Psych	\$1,128,610	\$4,623	(\$112,730)	\$1,020,502	1.135	\$1,158,082	\$6.55
Lab	\$2,378,706	\$30,003	(\$54,390)	\$2,354,319	1.502	\$3,535,696	\$20.00
OP - Emergency Room & Related	\$6,738,242	\$74,496		\$6,812,738	1.331	\$9,065,517	\$51.28
OP - Other	\$7,748,252	\$85,662	(\$1,726)	\$7,832,188	1.331	\$10,422,071	\$58.95
Pharmacy	\$12,357,290	\$111	(\$475,225)	\$11,882,176	1.282	\$15,228,802	\$86.14
Prof - Anesthesia	\$1,006,254	\$8,723		\$1,014,978	1.119	\$1,135,462	\$6.42
Prof - Child EPSDT	\$152,193	\$1,319		\$153,512	1.119	\$171,735	\$0.97
Prof - Evaluation & Management	\$6,358,209	\$55,120		\$6,413,329	1.119	\$7,174,632	\$40.58
Prof - Maternity	\$7,011,129	\$60,780		\$7,071,909	1.119	\$7,911,391	\$44.75
Prof - Other	\$1,795,311	\$15,564		\$1,810,875	1.119	\$2,025,838	\$11.46
Prof - Psych	\$567,446	\$4,919		\$572,365	1.119	\$640,308	\$3.62
Prof - Specialist	\$2,655,521	\$23,021		\$2,678,542	1.119	\$2,996,502	\$16.95
Prof - Vision	\$246,382	\$2,136		\$248,518	1.119	\$278,018	\$1.57
Radiology	\$2,262,605	\$28,538		\$2,291,143	1.502	\$3,440,819	\$19.46
Transportation/Ambulance	\$1,006,192	\$12,691		\$1,018,883	1.502	\$1,530,150	\$8.66
Provider Incentive Payment Adjustment							\$5.89
Total	\$75,709,045	\$664,616	(\$1,937,691)	\$74,435,971		\$91,348,034	\$522.61
Admin Cost Adjustment							\$44.00
Medallion II Capitation Rate							\$566.61

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Male							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$94,908	\$1,302	(\$8,732)	\$87,478	1.219	\$106,614	\$1.61
FQHC / RHC	\$61,042	\$482		\$61,525	1.095	\$67,370	\$1.02
Home Health	\$7,209	\$66		\$7,275	1.241	\$9,027	\$0.14
IP - Maternity	\$2,348	\$141	(\$150)	\$2,340	1.150	\$2,690	\$0.04
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$2,177,991	\$130,671	(\$138,771)	\$2,169,891	1.150	\$2,495,021	\$37.75
IP - Psych	\$410,203	\$2,266	(\$41,031)	\$371,438	1.485	\$551,713	\$8.35
Lab	\$133,790	\$1,835	(\$3,062)	\$132,563	1.219	\$161,561	\$2.44
OP - Emergency Room & Related	\$762,402	\$6,991		\$769,392	1.265	\$973,329	\$14.73
OP - Other	\$826,032	\$7,574	(\$184)	\$833,423	1.265	\$1,054,331	\$15.95
Pharmacy	\$1,660,829	\$6	(\$63,870)	\$1,596,965	1.042	\$1,663,387	\$25.17
Prof - Anesthesia	\$36,059	\$285		\$36,344	1.095	\$39,797	\$0.60
Prof - Child EPSDT	\$10,567	\$84		\$10,650	1.095	\$11,662	\$0.18
Prof - Evaluation & Management	\$977,231	\$7,724		\$984,954	1.095	\$1,078,536	\$16.32
Prof - Maternity	\$1,437	\$11		\$1,449	1.095	\$1,586	\$0.02
Prof - Other	\$187,370	\$1,481		\$188,851	1.095	\$206,794	\$3.13
Prof - Psych	\$227,271	\$1,796		\$229,067	1.095	\$250,831	\$3.80
Prof - Specialist	\$256,068	\$2,024		\$258,092	1.095	\$282,614	\$4.28
Prof - Vision	\$82,106	\$649		\$82,755	1.095	\$90,618	\$1.37
Radiology	\$132,589	\$1,819		\$134,408	1.219	\$163,810	\$2.48
Transportation/Ambulance	\$198,416	\$2,722		\$201,138	1.219	\$245,138	\$3.71
Provider Incentive Payment Adjustment							\$1.63
Total	\$8,245,868	\$169,930	(\$255,800)	\$8,159,997		\$9,456,428	\$144.71
Admin Cost Adjustment							\$12.18
Medallion II Capitation Rate							\$156.89

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Male							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$153,932	\$1,942	(\$10,191)	\$145,683	1.502	\$218,785	\$12.99
FQHC / RHC	\$84,242	\$730		\$84,972	1.119	\$95,059	\$5.65
Home Health	\$21,419	\$237		\$21,655	1.291	\$27,957	\$1.66
IP - Maternity	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,414,270	\$16,427	(\$85,998)	\$1,344,699	1.151	\$1,548,215	\$91.95
IP - Psych	\$152,638	\$625	(\$15,246)	\$138,018	1.135	\$156,624	\$9.30
Lab	\$100,018	\$1,262	(\$2,287)	\$98,992	1.502	\$148,666	\$8.83
OP - Emergency Room & Related	\$609,204	\$6,735		\$615,939	1.331	\$819,613	\$48.68
OP - Other	\$835,806	\$9,240	(\$186)	\$844,861	1.331	\$1,124,232	\$66.77
Pharmacy	\$1,217,836	\$11	(\$46,834)	\$1,171,013	1.282	\$1,500,830	\$89.13
Prof - Anesthesia	\$34,377	\$298		\$34,675	1.119	\$38,792	\$2.30
Prof - Child EPSDT	\$5,299	\$46		\$5,344	1.119	\$5,979	\$0.36
Prof - Evaluation & Management	\$505,413	\$4,381		\$509,795	1.119	\$570,311	\$33.87
Prof - Maternity	\$0	\$0		\$0	1.119	\$0	\$0.00
Prof - Other	\$151,241	\$1,311		\$152,552	1.119	\$170,661	\$10.14
Prof - Psych	\$49,789	\$432		\$50,220	1.119	\$56,182	\$3.34
Prof - Specialist	\$288,706	\$2,503		\$291,209	1.119	\$325,778	\$19.35
Prof - Vision	\$24,774	\$215		\$24,989	1.119	\$27,955	\$1.66
Radiology	\$134,221	\$1,693		\$135,914	1.502	\$204,114	\$12.12
Transportation/Ambulance	\$90,287	\$1,139		\$91,426	1.502	\$137,303	\$8.15
Provider Incentive Payment Adjustment							\$4.86
Total	\$5,873,473	\$49,226	(\$160,743)	\$5,761,956		\$7,177,054	\$431.10
Admin Cost Adjustment							\$36.30
Medallion II Capitation Rate							\$467.40

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 45 and Over							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$161,314	\$2,035	(\$10,680)	\$152,668	1.502	\$229,276	\$14.69
FQHC / RHC	\$78,294	\$679		\$78,972	1.119	\$88,347	\$5.66
Home Health	\$26,228	\$290		\$26,518	1.291	\$34,234	\$2.19
IP - Maternity	\$4,820	\$56	(\$293)	\$4,583	1.151	\$5,277	\$0.34
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$2,031,241	\$23,593	(\$123,514)	\$1,931,320	1.151	\$2,223,619	\$142.51
IP - Psych	\$129,263	\$529	(\$12,911)	\$116,881	1.135	\$132,639	\$8.50
Lab	\$172,616	\$2,177	(\$3,947)	\$170,846	1.502	\$256,575	\$16.44
OP - Emergency Room & Related	\$459,318	\$5,078		\$464,396	1.331	\$617,958	\$39.61
OP - Other	\$1,115,239	\$12,330	(\$248)	\$1,127,321	1.331	\$1,500,094	\$96.14
Pharmacy	\$2,187,904	\$20	(\$84,140)	\$2,103,783	1.282	\$2,696,316	\$172.81
Prof - Anesthesia	\$40,878	\$354		\$41,232	1.119	\$46,127	\$2.96
Prof - Child EPSDT	\$6,725	\$58		\$6,783	1.119	\$7,589	\$0.49
Prof - Evaluation & Management	\$646,043	\$5,601		\$651,644	1.119	\$728,998	\$46.72
Prof - Maternity	\$1,141	\$10		\$1,151	1.119	\$1,287	\$0.08
Prof - Other	\$456,935	\$3,961		\$460,896	1.119	\$515,608	\$33.05
Prof - Psych	\$66,653	\$578		\$67,231	1.119	\$75,212	\$4.82
Prof - Specialist	\$381,423	\$3,307		\$384,730	1.119	\$430,400	\$27.58
Prof - Vision	\$31,509	\$273		\$31,783	1.119	\$35,555	\$2.28
Radiology	\$202,370	\$2,552		\$204,923	1.502	\$307,751	\$19.72
Transportation/Ambulance	\$109,384	\$1,380		\$110,764	1.502	\$166,344	\$10.66
Provider Incentive Payment Adjustment							\$7.38
Total	\$8,309,298	\$64,860	(\$235,734)	\$8,138,424		\$10,099,204	\$654.64
Admin Cost Adjustment							\$55.12
Medallion II Capitation Rate							\$709.75

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

All Age Categories							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$2,184,927	\$29,142	(\$183,728)	\$2,030,341	1.318	\$2,675,662	\$2.08
FQHC / RHC	\$2,705,627	\$22,120		\$2,727,747	1.103	\$3,009,877	\$2.34
Home Health	\$525,468	\$5,404		\$530,872	1.270	\$674,454	\$0.52
IP - Maternity	\$17,834,277	\$449,168	(\$1,098,999)	\$17,184,446	1.151	\$19,777,735	\$15.39
IP - Newborn	\$20,525,179	\$1,231,433	(\$1,307,768)	\$20,448,844	1.150	\$23,512,840	\$18.30
IP - Other	\$24,621,810	\$924,788	(\$1,535,580)	\$24,011,017	1.151	\$27,625,151	\$21.50
IP - Psych	\$4,006,445	\$20,121	(\$400,549)	\$3,626,017	1.362	\$4,938,811	\$3.84
Lab	\$5,650,223	\$74,578	(\$129,268)	\$5,595,533	1.351	\$7,562,310	\$5.89
OP - Emergency Room & Related	\$17,470,998	\$174,925		\$17,645,923	1.294	\$22,841,045	\$17.78
OP - Other	\$20,502,862	\$206,295	(\$4,563)	\$20,704,594	1.296	\$26,835,853	\$20.89
Pharmacy	\$38,976,484	\$232	(\$1,498,918)	\$37,477,798	1.139	\$42,675,144	\$33.22
Prof - Anesthesia	\$2,083,763	\$17,297		\$2,101,060	1.107	\$2,326,533	\$1.81
Prof - Child EPSDT	\$2,045,719	\$16,294		\$2,062,013	1.097	\$2,261,853	\$1.76
Prof - Evaluation & Management	\$35,872,100	\$289,265		\$36,161,365	1.100	\$39,776,598	\$30.96
Prof - Maternity	\$9,996,563	\$84,376		\$10,080,940	1.112	\$11,206,341	\$8.72
Prof - Other	\$8,343,095	\$67,780		\$8,410,875	1.102	\$9,267,450	\$7.21
Prof - Psych	\$3,444,259	\$27,745		\$3,472,005	1.100	\$3,818,231	\$2.97
Prof - Specialist	\$7,135,186	\$58,939		\$7,194,125	1.106	\$7,957,135	\$6.19
Prof - Vision	\$1,681,024	\$13,518		\$1,694,542	1.099	\$1,862,777	\$1.45
Radiology	\$4,125,596	\$53,722		\$4,179,317	1.397	\$5,838,507	\$4.54
Transportation/Ambulance	\$4,191,493	\$56,164		\$4,247,658	1.300	\$5,522,457	\$4.30
Provider Incentive Payment Adjustment							\$2.41
Total	\$233,923,099	\$3,823,307	(\$6,159,373)	\$231,587,033		\$271,966,763	\$214.09
Admin Cost Adjustment							\$18.03
Medallion II Capitation Rate							\$232.12

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age Under 1							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,025,695	\$14,070	(\$96,967)	\$942,798	1.219	\$1,149,038	\$7.40
FQHC / RHC	\$140,334	\$1,109		\$141,443	1.095	\$154,882	\$1.00
Home Health	\$58,280	\$534		\$58,814	1.241	\$72,973	\$0.47
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$24,129,127	\$1,447,657	(\$1,537,394)	\$24,039,390	1.150	\$27,641,382	\$177.96
IP - Other	\$6,599,135	\$395,923	(\$420,466)	\$6,574,592	1.150	\$7,559,710	\$48.67
IP - Psych	\$174,219	\$963	(\$17,426)	\$157,755	1.485	\$234,319	\$1.51
Lab	\$275,200	\$3,775	(\$6,299)	\$272,676	1.219	\$332,324	\$2.14
OP - Emergency Room & Related	\$3,289,665	\$30,164		\$3,319,829	1.265	\$4,199,788	\$27.04
OP - Other	\$2,631,702	\$24,131	(\$585)	\$2,655,248	1.265	\$3,359,052	\$21.63
Pharmacy	\$2,744,078	\$11	(\$105,529)	\$2,638,560	1.042	\$2,748,303	\$17.69
Prof - Anesthesia	\$161,712	\$1,278		\$162,990	1.095	\$178,476	\$1.15
Prof - Child EPSDT	\$1,440,775	\$11,387		\$1,452,162	1.095	\$1,590,135	\$10.24
Prof - Evaluation & Management	\$13,412,242	\$106,004		\$13,518,246	1.095	\$14,802,636	\$95.30
Prof - Maternity	\$2,795	\$22		\$2,817	1.095	\$3,085	\$0.02
Prof - Other	\$1,957,085	\$15,468		\$1,972,553	1.095	\$2,159,968	\$13.91
Prof - Psych	\$160,683	\$1,270		\$161,953	1.095	\$177,340	\$1.14
Prof - Specialist	\$1,099,959	\$8,694		\$1,108,653	1.095	\$1,213,988	\$7.82
Prof - Vision	\$175,041	\$1,383		\$176,425	1.095	\$193,187	\$1.24
Radiology	\$233,705	\$3,206		\$236,911	1.219	\$288,736	\$1.86
Transportation/Ambulance	\$624,385	\$8,565		\$632,950	1.219	\$771,410	\$4.97
Provider Incentive Payment Adjustment							\$5.05
Total	\$60,335,817	\$2,075,614	(\$2,184,667)	\$60,226,764		\$68,830,734	\$448.19
Admin Cost Adjustment							\$37.74
Medallion II Capitation Rate							\$485.93

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 1-5							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$934,423	\$12,818	(\$88,339)	\$858,902	1.219	\$1,046,790	\$1.91
FQHC / RHC	\$185,970	\$1,470		\$187,440	1.095	\$205,249	\$0.37
Home Health	\$77,547	\$711		\$78,258	1.241	\$97,099	\$0.18
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$7,609,990	\$456,571	(\$484,873)	\$7,581,688	1.150	\$8,717,707	\$15.89
IP - Psych	\$597,909	\$3,304	(\$59,807)	\$541,406	1.485	\$804,172	\$1.47
Lab	\$791,090	\$10,852	(\$18,108)	\$783,833	1.219	\$955,299	\$1.74
OP - Emergency Room & Related	\$7,368,800	\$67,568		\$7,436,368	1.265	\$9,407,464	\$17.15
OP - Other	\$10,246,113	\$93,951	(\$2,278)	\$10,337,786	1.265	\$13,077,936	\$23.84
Pharmacy	\$9,944,928	\$39	(\$382,451)	\$9,562,515	1.042	\$9,960,241	\$18.16
Prof - Anesthesia	\$444,298	\$3,512		\$447,810	1.095	\$490,357	\$0.89
Prof - Child EPSDT	\$1,005,709	\$7,949		\$1,013,658	1.095	\$1,109,967	\$2.02
Prof - Evaluation & Management	\$14,139,528	\$111,752		\$14,251,280	1.095	\$15,605,317	\$28.45
Prof - Maternity	\$0	\$0		\$0	1.095	\$0	\$0.00
Prof - Other	\$2,428,152	\$19,191		\$2,447,343	1.095	\$2,679,869	\$4.89
Prof - Psych	\$718,083	\$5,675		\$723,758	1.095	\$792,524	\$1.44
Prof - Specialist	\$1,564,403	\$12,364		\$1,576,767	1.095	\$1,726,579	\$3.15
Prof - Vision	\$630,446	\$4,983		\$635,429	1.095	\$695,802	\$1.27
Radiology	\$284,253	\$3,899		\$288,152	1.219	\$351,186	\$0.64
Transportation/Ambulance	\$1,823,661	\$25,016		\$1,848,677	1.219	\$2,253,081	\$4.11
Provider Incentive Payment Adjustment							\$1.45
Total	\$60,795,303	\$841,623	(\$1,035,855)	\$60,601,070		\$69,976,637	\$129.01
Admin Cost Adjustment							\$10.86
Medallion II Capitation Rate							\$139.88

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 6-14							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$696,330	\$9,552	(\$64,065)	\$641,817	1.219	\$782,217	\$1.10
FQHC / RHC	\$194,175	\$1,535		\$195,710	1.095	\$214,305	\$0.30
Home Health	\$19,548	\$179		\$19,728	1.241	\$24,477	\$0.03
IP - Maternity	\$51,620	\$3,097	(\$3,289)	\$51,428	1.150	\$59,133	\$0.08
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$5,223,536	\$313,392	(\$332,819)	\$5,204,109	1.150	\$5,983,878	\$8.45
IP - Psych	\$1,930,188	\$10,665	(\$193,070)	\$1,747,784	1.485	\$2,596,054	\$3.67
Lab	\$852,134	\$11,689	(\$19,505)	\$844,317	1.219	\$1,029,014	\$1.45
OP - Emergency Room & Related	\$6,438,350	\$59,036		\$6,497,386	1.265	\$8,219,593	\$11.61
OP - Other	\$6,762,994	\$62,013	(\$1,504)	\$6,823,502	1.265	\$8,632,151	\$12.19
Pharmacy	\$16,635,176	\$65	(\$639,737)	\$15,995,504	1.042	\$16,660,791	\$23.53
Prof - Anesthesia	\$277,919	\$2,197		\$280,116	1.095	\$306,730	\$0.43
Prof - Child EPSDT	\$288,169	\$2,278		\$290,447	1.095	\$318,043	\$0.45
Prof - Evaluation & Management	\$10,880,295	\$85,993		\$10,966,287	1.095	\$12,008,212	\$16.96
Prof - Maternity	\$26,804	\$212		\$27,016	1.095	\$29,582	\$0.04
Prof - Other	\$1,954,672	\$15,449		\$1,970,121	1.095	\$2,157,305	\$3.05
Prof - Psych	\$1,957,596	\$15,472		\$1,973,068	1.095	\$2,160,532	\$3.05
Prof - Specialist	\$1,394,970	\$11,025		\$1,405,995	1.095	\$1,539,581	\$2.17
Prof - Vision	\$847,096	\$6,695		\$853,791	1.095	\$934,912	\$1.32
Radiology	\$464,062	\$6,366		\$470,428	1.219	\$573,336	\$0.81
Transportation/Ambulance	\$2,110,987	\$28,957		\$2,139,944	1.219	\$2,608,064	\$3.68
Provider Incentive Payment Adjustment							\$1.08
Total	\$59,006,621	\$645,865	(\$1,253,989)	\$58,398,498		\$66,837,910	\$95.48
Admin Cost Adjustment							\$8.04
Medallion II Capitation Rate							\$103.52

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Female							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$172,653	\$2,368	(\$15,885)	\$159,137	1.219	\$193,948	\$1.24
FQHC / RHC	\$189,267	\$1,496		\$190,762	1.095	\$208,887	\$1.33
Home Health	\$25,252	\$232		\$25,483	1.241	\$31,618	\$0.20
IP - Maternity	\$6,307,253	\$378,411	(\$401,868)	\$6,283,796	1.150	\$7,225,342	\$46.11
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,488,243	\$89,289	(\$94,824)	\$1,482,708	1.150	\$1,704,873	\$10.88
IP - Psych	\$595,258	\$3,289	(\$59,541)	\$539,005	1.485	\$800,607	\$5.11
Lab	\$718,199	\$9,852	(\$16,440)	\$711,611	1.219	\$867,279	\$5.53
OP - Emergency Room & Related	\$4,368,963	\$40,061		\$4,409,024	1.265	\$5,577,687	\$35.60
OP - Other	\$3,637,479	\$33,354	(\$809)	\$3,670,024	1.265	\$4,642,807	\$29.63
Pharmacy	\$3,710,106	\$14	(\$142,679)	\$3,567,441	1.042	\$3,715,818	\$23.71
Prof - Anesthesia	\$612,797	\$4,843		\$617,640	1.095	\$676,323	\$4.32
Prof - Child EPSDT	\$113,391	\$896		\$114,288	1.095	\$125,146	\$0.80
Prof - Evaluation & Management	\$3,748,584	\$29,627		\$3,778,211	1.095	\$4,137,185	\$26.40
Prof - Maternity	\$3,288,639	\$25,992		\$3,314,631	1.095	\$3,629,559	\$23.16
Prof - Other	\$874,149	\$6,909		\$881,057	1.095	\$964,768	\$6.16
Prof - Psych	\$403,227	\$3,187		\$406,414	1.095	\$445,028	\$2.84
Prof - Specialist	\$559,458	\$4,422		\$563,880	1.095	\$617,455	\$3.94
Prof - Vision	\$184,457	\$1,458		\$185,915	1.095	\$203,579	\$1.30
Radiology	\$733,189	\$10,057		\$743,247	1.219	\$905,834	\$5.78
Transportation/Ambulance	\$737,640	\$10,118		\$747,758	1.219	\$911,333	\$5.82
Provider Incentive Payment Adjustment							\$2.73
Total	\$32,468,203	\$655,875	(\$732,046)	\$32,392,033		\$37,585,076	\$242.59
Admin Cost Adjustment							\$20.43
Medallion II Capitation Rate							\$263.02

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Female							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$826,819	\$10,429	(\$54,740)	\$782,508	1.502	\$1,175,163	\$3.92
FQHC / RHC	\$853,843	\$7,402		\$861,245	1.119	\$963,480	\$3.21
Home Health	\$199,381	\$2,204		\$201,586	1.291	\$260,242	\$0.87
IP - Maternity	\$17,983,834	\$208,879	(\$1,093,545)	\$17,099,167	1.151	\$19,687,074	\$65.68
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$11,267,445	\$130,869	(\$685,141)	\$10,713,174	1.151	\$12,334,580	\$41.15
IP - Psych	\$1,452,158	\$5,948	(\$145,047)	\$1,313,059	1.135	\$1,490,080	\$4.97
Lab	\$1,878,118	\$23,689	(\$42,944)	\$1,858,863	1.502	\$2,791,624	\$9.31
OP - Emergency Room & Related	\$16,857,998	\$186,377		\$17,044,375	1.331	\$22,680,467	\$75.67
OP - Other	\$16,969,549	\$187,610	(\$3,780)	\$17,153,379	1.331	\$22,825,515	\$76.15
Pharmacy	\$15,986,584	\$143	(\$614,798)	\$15,371,930	1.282	\$19,701,448	\$65.73
Prof - Anesthesia	\$1,885,898	\$16,349		\$1,902,247	1.119	\$2,128,056	\$7.10
Prof - Child EPSDT	\$135,101	\$1,171		\$136,272	1.119	\$152,449	\$0.51
Prof - Evaluation & Management	\$10,163,671	\$88,110		\$10,251,781	1.119	\$11,468,734	\$38.26
Prof - Maternity	\$9,201,479	\$79,769		\$9,281,248	1.119	\$10,382,992	\$34.64
Prof - Other	\$2,694,653	\$23,360		\$2,718,013	1.119	\$3,040,659	\$10.14
Prof - Psych	\$858,327	\$7,441		\$865,768	1.119	\$968,540	\$3.23
Prof - Specialist	\$3,452,347	\$29,929		\$3,482,276	1.119	\$3,895,645	\$13.00
Prof - Vision	\$327,063	\$2,835		\$329,898	1.119	\$369,059	\$1.23
Radiology	\$3,117,070	\$39,316		\$3,156,386	1.502	\$4,740,232	\$15.82
Transportation/Ambulance	\$1,859,318	\$23,452		\$1,882,770	1.502	\$2,827,527	\$9.43
Provider Incentive Payment Adjustment							\$5.47
Total	\$117,970,656	\$1,075,283	(\$2,639,995)	\$116,405,944		\$143,883,568	\$485.52
Admin Cost Adjustment							\$40.88
Medallion II Capitation Rate							\$526.39

