

State of Rhode Island
Executive Office of Health and Human Services
State Fiscal Year (SFY) 2023 Capitation Rate Development
Medicare-Medicaid Plan
Prospective Rate Development Model

Rate Cell: IC30: MMP - SPMI	Adjusted Base Experience	Program Change Adjustments		Acuity Adjustments		Trend Adjustments		Projected Experience
Average Monthly Enrollment: 1,132 Category of Service	PMPM	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	PMPM
Inpatient Hospital								
Inpatient Hospital	\$ 86.76	\$ 0.00	\$ 0.00	\$ 0.07	\$ 0.00	\$ 2.63	\$ 4.62	\$ 94.08
Subtotal Inpatient Hospital	\$ 86.76							\$ 94.08
Outpatient Hospital								
Outpatient Emergency Room	\$ 2.82	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.03	\$ 0.15	\$ 3.00
Outpatient Surgery	2.11	-	-	-	-	0.07	0.11	2.29
Other Outpatient	3.40	-	-	-	-	0.11	0.18	3.69
Subtotal Outpatient Hospital	\$ 8.33							\$ 8.98
Professional								
MH/SA	\$ 582.39	\$ 0.00	\$ 0.00	\$ 0.47	\$ 0.00	\$ 23.54	\$ 24.50	\$ 630.90
Other Professional	26.43	-	-	0.02	-	1.07	1.11	28.63
Subtotal Professional	\$ 608.82							\$ 659.53
Retail Pharmacy								
Retail Pharmacy	\$ 1.94	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.08	\$ 0.16	\$ 2.18
Subtotal Retail Pharmacy	\$ 1.94							\$ 2.18
Ancillary								
Transportation	\$ 0.09	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.10
DME/Prosthetics	2.20	-	-	-	-	0.05	0.11	2.36
Subtotal Ancillary	\$ 2.29							\$ 2.46
LTSS								
Hospice	\$ 0.18	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.19
Nursing Home	12.11	-	-	-	-	0.12	0.69	12.92
HCBS	33.01	-	-	18.16	-	2.06	2.15	55.38
Case Management	231.82	-	-	-	-	9.37	9.74	250.93
Subtotal LTSS	\$ 277.12							\$ 319.42
Total Medical Costs	\$ 985.26							\$ 1,086.65

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Rate Cell: IC40: MMP - ID	Adjusted Base Experience	Program Change Adjustments		Acuity Adjustments		Trend Adjustments		Projected Experience
Average Monthly Enrollment: 1,411		Utilization	Cost	Utilization	Cost	Utilization	Cost	
Category of Service	PMPM	Adjustment	Adjustment	Adjustment	Adjustment	Adjustment	Adjustment	PMPM
Inpatient Hospital								
Inpatient Hospital	\$ 5.43	\$ 0.00	\$ 0.00	\$ 0.25	\$ 0.00	\$ 0.18	\$ 0.30	\$ 6.16
Subtotal Inpatient Hospital	\$ 5.43							\$ 6.16
Outpatient Hospital								
Outpatient Emergency Room	\$ 1.45	\$ 0.00	\$ 0.00	\$ 0.07	\$ 0.00	\$ 0.01	\$ 0.08	\$ 1.61
Outpatient Surgery	1.43	-	-	0.07	-	0.04	0.08	1.62
Other Outpatient	2.43	-	-	0.11	-	0.08	0.14	2.76
Subtotal Outpatient Hospital	\$ 5.31							\$ 5.99
Professional								
MH/SA	\$ 13.10	\$ 0.00	\$ 0.00	\$ 0.61	\$ 0.00	\$ 0.56	\$ 0.57	\$ 14.84
Other Professional	6.46	-	-	0.30	-	0.28	0.28	7.32
Subtotal Professional	\$ 19.56							\$ 22.16
Retail Pharmacy								
Retail Pharmacy	\$ 1.77	\$ 0.00	\$ 0.00	\$ 0.08	\$ 0.00	\$ 0.08	\$ 0.16	\$ 2.09
Subtotal Retail Pharmacy	\$ 1.77							\$ 2.09
Ancillary								
Transportation	\$ 0.02	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.02
DME/Prosthetics	24.05	-	-	1.13	-	0.50	1.30	26.98
Subtotal Ancillary	\$ 24.07							\$ 27.00
LTSS								
Hospice	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Nursing Home	1.19	-	-	-	-	0.01	0.07	1.27
HCBS	20.12	-	2.29	27.46	-	2.01	2.10	53.98
Case Management	0.02	-	-	-	-	-	-	0.02
Subtotal LTSS	\$ 21.33							\$ 55.27
Total Medical Costs	\$ 77.47							\$ 118.67

