Rate Cell: IC30: MMP - SPMI	SFY 2021 Base Experience	Incomplete Data Adjustments		Adjusted Base Experience
IC30. MIMF - SPIMI	Experience	Aujust	ments	Experience
Average Monthly Enrollment: 1,038		Utilization	Cost	
Category of Service	PMPM	Adjustment	Adjustment	PMPM
Innationt Hoonital				
Inpatient Hospital Inpatient Hospital	\$ 85.36	\$ 1.40	\$ 0.00	¢ 96 76
Subtotal Inpatient Hospital	\$ 85.36	<b>Φ 1.40</b>	\$ 0.00	\$ 86.76 \$ 86.76
Subtotal inpatient nospital	φ 05.30			φ 60.7 O
Outpatient Hospital				
Outpatient Emergency Room	\$ 2.82	\$ 0.00	\$ 0.00	\$ 2.82
Outpatient Surgery	2.11	-	-	2.11
Other Outpatient	3.40		-	3.40
Subtotal Outpatient Hospital	\$ 8.33			\$ 8.33
Professional				
MH/SA	\$ 581.52	\$ 0.87	\$ 0.00	\$ 582.39
Other Professional	26.39	0.04	· -	26.43
Subtotal Professional	\$ 607.91			\$ 608.82
Retail Pharmacy				
Retail Pharmacy	\$ 1.94	\$ 0.00	\$ 0.00	\$ 1.94
Subtotal Retail Pharmacy	\$ 1.94	Ψ 0.00	<del></del>	\$ 1.94
Ancillary				
Transportation	\$ 0.09	\$ 0.00	\$ 0.00	\$ 0.09
DME/Prosthetics	2.20	ψ 0.00 -	ψ 0.00 -	2.20
Subtotal Ancillary	\$ 2.29		_	\$ 2.29
LTSS				
	\$ 0.18	\$ 0.00	\$ 0.00	\$ 0.18
Hospice Nursing Home	ֆ Ս. 16 11.95	ֆ 0.00 0.16	φ 0.00	ង ប. 16 12.11
HCBS	32.83	0.18	-	33.01
Case Management	230.55	1.27	- -	231.82
Subtotal LTSS	\$ 275.51	1.21		\$ 277.12
Total Medical Costs	\$ 981.34			\$ 985.26

Rate Cell: IC40: MMP - ID	SFY 2021 Base Experience	Incomplete Data Adjustments		Adjusted Base Experience
		114:1:4:	Ocat	·
Average Monthly Enrollment: 975	514514	Utilization	Cost	D14D14
Category of Service	PMPM	Adjustment	Adjustment	PMPM
Inpatient Hospital				
Inpatient Hospital	\$ 5.34	\$ 0.09	\$ 0.00	\$ 5.43
Subtotal Inpatient Hospital	\$ 5.34		<del>* • • • • • • • • • • • • • • • • • • •</del>	\$ 5.43
Outpatient Hospital				
Outpatient Emergency Room	\$ 1.45	\$ 0.00	\$ 0.00	\$ 1.45
Outpatient Surgery	1.43	-	-	1.43
Other Outpatient	2.43	-	-	2.43
Subtotal Outpatient Hospital	\$ 5.31			\$ 5.31
Professional Professional				
MH/SA	\$ 13.08	\$ 0.02	\$ 0.00	\$ 13.10
Other Professional	6.45	0.01	-	6.46
Subtotal Professional	\$ 19.53			\$ 19.56
Retail Pharmacy				
Retail Pharmacy	\$ 1.77	\$ 0.00	\$ 0.00	\$ 1.77
Subtotal Retail Pharmacy	\$ 1.77		_	\$ 1.77
Ancillary				
Transportation	\$ 0.02	\$ 0.00	\$ 0.00	\$ 0.02
DME/Prosthetics	24.05	-	-	24.05
Subtotal Ancillary	\$ 24.07			\$ 24.07
LTSS				
Hospice	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	1.17	0.02	-	1.19
HCBS	20.01	0.11	-	20.12
Case Management	0.02			0.02
Subtotal LTSS	\$ 21.20			\$ 21.33
Total Medical Costs	\$ 77.22			\$ 77.47