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Male							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$138,524	\$1,900	(\$12,745)	\$127,679	1.219	\$155,609	\$1.36
FQHC / RHC	\$40,901	\$323		\$41,224	1.095	\$45,141	\$0.39
Home Health	\$12,882	\$118		\$13,000	1.241	\$16,130	\$0.14
IP - Maternity	\$9,098	\$546	(\$580)	\$9,065	1.150	\$10,423	\$0.09
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,785,327	\$107,113	(\$113,753)	\$1,778,687	1.150	\$2,045,200	\$17.88
IP - Psych	\$430,381	\$2,378	(\$43,049)	\$389,709	1.485	\$578,851	\$5.06
Lab	\$126,083	\$1,730	(\$2,886)	\$124,927	1.219	\$152,255	\$1.33
OP - Emergency Room & Related	\$1,736,097	\$15,919		\$1,752,016	1.265	\$2,216,408	\$19.38
OP - Other	\$1,522,445	\$13,960	(\$339)	\$1,536,066	1.265	\$1,943,219	\$16.99
Pharmacy	\$2,693,016	\$11	(\$103,565)	\$2,589,462	1.042	\$2,697,163	\$23.58
Prof - Anesthesia	\$60,668	\$479		\$61,147	1.095	\$66,957	\$0.59
Prof - Child EPSDT	\$23,789	\$188		\$23,977	1.095	\$26,255	\$0.23
Prof - Evaluation & Management	\$1,528,540	\$12,081		\$1,540,620	1.095	\$1,686,997	\$14.75
Prof - Maternity	\$4,591	\$36		\$4,627	1.095	\$5,067	\$0.04
Prof - Other	\$274,526	\$2,170		\$276,696	1.095	\$302,985	\$2.65
Prof - Psych	\$310,011	\$2,450		\$312,461	1.095	\$342,149	\$2.99
Prof - Specialist	\$376,569	\$2,976		\$379,545	1.095	\$415,606	\$3.63
Prof - Vision	\$130,423	\$1,031		\$131,454	1.095	\$143,944	\$1.26
Radiology	\$148,993	\$2,044		\$151,037	1.219	\$184,076	\$1.61
Transportation/Ambulance	\$379,570	\$5,207		\$384,776	1.219	\$468,947	\$4.10
Provider Incentive Payment Adjustment							\$1.35
Total	\$11,732,433	\$172,659	(\$276,916)	\$11,628,176		\$13,503,383	\$119.40
Admin Cost Adjustment							\$10.05
Medallion II Capitation Rate							\$129.46

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Male							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$123,085	\$1,552	(\$8,149)	\$116,488	1.502	\$174,941	\$9.58
FQHC / RHC	\$18,685	\$162		\$18,847	1.119	\$21,085	\$1.15
Home Health	\$17,648	\$195		\$17,843	1.291	\$23,035	\$1.26
IP - Maternity	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,188,346	\$13,802	(\$72,260)	\$1,129,889	1.151	\$1,300,894	\$71.23
IP - Psych	\$93,737	\$384	(\$9,363)	\$84,758	1.135	\$96,185	\$5.27
Lab	\$40,573	\$512	(\$928)	\$40,157	1.502	\$60,308	\$3.30
OP - Emergency Room & Related	\$697,345	\$7,710		\$705,055	1.331	\$938,196	\$51.37
OP - Other	\$870,478	\$9,624	(\$194)	\$879,908	1.331	\$1,170,869	\$64.11
Pharmacy	\$813,025	\$7	(\$31,267)	\$781,766	1.282	\$1,001,951	\$54.86
Prof - Anesthesia	\$35,952	\$312		\$36,264	1.119	\$40,569	\$2.22
Prof - Child EPSDT	\$3,274	\$28		\$3,302	1.119	\$3,694	\$0.20
Prof - Evaluation & Management	\$440,397	\$3,818		\$444,214	1.119	\$496,946	\$27.21
Prof - Maternity	\$0	\$0		\$0	1.119	\$0	\$0.00
Prof - Other	\$111,399	\$966		\$112,365	1.119	\$125,704	\$6.88
Prof - Psych	\$42,025	\$364		\$42,389	1.119	\$47,421	\$2.60
Prof - Specialist	\$200,889	\$1,742		\$202,630	1.119	\$226,684	\$12.41
Prof - Vision	\$22,547	\$195		\$22,742	1.119	\$25,442	\$1.39
Radiology	\$100,431	\$1,267		\$101,698	1.502	\$152,729	\$8.36
Transportation/Ambulance	\$83,531	\$1,054		\$84,585	1.502	\$127,029	\$6.96
Provider Incentive Payment Adjustment							\$3.76
Total	\$4,903,366	\$43,694	(\$122,160)	\$4,824,900		\$6,033,678	\$334.12
Admin Cost Adjustment							\$28.13
Medallion II Capitation Rate							\$362.26

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 45 and Over							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$265,430	\$3,348	(\$17,573)	\$251,205	1.502	\$377,257	\$13.35
FQHC / RHC	\$64,756	\$561		\$65,317	1.119	\$73,070	\$2.59
Home Health	\$66,226	\$732		\$66,958	1.291	\$86,441	\$3.06
IP - Maternity	\$2,526	\$29	(\$154)	\$2,402	1.151	\$2,765	\$0.10
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$3,120,884	\$36,249	(\$189,772)	\$2,967,361	1.151	\$3,416,462	\$120.89
IP - Psych	\$206,308	\$845	(\$20,607)	\$186,546	1.135	\$211,695	\$7.49
Lab	\$130,574	\$1,647	(\$2,986)	\$129,235	1.502	\$194,085	\$6.87
OP - Emergency Room & Related	\$1,235,996	\$13,665		\$1,249,661	1.331	\$1,662,888	\$58.84
OP - Other	\$2,607,593	\$28,829	(\$581)	\$2,635,841	1.331	\$3,507,439	\$124.11
Pharmacy	\$3,286,643	\$29	(\$126,395)	\$3,160,278	1.282	\$4,050,373	\$143.33
Prof - Anesthesia	\$71,999	\$624		\$72,623	1.119	\$81,244	\$2.87
Prof - Child EPSDT	\$9,260	\$80		\$9,340	1.119	\$10,449	\$0.37
Prof - Evaluation & Management	\$1,109,514	\$9,618		\$1,119,132	1.119	\$1,251,981	\$44.30
Prof - Maternity	\$3,157	\$27		\$3,185	1.119	\$3,563	\$0.13
Prof - Other	\$584,936	\$5,071		\$590,007	1.119	\$660,044	\$23.36
Prof - Psych	\$101,240	\$878		\$102,117	1.119	\$114,239	\$4.04
Prof - Specialist	\$541,415	\$4,694		\$546,108	1.119	\$610,935	\$21.62
Prof - Vision	\$54,769	\$475		\$55,244	1.119	\$61,802	\$2.19
Radiology	\$310,985	\$3,922		\$314,907	1.502	\$472,925	\$16.73
Transportation/Ambulance	\$180,648	\$2,279		\$182,927	1.502	\$274,718	\$9.72
Provider Incentive Payment Adjustment							\$6.91
Total	\$13,954,858	\$113,603	(\$358,067)	\$13,710,394		\$17,124,375	\$612.86
Admin Cost Adjustment							\$51.60
Medallion II Capitation Rate							\$664.46

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

All Age Categories							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$4,182,959	\$56,037	(\$358,461)	\$3,880,534	1.303	\$5,054,965	\$2.49
FQHC / RHC	\$1,687,930	\$14,058		\$1,701,989	1.108	\$1,886,099	\$0.93
Home Health	\$476,764	\$4,906		\$481,670	1.271	\$612,014	\$0.30
IP - Maternity	\$24,354,331	\$590,963	(\$1,499,436)	\$23,445,858	1.151	\$26,984,738	\$13.30
IP - Newborn	\$24,129,127	\$1,447,657	(\$1,537,394)	\$24,039,390	1.150	\$27,641,382	\$13.62
IP - Other	\$38,282,907	\$1,543,209	(\$2,393,907)	\$37,432,209	1.150	\$43,063,304	\$21.22
IP - Psych	\$5,480,157	\$27,775	(\$547,910)	\$4,960,022	1.373	\$6,811,964	\$3.36
Lab	\$4,811,971	\$63,744	(\$110,096)	\$4,765,620	1.339	\$6,382,188	\$3.15
OP - Emergency Room & Related	\$41,993,214	\$420,499		\$42,413,713	1.294	\$54,902,492	\$27.06
OP - Other	\$45,248,353	\$453,471	(\$10,070)	\$45,691,755	1.295	\$59,158,988	\$29.15
Pharmacy	\$55,813,556	\$320	(\$2,146,420)	\$53,667,456	1.128	\$60,536,089	\$29.83
Prof - Anesthesia	\$3,551,243	\$29,594		\$3,580,837	1.108	\$3,968,712	\$1.96
Prof - Child EPSDT	\$3,019,468	\$23,977		\$3,043,446	1.096	\$3,336,137	\$1.64
Prof - Evaluation & Management	\$55,422,769	\$447,003		\$55,869,772	1.100	\$61,458,007	\$30.29
Prof - Maternity	\$12,527,465	\$106,058		\$12,633,523	1.112	\$14,053,848	\$6.93
Prof - Other	\$10,879,572	\$88,583		\$10,968,155	1.102	\$12,091,302	\$5.96
Prof - Psych	\$4,551,191	\$36,737		\$4,587,928	1.100	\$5,047,773	\$2.49
Prof - Specialist	\$9,190,009	\$75,845		\$9,265,854	1.106	\$10,246,471	\$5.05
Prof - Vision	\$2,371,842	\$19,055		\$2,390,897	1.099	\$2,627,725	\$1.29
Radiology	\$5,392,689	\$70,077		\$5,462,766	1.404	\$7,669,056	\$3.78
Transportation/Ambulance	\$7,799,740	\$104,647		\$7,904,387	1.296	\$10,242,109	\$5.05
Provider Incentive Payment Adjustment							\$2.38
Total	\$361,167,258	\$5,624,215	(\$8,603,695)	\$358,187,779		\$423,775,362	\$211.22
Admin Cost Adjustment							\$17.78
Medallion II Capitation Rate							\$229.00

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age Under 1							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$578,528	\$7,936	(\$54,693)	\$531,771	1.219	\$648,098	\$6.03
FQHC / RHC	\$539,860	\$4,267		\$544,127	1.095	\$595,825	\$5.54
Home Health	\$87,702	\$804		\$88,506	1.241	\$109,814	\$1.02
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$21,040,962	\$1,262,378	(\$1,340,631)	\$20,962,710	1.150	\$24,103,702	\$224.17
IP - Other	\$3,569,514	\$214,157	(\$227,433)	\$3,556,239	1.150	\$4,089,095	\$38.03
IP - Psych	\$100,163	\$553	(\$10,019)	\$90,697	1.485	\$134,717	\$1.25
Lab	\$298,410	\$4,093	(\$6,831)	\$295,672	1.219	\$360,352	\$3.35
OP - Emergency Room & Related	\$1,533,627	\$14,062		\$1,547,689	1.265	\$1,957,922	\$18.21
OP - Other	\$1,667,120	\$15,287	(\$371)	\$1,682,035	1.265	\$2,127,878	\$19.79
Pharmacy	\$2,091,292	\$8	(\$80,425)	\$2,010,875	1.042	\$2,094,512	\$19.48
Prof - Anesthesia	\$145,040	\$1,146		\$146,187	1.095	\$160,076	\$1.49
Prof - Child EPSDT	\$827,121	\$6,537		\$833,658	1.095	\$912,865	\$8.49
Prof - Evaluation & Management	\$9,666,572	\$76,400		\$9,742,972	1.095	\$10,668,667	\$99.22
Prof - Maternity	\$0	\$0		\$0	1.095	\$0	\$0.00
Prof - Other	\$1,776,382	\$14,040		\$1,790,421	1.095	\$1,960,532	\$18.23
Prof - Psych	\$90,332	\$714		\$91,046	1.095	\$99,697	\$0.93
Prof - Specialist	\$849,096	\$6,711		\$855,807	1.095	\$937,119	\$8.72
Prof - Vision	\$136,683	\$1,080		\$137,763	1.095	\$150,852	\$1.40
Radiology	\$182,887	\$2,509		\$185,396	1.219	\$225,952	\$2.10
Transportation/Ambulance	\$508,077	\$6,969		\$515,047	1.219	\$627,715	\$5.84
Provider Incentive Payment Adjustment							\$5.51
Total	\$45,689,367	\$1,639,653	(\$1,720,402)	\$45,608,619		\$51,965,389	\$488.80
Admin Cost Adjustment							\$41.15
Medallion II Capitation Rate							\$529.95

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 1-5							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$404,624	\$5,550	(\$38,252)	\$371,922	1.219	\$453,281	\$1.29
FQHC / RHC	\$626,570	\$4,952		\$631,523	1.095	\$691,525	\$1.96
Home Health	\$80,843	\$741		\$81,585	1.241	\$101,226	\$0.29
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$4,225,388	\$253,507	(\$269,222)	\$4,209,674	1.150	\$4,840,439	\$13.73
IP - Psych	\$335,991	\$1,856	(\$33,608)	\$304,239	1.485	\$451,899	\$1.28
Lab	\$738,592	\$10,132	(\$16,906)	\$731,817	1.219	\$891,904	\$2.53
OP - Emergency Room & Related	\$3,411,684	\$31,283		\$3,442,967	1.265	\$4,355,565	\$12.36
OP - Other	\$5,032,711	\$46,147	(\$1,119)	\$5,077,739	1.265	\$6,423,653	\$18.22
Pharmacy	\$5,693,133	\$22	(\$218,940)	\$5,474,215	1.042	\$5,701,899	\$16.18
Prof - Anesthesia	\$350,811	\$2,773		\$353,583	1.095	\$387,178	\$1.10
Prof - Child EPSDT	\$545,262	\$4,309		\$549,572	1.095	\$601,788	\$1.71
Prof - Evaluation & Management	\$8,987,342	\$71,032		\$9,058,373	1.095	\$9,919,024	\$28.14
Prof - Maternity	\$0	\$0		\$0	1.095	\$0	\$0.00
Prof - Other	\$1,624,390	\$12,838		\$1,637,229	1.095	\$1,792,785	\$5.09
Prof - Psych	\$406,698	\$3,214		\$409,912	1.095	\$448,859	\$1.27
Prof - Specialist	\$1,020,306	\$8,064		\$1,028,370	1.095	\$1,126,077	\$3.19
Prof - Vision	\$419,940	\$3,319		\$423,259	1.095	\$463,474	\$1.31
Radiology	\$188,980	\$2,592		\$191,572	1.219	\$233,479	\$0.66
Transportation/Ambulance	\$1,157,400	\$15,876		\$1,173,277	1.219	\$1,429,935	\$4.06
Provider Incentive Payment Adjustment							\$1.30
Total	\$35,250,666	\$478,210	(\$578,048)	\$35,150,828		\$40,313,989	\$115.68
Admin Cost Adjustment							\$9.74
Medallion II Capitation Rate							\$125.42

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 6-14							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$434,028	\$5,954	(\$39,932)	\$400,049	1.219	\$487,561	\$1.13
FQHC / RHC	\$489,668	\$3,870		\$493,538	1.095	\$540,430	\$1.25
Home Health	\$87,161	\$799		\$87,960	1.241	\$109,136	\$0.25
IP - Maternity	\$23,257	\$1,395	(\$1,482)	\$23,170	1.150	\$26,642	\$0.06
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$3,195,914	\$191,743	(\$203,629)	\$3,184,028	1.150	\$3,661,113	\$8.46
IP - Psych	\$870,696	\$4,811	(\$87,092)	\$788,415	1.485	\$1,171,064	\$2.71
Lab	\$757,070	\$10,385	(\$17,329)	\$750,125	1.219	\$914,218	\$2.11
OP - Emergency Room & Related	\$3,290,661	\$30,173		\$3,320,834	1.265	\$4,201,060	\$9.71
OP - Other	\$3,939,167	\$36,120	(\$876)	\$3,974,411	1.265	\$5,027,875	\$11.62
Pharmacy	\$11,653,215	\$45	(\$448,146)	\$11,205,114	1.042	\$11,671,158	\$26.97
Prof - Anesthesia	\$205,597	\$1,625		\$207,222	1.095	\$226,910	\$0.52
Prof - Child EPSDT	\$109,137	\$863		\$110,000	1.095	\$120,451	\$0.28
Prof - Evaluation & Management	\$6,732,677	\$53,212		\$6,785,889	1.095	\$7,430,627	\$17.17
Prof - Maternity	\$16,396	\$130		\$16,526	1.095	\$18,096	\$0.04
Prof - Other	\$1,219,888	\$9,641		\$1,229,530	1.095	\$1,346,349	\$3.11
Prof - Psych	\$1,172,557	\$9,267		\$1,181,824	1.095	\$1,294,111	\$2.99
Prof - Specialist	\$909,424	\$7,188		\$916,612	1.095	\$1,003,701	\$2.32
Prof - Vision	\$524,548	\$4,146		\$528,694	1.095	\$578,926	\$1.34
Radiology	\$318,305	\$4,366		\$322,671	1.219	\$393,257	\$0.91
Transportation/Ambulance	\$1,290,365	\$17,700		\$1,308,065	1.219	\$1,594,209	\$3.68
Provider Incentive Payment Adjustment							\$1.10
Total	\$37,239,730	\$393,434	(\$798,487)	\$36,834,677		\$41,816,895	\$97.74
Admin Cost Adjustment							\$8.23
Medallion II Capitation Rate							\$105.97

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Female							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$79,229	\$1,087	(\$7,289)	\$73,027	1.219	\$89,001	\$0.90
FQHC / RHC	\$469,331	\$3,709		\$473,040	1.095	\$517,985	\$5.24
Home Health	\$79,694	\$731		\$80,424	1.241	\$99,786	\$1.01
IP - Maternity	\$4,566,140	\$273,951	(\$290,933)	\$4,549,158	1.150	\$5,230,791	\$52.92
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,127,702	\$67,658	(\$71,852)	\$1,123,508	1.150	\$1,291,851	\$13.07
IP - Psych	\$389,885	\$2,154	(\$38,999)	\$353,040	1.485	\$524,385	\$5.31
Lab	\$644,810	\$8,845	(\$14,760)	\$638,895	1.219	\$778,655	\$7.88
OP - Emergency Room & Related	\$1,959,780	\$17,970		\$1,977,750	1.265	\$2,501,975	\$25.31
OP - Other	\$2,393,467	\$21,947	(\$532)	\$2,414,882	1.265	\$3,054,974	\$30.91
Pharmacy	\$3,053,462	\$12	(\$117,427)	\$2,936,047	1.042	\$3,058,163	\$30.94
Prof - Anesthesia	\$348,365	\$2,753		\$351,118	1.095	\$384,478	\$3.89
Prof - Child EPSDT	\$92,244	\$729		\$92,973	1.095	\$101,806	\$1.03
Prof - Evaluation & Management	\$2,560,859	\$20,240		\$2,581,099	1.095	\$2,826,334	\$28.60
Prof - Maternity	\$2,617,665	\$20,689		\$2,638,354	1.095	\$2,889,028	\$29.23
Prof - Other	\$566,709	\$4,479		\$571,188	1.095	\$625,457	\$6.33
Prof - Psych	\$253,904	\$2,007		\$255,911	1.095	\$280,226	\$2.84
Prof - Specialist	\$431,425	\$3,410		\$434,835	1.095	\$476,149	\$4.82
Prof - Vision	\$122,119	\$965		\$123,085	1.095	\$134,779	\$1.36
Radiology	\$574,464	\$7,880		\$582,344	1.219	\$709,734	\$7.18
Transportation/Ambulance	\$409,383	\$5,616		\$414,999	1.219	\$505,781	\$5.12
Provider Incentive Payment Adjustment							\$3.01
Total	\$22,740,636	\$466,831	(\$541,791)	\$22,665,675		\$26,081,339	\$266.88
Admin Cost Adjustment							\$22.47
Medallion II Capitation Rate							\$289.35

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Female							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$634,214	\$7,999	(\$41,988)	\$600,225	1.502	\$901,412	\$5.64
FQHC / RHC	\$1,143,272	\$9,911		\$1,153,183	1.119	\$1,290,073	\$8.07
Home Health	\$314,641	\$3,479		\$318,120	1.291	\$410,685	\$2.57
IP - Maternity	\$12,383,058	\$143,827	(\$752,978)	\$11,773,907	1.151	\$13,555,852	\$84.83
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$7,595,394	\$88,219	(\$461,854)	\$7,221,759	1.151	\$8,314,750	\$52.03
IP - Psych	\$703,532	\$2,882	(\$70,272)	\$636,142	1.135	\$721,904	\$4.52
Lab	\$1,509,885	\$19,044	(\$34,524)	\$1,494,405	1.502	\$2,244,284	\$14.04
OP - Emergency Room & Related	\$6,271,651	\$69,338		\$6,340,988	1.331	\$8,437,773	\$52.80
OP - Other	\$9,465,182	\$104,644	(\$2,109)	\$9,567,717	1.331	\$12,731,490	\$79.67
Pharmacy	\$10,363,092	\$93	(\$398,534)	\$9,964,651	1.282	\$12,771,204	\$79.92
Prof - Anesthesia	\$986,172	\$8,549		\$994,721	1.119	\$1,112,801	\$6.96
Prof - Child EPSDT	\$150,257	\$1,303		\$151,560	1.119	\$169,551	\$1.06
Prof - Evaluation & Management	\$5,698,407	\$49,400		\$5,747,807	1.119	\$6,430,109	\$40.24
Prof - Maternity	\$6,450,622	\$55,921		\$6,506,543	1.119	\$7,278,911	\$45.55
Prof - Other	\$1,600,878	\$13,878		\$1,614,757	1.119	\$1,806,439	\$11.30
Prof - Psych	\$463,088	\$4,015		\$467,102	1.119	\$522,550	\$3.27
Prof - Specialist	\$2,361,022	\$20,468		\$2,381,490	1.119	\$2,664,189	\$16.67
Prof - Vision	\$206,093	\$1,787		\$207,879	1.119	\$232,556	\$1.46
Radiology	\$1,910,464	\$24,097		\$1,934,561	1.502	\$2,905,306	\$18.18
Transportation/Ambulance	\$972,849	\$12,271		\$985,120	1.502	\$1,479,444	\$9.26
Provider Incentive Payment Adjustment							\$6.13
Total	\$71,183,771	\$641,124	(\$1,762,259)	\$70,062,636		\$85,981,284	\$544.20
Admin Cost Adjustment							\$45.82
Medallion II Capitation Rate							\$590.02