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Rate Cell: IC50: MMP - Community LTSS	Adjusted Base Experience	Program Change Adjustments		Acuity Adjustments		Trend Adjustments		Projected Experience
Average Monthly Enrollment: 1,646 Category of Service	PMPM	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	PMPM
Inpatient Hospital								
Inpatient Hospital	\$ 24.26	\$ 0.00	\$ 0.00	\$ 0.30	\$ 0.00	\$ 0.75	\$ 1.30	\$ 26.61
Subtotal Inpatient Hospital	\$ 24.26							\$ 26.61
Outpatient Hospital								
Outpatient Emergency Room	\$ 2.00	\$ 0.00	\$ 0.00	\$ 0.02	\$ 0.00	\$ 0.03	\$ 0.10	\$ 2.15
Outpatient Surgery	2.45	-	-	0.03	-	0.08	0.13	2.69
Other Outpatient	14.93	-	-	0.19	-	0.45	0.81	16.38
Subtotal Outpatient Hospital	\$ 19.38							\$ 21.22
Professional								
MH/SA	\$ 43.58	\$ 0.00	\$ 0.00	\$ 0.54	\$ 0.00	\$ 1.79	\$ 1.85	\$ 47.76
Other Professional	21.16	-	-	0.26	-	0.87	0.90	23.19
Subtotal Professional	\$ 64.74							\$ 70.95
Retail Pharmacy								
Retail Pharmacy	\$ 2.78	\$ 0.00	\$ 0.00	\$ 0.03	\$ 0.00	\$ 0.12	\$ 0.24	\$ 3.17
Subtotal Retail Pharmacy	\$ 2.78							\$ 3.17
Ancillary								
Transportation	\$ 0.06	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.07
DME/Prosthetics	29.72	-	-	0.37	-	0.61	1.55	32.25
Subtotal Ancillary	\$ 29.78							\$ 32.32
LTSS								
Hospice	\$ 0.72	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.04	\$ 0.77
Nursing Home	17.56	-	-	0.44	-	0.18	1.02	19.20
HCBS	1,834.51	-	131.32	164.58	-	86.07	89.54	2,306.02
Case Management	41.62	-	-	(0.62)	-	1.66	1.72	44.38
Subtotal LTSS	\$ 1,894.41							\$ 2,370.37
Total Medical Costs	\$ 2,035.35							\$ 2,524.64

