

**AMENDMENT NUMBER FIFTEEN  
TO THE CONTRACT BETWEEN  
THE DIVISION OF MEDICAID  
IN THE OFFICE OF THE GOVERNOR  
AND  
MOLINA HEALTHCARE OF MISSISSIPPI, INC.  
A CARE COORDINATION ORGANIZATION (CCO)**

**(Molina Healthcare of Mississippi, Inc.)**

**THIS AMENDMENT NUMBER FIFTEEN** modifies, revises, and amends the Contract entered into by and between the **Division of Medicaid in the Office of the Governor**, an administrative agency of the **State of Mississippi** (hereinafter "DOM" or "Division"), and **Molina Healthcare of Mississippi, Inc.** (hereinafter "CCO" or "Contractor") and collectively hereinafter referenced as the "Parties."

**WHEREAS**, DOM is charged with the administration of the Mississippi State Plan for Medical Assistance in accordance with the requirements of Title XIX of the Social Security Act of 1935, as amended, and Miss. Code Ann. § 43-13-101, *et seq.*, (1972, as amended);

**WHEREAS**, CCO is an entity eligible to enter into a comprehensive risk contract in accordance with Section 1903(m) of the Social Security Act and 42 CFR § 438.3(b) and is engaged in the business of providing comprehensive services as outlined in 42 CFR § 438.2. The CCO is licensed appropriately as defined by the Department of Insurance of the State of Mississippi pursuant to Miss. Code Ann. § 83-41-305 (1972, as amended);

**WHEREAS**, the Parties extended the Contract for an additional year pursuant to Miss. Code Ann. § 43-13-117(H)(12) through Amendment 13 as approved by the Public Procurement Review Board (PPRB);

**WHEREAS**, DOM contracted with the CCO to obtain services for the benefit of certain Medicaid beneficiaries;

**WHEREAS**, pursuant to Section 17.M.1 and Section 1.B of the Contract, no modification or change to any provision of the Contract shall be made unless it is mutually agreed upon in writing by both parties and is signed by a duly authorized representative of the CCO and DOM as an amendment to the Contract, and such amendments shall be effective upon execution and approval; and

**WHEREAS**, the parties have previously modified the Contract in Amendments #1, #2, #3, #4, #5, #6, #7, #8, #9, #10, #11, #12, #13, and #14.

**NOW, THEREFORE**, in consideration of the foregoing recitals and of the mutual promises contained herein, DOM and CCO agree the Contract is amended as follows:

- I. Section 13.A.9, CAPITATION RATES, is hereby amended to add the attached and incorporated Exhibit 3 which provides clarification to Amendment 14, Exhibit 2 (September 14, 2022 State Fiscal Year 2023 Actuarial Report) language related to the additional outpatient payments as part of the Mississippi Hospital Access Program (MHAP) directed payment program and to revise the amount included for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program effective for State Fiscal Year 2023 (SFY 2023).
  
- II. All other provisions of the Contract are unchanged and it is further the intent of the parties that any inconsistent provisions not addressed by the above amendments are modified and interpreted to conform with this Amendment Number Fifteen.

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**IN WITNESS WHEREOF**, the parties have executed this Amendment Number Fifteen by their duly authorized representatives as follows:

**Mississippi Division of Medicaid**

By:   
\_\_\_\_\_  
Drew L. Snyder  
Executive Director

Date: June 19, 2023

**Molina Healthcare of Mississippi, Inc.**

By:   
\_\_\_\_\_  
Bridget Galatas  
President & Chief Executive Officer

Date: June 9, 2023

STATE OF MISSISSIPPI  
COUNTY OF Hinds

THIS DAY personally came and appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, the within named, **Drew L. Snyder**, in his official capacity as the duly appointed **Executive Director of the Division of Medicaid in the Office of the Governor**, an administrative agency of the **State of Mississippi**, who acknowledged to me, being first duly authorized by said agency that he signed and delivered the above and foregoing written **Amendment Number Fifteen** for and on behalf of said agency and as its official act and deed on the day and year therein mentioned.

GIVEN under my hand and official seal of office on this the 19<sup>th</sup> day of June, A.D., 2023.

NOTARY PUBLIC

Shelby J. Berryman

My Commission Expires:

Sept 23, 2024



STATE OF Mississippi  
COUNTY OF Hinds

THIS DAY personally came and appeared before me, the undersigned authority, in and for the aforesaid jurisdiction, the within named, **Bridget Galatas**, in her respective capacity as the **President and Chief Executive Officer of Molina Healthcare of Mississippi, Inc.**, a corporation authorized to do business in Mississippi, who acknowledged to me, being first duly authorized by said corporation that she signed and delivered the above and foregoing written **Amendment Number Fifteen** for and on behalf of said corporation and as its official act and deed on the day and year therein mentioned.