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Male							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$95,815	\$1,314	(\$8,815)	\$88,314	1.219	\$107,633	\$1.49
FQHC / RHC	\$85,802	\$678		\$86,480	1.095	\$94,697	\$1.31
Home Health	\$14,938	\$137		\$15,075	1.241	\$18,705	\$0.26
IP - Maternity	\$1,851	\$111	(\$118)	\$1,844	1.150	\$2,120	\$0.03
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$696,329	\$41,777	(\$44,367)	\$693,739	1.150	\$797,687	\$11.07
IP - Psych	\$241,598	\$1,335	(\$24,166)	\$218,767	1.485	\$324,943	\$4.51
Lab	\$118,765	\$1,629	(\$2,719)	\$117,676	1.219	\$143,418	\$1.99
OP - Emergency Room & Related	\$873,187	\$8,007		\$881,194	1.265	\$1,114,765	\$15.47
OP - Other	\$883,889	\$8,105	(\$197)	\$891,797	1.265	\$1,128,179	\$15.65
Pharmacy	\$1,997,415	\$8	(\$76,814)	\$1,920,608	1.042	\$2,000,491	\$27.75
Prof - Anesthesia	\$32,384	\$256		\$32,640	1.095	\$35,741	\$0.50
Prof - Child EPSDT	\$8,890	\$70		\$8,960	1.095	\$9,812	\$0.14
Prof - Evaluation & Management	\$1,006,630	\$7,956		\$1,014,586	1.095	\$1,110,984	\$15.41
Prof - Maternity	\$0	\$0		\$0	1.095	\$0	\$0.00
Prof - Other	\$161,930	\$1,280		\$163,210	1.095	\$178,717	\$2.48
Prof - Psych	\$168,317	\$1,330		\$169,647	1.095	\$185,765	\$2.58
Prof - Specialist	\$230,818	\$1,824		\$232,642	1.095	\$254,746	\$3.53
Prof - Vision	\$86,076	\$680		\$86,756	1.095	\$94,999	\$1.32
Radiology	\$100,337	\$1,376		\$101,713	1.219	\$123,964	\$1.72
Transportation/Ambulance	\$250,202	\$3,432		\$253,634	1.219	\$309,118	\$4.29
Provider Incentive Payment Adjustment							\$1.27
Total	\$7,055,174	\$81,306	(\$157,196)	\$6,979,284		\$8,036,481	\$112.77
Admin Cost Adjustment							\$9.49
Medallion II Capitation Rate							\$122.26

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Male							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$133,278	\$1,681	(\$8,824)	\$126,136	1.502	\$189,429	\$12.10
FQHC / RHC	\$43,120	\$374		\$43,493	1.119	\$48,656	\$3.11
Home Health	\$13,849	\$153		\$14,002	1.291	\$18,076	\$1.15
IP - Maternity	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,529,152	\$17,761	(\$92,983)	\$1,453,929	1.151	\$1,673,977	\$106.93
IP - Psych	\$123,247	\$505	(\$12,310)	\$111,442	1.135	\$126,466	\$8.08
Lab	\$73,224	\$924	(\$1,674)	\$72,474	1.502	\$108,840	\$6.95
OP - Emergency Room & Related	\$642,599	\$7,104		\$649,703	1.331	\$864,542	\$55.22
OP - Other	\$827,630	\$9,150	(\$184)	\$836,596	1.331	\$1,113,234	\$71.11
Pharmacy	\$1,266,608	\$11	(\$48,710)	\$1,217,909	1.282	\$1,560,935	\$99.71
Prof - Anesthesia	\$34,248	\$297		\$34,545	1.119	\$38,646	\$2.47
Prof - Child EPSDT	\$2,282	\$20		\$2,301	1.119	\$2,575	\$0.16
Prof - Evaluation & Management	\$471,456	\$4,087		\$475,543	1.119	\$531,993	\$33.98
Prof - Maternity	\$0	\$0		\$0	1.119	\$0	\$0.00
Prof - Other	\$95,893	\$831		\$96,725	1.119	\$108,206	\$6.91
Prof - Psych	\$38,518	\$334		\$38,852	1.119	\$43,464	\$2.78
Prof - Specialist	\$234,305	\$2,031		\$236,336	1.119	\$264,391	\$16.89
Prof - Vision	\$21,315	\$185		\$21,499	1.119	\$24,051	\$1.54
Radiology	\$104,860	\$1,323		\$106,182	1.502	\$159,463	\$10.19
Transportation/Ambulance	\$82,896	\$1,046		\$83,942	1.502	\$126,063	\$8.05
Provider Incentive Payment Adjustment							\$5.10
Total	\$5,738,480	\$47,816	(\$164,686)	\$5,621,610		\$7,003,009	\$452.43
Admin Cost Adjustment							\$38.09
Medallion II Capitation Rate							\$490.52

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 45 and Over							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$180,369	\$2,275	(\$11,941)	\$170,703	1.502	\$256,360	\$16.49
FQHC / RHC	\$96,783	\$839		\$97,622	1.119	\$109,210	\$7.03
Home Health	\$34,076	\$377		\$34,453	1.291	\$44,478	\$2.86
IP - Maternity	\$8,835	\$103	(\$537)	\$8,400	1.151	\$9,671	\$0.62
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,653,670	\$19,207	(\$100,555)	\$1,572,322	1.151	\$1,810,288	\$116.47
IP - Psych	\$128,337	\$526	(\$12,819)	\$116,044	1.135	\$131,688	\$8.47
Lab	\$131,395	\$1,657	(\$3,004)	\$130,048	1.502	\$195,305	\$12.57
OP - Emergency Room & Related	\$491,282	\$5,431		\$496,714	1.331	\$660,963	\$42.52
OP - Other	\$1,698,113	\$18,774	(\$378)	\$1,716,509	1.331	\$2,284,109	\$146.95
Pharmacy	\$2,316,618	\$21	(\$89,090)	\$2,227,549	1.282	\$2,854,940	\$183.68
Prof - Anesthesia	\$51,665	\$448		\$52,113	1.119	\$58,299	\$3.75
Prof - Child EPSDT	\$12,062	\$105		\$12,166	1.119	\$13,610	\$0.88
Prof - Evaluation & Management	\$631,043	\$5,471		\$636,513	1.119	\$712,072	\$45.81
Prof - Maternity	\$3,379	\$29		\$3,408	1.119	\$3,812	\$0.25
Prof - Other	\$314,523	\$2,727		\$317,250	1.119	\$354,909	\$22.83
Prof - Psych	\$69,865	\$606		\$70,470	1.119	\$78,835	\$5.07
Prof - Specialist	\$396,729	\$3,439		\$400,168	1.119	\$447,670	\$28.80
Prof - Vision	\$32,717	\$284		\$33,001	1.119	\$36,918	\$2.38
Radiology	\$191,927	\$2,421		\$194,348	1.502	\$291,870	\$18.78
Transportation/Ambulance	\$112,559	\$1,420		\$113,979	1.502	\$171,172	\$11.01
Provider Incentive Payment Adjustment							\$7.72
Total	\$8,555,945	\$66,158	(\$218,325)	\$8,403,777		\$10,526,181	\$684.95
Admin Cost Adjustment							\$57.67
Medallion II Capitation Rate							\$742.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

All Age Categories							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$2,540,085	\$33,796	(\$211,735)	\$2,362,146	1.326	\$3,132,776	\$2.50
FQHC / RHC	\$3,494,406	\$28,600		\$3,523,006	1.104	\$3,888,401	\$3.10
Home Health	\$712,905	\$7,221		\$720,126	1.266	\$911,905	\$0.73
IP - Maternity	\$16,983,140	\$419,387	(\$1,046,048)	\$16,356,479	1.151	\$18,825,076	\$15.00
IP - Newborn	\$21,040,962	\$1,262,378	(\$1,340,631)	\$20,962,710	1.150	\$24,103,702	\$19.21
IP - Other	\$23,593,062	\$894,029	(\$1,471,894)	\$23,015,197	1.151	\$26,479,201	\$21.11
IP - Psych	\$2,893,449	\$14,622	(\$289,285)	\$2,618,786	1.370	\$3,587,066	\$2.86
Lab	\$4,272,151	\$56,709	(\$97,747)	\$4,231,112	1.332	\$5,636,977	\$4.49
OP - Emergency Room & Related	\$18,474,470	\$183,369		\$18,657,839	1.291	\$24,094,566	\$19.20
OP - Other	\$25,907,280	\$260,173	(\$5,766)	\$26,161,687	1.295	\$33,891,394	\$27.01
Pharmacy	\$38,434,835	\$221	(\$1,478,087)	\$36,956,968	1.129	\$41,713,302	\$33.25
Prof - Anesthesia	\$2,154,281	\$17,847		\$2,172,128	1.107	\$2,404,128	\$1.92
Prof - Child EPSDT	\$1,747,254	\$13,935		\$1,761,189	1.097	\$1,932,457	\$1.54
Prof - Evaluation & Management	\$35,754,986	\$287,797		\$36,042,783	1.100	\$39,629,810	\$31.59
Prof - Maternity	\$9,088,062	\$76,769		\$9,164,831	1.112	\$10,189,848	\$8.12
Prof - Other	\$7,360,594	\$59,714		\$7,420,308	1.101	\$8,173,394	\$6.51
Prof - Psych	\$2,663,278	\$21,487		\$2,684,765	1.100	\$2,953,507	\$2.35
Prof - Specialist	\$6,433,125	\$53,135		\$6,486,260	1.106	\$7,174,041	\$5.72
Prof - Vision	\$1,549,491	\$12,446		\$1,561,936	1.099	\$1,716,555	\$1.37
Radiology	\$3,572,223	\$46,564		\$3,618,787	1.394	\$5,043,024	\$4.02
Transportation/Ambulance	\$4,783,732	\$64,330		\$4,848,062	1.288	\$6,243,436	\$4.98
Provider Incentive Payment Adjustment							\$2.47
Total	\$233,453,769	\$3,814,531	(\$5,941,194)	\$231,327,107		\$271,724,567	\$219.05
Admin Cost Adjustment							\$18.44
Medallion II Capitation Rate							\$237.49

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age Under 1							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$696,166	\$9,550	(\$65,814)	\$639,901	1.219	\$779,882	\$4.24
FQHC / RHC	\$294,054	\$2,324		\$296,378	1.095	\$324,538	\$1.77
Home Health	\$131,384	\$1,205		\$132,589	1.241	\$164,509	\$0.89
IP - Maternity	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Newborn	\$33,583,202	\$2,014,865	(\$2,139,763)	\$33,458,303	1.150	\$38,471,599	\$209.29
IP - Other	\$5,499,783	\$329,966	(\$350,420)	\$5,479,329	1.150	\$6,300,335	\$34.27
IP - Psych	\$206,321	\$1,140	(\$20,637)	\$186,823	1.485	\$277,496	\$1.51
Lab	\$360,797	\$4,949	(\$8,259)	\$357,487	1.219	\$435,689	\$2.37
OP - Emergency Room & Related	\$3,732,622	\$34,226		\$3,766,848	1.265	\$4,765,295	\$25.92
OP - Other	\$3,477,148	\$31,883	(\$773)	\$3,508,258	1.265	\$4,438,162	\$24.14
Pharmacy	\$3,171,879	\$12	(\$121,981)	\$3,049,911	1.042	\$3,176,763	\$17.28
Prof - Anesthesia	\$299,899	\$2,370		\$302,270	1.095	\$330,989	\$1.80
Prof - Child EPSDT	\$1,775,118	\$14,030		\$1,789,148	1.095	\$1,959,138	\$10.66
Prof - Evaluation & Management	\$17,445,955	\$137,885		\$17,583,840	1.095	\$19,254,509	\$104.75
Prof - Maternity	\$996	\$8		\$1,004	1.095	\$1,100	\$0.01
Prof - Other	\$2,368,810	\$18,722		\$2,387,532	1.095	\$2,614,375	\$14.22
Prof - Psych	\$187,637	\$1,483		\$189,120	1.095	\$207,089	\$1.13
Prof - Specialist	\$1,522,611	\$12,034		\$1,534,645	1.095	\$1,680,454	\$9.14
Prof - Vision	\$228,418	\$1,805		\$230,224	1.095	\$252,098	\$1.37
Radiology	\$248,061	\$3,403		\$251,463	1.219	\$306,472	\$1.67
Transportation/Ambulance	\$606,498	\$8,320		\$614,818	1.219	\$749,311	\$4.08
Provider Incentive Payment Adjustment							\$5.36
Total	\$75,837,359	\$2,630,180	(\$2,707,648)	\$75,759,891		\$86,489,802	\$475.87
Admin Cost Adjustment							\$40.07
Medallion II Capitation Rate							\$515.94

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 1-5							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$829,220	\$11,375	(\$78,393)	\$762,202	1.219	\$928,936	\$1.46
FQHC / RHC	\$341,643	\$2,700		\$344,343	1.095	\$377,060	\$0.59
Home Health	\$41,258	\$378		\$41,637	1.241	\$51,661	\$0.08
IP - Maternity	\$3,934	\$236	(\$251)	\$3,920	1.150	\$4,507	\$0.01
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$6,171,381	\$370,260	(\$393,211)	\$6,148,429	1.150	\$7,069,692	\$11.13
IP - Psych	\$780,864	\$4,315	(\$78,107)	\$707,072	1.485	\$1,050,243	\$1.65
Lab	\$1,264,926	\$17,351	(\$28,954)	\$1,253,323	1.219	\$1,527,491	\$2.41
OP - Emergency Room & Related	\$8,551,603	\$78,413		\$8,630,017	1.265	\$10,917,503	\$17.19
OP - Other	\$8,818,609	\$80,862	(\$1,961)	\$8,897,510	1.265	\$11,255,898	\$17.73
Pharmacy	\$8,826,142	\$34	(\$339,426)	\$8,486,750	1.042	\$8,839,732	\$13.92
Prof - Anesthesia	\$553,189	\$4,372		\$557,562	1.095	\$610,536	\$0.96
Prof - Child EPSDT	\$1,238,275	\$9,787		\$1,248,062	1.095	\$1,366,642	\$2.15
Prof - Evaluation & Management	\$15,787,365	\$124,776		\$15,912,141	1.095	\$17,423,979	\$27.44
Prof - Maternity	\$2,050	\$16		\$2,066	1.095	\$2,263	\$0.00
Prof - Other	\$4,347,007	\$34,357		\$4,381,363	1.095	\$4,797,644	\$7.56
Prof - Psych	\$881,768	\$6,969		\$888,737	1.095	\$973,177	\$1.53
Prof - Specialist	\$1,761,672	\$13,923		\$1,775,595	1.095	\$1,944,298	\$3.06
Prof - Vision	\$718,138	\$5,676		\$723,814	1.095	\$792,585	\$1.25
Radiology	\$288,055	\$3,951		\$292,006	1.219	\$355,883	\$0.56
Transportation/Ambulance	\$1,886,096	\$25,872		\$1,911,968	1.219	\$2,330,218	\$3.67
Provider Incentive Payment Adjustment							\$1.30
Total	\$63,093,197	\$795,624	(\$920,303)	\$62,968,517		\$72,619,948	\$115.67
Admin Cost Adjustment							\$9.74
Medallion II Capitation Rate							\$125.41

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 6-14							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$785,602	\$10,776	(\$72,278)	\$724,101	1.219	\$882,500	\$1.05
FQHC / RHC	\$306,164	\$2,420		\$308,583	1.095	\$337,902	\$0.40
Home Health	\$37,480	\$344		\$37,824	1.241	\$46,929	\$0.06
IP - Maternity	\$145,104	\$8,706	(\$9,245)	\$144,564	1.150	\$166,225	\$0.20
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$4,041,759	\$242,490	(\$257,522)	\$4,026,728	1.150	\$4,630,081	\$5.52
IP - Psych	\$1,957,790	\$10,817	(\$195,830)	\$1,772,777	1.485	\$2,633,178	\$3.14
Lab	\$1,395,574	\$19,144	(\$31,945)	\$1,382,773	1.219	\$1,685,259	\$2.01
OP - Emergency Room & Related	\$7,278,817	\$66,743		\$7,345,559	1.265	\$9,292,585	\$11.08
OP - Other	\$8,452,486	\$77,504	(\$1,879)	\$8,528,111	1.265	\$10,788,586	\$12.87
Pharmacy	\$20,468,190	\$80	(\$787,143)	\$19,681,126	1.042	\$20,499,706	\$24.45
Prof - Anesthesia	\$384,277	\$3,037		\$387,315	1.095	\$424,114	\$0.51
Prof - Child EPSDT	\$379,430	\$2,999		\$382,429	1.095	\$418,764	\$0.50
Prof - Evaluation & Management	\$12,455,592	\$98,443		\$12,554,035	1.095	\$13,746,814	\$16.40
Prof - Maternity	\$72,272	\$571		\$72,843	1.095	\$79,764	\$0.10
Prof - Other	\$3,931,970	\$31,076		\$3,963,047	1.095	\$4,339,582	\$5.18
Prof - Psych	\$2,405,313	\$19,010		\$2,424,324	1.095	\$2,654,663	\$3.17
Prof - Specialist	\$1,686,505	\$13,329		\$1,699,834	1.095	\$1,861,338	\$2.22
Prof - Vision	\$995,955	\$7,872		\$1,003,827	1.095	\$1,099,202	\$1.31
Radiology	\$486,675	\$6,676		\$493,351	1.219	\$601,273	\$0.72
Transportation/Ambulance	\$2,461,379	\$33,764		\$2,495,143	1.219	\$3,040,964	\$3.63
Provider Incentive Payment Adjustment							\$1.08
Total	\$70,128,334	\$655,801	(\$1,355,843)	\$69,428,292		\$79,229,429	\$95.58
Admin Cost Adjustment							\$8.05
Medallion II Capitation Rate							\$103.62

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Female							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$171,251	\$2,349	(\$15,756)	\$157,844	1.219	\$192,373	\$1.03
FQHC / RHC	\$320,737	\$2,535		\$323,272	1.095	\$353,987	\$1.90
Home Health	\$43,531	\$399		\$43,930	1.241	\$54,506	\$0.29
IP - Maternity	\$7,616,000	\$456,931	(\$485,256)	\$7,587,676	1.150	\$8,724,591	\$46.84
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,419,009	\$85,189	(\$90,470)	\$1,414,628	1.150	\$1,626,592	\$8.73
IP - Psych	\$480,302	\$2,654	(\$48,043)	\$434,913	1.485	\$645,994	\$3.47
Lab	\$567,301	\$7,782	(\$12,986)	\$562,098	1.219	\$685,058	\$3.68
OP - Emergency Room & Related	\$4,815,772	\$44,158		\$4,859,930	1.265	\$6,148,111	\$33.01
OP - Other	\$3,704,472	\$33,968	(\$824)	\$3,737,616	1.265	\$4,728,315	\$25.39
Pharmacy	\$4,484,283	\$18	(\$172,452)	\$4,311,849	1.042	\$4,491,188	\$24.11
Prof - Anesthesia	\$872,692	\$6,897		\$879,589	1.095	\$963,161	\$5.17
Prof - Child EPSDT	\$209,628	\$1,657		\$211,285	1.095	\$231,359	\$1.24
Prof - Evaluation & Management	\$3,931,866	\$31,076		\$3,962,942	1.095	\$4,339,468	\$23.30
Prof - Maternity	\$4,252,039	\$33,606		\$4,285,646	1.095	\$4,692,832	\$25.19
Prof - Other	\$978,704	\$7,735		\$986,439	1.095	\$1,080,163	\$5.80
Prof - Psych	\$437,832	\$3,460		\$441,292	1.095	\$483,220	\$2.59
Prof - Specialist	\$711,837	\$5,626		\$717,463	1.095	\$785,631	\$4.22
Prof - Vision	\$221,174	\$1,748		\$222,922	1.095	\$244,102	\$1.31
Radiology	\$1,031,622	\$14,151		\$1,045,773	1.219	\$1,274,539	\$6.84
Transportation/Ambulance	\$643,370	\$8,825		\$652,195	1.219	\$794,865	\$4.27
Provider Incentive Payment Adjustment							\$2.60
Total	\$36,914,323	\$750,765	(\$825,785)	\$36,839,303		\$42,540,054	\$230.99
Admin Cost Adjustment							\$19.45
Medallion II Capitation Rate							\$250.44

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Female							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,345,952	\$16,977	(\$89,109)	\$1,273,820	1.502	\$1,913,011	\$5.25
FQHC / RHC	\$1,271,743	\$11,025		\$1,282,768	1.119	\$1,435,041	\$3.94
Home Health	\$225,666	\$2,495		\$228,161	1.291	\$294,551	\$0.81
IP - Maternity	\$23,589,339	\$273,986	(\$1,434,400)	\$22,428,925	1.151	\$25,823,475	\$70.93
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$10,238,053	\$118,913	(\$622,547)	\$9,734,420	1.151	\$11,207,695	\$30.78
IP - Psych	\$1,283,135	\$5,256	(\$128,165)	\$1,160,227	1.135	\$1,316,643	\$3.62
Lab	\$1,397,401	\$17,625	(\$31,952)	\$1,383,075	1.502	\$2,077,090	\$5.71
OP - Emergency Room & Related	\$17,950,172	\$198,452		\$18,148,624	1.331	\$24,149,860	\$66.33
OP - Other	\$17,178,916	\$189,925	(\$3,827)	\$17,365,014	1.331	\$23,107,133	\$63.47
Pharmacy	\$17,374,329	\$156	(\$668,166)	\$16,706,319	1.282	\$21,411,669	\$58.81
Prof - Anesthesia	\$2,841,500	\$24,633		\$2,866,133	1.119	\$3,206,362	\$8.81
Prof - Child EPSDT	\$288,180	\$2,498		\$290,678	1.119	\$325,184	\$0.89
Prof - Evaluation & Management	\$11,007,227	\$95,423		\$11,102,650	1.119	\$12,420,606	\$34.12
Prof - Maternity	\$13,232,272	\$114,712		\$13,346,984	1.119	\$14,931,357	\$41.01
Prof - Other	\$4,058,702	\$35,185		\$4,093,887	1.119	\$4,579,858	\$12.58
Prof - Psych	\$1,039,843	\$9,015		\$1,048,858	1.119	\$1,173,364	\$3.22
Prof - Specialist	\$4,608,472	\$39,951		\$4,648,424	1.119	\$5,200,221	\$14.28
Prof - Vision	\$423,677	\$3,673		\$427,350	1.119	\$478,079	\$1.31
Radiology	\$4,278,964	\$53,971		\$4,332,935	1.502	\$6,507,163	\$17.87
Transportation/Ambulance	\$1,390,357	\$17,537		\$1,407,893	1.502	\$2,114,362	\$5.81
Provider Incentive Payment Adjustment							\$5.12
Total	\$135,023,903	\$1,231,407	(\$2,978,165)	\$133,277,144		\$163,672,724	\$454.69
Admin Cost Adjustment							\$38.28
Medallion II Capitation Rate							\$492.97

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 15-20 Male							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$230,221	\$3,158	(\$21,181)	\$212,198	1.219	\$258,616	\$1.94
FQHC / RHC	\$50,759	\$401		\$51,161	1.095	\$56,021	\$0.42
Home Health	\$23,687	\$217		\$23,905	1.241	\$29,660	\$0.22
IP - Maternity	\$4,339	\$260	(\$276)	\$4,323	1.150	\$4,971	\$0.04
IP - Newborn	\$0	\$0		\$0	1.150	\$0	\$0.00
IP - Other	\$1,665,199	\$99,906	(\$106,099)	\$1,659,006	1.150	\$1,907,586	\$14.30
IP - Psych	\$372,215	\$2,057	(\$37,231)	\$337,040	1.485	\$500,620	\$3.75
Lab	\$203,908	\$2,797	(\$4,667)	\$202,038	1.219	\$246,234	\$1.85
OP - Emergency Room & Related	\$1,819,886	\$16,687		\$1,836,573	1.265	\$2,323,379	\$17.42
OP - Other	\$2,076,871	\$19,044	(\$462)	\$2,095,453	1.265	\$2,650,878	\$19.87
Pharmacy	\$3,491,028	\$14	(\$134,254)	\$3,356,787	1.042	\$3,496,403	\$26.21
Prof - Anesthesia	\$84,407	\$667		\$85,074	1.095	\$93,157	\$0.70
Prof - Child EPSDT	\$30,485	\$241		\$30,726	1.095	\$33,645	\$0.25
Prof - Evaluation & Management	\$1,719,163	\$13,587		\$1,732,750	1.095	\$1,897,382	\$14.22
Prof - Maternity	\$2,497	\$20		\$2,517	1.095	\$2,756	\$0.02
Prof - Other	\$1,449,507	\$11,456		\$1,460,964	1.095	\$1,599,772	\$11.99
Prof - Psych	\$340,510	\$2,691		\$343,201	1.095	\$375,809	\$2.82
Prof - Specialist	\$466,582	\$3,688		\$470,270	1.095	\$514,951	\$3.86
Prof - Vision	\$154,986	\$1,225		\$156,211	1.095	\$171,053	\$1.28
Radiology	\$146,771	\$2,013		\$148,784	1.219	\$181,331	\$1.36
Transportation/Ambulance	\$411,001	\$5,638		\$416,639	1.219	\$507,780	\$3.81
Provider Incentive Payment Adjustment							\$1.44
Total	\$14,744,023	\$185,767	(\$304,171)	\$14,625,619		\$16,852,004	\$127.76
Admin Cost Adjustment							\$10.76
Medallion II Capitation Rate							\$138.51