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Rate Cell: IC60: MMP - Nursing Home	Adjusted Base Experience	Program Change Adjustments		Acuity Adjustments		Trend Adjustments		Projected Experience
Average Monthly Enrollment: 811		Utilization	Cost	Utilization	Cost	Utilization	Cost	
Category of Service	PMPM	Adjustment	Adjustment	Adjustment	Adjustment	Adjustment	Adjustment	PMPM
Inpatient Hospital								
Inpatient Hospital	\$ 8.24	\$ 0.00	\$ 0.00	\$ 1.50	\$ 0.00	\$ 0.30	\$ 0.52	\$ 10.56
Subtotal Inpatient Hospital	\$ 8.24							\$ 10.56
Outpatient Hospital								
Outpatient Emergency Room	\$ 0.90	\$ 0.00	\$ 0.00	\$ 0.16	\$ 0.00	\$ 0.02	\$ 0.05	\$ 1.13
Outpatient Surgery	0.50	-	-	0.09	-	0.02	0.03	0.64
Other Outpatient	3.33	-	-	0.61	-	0.12	0.21	4.27
Subtotal Outpatient Hospital	\$ 4.73							\$ 6.04
Professional								
MH/SA	\$ 1.38	\$ 0.00	\$ 0.00	\$ 0.25	\$ 0.00	\$ 0.07	\$ 0.07	\$ 1.77
Other Professional	3.85	-	-	0.70	-	0.19	0.19	4.93
Subtotal Professional	\$ 5.23							\$ 6.70
Retail Pharmacy								
Retail Pharmacy	\$ 1.13	\$ 0.00	\$ 0.00	\$ 0.21	\$ 0.00	\$ 0.05	\$ 0.11	\$ 1.50
Subtotal Retail Pharmacy	\$ 1.13							\$ 1.50
Ancillary								
Transportation	\$ 0.04	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.05
DME/Prosthetics	0.24	-	-	0.04	-	0.01	0.01	0.30
Subtotal Ancillary	\$ 0.28							\$ 0.35
LTSS								
Hospice	\$ 424.42	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 4.24	\$ 24.14	\$ 452.80
Nursing Home	5,424.65	-	-	-	202.34	56.27	319.97	6,003.23
HCBS	1.41	-	0.23	-	-	0.06	0.07	1.77
Case Management	0.90	-	-	-	-	0.04	0.03	0.97
Subtotal LTSS	\$ 5,851.38							\$ 6,458.77
Total Medical Costs	\$ 5,870.99							\$ 6,483.92

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Rate Cell: IC70: MMP - Community Non-LTSS	Adjusted Base Experience	Program Change Adjustments		Acuity Adjustments		Trend Adjustments		Projected Experience
Average Monthly Enrollment: 8,427 Category of Service	PMPM	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	Utilization Adjustment	Cost Adjustment	PMPM
Inpatient Hospital								
Inpatient Hospital	\$ 14.98	\$ 0.00	\$ 0.00	\$ 1.74	\$ 0.00	\$ 0.49	\$ 0.90	\$ 18.11
Subtotal Inpatient Hospital	\$ 14.98							\$ 18.11
Outpatient Hospital								
Outpatient Emergency Room	\$ 1.39	\$ 0.00	\$ 0.00	\$ 0.16	\$ 0.00	\$ 0.02	\$ 0.08	\$ 1.65
Outpatient Surgery	2.07	-	-	0.24	-	0.07	0.12	2.50
Other Outpatient	5.18	-	-	0.60	-	0.17	0.31	6.26
Subtotal Outpatient Hospital	\$ 8.64							\$ 10.41
Professional								
MH/SA	\$ 22.64	\$ 0.00	\$ 0.00	\$ 2.62	\$ 0.00	\$ 1.02	\$ 1.06	\$ 27.34
Other Professional	10.94	-	-	1.27	-	0.49	0.51	13.21
Subtotal Professional	\$ 33.58							\$ 40.55
Retail Pharmacy								
Retail Pharmacy	\$ 0.89	\$ 0.00	\$ 0.00	\$ 0.10	\$ 0.00	\$ 0.04	\$ 0.09	\$ 1.12
Subtotal Retail Pharmacy	\$ 0.89							\$ 1.12
Ancillary								
Transportation	\$ 0.04	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.01	\$ 0.00	\$ 0.05
DME/Prosthetics	2.41	-	-	0.28	-	0.05	0.14	2.88
Subtotal Ancillary	\$ 2.45							\$ 2.93
LTSS								
Hospice	\$ 1.16	\$ 0.00	\$ 0.00	\$ 0.07	\$ 0.00	\$ 0.01	\$ 0.07	\$ 1.31
Nursing Home	25.31	-	-	1.47	-	0.27	1.52	28.57
HCBS	8.00	-	0.28	62.57	-	2.86	2.98	76.69
Case Management	9.01	-	-	0.52	-	0.39	0.40	10.32
Subtotal LTSS	\$ 43.48							\$ 116.89
Total Medical Costs	\$ 104.02							\$ 190.01