

Use Case:								
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Diagnoses submitted (4296 and 70710)								
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Standardized bid = \$400							Risk Adjustment Factors (Coefficients)
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County Intra-Service Area Adjustment (ISAR) Factor = .78	Base Factor						
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Beneficiary premium = \$35			74 year old female		0.368	
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Base Factor					HCC81 Acute Myocardial Infarction	0.359		
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Include gender, age, Medicaid, and Disability as applicable	HCC149 Chronic Ulcer of Skin, Except Decubitus	0.449		
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Determine HCCs									
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Diagnosis Code 4296 = HCC81 Acute Myocardial Infarction							
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Diagnosis Code 70710 = HCC149 Chronic Ulcer of Skin, Except Decubitus						
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Apply the Normalization Factor and MA Coding Intensity							
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Normalization Factor for 2012 = 1.079									
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1.176	/	1.079	=	1.089					

Coding Intensity Factor for 2012 = 0.0341								
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total monthly payment for the beneficiary							
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Standardized ("1.0") A/B bid = \$400								
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Premium = \$35 (Plan's bid above benchmark; therefore, premium applied)						
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The plan's county ISAR factor = 0.78	<input type="checkbox"/>	The risk factor = 1.053						
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Standardized Bid * ISAR Factor = plan-specific county payment rate for this plan						
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\$400 * 0.78 = \$312.00									
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Plan-Specific County Payment Rate * Risk Score +/- premium or rebate = Monthly Payment for this beneficiary				
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Total monthly payment of the beneficiary = 293.54							
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