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 21-44 Male							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$167,261	\$2,110	(\$11,074)	\$158,297	1.502	\$237,729	\$14.58
FQHC / RHC	\$18,486	\$160		\$18,647	1.119	\$20,860	\$1.28
Home Health	\$12,159	\$134		\$12,293	1.291	\$15,870	\$0.97
IP - Maternity	\$1,599	\$19	(\$97)	\$1,520	1.151	\$1,750	\$0.11
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$1,181,504	\$13,723	(\$71,844)	\$1,123,383	1.151	\$1,293,403	\$79.35
IP - Psych	\$88,945	\$364	(\$8,884)	\$80,425	1.135	\$91,268	\$5.60
Lab	\$32,037	\$404	(\$733)	\$31,708	1.502	\$47,619	\$2.92
OP - Emergency Room & Related	\$693,400	\$7,666		\$701,066	1.331	\$932,888	\$57.23
OP - Other	\$780,650	\$8,631	(\$174)	\$789,106	1.331	\$1,050,042	\$64.42
Pharmacy	\$895,484	\$8	(\$34,438)	\$861,054	1.282	\$1,103,571	\$67.70
Prof - Anesthesia	\$36,631	\$318		\$36,948	1.119	\$41,334	\$2.54
Prof - Child EPSDT	\$2,678	\$23		\$2,702	1.119	\$3,022	\$0.19
Prof - Evaluation & Management	\$445,483	\$3,862		\$449,345	1.119	\$502,685	\$30.84
Prof - Maternity	\$0	\$0		\$0	1.119	\$0	\$0.00
Prof - Other	\$139,733	\$1,211		\$140,944	1.119	\$157,675	\$9.67
Prof - Psych	\$38,512	\$334		\$38,846	1.119	\$43,457	\$2.67
Prof - Specialist	\$189,237	\$1,641		\$190,877	1.119	\$213,536	\$13.10
Prof - Vision	\$26,594	\$231		\$26,824	1.119	\$30,009	\$1.84
Radiology	\$95,146	\$1,200		\$96,346	1.502	\$144,691	\$8.88
Transportation/Ambulance	\$57,745	\$728		\$58,473	1.502	\$87,814	\$5.39
Provider Incentive Payment Adjustment							\$4.21
Total	\$4,903,282	\$42,766	(\$127,243)	\$4,818,805		\$6,019,225	\$373.49
Admin Cost Adjustment							\$31.45
Medallion II Capitation Rate							\$404.93

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

Age 45 and Over							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$435,245	\$5,490	(\$28,815)	\$411,919	1.502	\$618,617	\$21.00
FQHC / RHC	\$187,618	\$1,626		\$189,245	1.119	\$211,709	\$7.19
Home Health	\$64,760	\$716		\$65,476	1.291	\$84,528	\$2.87
IP - Maternity	\$10,832	\$126	(\$659)	\$10,299	1.151	\$11,858	\$0.40
IP - Newborn	\$0	\$0		\$0	1.151	\$0	\$0.00
IP - Other	\$2,949,865	\$34,262	(\$179,373)	\$2,804,754	1.151	\$3,229,245	\$109.63
IP - Psych	\$99,537	\$408	(\$9,942)	\$90,003	1.135	\$102,137	\$3.47
Lab	\$110,980	\$1,400	(\$2,538)	\$109,842	1.502	\$164,960	\$5.60
OP - Emergency Room & Related	\$1,442,600	\$15,949		\$1,458,549	1.331	\$1,940,849	\$65.89
OP - Other	\$3,256,994	\$36,008	(\$726)	\$3,292,277	1.331	\$4,380,940	\$148.73
Pharmacy	\$4,005,578	\$36	(\$154,043)	\$3,851,571	1.282	\$4,936,370	\$167.58
Prof - Anesthesia	\$119,943	\$1,040		\$120,983	1.119	\$135,344	\$4.59
Prof - Child EPSDT	\$13,463	\$117		\$13,580	1.119	\$15,192	\$0.52
Prof - Evaluation & Management	\$1,443,018	\$12,510		\$1,455,528	1.119	\$1,628,308	\$55.28
Prof - Maternity	\$1,665	\$14		\$1,679	1.119	\$1,879	\$0.06
Prof - Other	\$742,341	\$6,435		\$748,776	1.119	\$837,661	\$28.44
Prof - Psych	\$117,457	\$1,018		\$118,475	1.119	\$132,539	\$4.50
Prof - Specialist	\$798,237	\$6,920		\$805,157	1.119	\$900,735	\$30.58
Prof - Vision	\$64,781	\$562		\$65,343	1.119	\$73,099	\$2.48
Radiology	\$384,023	\$4,844		\$388,867	1.502	\$583,996	\$19.83
Transportation/Ambulance	\$128,890	\$1,626		\$130,516	1.502	\$196,007	\$6.65
Provider Incentive Payment Adjustment							\$7.81
Total	\$16,377,827	\$131,106	(\$376,095)	\$16,132,838		\$20,185,973	\$693.10
Admin Cost Adjustment							\$58.36
Medallion II Capitation Rate							\$751.46

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Low Income Families with Children (LIFC)

Exhibit 4a

All Age Categories							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$4,660,918	\$61,784	(\$382,420)	\$4,340,282	1.339	\$5,811,665	\$2.43
FQHC / RHC	\$2,791,205	\$23,192		\$2,814,397	1.108	\$3,117,119	\$1.31
Home Health	\$579,926	\$5,888		\$585,815	1.267	\$742,213	\$0.31
IP - Maternity	\$31,371,148	\$740,264	(\$1,930,184)	\$30,181,227	1.151	\$34,737,377	\$14.55
IP - Newborn	\$33,583,202	\$2,014,865	(\$2,139,763)	\$33,458,303	1.150	\$38,471,599	\$16.12
IP - Other	\$33,167,453	\$1,294,709	(\$2,071,485)	\$32,390,677	1.150	\$37,264,631	\$15.61
IP - Psych	\$5,269,109	\$27,010	(\$526,840)	\$4,769,279	1.388	\$6,617,577	\$2.77
Lab	\$5,332,924	\$71,452	(\$122,033)	\$5,282,343	1.300	\$6,869,400	\$2.88
OP - Emergency Room & Related	\$46,284,872	\$462,294		\$46,747,166	1.294	\$60,470,470	\$25.34
OP - Other	\$47,746,146	\$477,825	(\$10,626)	\$48,213,346	1.294	\$62,399,953	\$26.14
Pharmacy	\$62,716,912	\$358	(\$2,411,902)	\$60,305,368	1.127	\$67,955,403	\$28.47
Prof - Anesthesia	\$5,192,539	\$43,335		\$5,235,873	1.109	\$5,804,997	\$2.43
Prof - Child EPSDT	\$3,937,258	\$31,351		\$3,968,610	1.097	\$4,352,947	\$1.82
Prof - Evaluation & Management	\$64,235,670	\$517,561		\$64,753,230	1.100	\$71,213,751	\$29.84
Prof - Maternity	\$17,563,792	\$148,947		\$17,712,739	1.113	\$19,711,949	\$8.26
Prof - Other	\$18,016,774	\$146,179		\$18,162,952	1.102	\$20,006,730	\$8.38
Prof - Psych	\$5,448,872	\$43,981		\$5,492,852	1.100	\$6,043,317	\$2.53
Prof - Specialist	\$11,745,154	\$97,112		\$11,842,266	1.106	\$13,101,164	\$5.49
Prof - Vision	\$2,833,723	\$22,791		\$2,856,514	1.099	\$3,140,226	\$1.32
Radiology	\$6,959,315	\$90,209		\$7,049,524	1.412	\$9,955,349	\$4.17
Transportation/Ambulance	\$7,585,336	\$102,309		\$7,687,645	1.278	\$9,821,321	\$4.11
Provider Incentive Payment Adjustment							\$2.33
Total	\$417,022,247	\$6,423,416	(\$9,595,253)	\$413,850,410		\$487,609,157	\$206.63
Admin Cost Adjustment							\$17.40
Medallion II Capitation Rate							\$224.03

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$174,138	\$3,002	(\$17,740)	\$159,400	1.269	\$202,320	\$123.59
FQHC / RHC	\$21,082	\$282		\$21,364	1.159	\$24,767	\$15.13
Home Health	\$51,571	\$652		\$52,224	1.252	\$65,401	\$39.95
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$498.21
IP - Other	\$690,313	\$17,005	(\$42,516)	\$664,802	1.262	\$838,968	\$512.50
IP - Psych	\$22,902	\$285	(\$2,307)	\$20,880	1.137	\$23,734	\$14.50
Lab	\$9,525	\$164	(\$188)	\$9,501	1.269	\$12,060	\$7.37
OP - Emergency Room & Related	\$74,518	\$943		\$75,460	1.278	\$96,469	\$58.93
OP - Other	\$342,456	\$4,332	(\$76)	\$346,712	1.278	\$443,238	\$270.76
Pharmacy	\$467,682	\$4	(\$18,297)	\$449,389	1.098	\$493,394	\$301.40
Prof - Anesthesia	\$23,351	\$312		\$23,663	1.159	\$27,432	\$16.76
Prof - Child EPSDT	\$10,480	\$140		\$10,620	1.159	\$12,312	\$7.52
Prof - Evaluation & Management	\$396,497	\$5,297		\$401,794	1.159	\$465,800	\$284.54
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$416,021	\$5,558		\$421,579	1.159	\$488,736	\$298.56
Prof - Psych	\$6,134	\$82		\$6,216	1.159	\$7,206	\$4.40
Prof - Specialist	\$78,991	\$1,055		\$80,046	1.159	\$92,797	\$56.69
Prof - Vision	\$9,756	\$130		\$9,886	1.159	\$11,461	\$7.00
Radiology	\$10,042	\$173		\$10,215	1.269	\$12,966	\$7.92
Transportation/Ambulance	\$19,939	\$344		\$20,282	1.269	\$25,743	\$15.73
Provider Incentive Payment Adjustment							\$28.96
Total	\$3,496,452	\$56,291	(\$122,454)	\$3,430,289		\$4,160,365	\$2,570.42
Admin Cost Adjustment							\$216.42
Medallion II Capitation Rate							\$2,786.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$554,801	\$9,564	(\$56,519)	\$507,846	1.269	\$644,587	\$114.63
FQHC / RHC	\$2,165	\$29		\$2,194	1.159	\$2,544	\$0.45
Home Health	\$130,513	\$1,651		\$132,164	1.252	\$165,512	\$29.43
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$1,586,563	\$39,083	(\$97,716)	\$1,527,931	1.262	\$1,928,219	\$342.92
IP - Psych	\$10,072	\$125	(\$1,014)	\$9,183	1.137	\$10,438	\$1.86
Lab	\$14,162	\$244	(\$280)	\$14,126	1.269	\$17,930	\$3.19
OP - Emergency Room & Related	\$132,505	\$1,676		\$134,181	1.278	\$171,538	\$30.51
OP - Other	\$1,047,715	\$13,254	(\$234)	\$1,060,735	1.278	\$1,356,050	\$241.16
Pharmacy	\$1,049,694	\$9	(\$41,066)	\$1,008,636	1.098	\$1,107,403	\$196.94
Prof - Anesthesia	\$44,923	\$600		\$45,523	1.159	\$52,775	\$9.39
Prof - Child EPSDT	\$8,824	\$118		\$8,942	1.159	\$10,367	\$1.84
Prof - Evaluation & Management	\$432,473	\$5,777		\$438,250	1.159	\$508,063	\$90.35
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$209,187	\$2,795		\$211,981	1.159	\$245,750	\$43.70
Prof - Psych	\$12,640	\$169		\$12,809	1.159	\$14,849	\$2.64
Prof - Specialist	\$86,792	\$1,159		\$87,951	1.159	\$101,962	\$18.13
Prof - Vision	\$22,980	\$307		\$23,287	1.159	\$26,996	\$4.80
Radiology	\$18,080	\$312		\$18,392	1.269	\$23,344	\$4.15
Transportation/Ambulance	\$25,640	\$442		\$26,082	1.269	\$33,105	\$5.89
Provider Incentive Payment Adjustment							\$13.01
Total	\$5,389,729	\$77,315	(\$196,830)	\$5,270,215		\$6,421,432	\$1,155.01
Admin Cost Adjustment							\$97.25
Medallion II Capitation Rate							\$1,252.25

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$893,936	\$15,411	(\$100,561)	\$808,785	1.269	\$1,026,556	\$32.12
FQHC / RHC	\$3,649	\$49		\$3,698	1.159	\$4,287	\$0.13
Home Health	\$4,816	\$61		\$4,877	1.252	\$6,107	\$0.19
IP - Maternity	\$118,118	\$2,910	(\$7,275)	\$113,753	1.262	\$143,554	\$4.49
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$2,691,110	\$66,293	(\$165,745)	\$2,591,658	1.262	\$3,270,622	\$102.34
IP - Psych	\$438,157	\$5,449	(\$44,128)	\$399,477	1.137	\$454,082	\$14.21
Lab	\$59,659	\$1,028	(\$1,178)	\$59,510	1.269	\$75,533	\$2.36
OP - Emergency Room & Related	\$536,096	\$6,782		\$542,878	1.278	\$694,019	\$21.72
OP - Other	\$1,203,190	\$15,221	(\$268)	\$1,218,143	1.278	\$1,557,281	\$48.73
Pharmacy	\$5,140,059	\$43	(\$201,091)	\$4,939,011	1.098	\$5,422,647	\$169.68
Prof - Anesthesia	\$78,500	\$1,049		\$79,549	1.159	\$92,221	\$2.89
Prof - Child EPSDT	\$11,452	\$153		\$11,605	1.159	\$13,453	\$0.42
Prof - Evaluation & Management	\$1,086,653	\$14,517		\$1,101,170	1.159	\$1,276,585	\$39.94
Prof - Maternity	\$45,453	\$607		\$46,060	1.159	\$53,397	\$1.67
Prof - Other	\$3,522,701	\$47,060		\$3,569,761	1.159	\$4,138,422	\$129.49
Prof - Psych	\$208,644	\$2,787		\$211,431	1.159	\$245,112	\$7.67
Prof - Specialist	\$164,758	\$2,201		\$166,959	1.159	\$193,556	\$6.06
Prof - Vision	\$55,955	\$747		\$56,703	1.159	\$65,735	\$2.06
Radiology	\$92,442	\$1,594		\$94,036	1.269	\$119,356	\$3.73
Transportation/Ambulance	\$124,554	\$2,147		\$126,701	1.269	\$160,816	\$5.03
Provider Incentive Payment Adjustment							\$6.78
Total	\$16,479,901	\$186,108	(\$520,247)	\$16,145,763		\$19,013,340	\$601.71
Admin Cost Adjustment							\$50.66
Medallion II Capitation Rate							\$652.37

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$362,526	\$6,250	(\$24,887)	\$343,889	1.269	\$436,483	\$20.40
FQHC / RHC	\$1,891	\$25		\$1,916	1.159	\$2,221	\$0.10
Home Health	\$41,350	\$523		\$41,873	1.252	\$52,439	\$2.45
IP - Maternity	\$357,212	\$8,800	(\$22,001)	\$344,011	1.262	\$434,136	\$20.29
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$4,178,845	\$102,941	(\$257,374)	\$4,024,413	1.262	\$5,078,731	\$237.36
IP - Psych	\$1,137,179	\$14,142	(\$114,530)	\$1,036,792	1.137	\$1,178,510	\$55.08
Lab	\$117,341	\$2,023	(\$2,317)	\$117,047	1.269	\$148,562	\$6.94
OP - Emergency Room & Related	\$1,657,741	\$20,972		\$1,678,713	1.278	\$2,146,076	\$100.30
OP - Other	\$1,414,036	\$17,889	(\$316)	\$1,431,609	1.278	\$1,830,178	\$85.53
Pharmacy	\$6,510,071	\$55	(\$254,689)	\$6,255,436	1.098	\$6,867,978	\$320.98
Prof - Anesthesia	\$97,119	\$1,297		\$98,416	1.159	\$114,094	\$5.33
Prof - Child EPSDT	\$8,933	\$119		\$9,052	1.159	\$10,494	\$0.49
Prof - Evaluation & Management	\$1,366,845	\$18,260		\$1,385,104	1.159	\$1,605,751	\$75.05
Prof - Maternity	\$117,819	\$1,574		\$119,393	1.159	\$138,412	\$6.47
Prof - Other	\$478,683	\$6,395		\$485,078	1.159	\$562,351	\$26.28
Prof - Psych	\$258,030	\$3,447		\$261,477	1.159	\$303,130	\$14.17
Prof - Specialist	\$355,853	\$4,754		\$360,607	1.159	\$418,052	\$19.54
Prof - Vision	\$37,525	\$501		\$38,026	1.159	\$44,084	\$2.06
Radiology	\$354,846	\$6,117		\$360,964	1.269	\$458,155	\$21.41
Transportation/Ambulance	\$204,648	\$3,528		\$208,176	1.269	\$264,229	\$12.35
Provider Incentive Payment Adjustment							\$11.77
Total	\$19,058,493	\$219,612	(\$676,112)	\$18,601,993		\$22,094,066	\$1,044.34
Admin Cost Adjustment							\$87.93
Medallion II Capitation Rate							\$1,132.27

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$339,971	\$5,861	(\$23,338)	\$322,494	1.269	\$409,327	\$19.83
FQHC / RHC	\$1,239	\$17		\$1,255	1.159	\$1,455	\$0.07
Home Health	\$26,968	\$341		\$27,309	1.252	\$34,200	\$1.66
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$4,947,784	\$121,883	(\$304,733)	\$4,764,934	1.262	\$6,013,255	\$291.35
IP - Psych	\$1,207,309	\$15,014	(\$121,593)	\$1,100,731	1.137	\$1,251,189	\$60.62
Lab	\$73,306	\$1,264	(\$1,447)	\$73,122	1.269	\$92,811	\$4.50
OP - Emergency Room & Related	\$833,397	\$10,543		\$843,940	1.278	\$1,078,897	\$52.27
OP - Other	\$939,684	\$11,888	(\$210)	\$951,362	1.278	\$1,216,227	\$58.93
Pharmacy	\$6,466,842	\$54	(\$252,998)	\$6,213,898	1.098	\$6,822,373	\$330.56
Prof - Anesthesia	\$41,995	\$561		\$42,556	1.159	\$49,335	\$2.39
Prof - Child EPSDT	\$4,834	\$65		\$4,899	1.159	\$5,679	\$0.28
Prof - Evaluation & Management	\$818,667	\$10,937		\$829,603	1.159	\$961,758	\$46.60
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$285,077	\$3,808		\$288,885	1.159	\$334,905	\$16.23
Prof - Psych	\$206,192	\$2,755		\$208,946	1.159	\$242,231	\$11.74
Prof - Specialist	\$257,192	\$3,436		\$260,628	1.159	\$302,146	\$14.64
Prof - Vision	\$23,006	\$307		\$23,313	1.159	\$27,027	\$1.31
Radiology	\$145,680	\$2,511		\$148,191	1.269	\$188,093	\$9.11
Transportation/Ambulance	\$139,122	\$2,398		\$141,521	1.269	\$179,626	\$8.70
Provider Incentive Payment Adjustment							\$10.61
Total	\$16,758,263	\$193,643	(\$704,318)	\$16,247,588		\$19,210,535	\$941.40
Admin Cost Adjustment							\$79.26
Medallion II Capitation Rate							\$1,020.66

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 45 and Over							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,290,634	\$22,249	(\$88,599)	\$1,224,285	1.269	\$1,553,931	\$17.41
FQHC / RHC	\$22,773	\$304		\$23,077	1.159	\$26,753	\$0.30
Home Health	\$441,107	\$5,580		\$446,688	1.252	\$559,396	\$6.27
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$26,569,826	\$654,520	(\$1,636,428)	\$25,587,918	1.262	\$32,291,458	\$361.89
IP - Psych	\$2,114,649	\$26,298	(\$212,974)	\$1,927,974	1.137	\$2,191,507	\$24.56
Lab	\$505,992	\$8,723	(\$9,991)	\$504,724	1.269	\$640,624	\$7.18
OP - Emergency Room & Related	\$3,503,765	\$44,326		\$3,548,091	1.278	\$4,535,900	\$50.83
OP - Other	\$7,937,367	\$100,414	(\$1,771)	\$8,036,011	1.278	\$10,273,283	\$115.13
Pharmacy	\$27,630,712	\$233	(\$1,080,978)	\$26,549,967	1.098	\$29,149,781	\$326.68
Prof - Anesthesia	\$373,485	\$4,989		\$378,474	1.159	\$438,765	\$4.92
Prof - Child EPSDT	\$35,319	\$472		\$35,791	1.159	\$41,492	\$0.46
Prof - Evaluation & Management	\$6,137,607	\$81,992		\$6,219,599	1.159	\$7,210,378	\$80.81
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$3,061,512	\$40,899		\$3,102,411	1.159	\$3,596,623	\$40.31
Prof - Psych	\$551,784	\$7,371		\$559,155	1.159	\$648,228	\$7.26
Prof - Specialist	\$2,284,165	\$30,514		\$2,314,679	1.159	\$2,683,406	\$30.07
Prof - Vision	\$330,187	\$4,411		\$334,598	1.159	\$387,900	\$4.35
Radiology	\$1,794,016	\$30,927		\$1,824,944	1.269	\$2,316,321	\$25.96
Transportation/Ambulance	\$659,914	\$11,376		\$671,290	1.269	\$852,039	\$9.55
Provider Incentive Payment Adjustment							\$12.69
Total	\$85,244,815	\$1,075,598	(\$3,030,740)	\$83,289,673		\$99,397,785	\$1,126.63
Admin Cost Adjustment							\$94.86
Medallion II Capitation Rate							\$1,221.49

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

All Age Categories ²							
Northern Virginia	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$3,616,007	\$62,336	(\$311,644)	\$3,366,700	1.269	\$4,273,204	\$25.06
FQHC / RHC	\$52,799	\$705		\$53,504	1.159	\$62,028	\$0.36
Home Health	\$696,326	\$8,809		\$705,135	1.252	\$883,055	\$5.18
IP - Maternity	\$475,331	\$11,709	(\$29,275)	\$457,764	1.262	\$577,690	\$3.39
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$4.78
IP - Other	\$40,664,440	\$1,001,726	(\$2,504,511)	\$39,161,656	1.262	\$49,421,253	\$289.88
IP - Psych	\$4,930,268	\$61,314	(\$496,546)	\$4,495,037	1.137	\$5,109,460	\$29.97
Lab	\$779,985	\$13,446	(\$15,401)	\$778,030	1.269	\$987,520	\$5.79
OP - Emergency Room & Related	\$6,738,021	\$85,242		\$6,823,263	1.278	\$8,722,899	\$51.16
OP - Other	\$12,884,448	\$162,999	(\$2,875)	\$13,044,572	1.278	\$16,676,256	\$97.82
Pharmacy	\$47,265,059	\$398	(\$1,849,119)	\$45,416,337	1.098	\$49,863,576	\$292.48
Prof - Anesthesia	\$659,372	\$8,809		\$668,181	1.159	\$774,622	\$4.54
Prof - Child EPSDT	\$79,842	\$1,067		\$80,909	1.159	\$93,797	\$0.55
Prof - Evaluation & Management	\$10,238,741	\$136,779		\$10,375,520	1.159	\$12,028,335	\$70.55
Prof - Maternity	\$163,271	\$2,181		\$165,452	1.159	\$191,809	\$1.13
Prof - Other	\$7,973,182	\$106,513		\$8,079,695	1.159	\$9,366,786	\$54.94
Prof - Psych	\$1,243,423	\$16,611		\$1,260,034	1.159	\$1,460,757	\$8.57
Prof - Specialist	\$3,227,751	\$43,119		\$3,270,870	1.159	\$3,791,918	\$22.24
Prof - Vision	\$479,408	\$6,404		\$485,813	1.159	\$563,203	\$3.30
Radiology	\$2,415,107	\$41,634		\$2,456,741	1.269	\$3,118,234	\$18.29
Transportation/Ambulance	\$1,173,817	\$20,235		\$1,194,052	1.269	\$1,515,558	\$8.89
Provider Incentive Payment Adjustment							\$11.38
Total	\$146,427,654	\$1,808,567	(\$5,250,701)	\$142,985,520		\$170,297,522	\$1,010.28
Admin Cost Adjustment							\$85.06
Medallion II Capitation Rate							\$1,095.34