GIVEN under my hand and official seal of office on this the 9<sup>th</sup> day of Jan, A.D., 2023.



My Commission Expires:

June 16, 2023

NOTARY PUBLIC

Norma L. Dempsey

**MSCAN AMENDMENT 15**  
**Exhibit 3 to MSCAN Amendment 14**  
***SFY2023 Rate Calculation Updated Language for State***  
***Directed Payments***



17335 Golf Parkway  
Suite 100  
Brookfield, WI 53045  
USA  
Tel +1 262 784 2250

milliman.com

April 11, 2023

Jennifer Wentworth  
Special Projects Admin, Accounting  
Mississippi Office of the Governor, Division of Medicaid  
550 High Street, Suite 1000  
Jackson, MS 39201  
*Sent via email: [jennifer.wentworth@medicaid.ms.gov](mailto:jennifer.wentworth@medicaid.ms.gov)*

**Re: State Fiscal Year 2023 MississippiCAN Preliminary Rate Calculation and Certification – MHAP Update**

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) retained Milliman to develop actuarially sound capitation rates for state fiscal year (SFY) 2023 for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for Medicaid beneficiaries. This letter summarizes revisions to the development of the SFY 2023 capitation rates to incorporate additional outpatient payments as part of the Mississippi Hospital Access Program (MHAP) directed payment program and to revise the amount included for the new Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program effective for SFY 2023. The adjustments to capitation rates are consistent with CMS guidance and the updated preprint submitted to CMS.

A revised actuarial certification is included in Attachment A.

**MHAP AND TREAT PAYMENT ADJUSTMENTS**

Compared to the prior rate certification dated on September 14, 2022, this rate certification is updated to include an additional \$40,245,451 in outpatient fee schedule adjustment (FSA) payments for the MHAP program. By adding these funds to the outpatient FSA pool, DOM aims to align the FSA funding more closely with Medicaid managed care payments (currently these are more heavily weighted toward inpatient) and to address urgent access issues for ambulatory hospital services. The amounts included for the TREAT program have also been updated to align with the preprint submitted to CMS, which decreased from the initial estimate of \$15.3 million to \$13.6 million.

Monthly capitation payments made to the CCOs exclude directed payments, including MHAP and TREAT payments. The projected PMPM amounts for payments made outside the monthly capitation rates are shown on Exhibits 15 and 16, along with the associated premium tax. Relative to the September 14, 2022 certification, Exhibits 15 and 16 are updated to include the MHAP and TREAT amounts discussed above, as well as an updated federal medical assistance percentage (FMAP) based on the phasing out of the enhanced FMAP due to the COVID-19 public health emergency during SFY 2023. All values in the other exhibits included in this certification are unchanged from the prior version.

**CMS DOCUMENTATION**

All necessary information for the state directed payment arrangements included in these revised capitation rates is summarized below.

**Table 1**  
**Mississippi Division of Medicaid**  
**Summary of All State Directed Payments**

Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?
MS_Fee_IPH.OPH_Amend2_20220701-20230630	Uniform dollar or percentage increase	Enhanced hospital reimbursement for inpatient and outpatient hospital services for qualifying facilities	Separate payment term
MS_Fee.VBP_AMC.PC.SP.Oth_Renewal_20220701-20230630	Uniform dollar or percentage increase	Enhanced payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital	Separate payment term
MS_Fee_Oth_Renewal_20220701-20230630	Minimum Fee Schedule	Enhanced payments to physicians and other eligible professional service practitioners providing services related to autism spectrum disorder	Included as a rate adjustment
MS_Fee_Oth_New_20220701-20230630	Uniform dollar or percentage increase	Enhanced reimbursement for ambulance providers	Separate payment term

**Table 2**  
**Mississippi Division of Medicaid**  
**Summary of State Directed Payments Included as a Separate Payment Term**

Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	The Magnitude on a PMPM Basis	Confirmation the Rate Development is Consistent with the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period
			See Exhibit 15		
MS_Fee_IPH.OPH_Amend2_20220701-20230630	FSA component of MHAP: \$313.1 million QIPP component of MHAP: \$288.1 million	Confirmed the actuarial certification covers this separate payment term	FSA component of MHAP: allocated across rate cells based on projected IP / OP spend. 61% is allocated based on projected IP spend and 39% is allocated based on projected OP spend. Ranges from \$14.82 to \$2,541.27 PMPM.  QIPP component of MHAP: allocated as a fixed PMPM of \$56.86 across all rate cells.	Confirmed	Confirmed
MS_Fee.VBP_AMC.PC.SP.Oth_Renewal_20220701-20230630	\$38.0 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 15 Allocated as a fixed PMPM of \$7.50 across all rate cells	Confirmed	Confirmed
MS_Fee_Oth_New_20220701-20230630	\$13.6 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 15 Allocated as a fixed PMPM of \$2.69 across all rate cells	Confirmed	Confirmed