Rate Cell: IC50: MMP - Community LTSS  Average Monthly Enrollment: 1,656 Category of Service	SFY 2021 Base Experience PMPM	Incomplete Data Adjustments		Adjusted Base Experience
		Utilization Adjustment	Cost Adjustment	РМРМ
Category of Gervice	1 1911 191	Aujustinent	Aujustilielit	1 1011 101
Inpatient Hospital				
Inpatient Hospital	\$ 23.88	\$ 0.38	\$ 0.00	\$ 24.26
Subtotal Inpatient Hospital	\$ 23.88			\$ 24.26
Outpatient Hospital				
Outpatient Emergency Room	\$ 2.00	\$ 0.00	\$ 0.00	\$ 2.00
Outpatient Surgery	2.45	-	-	2.45
Other Outpatient	14.93			14.93
Subtotal Outpatient Hospital	\$ 19.38			\$ 19.38
Professional				
MH/SA	\$ 43.51	\$ 0.07	\$ 0.00	\$ 43.58
Other Professional	21.13	0.03	<u>-</u> _	21.16
Subtotal Professional	\$ 64.64			\$ 64.74
Retail Pharmacy				
Retail Pharmacy	\$ 2.78	\$ 0.00	\$ 0.00	\$ 2.78
Subtotal Retail Pharmacy	\$ 2.78		_	\$ 2.78
Ancillary				
Transportation	\$ 0.06	\$ 0.00	\$ 0.00	\$ 0.06
DME/Prosthetics	29.72		<u> </u>	29.72
Subtotal Ancillary	\$ 29.78		_	\$ 29.78
LTSS				
Hospice	\$ 0.72	\$ 0.00	\$ 0.00	\$ 0.72
Nursing Home	17.33	0.23	-	17.56
HCBS	1,824.48	10.03	-	1,834.51
Case Management	41.39	0.23		41.62
Subtotal LTSS	\$ 1,883.92			\$ 1,894.41
Total Medical Costs	\$ 2,024.38			\$ 2,035.35

Rate Cell:	SFY 2021 Base	Incomplete Data Adjustments		Adjusted Base Experience
IC60: MMP - Nursing Home	Experience			
Average Monthly Enrollment: 2,775		Utilization	Cost	
Category of Service	PMPM	Adjustment	Adjustment	PMPM
Inpatient Hospital				
Inpatient Hospital	\$ 8.10	\$ 0.14	\$ 0.00	\$ 8.24
Subtotal Inpatient Hospital	\$ 8.10	Ψ 0.11	Ψ 0.00	\$ 8.24
Outpatient Hospital				
Outpatient Emergency Room	\$ 0.90	\$ 0.00	\$ 0.00	\$ 0.90
Outpatient Surgery	0.50	-	-	0.50
Other Outpatient	3.33	-	-	3.33
Subtotal Outpatient Hospital	\$ 4.73			\$ 4.73
Professional				
MH/SA	\$ 1.38	\$ 0.00	\$ 0.00	\$ 1.38
Other Professional	3.84	0.01	-	3.85
Subtotal Professional	\$ 5.22			\$ 5.23
Retail Pharmacy				
Retail Pharmacy	\$ 1.13	\$ 0.00	\$ 0.00	\$ 1.13
Subtotal Retail Pharmacy	\$ 1.13 <b>\$ 1.13</b>			\$ 1.13
Ancillary				
Transportation	\$ 0.04	\$ 0.00	\$ 0.00	\$ 0.04
DME/Prosthetics	0.24		<u> </u>	0.24
Subtotal Ancillary	\$ 0.28		_	\$ 0.28
LTSS				
Hospice	\$ 422.10	\$ 2.32	\$ 0.00	\$ 424.42
Nursing Home	5,352.92	71.73	-	5,424.65
HCBS	1.40	0.01	-	1.41
Case Management	0.90			0.90
Subtotal LTSS	\$ 5,777.32			\$ 5,851.38
Total Medical Costs	\$ 5,796.78			\$ 5,870.99

Rate Cell: IC70: MMP - Community Non-LTSS	SFY 2021 Base Experience	Incomplete Data Adjustments		Adjusted Base Experience
Average Monthly Enrollment: 8,864 Category of Service	PMPM	Utilization Adjustment	Cost Adjustment	PMPM
	1 1011 101	Aujustinent	Adjustiniont	1 1011 101
Inpatient Hospital				
Inpatient Hospital	\$ 14.74	\$ 0.24	\$ 0.00	\$ 14.98
Subtotal Inpatient Hospital	\$ 14.74			\$ 14.98
Outpatient Hospital				
Outpatient Emergency Room	\$ 1.39	\$ 0.00	\$ 0.00	\$ 1.39
Outpatient Surgery	2.07	-	-	2.07
Other Outpatient	5.18	-	-	5.18
Subtotal Outpatient Hospital	\$ 8.64			\$ 8.64
Professional				
MH/SA	\$ 22.61	\$ 0.03	\$ 0.00	\$ 22.64
Other Professional	10.92	0.02		10.94
Subtotal Professional	\$ 33.53		_	\$ 33.58
Retail Pharmacy				
Retail Pharmacy	\$ 0.89	\$ 0.00	\$ 0.00	\$ 0.89
Subtotal Retail Pharmacy	\$ 0.89		_	\$ 0.89
Ancillary				
Transportation	\$ 0.04	\$ 0.00	\$ 0.00	\$ 0.04
DME/Prosthetics	2.41		-	2.41
Subtotal Ancillary	\$ 2.45		_	\$ 2.45
LTSS				
Hospice	\$ 1.15	\$ 0.01	\$ 0.00	\$ 1.16
Nursing Home	24.98	0.33	-	25.31
HCBS	7.96	0.04	-	8.00
Case Management	8.96	0.05		9.01
Subtotal LTSS	\$ 43.05			\$ 43.48
Total Medical Costs	\$ 103.30			\$ 104.02