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$174,138	\$3,002	(\$17,740)	\$159,400	1.269	\$202,320	\$123.59
FQHC / RHC	\$21,082	\$282		\$21,364	1.159	\$24,767	\$15.13
Home Health	\$51,571	\$652		\$52,224	1.252	\$65,401	\$39.95
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$498.21
IP - Other	\$690,313	\$17,005	(\$42,516)	\$664,802	1.262	\$838,968	\$512.50
IP - Psych	\$22,902	\$285	(\$2,307)	\$20,880	1.137	\$23,734	\$14.50
Lab	\$9,525	\$164	(\$188)	\$9,501	1.269	\$12,060	\$7.37
OP - Emergency Room & Related	\$74,518	\$943		\$75,460	1.278	\$96,469	\$58.93
OP - Other	\$342,456	\$4,332	(\$76)	\$346,712	1.278	\$443,238	\$270.76
Pharmacy	\$467,682	\$4	(\$18,297)	\$449,389	1.098	\$493,394	\$301.40
Prof - Anesthesia	\$23,351	\$312		\$23,663	1.159	\$27,432	\$16.76
Prof - Child EPSDT	\$10,480	\$140		\$10,620	1.159	\$12,312	\$7.52
Prof - Evaluation & Management	\$396,497	\$5,297		\$401,794	1.159	\$465,800	\$284.54
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$416,021	\$5,558		\$421,579	1.159	\$488,736	\$298.56
Prof - Psych	\$6,134	\$82		\$6,216	1.159	\$7,206	\$4.40
Prof - Specialist	\$78,991	\$1,055		\$80,046	1.159	\$92,797	\$56.69
Prof - Vision	\$9,756	\$130		\$9,886	1.159	\$11,461	\$7.00
Radiology	\$10,042	\$173		\$10,215	1.269	\$12,966	\$7.92
Transportation/Ambulance	\$19,939	\$344		\$20,282	1.269	\$25,743	\$15.73
Provider Incentive Payment Adjustment							\$28.96
Total	\$3,496,452	\$56,291	(\$122,454)	\$3,430,289		\$4,160,365	\$2,570.42
Admin Cost Adjustment							\$216.42
Medallion II Capitation Rate							\$2,786.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$502,493	\$8,662	(\$51,190)	\$459,965	1.269	\$583,813	\$75.12
FQHC / RHC	\$32,947	\$440		\$33,388	1.159	\$38,706	\$4.98
Home Health	\$60,042	\$760		\$60,801	1.252	\$76,143	\$9.80
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$2,154,156	\$53,065	(\$132,674)	\$2,074,547	1.262	\$2,618,039	\$336.86
IP - Psych	\$88,824	\$1,105	(\$8,946)	\$80,982	1.137	\$92,052	\$11.84
Lab	\$49,879	\$860	(\$985)	\$49,754	1.269	\$63,150	\$8.13
OP - Emergency Room & Related	\$134,298	\$1,699		\$135,997	1.278	\$173,859	\$22.37
OP - Other	\$941,228	\$11,907	(\$210)	\$952,926	1.278	\$1,218,226	\$156.75
Pharmacy	\$709,767	\$6	(\$27,768)	\$682,005	1.098	\$748,789	\$96.34
Prof - Anesthesia	\$44,859	\$599		\$45,458	1.159	\$52,700	\$6.78
Prof - Child EPSDT	\$13,379	\$179		\$13,557	1.159	\$15,717	\$2.02
Prof - Evaluation & Management	\$461,480	\$6,165		\$467,644	1.159	\$542,140	\$69.76
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$507,155	\$6,775		\$513,930	1.159	\$595,799	\$76.66
Prof - Psych	\$34,923	\$467		\$35,390	1.159	\$41,027	\$5.28
Prof - Specialist	\$120,888	\$1,615		\$122,503	1.159	\$142,018	\$18.27
Prof - Vision	\$15,982	\$213		\$16,195	1.159	\$18,775	\$2.42
Radiology	\$29,659	\$511		\$30,170	1.269	\$38,294	\$4.93
Transportation/Ambulance	\$92,641	\$1,597		\$94,238	1.269	\$119,612	\$15.39
Provider Incentive Payment Adjustment							\$10.53
Total	\$5,994,598	\$96,626	(\$221,773)	\$5,869,451		\$7,178,858	\$934.21
Admin Cost Adjustment							\$78.66
Medallion II Capitation Rate							\$1,012.86

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$677,311	\$11,676	(\$76,192)	\$612,795	1.269	\$777,794	\$16.47
FQHC / RHC	\$91,056	\$1,216		\$92,272	1.159	\$106,971	\$2.27
Home Health	\$46,689	\$591		\$47,279	1.252	\$59,209	\$1.25
IP - Maternity	\$119,858	\$2,953	(\$7,382)	\$115,428	1.262	\$145,668	\$3.09
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$1,835,789	\$45,223	(\$113,066)	\$1,767,946	1.262	\$2,231,114	\$47.26
IP - Psych	\$1,034,761	\$12,869	(\$104,215)	\$943,415	1.137	\$1,072,369	\$22.71
Lab	\$218,931	\$3,774	(\$4,323)	\$218,382	1.269	\$277,183	\$5.87
OP - Emergency Room & Related	\$698,430	\$8,836		\$707,266	1.278	\$904,173	\$19.15
OP - Other	\$1,420,625	\$17,972	(\$317)	\$1,438,280	1.278	\$1,838,706	\$38.94
Pharmacy	\$5,895,092	\$50	(\$230,630)	\$5,664,512	1.098	\$6,219,190	\$131.73
Prof - Anesthesia	\$59,494	\$795		\$60,288	1.159	\$69,892	\$1.48
Prof - Child EPSDT	\$22,168	\$296		\$22,464	1.159	\$26,042	\$0.55
Prof - Evaluation & Management	\$1,130,932	\$15,108		\$1,146,040	1.159	\$1,328,604	\$28.14
Prof - Maternity	\$64,803	\$866		\$65,669	1.159	\$76,130	\$1.61
Prof - Other	\$671,270	\$8,967		\$680,237	1.159	\$788,598	\$16.70
Prof - Psych	\$481,184	\$6,428		\$487,612	1.159	\$565,289	\$11.97
Prof - Specialist	\$245,489	\$3,279		\$248,769	1.159	\$288,398	\$6.11
Prof - Vision	\$76,622	\$1,024		\$77,646	1.159	\$90,015	\$1.91
Radiology	\$111,739	\$1,926		\$113,665	1.269	\$144,270	\$3.06
Transportation/Ambulance	\$314,503	\$5,422		\$319,925	1.269	\$406,066	\$8.60
Provider Incentive Payment Adjustment							\$4.20
Total	\$15,216,746	\$149,270	(\$536,124)	\$14,829,892		\$17,415,682	\$373.08
Admin Cost Adjustment							\$31.41
Medallion II Capitation Rate							\$404.49

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Female							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$560,059	\$9,655	(\$38,447)	\$531,267	1.269	\$674,314	\$19.95
FQHC / RHC	\$194,371	\$2,597		\$196,967	1.159	\$228,344	\$6.75
Home Health	\$97,650	\$1,235		\$98,886	1.252	\$123,836	\$3.66
IP - Maternity	\$442,998	\$10,913	(\$27,284)	\$426,627	1.262	\$538,395	\$15.93
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$5,698,279	\$140,371	(\$350,955)	\$5,487,695	1.262	\$6,925,365	\$204.86
IP - Psych	\$1,210,507	\$15,054	(\$121,915)	\$1,103,646	1.137	\$1,254,503	\$37.11
Lab	\$551,450	\$9,506	(\$10,888)	\$550,068	1.269	\$698,178	\$20.65
OP - Emergency Room & Related	\$1,958,216	\$24,773		\$1,982,989	1.278	\$2,535,065	\$74.99
OP - Other	\$2,294,783	\$29,031	(\$512)	\$2,323,302	1.278	\$2,970,123	\$87.86
Pharmacy	\$7,932,197	\$67	(\$310,326)	\$7,621,937	1.098	\$8,368,289	\$247.55
Prof - Anesthesia	\$107,582	\$1,437		\$109,019	1.159	\$126,386	\$3.74
Prof - Child EPSDT	\$24,464	\$327		\$24,791	1.159	\$28,740	\$0.85
Prof - Evaluation & Management	\$1,811,179	\$24,195		\$1,835,375	1.159	\$2,127,749	\$62.94
Prof - Maternity	\$195,316	\$2,609		\$197,925	1.159	\$229,455	\$6.79
Prof - Other	\$750,986	\$10,032		\$761,018	1.159	\$882,248	\$26.10
Prof - Psych	\$344,957	\$4,608		\$349,566	1.159	\$405,251	\$11.99
Prof - Specialist	\$706,752	\$9,441		\$716,193	1.159	\$830,283	\$24.56
Prof - Vision	\$64,175	\$857		\$65,032	1.159	\$75,392	\$2.23
Radiology	\$456,214	\$7,865		\$464,079	1.269	\$589,035	\$17.42
Transportation/Ambulance	\$587,226	\$10,123		\$597,349	1.269	\$758,189	\$22.43
Provider Incentive Payment Adjustment							\$10.24
Total	\$25,989,361	\$314,698	(\$860,327)	\$25,443,732		\$30,369,139	\$908.60
Admin Cost Adjustment							\$76.50
Medallion II Capitation Rate							\$985.10

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Other MSA	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$381,947	\$6,584	(\$26,220)	\$362,312	1.269	\$459,866	\$18.59
FQHC / RHC	\$72,874	\$974		\$73,847	1.159	\$85,611	\$3.46
Home Health	\$43,455	\$550		\$44,005	1.252	\$55,108	\$2.23
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$3,616,583	\$89,091	(\$222,744)	\$3,482,929	1.262	\$4,395,389	\$177.70
IP - Psych	\$1,057,164	\$13,147	(\$106,471)	\$963,841	1.137	\$1,095,587	\$44.29
Lab	\$187,881	\$3,239	(\$3,710)	\$187,411	1.269	\$237,872	\$9.62
OP - Emergency Room & Related	\$871,049	\$11,019		\$882,068	1.278	\$1,127,641	\$45.59
OP - Other	\$1,341,442	\$16,970	(\$299)	\$1,358,113	1.278	\$1,736,220	\$70.19
Pharmacy	\$5,198,941	\$44	(\$203,395)	\$4,995,590	1.098	\$5,484,766	\$221.74
Prof - Anesthesia	\$34,731	\$464		\$35,195	1.159	\$40,801	\$1.65
Prof - Child EPSDT	\$9,599	\$128		\$9,727	1.159	\$11,277	\$0.46
Prof - Evaluation & Management	\$851,260	\$11,372		\$862,632	1.159	\$1,000,049	\$40.43
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$548,947	\$7,333		\$556,280	1.159	\$644,895	\$26.07
Prof - Psych	\$180,685	\$2,414		\$183,099	1.159	\$212,266	\$8.58
Prof - Specialist	\$285,940	\$3,820		\$289,760	1.159	\$335,918	\$13.58
Prof - Vision	\$38,473	\$514		\$38,987	1.159	\$45,198	\$1.83
Radiology	\$164,607	\$2,838		\$167,445	1.269	\$212,530	\$8.59
Transportation/Ambulance	\$288,868	\$4,980		\$293,848	1.269	\$372,968	\$15.08
Provider Incentive Payment Adjustment							\$8.09
Total	\$15,174,446	\$175,481	(\$562,839)	\$14,787,088		\$17,553,965	\$717.77
Admin Cost Adjustment							\$60.43
Medallion II Capitation Rate							\$778.20

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$2,525,639	\$43,540	(\$173,379)	\$2,395,800	1.269	\$3,040,884	\$37.11
FQHC / RHC	\$587,390	\$7,847		\$595,237	1.159	\$690,058	\$8.42
Home Health	\$403,105	\$5,100		\$408,205	1.252	\$511,203	\$6.24
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$25,016,076	\$616,245	(\$1,540,733)	\$24,091,588	1.262	\$30,403,118	\$371.05
IP - Psych	\$2,532,361	\$31,493	(\$255,043)	\$2,308,810	1.137	\$2,624,400	\$32.03
Lab	\$1,314,485	\$22,660	(\$25,954)	\$1,311,191	1.269	\$1,664,238	\$20.31
OP - Emergency Room & Related	\$2,990,268	\$37,829		\$3,028,097	1.278	\$3,871,137	\$47.24
OP - Other	\$8,424,541	\$106,577	(\$1,880)	\$8,529,239	1.278	\$10,903,828	\$133.07
Pharmacy	\$25,160,374	\$212	(\$984,333)	\$24,176,254	1.098	\$26,543,630	\$323.94
Prof - Anesthesia	\$247,788	\$3,310		\$251,099	1.159	\$291,098	\$3.55
Prof - Child EPSDT	\$69,679	\$931		\$70,610	1.159	\$81,858	\$1.00
Prof - Evaluation & Management	\$4,878,649	\$65,174		\$4,943,822	1.159	\$5,731,371	\$69.95
Prof - Maternity	\$30	\$0		\$31	1.159	\$36	\$0.00
Prof - Other	\$3,043,072	\$40,652		\$3,083,724	1.159	\$3,574,960	\$43.63
Prof - Psych	\$542,200	\$7,243		\$549,443	1.159	\$636,970	\$7.77
Prof - Specialist	\$2,310,400	\$30,864		\$2,341,265	1.159	\$2,714,227	\$33.12
Prof - Vision	\$241,605	\$3,228		\$244,833	1.159	\$283,835	\$3.46
Radiology	\$1,356,047	\$23,377		\$1,379,424	1.269	\$1,750,843	\$21.37
Transportation/Ambulance	\$1,427,304	\$24,605		\$1,451,909	1.269	\$1,842,845	\$22.49
Provider Incentive Payment Adjustment							\$13.51
Total	\$83,071,014	\$1,070,888	(\$2,981,321)	\$81,160,581		\$97,160,538	\$1,199.28
Admin Cost Adjustment							\$100.97
Medallion II Capitation Rate							\$1,300.25

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$4,821,586	\$83,120	(\$383,168)	\$4,521,538	1.269	\$5,738,990	\$29.12
FQHC / RHC	\$999,721	\$13,355		\$1,013,076	1.159	\$1,174,458	\$5.96
Home Health	\$702,512	\$8,887		\$711,400	1.252	\$890,900	\$4.52
IP - Maternity	\$562,856	\$13,865	(\$34,666)	\$542,055	1.262	\$684,063	\$3.47
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$4.14
IP - Other	\$39,011,195	\$961,000	(\$2,402,688)	\$37,569,507	1.262	\$47,411,993	\$240.55
IP - Psych	\$5,946,518	\$73,952	(\$598,896)	\$5,421,574	1.137	\$6,162,646	\$31.27
Lab	\$2,332,152	\$40,204	(\$46,048)	\$2,326,308	1.269	\$2,952,681	\$14.98
OP - Emergency Room & Related	\$6,726,779	\$85,099		\$6,811,878	1.278	\$8,708,345	\$44.18
OP - Other	\$14,765,075	\$186,791	(\$3,294)	\$14,948,571	1.278	\$19,110,341	\$96.96
Pharmacy	\$45,364,053	\$382	(\$1,774,748)	\$43,589,687	1.098	\$47,858,057	\$242.81
Prof - Anesthesia	\$517,805	\$6,917		\$524,722	1.159	\$608,310	\$3.09
Prof - Child EPSDT	\$149,769	\$2,001		\$151,769	1.159	\$175,946	\$0.89
Prof - Evaluation & Management	\$9,529,997	\$127,311		\$9,657,308	1.159	\$11,195,712	\$56.80
Prof - Maternity	\$260,150	\$3,475		\$263,625	1.159	\$305,620	\$1.55
Prof - Other	\$5,937,450	\$79,318		\$6,016,768	1.159	\$6,975,236	\$35.39
Prof - Psych	\$1,590,084	\$21,242		\$1,611,326	1.159	\$1,868,009	\$9.48
Prof - Specialist	\$3,748,461	\$50,075		\$3,798,536	1.159	\$4,403,641	\$22.34
Prof - Vision	\$446,613	\$5,966		\$452,579	1.159	\$524,675	\$2.66
Radiology	\$2,128,308	\$36,690		\$2,164,998	1.269	\$2,747,938	\$13.94
Transportation/Ambulance	\$2,730,481	\$47,071		\$2,777,552	1.269	\$3,525,425	\$17.89
Provider Incentive Payment Adjustment							\$10.05
Total	\$148,942,618	\$1,863,252	(\$5,284,838)	\$145,521,033		\$173,838,547	\$892.03
Admin Cost Adjustment							\$75.10
Medallion II Capitation Rate							\$967.13

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$174,138	\$3,002	(\$17,740)	\$159,400	1.269	\$202,320	\$123.59
FQHC / RHC	\$21,082	\$282		\$21,364	1.159	\$24,767	\$15.13
Home Health	\$51,571	\$652		\$52,224	1.252	\$65,401	\$39.95
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$498.21
IP - Other	\$690,313	\$17,005	(\$42,516)	\$664,802	1.262	\$838,968	\$512.50
IP - Psych	\$22,902	\$285	(\$2,307)	\$20,880	1.137	\$23,734	\$14.50
Lab	\$9,525	\$164	(\$188)	\$9,501	1.269	\$12,060	\$7.37
OP - Emergency Room & Related	\$74,518	\$943		\$75,460	1.278	\$96,469	\$58.93
OP - Other	\$342,456	\$4,332	(\$76)	\$346,712	1.278	\$443,238	\$270.76
Pharmacy	\$467,682	\$4	(\$18,297)	\$449,389	1.098	\$493,394	\$301.40
Prof - Anesthesia	\$23,351	\$312		\$23,663	1.159	\$27,432	\$16.76
Prof - Child EPSDT	\$10,480	\$140		\$10,620	1.159	\$12,312	\$7.52
Prof - Evaluation & Management	\$396,497	\$5,297		\$401,794	1.159	\$465,800	\$284.54
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$416,021	\$5,558		\$421,579	1.159	\$488,736	\$298.56
Prof - Psych	\$6,134	\$82		\$6,216	1.159	\$7,206	\$4.40
Prof - Specialist	\$78,991	\$1,055		\$80,046	1.159	\$92,797	\$56.69
Prof - Vision	\$9,756	\$130		\$9,886	1.159	\$11,461	\$7.00
Radiology	\$10,042	\$173		\$10,215	1.269	\$12,966	\$7.92
Transportation/Ambulance	\$19,939	\$344		\$20,282	1.269	\$25,743	\$15.73
Provider Incentive Payment Adjustment							\$28.96
Total	\$3,496,452	\$56,291	(\$122,454)	\$3,430,289		\$4,160,365	\$2,570.42
Admin Cost Adjustment							\$216.42
Medallion II Capitation Rate							\$2,786.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$532,413	\$9,178	(\$54,239)	\$487,353	1.269	\$618,576	\$56.36
FQHC / RHC	\$1,718	\$23		\$1,741	1.159	\$2,018	\$0.18
Home Health	\$5,792	\$73		\$5,865	1.252	\$7,345	\$0.67
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$1,172,037	\$28,872	(\$72,185)	\$1,128,724	1.262	\$1,424,428	\$129.78
IP - Psych	\$176,737	\$2,198	(\$17,800)	\$161,136	1.137	\$183,161	\$16.69
Lab	\$21,164	\$365	(\$418)	\$21,111	1.269	\$26,795	\$2.44
OP - Emergency Room & Related	\$313,146	\$3,962		\$317,108	1.278	\$405,392	\$36.93
OP - Other	\$1,921,865	\$24,313	(\$429)	\$1,945,749	1.278	\$2,487,457	\$226.63
Pharmacy	\$1,148,376	\$10	(\$44,927)	\$1,103,458	1.098	\$1,211,511	\$110.38
Prof - Anesthesia	\$61,788	\$825		\$62,614	1.159	\$72,588	\$6.61
Prof - Child EPSDT	\$16,800	\$224		\$17,025	1.159	\$19,737	\$1.80
Prof - Evaluation & Management	\$548,282	\$7,324		\$555,606	1.159	\$644,114	\$58.68
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$324,825	\$4,339		\$329,164	1.159	\$381,600	\$34.77
Prof - Psych	\$79,633	\$1,064		\$80,697	1.159	\$93,552	\$8.52
Prof - Specialist	\$162,600	\$2,172		\$164,772	1.159	\$191,020	\$17.40
Prof - Vision	\$37,143	\$496		\$37,639	1.159	\$43,635	\$3.98
Radiology	\$41,043	\$708		\$41,750	1.269	\$52,992	\$4.83
Transportation/Ambulance	\$56,050	\$966		\$57,016	1.269	\$72,368	\$6.59
Provider Incentive Payment Adjustment							\$8.24
Total	\$6,621,411	\$87,113	(\$189,998)	\$6,518,526		\$7,938,287	\$731.48
Admin Cost Adjustment							\$61.59
Medallion II Capitation Rate							\$793.07

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,263,649	\$21,784	(\$142,151)	\$1,143,282	1.269	\$1,451,117	\$13.53
FQHC / RHC	\$43,797	\$585		\$44,382	1.159	\$51,452	\$0.48
Home Health	\$48,468	\$613		\$49,081	1.252	\$61,465	\$0.57
IP - Maternity	\$308,024	\$7,588	(\$18,971)	\$296,640	1.262	\$374,354	\$3.49
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$4,171,937	\$102,771	(\$256,948)	\$4,017,760	1.262	\$5,070,335	\$47.26
IP - Psych	\$2,728,767	\$33,936	(\$274,824)	\$2,487,878	1.137	\$2,827,945	\$26.36
Lab	\$202,338	\$3,488	(\$3,995)	\$201,831	1.269	\$256,175	\$2.39
OP - Emergency Room & Related	\$2,348,941	\$29,716		\$2,378,657	1.278	\$3,040,889	\$28.35
OP - Other	\$4,278,284	\$54,124	(\$955)	\$4,331,454	1.278	\$5,537,356	\$51.62
Pharmacy	\$9,998,691	\$84	(\$391,172)	\$9,607,603	1.098	\$10,548,394	\$98.33
Prof - Anesthesia	\$156,543	\$2,091		\$158,634	1.159	\$183,904	\$1.71
Prof - Child EPSDT	\$55,786	\$745		\$56,531	1.159	\$65,537	\$0.61
Prof - Evaluation & Management	\$2,507,988	\$33,504		\$2,541,492	1.159	\$2,946,350	\$27.46
Prof - Maternity	\$169,498	\$2,264		\$171,762	1.159	\$199,124	\$1.86
Prof - Other	\$2,330,806	\$31,137		\$2,361,943	1.159	\$2,738,199	\$25.52
Prof - Psych	\$992,989	\$13,265		\$1,006,255	1.159	\$1,166,551	\$10.87
Prof - Specialist	\$524,900	\$7,012		\$531,912	1.159	\$616,645	\$5.75
Prof - Vision	\$153,813	\$2,055		\$155,868	1.159	\$180,697	\$1.68
Radiology	\$220,209	\$3,796		\$224,005	1.269	\$284,319	\$2.65
Transportation/Ambulance	\$541,346	\$9,332		\$550,678	1.269	\$698,951	\$6.52
Provider Incentive Payment Adjustment							\$4.07
Total	\$33,046,771	\$359,892	(\$1,089,017)	\$32,317,646		\$38,299,760	\$361.08
Admin Cost Adjustment							\$30.40
Medallion II Capitation Rate							\$391.48

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Female							
Richmond/Charlottesville	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$913,213	\$15,743	(\$62,690)	\$866,266	1.269	\$1,099,513	\$21.99
FQHC / RHC	\$148,679	\$1,986		\$150,665	1.159	\$174,666	\$3.49
Home Health	\$94,049	\$1,190		\$95,239	1.252	\$119,269	\$2.39
IP - Maternity	\$797,042	\$19,634	(\$49,090)	\$767,586	1.262	\$968,679	\$19.38
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$8,629,249	\$212,572	(\$531,473)	\$8,310,349	1.262	\$10,487,499	\$209.77
IP - Psych	\$3,064,013	\$38,105	(\$308,588)	\$2,793,529	1.137	\$3,175,375	\$63.51
Lab	\$317,539	\$5,474	(\$6,270)	\$316,744	1.269	\$402,029	\$8.04
OP - Emergency Room & Related	\$4,356,017	\$55,107		\$4,411,124	1.278	\$5,639,206	\$112.79
OP - Other	\$4,356,114	\$55,108	(\$972)	\$4,410,250	1.278	\$5,638,090	\$112.77
Pharmacy	\$11,472,749	\$97	(\$448,841)	\$11,024,004	1.098	\$12,103,492	\$242.09
Prof - Anesthesia	\$152,491	\$2,037		\$154,528	1.159	\$179,144	\$3.58
Prof - Child EPSDT	\$44,820	\$599		\$45,419	1.159	\$52,654	\$1.05
Prof - Evaluation & Management	\$2,899,485	\$38,734		\$2,938,219	1.159	\$3,406,276	\$68.13
Prof - Maternity	\$297,117	\$3,969		\$301,086	1.159	\$349,049	\$6.98
Prof - Other	\$1,337,274	\$17,865		\$1,355,139	1.159	\$1,571,012	\$31.42
Prof - Psych	\$531,392	\$7,099		\$538,491	1.159	\$624,272	\$12.49
Prof - Specialist	\$801,048	\$10,701		\$811,750	1.159	\$941,061	\$18.82
Prof - Vision	\$94,180	\$1,258		\$95,438	1.159	\$110,641	\$2.21
Radiology	\$575,357	\$9,919		\$585,276	1.269	\$742,865	\$14.86
Transportation/Ambulance	\$830,649	\$14,320		\$844,968	1.269	\$1,072,481	\$21.45
Provider Incentive Payment Adjustment							\$11.14
Total	\$41,712,476	\$511,517	(\$1,407,923)	\$40,816,070		\$48,857,276	\$988.36
Admin Cost Adjustment							\$83.22
Medallion II Capitation Rate							\$1,071.58

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$875,553	\$15,094	(\$60,105)	\$830,543	1.269	\$1,054,171	\$30.58
FQHC / RHC	\$68,227	\$911		\$69,138	1.159	\$80,152	\$2.33
Home Health	\$138,231	\$1,749		\$139,980	1.252	\$175,300	\$5.09
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$5,674,470	\$139,785	(\$349,489)	\$5,464,766	1.262	\$6,896,429	\$200.05
IP - Psych	\$2,274,318	\$28,284	(\$229,055)	\$2,073,547	1.137	\$2,356,979	\$68.37
Lab	\$132,299	\$2,281	(\$2,612)	\$131,968	1.269	\$167,501	\$4.86
OP - Emergency Room & Related	\$1,664,170	\$21,053		\$1,685,224	1.278	\$2,154,400	\$62.50
OP - Other	\$2,460,142	\$31,123	(\$549)	\$2,490,716	1.278	\$3,184,145	\$92.37
Pharmacy	\$6,868,215	\$58	(\$268,701)	\$6,599,572	1.098	\$7,245,813	\$210.19
Prof - Anesthesia	\$41,049	\$548		\$41,597	1.159	\$48,224	\$1.40
Prof - Child EPSDT	\$5,956	\$80		\$6,036	1.159	\$6,997	\$0.20
Prof - Evaluation & Management	\$1,311,499	\$17,520		\$1,329,019	1.159	\$1,540,731	\$44.69
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$778,538	\$10,400		\$788,939	1.159	\$914,616	\$26.53
Prof - Psych	\$309,947	\$4,141		\$314,087	1.159	\$364,121	\$10.56
Prof - Specialist	\$383,405	\$5,122		\$388,527	1.159	\$450,419	\$13.07
Prof - Vision	\$54,051	\$722		\$54,773	1.159	\$63,499	\$1.84
Radiology	\$205,106	\$3,536		\$208,642	1.269	\$264,820	\$7.68
Transportation/Ambulance	\$720,455	\$12,420		\$732,875	1.269	\$930,207	\$26.98
Provider Incentive Payment Adjustment							\$9.22
Total	\$23,965,633	\$294,826	(\$910,510)	\$23,349,948		\$27,898,523	\$818.51
Admin Cost Adjustment							\$68.91
Medallion II Capitation Rate							\$887.42

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$3,887,553	\$67,018	(\$266,871)	\$3,687,699	1.269	\$4,680,635	\$40.67
FQHC / RHC	\$626,426	\$8,368		\$634,795	1.159	\$735,917	\$6.39
Home Health	\$769,404	\$9,734		\$779,137	1.252	\$975,729	\$8.48
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$36,680,564	\$903,587	(\$2,259,145)	\$35,325,006	1.262	\$44,579,476	\$387.33
IP - Psych	\$5,554,192	\$69,073	(\$559,383)	\$5,063,882	1.137	\$5,756,061	\$50.01
Lab	\$749,395	\$12,919	(\$14,797)	\$747,517	1.269	\$948,790	\$8.24
OP - Emergency Room & Related	\$7,161,680	\$90,601		\$7,252,281	1.278	\$9,271,359	\$80.56
OP - Other	\$17,865,637	\$226,015	(\$3,986)	\$18,087,666	1.278	\$23,123,377	\$200.91
Pharmacy	\$36,602,672	\$308	(\$1,431,982)	\$35,170,998	1.098	\$38,614,997	\$335.51
Prof - Anesthesia	\$454,226	\$6,068		\$460,294	1.159	\$533,619	\$4.64
Prof - Child EPSDT	\$64,941	\$868		\$65,809	1.159	\$76,292	\$0.66
Prof - Evaluation & Management	\$7,649,726	\$102,192		\$7,751,918	1.159	\$8,986,795	\$78.08
Prof - Maternity	\$857	\$11		\$869	1.159	\$1,007	\$0.01
Prof - Other	\$4,561,739	\$60,940		\$4,622,679	1.159	\$5,359,070	\$46.56
Prof - Psych	\$1,052,841	\$14,065		\$1,066,906	1.159	\$1,236,864	\$10.75
Prof - Specialist	\$3,562,388	\$47,590		\$3,609,978	1.159	\$4,185,045	\$36.36
Prof - Vision	\$346,690	\$4,631		\$351,321	1.159	\$407,287	\$3.54
Radiology	\$1,983,002	\$34,185		\$2,017,188	1.269	\$2,560,328	\$22.25
Transportation/Ambulance	\$2,419,945	\$41,718		\$2,461,662	1.269	\$3,124,480	\$27.15
Provider Incentive Payment Adjustment							\$15.36
Total	\$131,993,879	\$1,699,891	(\$4,536,164)	\$129,157,606		\$155,157,128	\$1,363.47
Admin Cost Adjustment							\$114.80
Medallion II Capitation Rate							\$1,478.26

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$7,646,519	\$131,819	(\$603,795)	\$7,174,542	1.269	\$9,106,333	\$28.51
FQHC / RHC	\$909,929	\$12,156		\$922,084	1.159	\$1,068,972	\$3.35
Home Health	\$1,107,515	\$14,011		\$1,121,526	1.252	\$1,404,509	\$4.40
IP - Maternity	\$1,105,065	\$27,222	(\$68,061)	\$1,064,227	1.262	\$1,343,033	\$4.20
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$2.55
IP - Other	\$57,018,571	\$1,404,593	(\$3,511,757)	\$54,911,407	1.262	\$69,297,135	\$216.92
IP - Psych	\$13,820,930	\$171,880	(\$1,391,957)	\$12,600,853	1.137	\$14,323,256	\$44.84
Lab	\$1,432,261	\$24,691	(\$28,280)	\$1,428,672	1.269	\$1,813,351	\$5.68
OP - Emergency Room & Related	\$15,918,472	\$201,382		\$16,119,854	1.278	\$20,607,715	\$64.51
OP - Other	\$31,224,497	\$395,016	(\$6,967)	\$31,612,546	1.278	\$40,413,663	\$126.51
Pharmacy	\$66,558,384	\$560	(\$2,603,919)	\$63,955,025	1.098	\$70,217,601	\$219.80
Prof - Anesthesia	\$889,448	\$11,882		\$901,330	1.159	\$1,044,911	\$3.27
Prof - Child EPSDT	\$198,783	\$2,656		\$201,439	1.159	\$233,528	\$0.73
Prof - Evaluation & Management	\$15,313,477	\$204,572		\$15,518,049	1.159	\$17,990,066	\$56.31
Prof - Maternity	\$467,472	\$6,245		\$473,717	1.159	\$549,180	\$1.72
Prof - Other	\$9,749,204	\$130,239		\$9,879,443	1.159	\$11,453,233	\$35.85
Prof - Psych	\$2,972,936	\$39,715		\$3,012,651	1.159	\$3,492,565	\$10.93
Prof - Specialist	\$5,513,332	\$73,652		\$5,586,984	1.159	\$6,476,988	\$20.28
Prof - Vision	\$695,632	\$9,293		\$704,925	1.159	\$817,219	\$2.56
Radiology	\$3,034,759	\$52,316		\$3,087,075	1.269	\$3,918,289	\$12.27
Transportation/Ambulance	\$4,588,383	\$79,099		\$4,667,482	1.269	\$5,924,230	\$18.54
Provider Incentive Payment Adjustment							\$10.07
Total	\$240,836,621	\$3,009,529	(\$8,256,066)	\$235,590,084		\$282,311,339	\$893.80
Admin Cost Adjustment							\$75.25
Medallion II Capitation Rate							\$969.05

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$174,138	\$3,002	(\$17,740)	\$159,400	1.269	\$202,320	\$123.59
FQHC / RHC	\$21,082	\$282		\$21,364	1.159	\$24,767	\$15.13
Home Health	\$51,571	\$652		\$52,224	1.252	\$65,401	\$39.95
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$498.21
IP - Other	\$690,313	\$17,005	(\$42,516)	\$664,802	1.262	\$838,968	\$512.50
IP - Psych	\$22,902	\$285	(\$2,307)	\$20,880	1.137	\$23,734	\$14.50
Lab	\$9,525	\$164	(\$188)	\$9,501	1.269	\$12,060	\$7.37
OP - Emergency Room & Related	\$74,518	\$943		\$75,460	1.278	\$96,469	\$58.93
OP - Other	\$342,456	\$4,332	(\$76)	\$346,712	1.278	\$443,238	\$270.76
Pharmacy	\$467,682	\$4	(\$18,297)	\$449,389	1.098	\$493,394	\$301.40
Prof - Anesthesia	\$23,351	\$312		\$23,663	1.159	\$27,432	\$16.76
Prof - Child EPSDT	\$10,480	\$140		\$10,620	1.159	\$12,312	\$7.52
Prof - Evaluation & Management	\$396,497	\$5,297		\$401,794	1.159	\$465,800	\$284.54
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$416,021	\$5,558		\$421,579	1.159	\$488,736	\$298.56
Prof - Psych	\$6,134	\$82		\$6,216	1.159	\$7,206	\$4.40
Prof - Specialist	\$78,991	\$1,055		\$80,046	1.159	\$92,797	\$56.69
Prof - Vision	\$9,756	\$130		\$9,886	1.159	\$11,461	\$7.00
Radiology	\$10,042	\$173		\$10,215	1.269	\$12,966	\$7.92
Transportation/Ambulance	\$19,939	\$344		\$20,282	1.269	\$25,743	\$15.73
Provider Incentive Payment Adjustment							\$28.96
Total	\$3,496,452	\$56,291	(\$122,454)	\$3,430,289		\$4,160,365	\$2,570.42
Admin Cost Adjustment							\$216.42
Medallion II Capitation Rate							\$2,786.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$430,809	\$7,427	(\$43,888)	\$394,348	1.269	\$500,529	\$56.93
FQHC / RHC	\$21,938	\$293		\$22,231	1.159	\$25,773	\$2.93
Home Health	\$24,314	\$308		\$24,622	1.252	\$30,834	\$3.51
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$854,375	\$21,047	(\$52,621)	\$822,801	1.262	\$1,038,359	\$118.10
IP - Psych	\$116,426	\$1,448	(\$11,726)	\$106,148	1.137	\$120,658	\$13.72
Lab	\$36,442	\$628	(\$720)	\$36,351	1.269	\$46,139	\$5.25
OP - Emergency Room & Related	\$155,235	\$1,964		\$157,199	1.278	\$200,964	\$22.86
OP - Other	\$897,294	\$11,352	(\$200)	\$908,445	1.278	\$1,161,362	\$132.09
Pharmacy	\$786,429	\$7	(\$30,767)	\$755,668	1.098	\$829,664	\$94.37
Prof - Anesthesia	\$41,208	\$550		\$41,759	1.159	\$48,411	\$5.51
Prof - Child EPSDT	\$12,353	\$165		\$12,518	1.159	\$14,512	\$1.65
Prof - Evaluation & Management	\$455,538	\$6,086		\$461,624	1.159	\$535,160	\$60.87
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$426,611	\$5,699		\$432,310	1.159	\$501,177	\$57.00
Prof - Psych	\$42,120	\$563		\$42,683	1.159	\$49,482	\$5.63
Prof - Specialist	\$101,035	\$1,350		\$102,385	1.159	\$118,695	\$13.50
Prof - Vision	\$20,160	\$269		\$20,429	1.159	\$23,684	\$2.69
Radiology	\$20,608	\$355		\$20,963	1.269	\$26,608	\$3.03
Transportation/Ambulance	\$90,323	\$1,557		\$91,880	1.269	\$116,620	\$13.26
Provider Incentive Payment Adjustment							\$6.98
Total	\$4,533,220	\$61,066	(\$139,921)	\$4,454,365		\$5,388,630	\$619.89
Admin Cost Adjustment							\$52.19
Medallion II Capitation Rate							\$672.08

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$967,845	\$16,685	(\$108,875)	\$875,655	1.269	\$1,111,430	\$20.02
FQHC / RHC	\$211,687	\$2,828		\$214,514	1.159	\$248,687	\$4.48
Home Health	\$36,425	\$461		\$36,886	1.252	\$46,193	\$0.83
IP - Maternity	\$189,942	\$4,679	(\$11,698)	\$182,923	1.262	\$230,845	\$4.16
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$3,951,340	\$97,337	(\$243,362)	\$3,805,315	1.262	\$4,802,235	\$86.51
IP - Psych	\$1,484,206	\$18,458	(\$149,480)	\$1,353,184	1.137	\$1,538,150	\$27.71
Lab	\$170,674	\$2,942	(\$3,370)	\$170,247	1.269	\$216,087	\$3.89
OP - Emergency Room & Related	\$945,942	\$11,967		\$957,909	1.278	\$1,224,597	\$22.06
OP - Other	\$2,102,492	\$26,598	(\$469)	\$2,128,622	1.278	\$2,721,242	\$49.02
Pharmacy	\$6,908,538	\$58	(\$270,278)	\$6,638,318	1.098	\$7,288,352	\$131.29
Prof - Anesthesia	\$90,580	\$1,210		\$91,790	1.159	\$106,412	\$1.92
Prof - Child EPSDT	\$26,292	\$351		\$26,643	1.159	\$30,888	\$0.56
Prof - Evaluation & Management	\$1,401,521	\$18,723		\$1,420,244	1.159	\$1,646,488	\$29.66
Prof - Maternity	\$79,752	\$1,065		\$80,817	1.159	\$93,691	\$1.69
Prof - Other	\$717,500	\$9,585		\$727,085	1.159	\$842,909	\$15.18
Prof - Psych	\$463,244	\$6,188		\$469,432	1.159	\$544,212	\$9.80
Prof - Specialist	\$293,577	\$3,922		\$297,498	1.159	\$344,890	\$6.21
Prof - Vision	\$78,711	\$1,051		\$79,763	1.159	\$92,469	\$1.67
Radiology	\$116,363	\$2,006		\$118,369	1.269	\$150,241	\$2.71
Transportation/Ambulance	\$350,703	\$6,046		\$356,748	1.269	\$452,805	\$8.16
Provider Incentive Payment Adjustment							\$4.87
Total	\$20,587,334	\$232,161	(\$787,533)	\$20,031,963		\$23,732,822	\$432.40
Admin Cost Adjustment							\$36.41
Medallion II Capitation Rate							\$468.80

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$595,998	\$10,274	(\$40,914)	\$565,358	1.269	\$717,585	\$23.00
FQHC / RHC	\$245,586	\$3,281		\$248,867	1.159	\$288,511	\$9.25
Home Health	\$115,152	\$1,457		\$116,609	1.252	\$146,032	\$4.68
IP - Maternity	\$320,549	\$7,896	(\$19,743)	\$308,703	1.262	\$389,577	\$12.48
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$4,477,406	\$110,296	(\$275,762)	\$4,311,940	1.262	\$5,441,585	\$174.38
IP - Psych	\$1,068,763	\$13,291	(\$107,639)	\$974,415	1.137	\$1,107,608	\$35.49
Lab	\$302,728	\$5,219	(\$5,977)	\$301,969	1.269	\$383,276	\$12.28
OP - Emergency Room & Related	\$1,720,419	\$21,765		\$1,742,184	1.278	\$2,227,218	\$71.37
OP - Other	\$2,783,575	\$35,215	(\$621)	\$2,818,169	1.278	\$3,602,763	\$115.45
Pharmacy	\$8,194,602	\$69	(\$320,592)	\$7,874,079	1.098	\$8,645,121	\$277.04
Prof - Anesthesia	\$91,799	\$1,226		\$93,026	1.159	\$107,844	\$3.46
Prof - Child EPSDT	\$29,339	\$392		\$29,731	1.159	\$34,467	\$1.10
Prof - Evaluation & Management	\$1,529,200	\$20,428		\$1,549,629	1.159	\$1,796,484	\$57.57
Prof - Maternity	\$132,962	\$1,776		\$134,738	1.159	\$156,201	\$5.01
Prof - Other	\$529,920	\$7,079		\$536,999	1.159	\$622,543	\$19.95
Prof - Psych	\$289,190	\$3,863		\$293,053	1.159	\$339,736	\$10.89
Prof - Specialist	\$583,385	\$7,793		\$591,179	1.159	\$685,353	\$21.96
Prof - Vision	\$48,648	\$650		\$49,298	1.159	\$57,151	\$1.83
Radiology	\$336,881	\$5,808		\$342,688	1.269	\$434,959	\$13.94
Transportation/Ambulance	\$567,954	\$9,791		\$577,745	1.269	\$733,307	\$23.50
Provider Incentive Payment Adjustment							\$10.20
Total	\$23,964,055	\$267,570	(\$771,248)	\$23,460,378		\$27,917,321	\$904.84
Admin Cost Adjustment							\$76.18
Medallion II Capitation Rate							\$981.02

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$421,294	\$7,263	(\$28,921)	\$399,635	1.269	\$507,240	\$22.33
FQHC / RHC	\$117,775	\$1,573		\$119,348	1.159	\$138,361	\$6.09
Home Health	\$60,976	\$771		\$61,748	1.252	\$77,328	\$3.40
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$3,003,709	\$73,993	(\$184,998)	\$2,892,704	1.262	\$3,650,537	\$160.70
IP - Psych	\$905,038	\$11,255	(\$91,150)	\$825,144	1.137	\$937,932	\$41.29
Lab	\$109,135	\$1,881	(\$2,155)	\$108,861	1.269	\$138,173	\$6.08
OP - Emergency Room & Related	\$661,553	\$8,369		\$669,922	1.278	\$856,432	\$37.70
OP - Other	\$1,207,521	\$15,276	(\$269)	\$1,222,527	1.278	\$1,562,886	\$68.80
Pharmacy	\$4,698,835	\$40	(\$183,829)	\$4,515,046	1.098	\$4,957,166	\$218.21
Prof - Anesthesia	\$32,369	\$432		\$32,801	1.159	\$38,026	\$1.67
Prof - Child EPSDT	\$5,523	\$74		\$5,597	1.159	\$6,489	\$0.29
Prof - Evaluation & Management	\$685,598	\$9,159		\$694,757	1.159	\$805,432	\$35.46
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$332,828	\$4,446		\$337,275	1.159	\$391,002	\$17.21
Prof - Psych	\$185,471	\$2,478		\$187,949	1.159	\$217,889	\$9.59
Prof - Specialist	\$212,308	\$2,836		\$215,144	1.159	\$249,417	\$10.98
Prof - Vision	\$35,299	\$472		\$35,770	1.159	\$41,468	\$1.83
Radiology	\$113,179	\$1,951		\$115,130	1.269	\$146,129	\$6.43
Transportation/Ambulance	\$372,543	\$6,422		\$378,966	1.269	\$481,004	\$21.17
Provider Incentive Payment Adjustment							\$7.63
Total	\$13,160,955	\$148,692	(\$491,322)	\$12,818,325		\$15,202,912	\$676.86
Admin Cost Adjustment							\$56.99
Medallion II Capitation Rate							\$733.85

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 45 and Over							
Rural	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$2,511,654	\$43,299	(\$172,419)	\$2,382,534	1.269	\$3,024,046	\$34.73
FQHC / RHC	\$777,814	\$10,391		\$788,205	1.159	\$913,765	\$10.49
Home Health	\$698,248	\$8,833		\$707,081	1.252	\$885,492	\$10.17
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$22,916,823	\$564,532	(\$1,411,440)	\$22,069,915	1.262	\$27,851,806	\$319.85
IP - Psych	\$2,529,633	\$31,459	(\$254,769)	\$2,306,323	1.137	\$2,621,573	\$30.11
Lab	\$824,372	\$14,211	(\$16,277)	\$822,307	1.269	\$1,043,718	\$11.99
OP - Emergency Room & Related	\$3,453,884	\$43,695		\$3,497,578	1.278	\$4,471,325	\$51.35
OP - Other	\$11,467,960	\$145,079	(\$2,559)	\$11,610,480	1.278	\$14,842,905	\$170.46
Pharmacy	\$25,927,266	\$218	(\$1,014,335)	\$24,913,149	1.098	\$27,352,683	\$314.12
Prof - Anesthesia	\$289,690	\$3,870		\$293,560	1.159	\$340,324	\$3.91
Prof - Child EPSDT	\$50,261	\$671		\$50,933	1.159	\$59,046	\$0.68
Prof - Evaluation & Management	\$4,893,408	\$65,371		\$4,958,779	1.159	\$5,748,710	\$66.02
Prof - Maternity	\$892	\$12		\$904	1.159	\$1,048	\$0.01
Prof - Other	\$2,805,388	\$37,477		\$2,842,865	1.159	\$3,295,732	\$37.85
Prof - Psych	\$638,958	\$8,536		\$647,494	1.159	\$750,639	\$8.62
Prof - Specialist	\$2,133,383	\$28,500		\$2,161,883	1.159	\$2,506,270	\$28.78
Prof - Vision	\$253,447	\$3,386		\$256,833	1.159	\$297,746	\$3.42
Radiology	\$1,220,325	\$21,037		\$1,241,363	1.269	\$1,575,607	\$18.09
Transportation/Ambulance	\$1,532,081	\$26,412		\$1,558,493	1.269	\$1,978,126	\$22.72
Provider Incentive Payment Adjustment							\$13.03
Total	\$84,925,487	\$1,056,988	(\$2,871,799)	\$83,110,677		\$99,560,562	\$1,156.38
Admin Cost Adjustment							\$97.36
Medallion II Capitation Rate							\$1,253.74

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$5,101,738	\$87,949	(\$412,757)	\$4,776,930	1.269	\$6,063,149	\$29.30
FQHC / RHC	\$1,395,882	\$18,647		\$1,414,530	1.159	\$1,639,864	\$7.92
Home Health	\$986,687	\$12,482		\$999,169	1.252	\$1,251,279	\$6.05
IP - Maternity	\$510,491	\$12,575	(\$31,441)	\$491,626	1.262	\$620,422	\$3.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$3.94
IP - Other	\$35,893,966	\$884,210	(\$2,210,699)	\$34,567,478	1.262	\$43,623,489	\$210.80
IP - Psych	\$6,126,968	\$76,196	(\$617,070)	\$5,586,094	1.137	\$6,349,654	\$30.68
Lab	\$1,452,877	\$25,046	(\$28,687)	\$1,449,236	1.269	\$1,839,452	\$8.89
OP - Emergency Room & Related	\$7,011,551	\$88,702		\$7,100,253	1.278	\$9,077,004	\$43.86
OP - Other	\$18,801,298	\$237,852	(\$4,195)	\$19,034,955	1.278	\$24,334,397	\$117.59
Pharmacy	\$46,983,350	\$395	(\$1,838,098)	\$45,145,648	1.098	\$49,566,380	\$239.52
Prof - Anesthesia	\$568,997	\$7,601		\$576,598	1.159	\$668,450	\$3.23
Prof - Child EPSDT	\$134,248	\$1,793		\$136,042	1.159	\$157,713	\$0.76
Prof - Evaluation & Management	\$9,361,763	\$125,063		\$9,486,826	1.159	\$10,998,073	\$53.15
Prof - Maternity	\$213,606	\$2,854		\$216,459	1.159	\$250,941	\$1.21
Prof - Other	\$5,228,268	\$69,844		\$5,298,112	1.159	\$6,142,099	\$29.68
Prof - Psych	\$1,625,117	\$21,710		\$1,646,827	1.159	\$1,909,166	\$9.23
Prof - Specialist	\$3,402,680	\$45,456		\$3,448,136	1.159	\$3,997,422	\$19.32
Prof - Vision	\$446,020	\$5,958		\$451,979	1.159	\$523,979	\$2.53
Radiology	\$1,817,398	\$31,330		\$1,848,729	1.269	\$2,346,510	\$11.34
Transportation/Ambulance	\$2,933,543	\$50,571		\$2,984,114	1.269	\$3,787,606	\$18.30
Provider Incentive Payment Adjustment							\$9.69
Total	\$150,667,503	\$1,822,769	(\$5,184,276)	\$147,305,996		\$175,962,611	\$859.99
Admin Cost Adjustment							\$72.41
Medallion II Capitation Rate							\$932.40

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age Under 1							
Statewide	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$174,138	\$3,002	(\$17,740)	\$159,400	1.269	\$202,320	\$123.59
FQHC / RHC	\$21,082	\$282		\$21,364	1.159	\$24,767	\$15.13
Home Health	\$51,571	\$652		\$52,224	1.252	\$65,401	\$39.95
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$498.21
IP - Other	\$690,313	\$17,005	(\$42,516)	\$664,802	1.262	\$838,968	\$512.50
IP - Psych	\$22,902	\$285	(\$2,307)	\$20,880	1.137	\$23,734	\$14.50
Lab	\$9,525	\$164	(\$188)	\$9,501	1.269	\$12,060	\$7.37
OP - Emergency Room & Related	\$74,518	\$943		\$75,460	1.278	\$96,469	\$58.93
OP - Other	\$342,456	\$4,332	(\$76)	\$346,712	1.278	\$443,238	\$270.76
Pharmacy	\$467,682	\$4	(\$18,297)	\$449,389	1.098	\$493,394	\$301.40
Prof - Anesthesia	\$23,351	\$312		\$23,663	1.159	\$27,432	\$16.76
Prof - Child EPSDT	\$10,480	\$140		\$10,620	1.159	\$12,312	\$7.52
Prof - Evaluation & Management	\$396,497	\$5,297		\$401,794	1.159	\$465,800	\$284.54
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$416,021	\$5,558		\$421,579	1.159	\$488,736	\$298.56
Prof - Psych	\$6,134	\$82		\$6,216	1.159	\$7,206	\$4.40
Prof - Specialist	\$78,991	\$1,055		\$80,046	1.159	\$92,797	\$56.69
Prof - Vision	\$9,756	\$130		\$9,886	1.159	\$11,461	\$7.00
Radiology	\$10,042	\$173		\$10,215	1.269	\$12,966	\$7.92
Transportation/Ambulance	\$19,939	\$344		\$20,282	1.269	\$25,743	\$15.73
Provider Incentive Payment Adjustment							\$28.96
Total	\$3,496,452	\$56,291	(\$122,454)	\$3,430,289		\$4,160,365	\$2,570.42
Admin Cost Adjustment							\$216.42
Medallion II Capitation Rate							\$2,786.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 1-5							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$808,444	\$13,937	(\$82,359)	\$740,023	1.269	\$939,278	\$59.86
FQHC / RHC	\$11,196	\$150		\$11,345	1.159	\$13,153	\$0.84
Home Health	\$27,877	\$353		\$28,230	1.252	\$35,353	\$2.25
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$2,291,926	\$56,459	(\$141,159)	\$2,207,226	1.262	\$2,785,477	\$177.51
IP - Psych	\$274,842	\$3,418	(\$27,680)	\$250,579	1.137	\$284,831	\$18.15
Lab	\$51,441	\$887	(\$1,016)	\$51,312	1.269	\$65,128	\$4.15
OP - Emergency Room & Related	\$474,822	\$6,007		\$480,829	1.278	\$614,695	\$39.17
OP - Other	\$2,750,195	\$34,792	(\$614)	\$2,784,374	1.278	\$3,559,560	\$226.84
Pharmacy	\$1,831,285	\$15	(\$71,644)	\$1,759,656	1.098	\$1,931,964	\$123.12
Prof - Anesthesia	\$104,322	\$1,394		\$105,716	1.159	\$122,557	\$7.81
Prof - Child EPSDT	\$28,316	\$378		\$28,694	1.159	\$33,265	\$2.12
Prof - Evaluation & Management	\$972,823	\$12,996		\$985,819	1.159	\$1,142,859	\$72.83
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$1,407,705	\$18,805		\$1,426,510	1.159	\$1,653,752	\$105.39
Prof - Psych	\$80,300	\$1,073		\$81,373	1.159	\$94,335	\$6.01
Prof - Specialist	\$230,912	\$3,085		\$233,997	1.159	\$271,273	\$17.29
Prof - Vision	\$40,338	\$539		\$40,877	1.159	\$47,388	\$3.02
Radiology	\$44,801	\$772		\$45,574	1.269	\$57,845	\$3.69
Transportation/Ambulance	\$71,485	\$1,232		\$72,717	1.269	\$92,296	\$5.88
Provider Incentive Payment Adjustment							\$9.98
Total	\$11,503,031	\$156,292	(\$324,471)	\$11,334,852		\$13,745,011	\$885.91
Admin Cost Adjustment							\$74.59
Medallion II Capitation Rate							\$960.50

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 6-20							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,787,445	\$30,814	(\$201,074)	\$1,617,184	1.269	\$2,052,621	\$17.89
FQHC / RHC	\$77,921	\$1,041		\$78,962	1.159	\$91,540	\$0.80
Home Health	\$23,517	\$298		\$23,815	1.252	\$29,824	\$0.26
IP - Maternity	\$377,886	\$9,309	(\$23,274)	\$363,921	1.262	\$459,261	\$4.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$6,241,239	\$153,746	(\$384,396)	\$6,010,590	1.262	\$7,585,248	\$66.12
IP - Psych	\$2,764,303	\$34,378	(\$278,403)	\$2,520,277	1.137	\$2,864,773	\$24.97
Lab	\$254,012	\$4,379	(\$5,015)	\$253,376	1.269	\$321,599	\$2.80
OP - Emergency Room & Related	\$2,402,410	\$30,392		\$2,432,803	1.278	\$3,110,109	\$27.11
OP - Other	\$5,696,374	\$72,064	(\$1,271)	\$5,767,167	1.278	\$7,372,779	\$64.27
Pharmacy	\$12,483,422	\$105	(\$488,381)	\$11,995,147	1.098	\$13,169,730	\$114.80
Prof - Anesthesia	\$200,850	\$2,683		\$203,533	1.159	\$235,955	\$2.06
Prof - Child EPSDT	\$63,291	\$845		\$64,136	1.159	\$74,353	\$0.65
Prof - Evaluation & Management	\$2,917,834	\$38,979		\$2,956,813	1.159	\$3,427,832	\$29.88
Prof - Maternity	\$174,726	\$2,334		\$177,060	1.159	\$205,266	\$1.79
Prof - Other	\$3,439,523	\$45,948		\$3,485,471	1.159	\$4,040,705	\$35.22
Prof - Psych	\$1,047,986	\$14,000		\$1,061,986	1.159	\$1,231,160	\$10.73
Prof - Specialist	\$584,214	\$7,804		\$592,018	1.159	\$686,326	\$5.98
Prof - Vision	\$173,187	\$2,314		\$175,500	1.159	\$203,457	\$1.77
Radiology	\$247,453	\$4,266		\$251,719	1.269	\$319,496	\$2.79
Transportation/Ambulance	\$418,633	\$7,217		\$425,850	1.269	\$540,513	\$4.71
Provider Incentive Payment Adjustment							\$4.77
Total	\$41,376,225	\$462,916	(\$1,381,815)	\$40,457,327		\$48,022,548	\$423.38
Admin Cost Adjustment							\$35.65
Medallion II Capitation Rate							\$459.03

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,232,148	\$21,241	(\$84,584)	\$1,168,805	1.269	\$1,483,514	\$25.56
FQHC / RHC	\$247,480	\$3,306		\$250,786	1.159	\$290,736	\$5.01
Home Health	\$134,469	\$1,701		\$136,170	1.252	\$170,529	\$2.94
IP - Maternity	\$928,987	\$22,885	(\$57,216)	\$894,656	1.262	\$1,129,038	\$19.45
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$6,572,983	\$161,919	(\$404,828)	\$6,330,074	1.262	\$7,988,431	\$137.65
IP - Psych	\$2,284,883	\$28,415	(\$230,119)	\$2,083,180	1.137	\$2,367,928	\$40.80
Lab	\$225,391	\$3,886	(\$4,450)	\$224,826	1.269	\$285,362	\$4.92
OP - Emergency Room & Related	\$4,784,679	\$60,530		\$4,845,209	1.278	\$6,194,143	\$106.73
OP - Other	\$5,216,480	\$65,993	(\$1,164)	\$5,281,309	1.278	\$6,751,656	\$116.34
Pharmacy	\$12,795,995	\$108	(\$500,609)	\$12,295,494	1.098	\$13,499,488	\$232.61
Prof - Anesthesia	\$219,367	\$2,931		\$222,297	1.159	\$257,709	\$4.44
Prof - Child EPSDT	\$81,395	\$1,087		\$82,482	1.159	\$95,621	\$1.65
Prof - Evaluation & Management	\$3,186,968	\$42,574		\$3,229,543	1.159	\$3,744,007	\$64.51
Prof - Maternity	\$381,034	\$5,090		\$386,124	1.159	\$447,633	\$7.71
Prof - Other	\$2,469,656	\$32,992		\$2,502,648	1.159	\$2,901,319	\$49.99
Prof - Psych	\$594,878	\$7,947		\$602,825	1.159	\$698,855	\$12.04
Prof - Specialist	\$1,054,663	\$14,089		\$1,068,752	1.159	\$1,239,004	\$21.35
Prof - Vision	\$101,455	\$1,355		\$102,810	1.159	\$119,188	\$2.05
Radiology	\$671,043	\$11,568		\$682,611	1.269	\$866,408	\$14.93
Transportation/Ambulance	\$495,350	\$8,539		\$503,890	1.269	\$639,565	\$11.02
Provider Incentive Payment Adjustment							\$10.05
Total	\$43,679,305	\$498,156	(\$1,282,971)	\$42,894,490		\$51,170,134	\$891.76
Admin Cost Adjustment							\$75.08
Medallion II Capitation Rate							\$966.84

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 21-44 Male							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$1,369,469	\$23,608	(\$94,011)	\$1,299,067	1.269	\$1,648,849	\$40.12
FQHC / RHC	\$114,554	\$1,530		\$116,084	1.159	\$134,576	\$3.27
Home Health	\$368,803	\$4,666		\$373,469	1.252	\$467,703	\$11.38
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$5,301,981	\$130,609	(\$326,547)	\$5,106,042	1.262	\$6,443,726	\$156.80
IP - Psych	\$1,844,944	\$22,944	(\$185,811)	\$1,682,077	1.137	\$1,911,999	\$46.53
Lab	\$93,905	\$1,619	(\$1,854)	\$93,670	1.269	\$118,891	\$2.89
OP - Emergency Room & Related	\$2,030,616	\$25,689		\$2,056,305	1.278	\$2,628,792	\$63.97
OP - Other	\$3,889,103	\$49,200	(\$868)	\$3,937,436	1.278	\$5,033,641	\$122.49
Pharmacy	\$8,141,236	\$69	(\$318,504)	\$7,822,800	1.098	\$8,588,821	\$209.00
Prof - Anesthesia	\$86,669	\$1,158		\$87,827	1.159	\$101,817	\$2.48
Prof - Child EPSDT	\$11,633	\$155		\$11,788	1.159	\$13,666	\$0.33
Prof - Evaluation & Management	\$1,557,649	\$20,809		\$1,578,458	1.159	\$1,829,906	\$44.53
Prof - Maternity	\$0			\$0	1.159	\$0	\$0.00
Prof - Other	\$1,747,832	\$23,349		\$1,771,181	1.159	\$2,053,330	\$49.97
Prof - Psych	\$355,713	\$4,752		\$360,465	1.159	\$417,887	\$10.17
Prof - Specialist	\$472,147	\$6,307		\$478,455	1.159	\$554,672	\$13.50
Prof - Vision	\$56,997	\$761		\$57,759	1.159	\$66,960	\$1.63
Radiology	\$286,471	\$4,938		\$291,409	1.269	\$369,873	\$9.00
Transportation/Ambulance	\$380,707	\$6,563		\$387,270	1.269	\$491,544	\$11.96
Provider Incentive Payment Adjustment							\$9.12
Total	\$28,110,430	\$328,727	(\$927,595)	\$27,511,561		\$32,876,653	\$809.15
Admin Cost Adjustment							\$68.13
Medallion II Capitation Rate							\$877.28

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 Capitation Rate Development
Capitation Rate Calculations - Health Plan Encounter Data
Aged, Blind, and Disabled (ABAD)

Exhibit 4b

Age 45 and Over							
Tidewater	Total Base Claims FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$5,117,135	\$88,214.51	(\$351,278.67)	\$4,854,071	1.269	\$6,161,060	\$43.58
FQHC / RHC	\$1,305,830	\$17,444		\$1,323,274	1.159	\$1,534,071	\$10.85
Home Health	\$1,157,572	\$14,644		\$1,172,216	1.252	\$1,467,989	\$10.38
IP - Maternity	\$0			\$0	1.262	\$0	\$0.00
IP - Newborn	\$0			\$0	1.262	\$0	\$0.00
IP - Other	\$37,320,034	\$919,340	(\$2,298,530)	\$35,940,844	1.262	\$45,356,651	\$320.84
IP - Psych	\$4,677,761	\$58,174	(\$471,115)	\$4,264,820	1.137	\$4,847,776	\$34.29
Lab	\$620,746	\$10,701	(\$12,256)	\$619,190	1.269	\$785,911	\$5.56
OP - Emergency Room & Related	\$9,066,517	\$114,699		\$9,181,216	1.278	\$11,737,320	\$83.03
OP - Other	\$21,067,309	\$266,519	(\$4,701)	\$21,329,128	1.278	\$27,267,281	\$192.88
Pharmacy	\$44,117,482	\$371	(\$1,725,979)	\$42,391,875	1.098	\$46,542,953	\$329.23
Prof - Anesthesia	\$663,377	\$8,862		\$672,239	1.159	\$779,326	\$5.51
Prof - Child EPSDT	\$91,019	\$1,216		\$92,235	1.159	\$106,928	\$0.76
Prof - Evaluation & Management	\$10,513,200	\$140,445		\$10,653,646	1.159	\$12,350,766	\$87.37
Prof - Maternity	\$129	\$2		\$131	1.159	\$152	\$0.00
Prof - Other	\$9,846,061	\$131,533		\$9,977,594	1.159	\$11,567,020	\$81.82
Prof - Psych	\$1,169,380	\$15,622		\$1,185,002	1.159	\$1,373,772	\$9.72
Prof - Specialist	\$4,699,076	\$62,775		\$4,761,851	1.159	\$5,520,411	\$39.05
Prof - Vision	\$458,456	\$6,124		\$464,580	1.159	\$538,587	\$3.81
Radiology	\$2,344,248	\$40,413		\$2,384,660	1.269	\$3,026,745	\$21.41
Transportation/Ambulance	\$1,435,196	\$24,741		\$1,459,937	1.269	\$1,853,034	\$13.11
Provider Incentive Payment Adjustment							\$14.74
Total	\$155,670,528	\$1,921,840	(\$4,863,859)	\$152,728,509		\$182,817,755	\$1,307.95
Admin Cost Adjustment							\$110.12
Medallion II Capitation Rate							\$1,418.07

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

Virginia Medicaid
FY 2011 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 FY08-09	Completion Factor Adjustment	Policy and Program Adjustments ¹	Completed and Adjusted Claims FY08-09	Trend Adjustment	Completed & Trended Claims FY11	PMPM FY11
Service Type							
DME/Supplies	\$10,488,780	\$180,817	(\$831,046)	\$9,838,550	1.269	\$12,487,641	\$33.52
FQHC / RHC	\$1,778,062	\$23,753		\$1,801,815	1.159	\$2,088,844	\$5.61
Home Health	\$1,763,811	\$22,314		\$1,786,124	1.252	\$2,236,798	\$6.00
IP - Maternity	\$1,306,873	\$32,193	(\$80,490)	\$1,258,577	1.262	\$1,588,300	\$4.26
IP - Newborn	\$671,055	\$16,531	(\$41,330)	\$646,255	1.262	\$815,562	\$2.19
IP - Other	\$58,418,477	\$1,439,078	(\$3,597,977)	\$56,259,578	1.262	\$70,998,501	\$190.58
IP - Psych	\$11,869,635	\$147,614	(\$1,195,435)	\$10,821,813	1.137	\$12,301,041	\$33.02
Lab	\$1,255,020	\$21,635	(\$24,780)	\$1,251,875	1.269	\$1,588,950	\$4.27
OP - Emergency Room & Related	\$18,833,562	\$238,260		\$19,071,822	1.278	\$24,381,528	\$65.45
OP - Other	\$38,961,917	\$492,901	(\$8,693)	\$39,446,125	1.278	\$50,428,156	\$135.36
Pharmacy	\$79,837,102	\$672	(\$3,123,414)	\$76,714,360	1.098	\$84,226,350	\$226.08
Prof - Anesthesia	\$1,297,935	\$17,339		\$1,315,274	1.159	\$1,524,797	\$4.09
Prof - Child EPSDT	\$286,133	\$3,822		\$289,956	1.159	\$336,145	\$0.90
Prof - Evaluation & Management	\$19,544,972	\$261,100		\$19,806,072	1.159	\$22,961,170	\$61.63
Prof - Maternity	\$555,889	\$7,426		\$563,315	1.159	\$653,051	\$1.75
Prof - Other	\$19,326,798	\$258,185		\$19,584,984	1.159	\$22,704,862	\$60.95
Prof - Psych	\$3,254,392	\$43,475		\$3,297,867	1.159	\$3,823,215	\$10.26
Prof - Specialist	\$7,120,003	\$95,116		\$7,215,119	1.159	\$8,364,484	\$22.45
Prof - Vision	\$840,188	\$11,224		\$851,412	1.159	\$987,042	\$2.65
Radiology	\$3,604,058	\$62,131		\$3,666,188	1.269	\$4,653,332	\$12.49
Transportation/Ambulance	\$2,821,309	\$48,637		\$2,869,946	1.269	\$3,642,696	\$9.78
Provider Incentive Payment Adjustment							\$10.18
Total	\$283,835,971	\$3,424,222	(\$8,903,165)	\$278,357,028		\$332,792,466	\$903.48
Admin Cost Adjustment							\$76.07
Medallion II Capitation Rate							\$979.55

¹ Policy and Program Adjustments are calculated based on Completed Claims = Total Base Claims + Completion Factor Adjustment.
 No Cost/Unit contract period trend applied to Home Health services.

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Summary of FY 2011 Base Capitation Rates
Before CDPS Adjustment**

Exhibit 5a

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84
	1-5	\$1,252.25	\$1,012.86	\$793.07	\$672.08	\$960.50	\$922.85
	6-14	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$451.52
	Female 15-20	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$452.00
	Female 21-44	\$1,132.27	\$985.10	\$1,071.58	\$981.02	\$966.84	\$1,016.83
	Male 15-20	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$451.91
	Male 21-44	\$1,020.66	\$778.20	\$887.42	\$733.85	\$877.28	\$859.68
	Over 44	\$1,221.49	\$1,300.25	\$1,478.26	\$1,253.74	\$1,418.07	\$1,350.20
	Average	\$1,077.42	\$957.85	\$974.32	\$925.13	\$981.44	\$979.41
Low Income Families with Children	Under 1	\$376.61	\$462.40	\$485.93	\$529.95	\$515.94	\$465.60
	1-5	\$119.98	\$109.99	\$139.88	\$125.42	\$125.41	\$124.60
	6-14	\$99.76	\$101.29	\$103.52	\$105.97	\$103.62	\$102.63
	Female 15-20	\$222.19	\$309.50	\$263.02	\$289.35	\$250.44	\$262.19
	Female 21-44	\$596.62	\$566.61	\$526.39	\$590.02	\$492.97	\$541.82
	Male 15-20	\$107.91	\$156.89	\$129.46	\$122.26	\$138.51	\$129.82
	Male 21-44	\$379.60	\$467.40	\$362.26	\$490.52	\$404.93	\$420.27
	Over 44	\$710.29	\$709.75	\$664.46	\$742.62	\$751.46	\$713.30
	Average	\$182.60	\$224.45	\$223.01	\$230.01	\$217.48	\$213.07
Weighted Average		\$239.73	\$313.31	\$311.78	\$318.67	\$311.08	\$296.31

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

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Adjustment to FY2011 Base Capitation Rates for Mental Health Parity**

Exhibit 5b

Aid Category	Age Group	Statewide
Aged, Blind, and Disabled	Under 1	\$0.00
	1-5	\$0.00
	6-14	\$0.00
	Female 15-20	\$0.00
	Female 21-44	\$3.38
	Male 15-20	\$0.00
	Male 21-44	\$3.38
	Over 44	\$3.38
	Average	\$2.31
Low Income Families with Children	Under 1	\$0.00
	1-5	\$0.00
	6-14	\$0.00
	Female 15-20	\$0.00
	Female 21-44	\$0.25
	Male 15-20	\$0.00
	Male 21-44	\$0.25
	Over 44	\$0.25
	Average	\$0.04
Weighted Average		\$0.28

Note:
 Based on additional \$1.8 million in annual expenditures.
 Average is weighted by health plan enrollment distribution as of May 2010.

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Summary of FY 2011 Base Capitation Rates with MH Parity Adjustment
Before CDPS Adjustment

Exhibit 5c

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84	\$2,786.84
	1-5	\$1,252.25	\$1,012.86	\$793.07	\$672.08	\$960.50	\$922.85
	6-14	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$451.52
	Female 15-20	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$452.00
	Female 21-44	\$1,135.66	\$988.48	\$1,074.96	\$984.40	\$970.22	\$1,020.21
	Male 15-20	\$652.37	\$404.49	\$391.48	\$468.80	\$459.03	\$451.91
	Male 21-44	\$1,024.04	\$781.58	\$890.81	\$737.23	\$880.66	\$863.06
	Over 44	\$1,224.87	\$1,303.64	\$1,481.64	\$1,257.12	\$1,421.46	\$1,353.58
	Average	\$1,080.00	\$960.25	\$976.48	\$927.48	\$983.67	\$981.72
Low Income Families with Children	Under 1	\$376.61	\$462.40	\$485.93	\$529.95	\$515.94	\$465.60
	1-5	\$119.98	\$109.99	\$139.88	\$125.42	\$125.41	\$124.60
	6-14	\$99.76	\$101.29	\$103.52	\$105.97	\$103.62	\$102.63
	Female 15-20	\$222.19	\$309.50	\$263.02	\$289.35	\$250.44	\$262.19
	Female 21-44	\$596.87	\$566.87	\$526.65	\$590.28	\$493.22	\$542.08
	Male 15-20	\$107.91	\$156.89	\$129.46	\$122.26	\$138.51	\$129.82
	Male 21-44	\$379.86	\$467.65	\$362.51	\$490.78	\$405.18	\$420.52
	Over 44	\$710.54	\$710.01	\$664.72	\$742.87	\$751.71	\$713.55
	Average	\$182.63	\$224.49	\$223.05	\$230.05	\$217.53	\$213.11
Weighted Average		\$239.92	\$313.64	\$312.07	\$319.01	\$311.39	\$296.60

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

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Health Plan Encounter Data
 Comparison of FY 2010 and FY 2011 Base Capitation Rates
 Before CDPS Adjustment**

**Exhibit 5d
 DRAFT**

Aid Category	Age Group	Region								
		FY 2010	FY 2011	% Change 2010-2011	FY 2010	FY 2011	% Change 2010-2011	FY 2010	FY 2011	% Change 2010-2011
		Northern Virginia			Other MSA			Richmond/ Charlottesville		
Aged, Blind, and Disabled	Under 1	\$2,715.96	\$2,786.84	2.61%	\$2,715.96	\$2,786.84	2.61%	\$2,715.96	\$2,786.84	2.61%
	1-5	\$954.06	\$1,252.25	31.26%	\$1,046.48	\$1,012.86	-3.21%	\$723.56	\$793.07	9.61%
	6-14	\$625.19	\$652.37	4.35%	\$387.91	\$404.49	4.27%	\$363.45	\$391.48	7.71%
	Female 15-20	\$625.19	\$652.37	4.35%	\$387.91	\$404.49	4.27%	\$363.45	\$391.48	7.71%
	Female 21-44	\$1,048.09	\$1,135.66	8.35%	\$899.92	\$988.48	9.84%	\$1,000.51	\$1,074.96	7.44%
	Male 15-20	\$625.19	\$652.37	4.35%	\$387.91	\$404.49	4.27%	\$363.45	\$391.48	7.71%
	Male 21-44	\$884.62	\$1,024.04	15.76%	\$694.92	\$781.58	12.47%	\$801.19	\$890.81	11.19%
	Over 44	\$1,091.59	\$1,224.87	12.21%	\$1,145.21	\$1,303.64	13.83%	\$1,304.61	\$1,481.64	13.57%
	Average	\$966.47	\$1,080.00	11.75%	\$865.85	\$960.25	10.90%	\$877.12	\$976.48	11.33%
Low Income Families with Children	Under 1	\$366.23	\$376.61	2.83%	\$450.32	\$462.40	2.68%	\$503.31	\$485.93	-3.45%
	1-5	\$122.14	\$119.98	-1.77%	\$112.00	\$109.99	-1.80%	\$133.65	\$139.88	4.66%
	6-14	\$102.39	\$99.76	-2.57%	\$102.76	\$101.29	-1.43%	\$102.14	\$103.52	1.34%
	Female 15-20	\$216.65	\$222.19	2.56%	\$295.64	\$309.50	4.69%	\$241.11	\$263.02	9.09%
	Female 21-44	\$506.96	\$596.87	17.74%	\$502.14	\$566.87	12.89%	\$449.74	\$526.65	17.10%
	Male 15-20	\$102.56	\$107.91	5.22%	\$128.98	\$156.89	21.64%	\$116.62	\$129.46	11.01%
	Male 21-44	\$308.30	\$379.86	23.21%	\$378.02	\$467.65	23.71%	\$283.00	\$362.51	28.10%
	Over 44	\$589.93	\$710.54	20.45%	\$606.82	\$710.01	17.00%	\$542.21	\$664.72	22.59%
	Average	\$174.04	\$182.63	4.94%	\$210.48	\$224.49	6.66%	\$205.55	\$223.05	8.52%
Weighted Average		\$224.63	\$239.92	6.81%	\$289.89	\$313.64	8.19%	\$284.90	\$312.07	9.54%

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

Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
Comparison of FY 2010 and FY 2011 Base Capitation Rates
Before CDPS Adjustment

Exhibit 5d

Aid Category	Age Group	Region								
		FY 2010	FY 2011	% Change 2010-2011	FY 2010	FY 2011	% Change 2010-2011	FY 2010	FY 2011	% Change 2010-2011
		Rural			Tidewater			Weighted Average		
Aged, Blind, and Disabled	Under 1	\$2,715.96	\$2,786.84	2.61%	\$2,715.96	\$2,786.84	2.61%	\$2,715.96	\$2,786.84	2.61%
	1-5	\$689.61	\$672.08	-2.54%	\$847.01	\$960.50	13.40%	\$847.97	\$922.85	8.83%
	6-14	\$443.33	\$468.80	5.75%	\$405.82	\$459.03	13.11%	\$417.61	\$451.52	8.12%
	Female 15-20	\$443.33	\$468.80	5.75%	\$405.82	\$459.03	13.11%	\$418.14	\$452.00	8.10%
	Female 21-44	\$905.63	\$984.40	8.70%	\$871.62	\$970.22	11.31%	\$933.91	\$1,020.21	9.24%
	Male 15-20	\$443.33	\$468.80	5.75%	\$405.82	\$459.03	13.11%	\$418.41	\$451.91	8.01%
	Male 21-44	\$716.97	\$737.23	2.83%	\$773.46	\$880.66	13.86%	\$772.79	\$863.06	11.68%
	Over 44	\$1,120.80	\$1,257.12	12.16%	\$1,246.08	\$1,421.46	14.07%	\$1,194.45	\$1,353.58	13.32%
	Average	\$848.53	\$927.48	9.30%	\$867.13	\$983.67	13.44%	\$879.65	\$981.72	11.60%
Low Income Families with Children	Under 1	\$512.73	\$529.95	3.36%	\$522.44	\$515.94	-1.25%	\$463.75	\$465.60	0.40%
	1-5	\$121.51	\$125.42	3.22%	\$120.07	\$125.41	4.44%	\$122.46	\$124.60	1.75%
	6-14	\$108.09	\$105.97	-1.96%	\$102.74	\$103.62	0.86%	\$103.26	\$102.63	-0.61%
	Female 15-20	\$272.97	\$289.35	6.00%	\$233.18	\$250.44	7.40%	\$246.87	\$262.19	6.21%
	Female 21-44	\$522.07	\$590.28	13.06%	\$419.56	\$493.22	17.56%	\$467.42	\$542.08	15.97%
	Male 15-20	\$124.52	\$122.26	-1.82%	\$128.63	\$138.51	7.68%	\$119.40	\$129.82	8.73%
	Male 21-44	\$412.55	\$490.78	18.96%	\$326.71	\$405.18	24.02%	\$340.55	\$420.52	23.48%
	Over 44	\$633.61	\$742.87	17.24%	\$607.78	\$751.71	23.68%	\$591.05	\$713.55	20.73%
	Average	\$215.98	\$230.05	6.51%	\$200.64	\$217.53	8.42%	\$198.90	\$213.11	7.15%
Weighted Average		\$296.66	\$319.01	7.53%	\$282.30	\$311.39	10.31%	\$272.84	\$296.60	8.71%

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

**Virginia Medicaid
FY 2011 Capitation Rate Development
Health Plan Encounter Data
May 2010 Member Month Distribution**

Exhibit 5e

Aid Category	Age Group	Region					Regional Total
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	12	25	12	8	14	71
	1-5	287	459	459	403	658	2,266
	6-14	812	1,310	2,429	1,353	2,793	8,697
	Female 15-20	262	362	782	376	812	2,594
	Female 21-44	952	1,615	2,124	1,390	2,504	8,585
	Male 15-20	440	658	1,307	726	1,364	4,495
	Male 21-44	940	1,182	1,570	1,057	1,955	6,704
	Over 44	3,984	4,050	5,208	4,053	6,469	23,764
Aid Category Total		7,689	9,661	13,891	9,366	16,569	57,176
Low Income Families with Children	Under 1	8,244	4,769	6,276	4,018	7,207	30,514
	1-5	39,300	20,707	29,016	18,547	32,498	140,068
	6-14	41,267	23,925	36,568	22,802	42,338	166,900
	Female 15-20	6,915	5,208	7,902	4,881	9,275	34,181
	Female 21-44	8,598	9,453	14,950	8,228	17,836	59,065
	Male 15-20	6,086	3,801	6,114	3,684	6,943	26,628
	Male 21-44	987	1,286	1,351	1,064	1,099	5,787
	Over 44	1,340	925	1,504	841	1,470	6,080
Aid Category Total		112,737	70,074	103,681	64,065	118,666	469,223
Total		120,426	79,735	117,572	73,431	135,235	526,399

Virginia Medicaid
FY 2011 Capitation Rate Development
CDPS Rates Summary of Difference in Implied Cost
All Diagnosis Codes and NDC Codes using v5.1 and VA Specific Weights (FY09 Data)

Exhibit 6

	Aged, Blind, and Disabled				
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater
AMERIGROUP Virginia	-3.5%	-0.4%	0.0%	0.5%	0.1%
Anthem Blue Cross and Blue Shield	1.4%	-0.4%	-4.5%	-3.4%	-0.5%
CareNet/Southern Health Services	0.0%	-0.4%	-0.5%	0.5%	0.1%
Optima Family Care	0.0%	-9.6%	-1.9%	1.1%	3.5%
Virginia Premier Health Plan	1.3%	3.0%	7.7%	0.6%	-11.4%

	Low Income Families with Children				
	Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater
AMERIGROUP Virginia	-8.3%	-0.1%	0.0%	8.1%	0.0%
Anthem Blue Cross and Blue Shield	2.5%	-0.9%	0.1%	-1.0%	0.0%
CareNet/Southern Health Services	0.3%	-10.1%	0.3%	10.9%	0.0%
Optima Family Care	0.3%	-7.9%	-1.4%	-3.3%	0.8%
Virginia Premier Health Plan	5.2%	3.1%	1.1%	1.0%	-2.8%

**Virginia Medicaid
FY 2011 Capitation Rate Development
Amerigroup Medallion II Capitation Rates
With CDPS Adjustment**

Exhibit 7a

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,688.27	\$2,776.81	\$2,786.84	\$2,801.66	\$2,790.03	\$2,688.28
	1-5	\$1,207.96	\$1,009.22	\$793.07	\$675.65	\$961.60	\$1,041.12
	6-14	\$629.30	\$403.03	\$391.48	\$471.30	\$459.55	\$597.70
	Female 15-20	\$629.30	\$403.03	\$391.48	\$471.30	\$459.55	\$602.21
	Female 21-44	\$1,095.49	\$984.92	\$1,074.96	\$989.64	\$971.33	\$1,078.34
	Male 15-20	\$629.30	\$403.03	\$391.48	\$471.30	\$459.55	\$598.19
	Male 21-44	\$987.82	\$778.77	\$890.81	\$741.15	\$881.67	\$954.80
	Over 44	\$1,181.55	\$1,298.94	\$1,481.64	\$1,263.81	\$1,423.08	\$1,191.89
	Average	\$1,067.40	\$778.77	\$1,025.22	\$962.36	\$1,423.08	\$1,052.21
Low Income Families with Children	Under 1	\$345.27	\$461.91	\$485.80	\$572.65	\$515.94	\$368.83
	1-5	\$109.99	\$109.87	\$139.84	\$135.52	\$125.41	\$112.70
	6-14	\$91.46	\$101.18	\$103.49	\$114.51	\$103.62	\$94.66
	Female 15-20	\$203.70	\$309.17	\$262.94	\$312.66	\$250.44	\$219.05
	Female 21-44	\$547.20	\$566.26	\$526.50	\$637.83	\$493.22	\$567.14
	Male 15-20	\$98.93	\$156.72	\$129.42	\$132.11	\$138.51	\$102.98
	Male 21-44	\$348.25	\$467.15	\$362.41	\$530.31	\$405.18	\$397.29
	Over 44	\$651.42	\$709.25	\$664.53	\$802.72	\$751.71	\$676.05
	Average	\$167.56	\$336.54	\$313.54	\$250.55	\$348.00	\$178.34
Weighted Average		\$231.81	\$410.24	\$314.49	\$307.99	\$1,414.55	\$241.82

Note:
Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 Anthem Medallion II Capitation Rates
 With CDPS Adjustment**

Exhibit 7b

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,826.72	\$2,776.81	\$2,662.68	\$2,693.38	\$2,774.04	\$2,744.34
	1-5	\$1,270.18	\$1,009.22	\$757.74	\$649.54	\$956.08	\$973.14
	6-14	\$661.71	\$403.03	\$374.04	\$453.08	\$456.92	\$470.93
	Female 15-20	\$661.71	\$403.03	\$374.04	\$453.08	\$456.92	\$472.90
	Female 21-44	\$1,151.91	\$984.92	\$1,027.07	\$951.39	\$965.77	\$1,027.70
	Male 15-20	\$661.71	\$403.03	\$374.04	\$453.08	\$456.92	\$469.48
	Male 21-44	\$1,038.69	\$778.77	\$851.12	\$712.50	\$876.62	\$898.30
	Over 44	\$1,242.40	\$1,298.94	\$1,415.64	\$1,214.96	\$1,414.93	\$1,334.86
	Average	\$1,089.92	\$978.44	\$903.06	\$911.26	\$1,004.29	\$991.60
Low Income Families with Children	Under 1	\$385.87	\$458.07	\$486.50	\$524.71	\$515.89	\$449.34
	1-5	\$122.92	\$108.96	\$140.04	\$124.17	\$125.39	\$126.85
	6-14	\$102.21	\$100.34	\$103.64	\$104.92	\$103.61	\$103.01
	Female 15-20	\$227.65	\$306.60	\$263.33	\$286.49	\$250.42	\$248.49
	Female 21-44	\$611.54	\$561.56	\$527.27	\$584.43	\$493.18	\$545.15
	Male 15-20	\$110.57	\$155.42	\$129.61	\$121.05	\$138.50	\$123.37
	Male 21-44	\$389.19	\$463.27	\$362.94	\$485.92	\$405.15	\$396.52
	Over 44	\$728.01	\$703.35	\$665.50	\$735.52	\$751.64	\$718.28
	Average	\$184.34	\$214.90	\$226.10	\$226.25	\$220.94	\$206.12
Weighted Average		\$240.16	\$281.29	\$299.81	\$317.80	\$319.43	\$280.26

Note:
 Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
 FY 2011 Capitation Rate Development
 CareNet Medallion II Capitation Rates
 With CDPS Adjustment**

Exhibit 7c

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,786.84	\$2,776.81	\$2,772.93	\$2,801.66	\$2,790.03	\$2,775.84
	1-5	\$1,252.25	\$1,009.22	\$789.11	\$675.65	\$961.60	\$808.91
	6-14	\$652.37	\$403.03	\$389.52	\$471.30	\$459.55	\$399.01
	Female 15-20	\$652.37	\$403.03	\$389.52	\$471.30	\$459.55	\$398.12
	Female 21-44	\$1,135.66	\$984.92	\$1,069.59	\$989.64	\$971.33	\$1,049.42
	Male 15-20	\$652.37	\$403.03	\$389.52	\$471.30	\$459.55	\$395.99
	Male 21-44	\$1,024.04	\$778.77	\$886.36	\$741.15	\$881.67	\$854.09
	Over 44	\$1,224.87	\$1,298.94	\$1,474.25	\$1,263.81	\$1,423.08	\$1,416.85
	Average	\$1,172.60	\$976.57	\$944.51	\$951.35	\$1,242.61	\$950.03
Low Income Families with Children	Under 1	\$377.80	\$415.58	\$487.30	\$587.71	\$516.06	\$490.50
	1-5	\$120.35	\$98.85	\$140.27	\$139.08	\$125.44	\$135.40
	6-14	\$100.07	\$91.03	\$103.81	\$117.52	\$103.65	\$103.96
	Female 15-20	\$222.89	\$278.15	\$263.76	\$320.89	\$250.50	\$272.14
	Female 21-44	\$598.76	\$509.46	\$528.13	\$654.61	\$493.34	\$537.05
	Male 15-20	\$108.25	\$141.00	\$129.82	\$135.59	\$138.55	\$131.87
	Male 21-44	\$381.06	\$420.29	\$363.53	\$544.26	\$405.28	\$392.03
	Over 44	\$712.79	\$638.10	\$666.59	\$823.83	\$751.89	\$676.34
	Average	\$104.16	\$216.28	\$226.23	\$263.30	\$203.15	\$228.74
Weighted Average		\$108.42	\$320.23	\$308.60	\$351.40	\$277.39	\$314.28

Note:
 Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
FY 2011 Capitation Rate Development
Optima Medallion II Capitation Rates
With CDPS Adjustment**

Exhibit 7d

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,786.84	\$2,520.34	\$2,733.96	\$2,816.64	\$2,884.30	\$2,759.57
	1-5	\$1,252.25	\$916.01	\$778.02	\$679.26	\$994.09	\$885.78
	6-14	\$652.37	\$365.81	\$384.05	\$473.82	\$475.08	\$444.67
	Female 15-20	\$652.37	\$365.81	\$384.05	\$473.82	\$475.08	\$446.21
	Female 21-44	\$1,135.66	\$893.96	\$1,054.56	\$994.93	\$1,004.16	\$997.76
	Male 15-20	\$652.37	\$365.81	\$384.05	\$473.82	\$475.08	\$444.59
	Male 21-44	\$1,024.04	\$706.84	\$873.91	\$745.11	\$911.46	\$841.70
	Over 44	\$1,224.87	\$1,178.97	\$1,453.53	\$1,270.57	\$1,471.17	\$1,386.81
	Average	\$1,172.60	\$831.02	\$988.62	\$905.72	\$1,002.45	\$957.34
Low Income Families with Children	Under 1	\$377.80	\$425.77	\$479.19	\$512.38	\$520.22	\$496.64
	1-5	\$120.35	\$101.28	\$137.94	\$121.26	\$126.45	\$124.82
	6-14	\$100.07	\$93.26	\$102.08	\$102.45	\$104.48	\$102.21
	Female 15-20	\$222.89	\$284.98	\$259.37	\$279.75	\$252.52	\$262.78
	Female 21-44	\$598.76	\$521.96	\$519.34	\$570.70	\$497.32	\$516.48
	Male 15-20	\$108.25	\$144.46	\$127.66	\$118.21	\$139.66	\$134.08
	Male 21-44	\$381.06	\$430.60	\$357.48	\$474.50	\$408.55	\$411.97
	Over 44	\$712.79	\$653.76	\$655.49	\$718.23	\$757.95	\$713.10
	Average	\$120.35	\$207.59	\$215.11	\$218.91	\$215.71	\$215.09
Weighted Average		\$124.55	\$285.42	\$308.26	\$320.90	\$311.04	\$308.92

Note:
Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
FY 2011 Capitation Rate Development
Premier Medallion II Capitation Rates
With CDPS Adjustment**

Exhibit 7e

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,823.66	\$2,870.53	\$3,000.32	\$2,803.19	\$2,468.37	\$2,833.31
	1-5	\$1,268.80	\$1,043.28	\$853.82	\$676.02	\$850.73	\$913.46
	6-14	\$660.99	\$416.64	\$421.47	\$471.56	\$406.57	\$433.87
	Female 15-20	\$660.99	\$416.64	\$421.47	\$471.56	\$406.57	\$432.59
	Female 21-44	\$1,150.66	\$1,018.17	\$1,157.31	\$990.18	\$859.35	\$1,026.16
	Male 15-20	\$660.99	\$416.64	\$421.47	\$471.56	\$406.57	\$434.14
	Male 21-44	\$1,037.57	\$805.06	\$959.05	\$741.55	\$780.02	\$828.03
	Over 44	\$1,241.06	\$1,342.79	\$1,595.15	\$1,264.50	\$1,259.02	\$1,367.17
	Average	\$1,032.46	\$1,001.38	\$1,080.79	\$955.66	\$858.30	\$991.33
Low Income Families with Children	Under 1	\$396.32	\$476.61	\$491.06	\$535.11	\$501.29	\$489.67
	1-5	\$126.26	\$113.37	\$141.35	\$126.64	\$121.85	\$123.13
	6-14	\$104.98	\$104.40	\$104.61	\$107.00	\$100.68	\$104.52
	Female 15-20	\$233.82	\$319.01	\$265.79	\$292.17	\$243.33	\$287.48
	Female 21-44	\$628.11	\$584.28	\$532.20	\$596.02	\$479.22	\$562.96
	Male 15-20	\$113.56	\$161.71	\$130.82	\$123.45	\$134.58	\$141.06
	Male 21-44	\$399.74	\$482.02	\$366.33	\$495.55	\$393.68	\$457.01
	Over 44	\$747.74	\$731.82	\$671.73	\$750.10	\$730.37	\$723.35
	Average	\$219.81	\$230.61	\$224.25	\$235.24	\$215.28	\$227.57
Weighted Average		\$267.11	\$323.57	\$338.31	\$317.02	\$291.87	\$317.47

Note:
Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
FY 2011 Capitation Rate Development
Summary of Medallion II Regional Average Capitation Rates
With CDPS Adjustment**

Exhibit 7f

Aid Category	Age Group	Region					FY 2011 Average
		Northern Virginia	Other MSA	Richmond/ Charlottesville	Rural	Tidewater	
Aged, Blind, and Disabled	Under 1	\$2,757.70	\$2,799.51	\$2,718.06	\$2,797.87	\$2,777.63	\$2,774.18
	1-5	\$1,260.08	\$1,015.16	\$790.44	\$672.23	\$958.74	\$923.29
	6-14	\$655.25	\$401.53	\$389.67	\$469.38	\$458.90	\$450.89
	Female 15-20	\$654.47	\$403.30	\$391.87	\$469.13	\$459.51	\$452.36
	Female 21-44	\$1,137.72	\$989.56	\$1,072.93	\$984.68	\$972.08	\$1,020.73
	Male 15-20	\$654.13	\$401.42	\$390.15	\$469.06	\$459.71	\$451.49
	Male 21-44	\$1,022.22	\$779.06	\$890.21	\$737.63	\$879.14	\$861.84
	Over 44	\$1,223.41	\$1,305.16	\$1,484.16	\$1,256.62	\$1,421.25	\$1,354.01
	Average	\$1,080.01	\$960.25	\$976.48	\$927.48	\$983.67	\$981.72
Low Income Families with Children	Under 1	\$373.59	\$463.54	\$485.97	\$531.42	\$515.32	\$465.02
	1-5	\$119.45	\$110.25	\$139.83	\$125.46	\$125.36	\$124.48
	6-14	\$100.13	\$101.25	\$103.51	\$105.86	\$103.67	\$102.71
	Female 15-20	\$222.38	\$308.64	\$263.06	\$288.89	\$250.63	\$262.09
	Female 21-44	\$599.78	\$565.98	\$526.71	\$590.06	\$493.26	\$542.36
	Male 15-20	\$107.93	\$156.79	\$129.48	\$121.93	\$138.68	\$129.81
	Male 21-44	\$382.44	\$471.23	\$362.29	\$492.24	\$404.94	\$421.93
	Over 44	\$711.58	\$708.81	\$664.85	\$742.39	\$752.03	\$713.64
	Average	\$182.63	\$224.49	\$223.05	\$230.05	\$217.53	\$213.11
Weighted Average		\$239.92	\$313.64	\$312.07	\$319.01	\$311.39	\$296.60

Note:
Average is weighted by health plan enrollment distribution as of May 2010.

**Virginia Medicaid
FY 2011 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	