## DATA RELIANCE AND IMPORTANT CAVEATS

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to estimate SFY 2023 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting from January 2018 to September 2021 with runout through November 2021, FFS cost and eligibility data from January 2017 to December 2018, historical and projected reimbursement information, TPL recoveries, fee schedules, pharmacy and dispensing fee pricing, and other information from DOM, MississippiCAN CCOs, Myers and Stauffer, Change Healthcare, and CMS to calculate the preliminary MississippiCAN capitation rates shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Attachment B for a full list of the data relied upon to develop the SFY 2023 capitation rates.

Differences between the capitation rates and actual experience will depend on the extent to which future experience conforms to the assumptions made in the capitation rate calculations. It is certain that actual experience will not conform exactly to the assumptions used. Actual amounts will differ from projected amounts to the extent that actual experience is better or worse than expected.

Our letter is intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2023. The letter and the models used to develop the values in this letter may not be appropriate for other purposes. We anticipate the letter will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

The results of this letter are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

The authors of this letter are actuaries employed by Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, this letter is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with DOM effective September 1, 2022, apply to this letter and its use.



Please let us know if you would like to discuss these results further.

Sincerely,



Jill A. Bruckert, FSA, MAAA  
Principal and Consulting Actuary



Katarina N. Lorenz, FSA, MAAA  
Consulting Actuary

JAB/KNL/mb

Attachments



EXHIBITS  
(Provided in Excel)





ATTACHMENT A  
Actuarial Certification



17335 Golf Parkway  
Suite 100  
Brookfield, WI 53045  
USA  
Tel +1 262 784 2250

milliman.com

Jill A. Bruckert, FSA, MAAA  
Principal and Consulting Actuary

jill.bruckert@milliman.com

April 11, 2023

**Mississippi Division of Medicaid  
Capitated Contracts Ratesetting  
Actuarial Certification  
SFY 2023 MississippiCAN Capitation Rates - REVISED**

I, Jill A. Bruckert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the Mississippi Division of Medicaid (DOM) to perform an actuarial certification of the Mississippi Coordinated Access Network (MississippiCAN) coordinated care capitation rates for July 1, 2022 to June 30, 2023 (SFY 2023) for filing with the Centers for Medicare and Medicaid Services (CMS). I reviewed the capitation rate development and am familiar with the following regulation and guidance:

- The requirements of 42 CFR §438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7
- CMS "Appendix A, PAHP, PIHP, and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting dated November 10, 2014"
- 2022 to 2023 Medicaid Managed Care Rate Development Guide
- Actuarial Standard of Practice 49 and other applicable standards of practice

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2023 dated April 11, 2023 and accompanying this certification.

To the best of my information, knowledge, and belief, for the SFY 2023 period, the capitation rates offered by DOM are in compliance with the relevant requirements of 42 CFR 438.4. The attached letter and full report dated September 14, 2022 describe the capitation rate setting methodology.

In my opinion, the capitation rates are actuarially sound, as defined in Actuarial Standard of Practice 49, were developed in accordance with generally accepted actuarial principles and practices, and are appropriate for the populations to be covered and the services to be furnished under the contract. This certification includes all prospective health plan payments, as well as the components of the MHAP, MAPS, and TREAT programs that will be settled retrospectively.

In making my opinion, I relied upon the accuracy of the underlying claim and eligibility data records and other information prepared by DOM and participating CCOs. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary. The reliance letter from DOM is included in Attachment B.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time-to-time by the Actuarial Standards Board, whose standards form the basis of this Statement of Opinion.

It should be emphasized that capitation rates are a projection of future costs based on a set of assumptions. Actual costs will be dependent on each contracted coordinated care organization's situation and experience.



This Opinion assumes the reader is familiar with the MississippiCAN program, Medicaid coordinated care programs, and actuarial rating techniques. The Opinion is intended for the State of Mississippi and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

A handwritten signature in black ink, appearing to read "Jill A. Bruckert", written over a horizontal line.

Jill A. Bruckert  
Member, American Academy of Actuaries  
Principal and Consulting Actuary  
April 11, 2023



ATTACHMENT B  
Data Reliance Letter



MISSISSIPPI DIVISION OF  
**MEDICAID**

April 10, 2023

Jill A. Bruckert, FSA, MAAA  
Principal and Consulting Actuary  
Milliman, Inc.  
17335 Golf Parkway, Suite 100  
Brookfield, WI 53045

**Re: Data Reliance for Actuarial Certification of SFY 2023 MississippiCAN Capitation Rates**

Dear Jill:

I, Jennifer Wentworth, Deputy Administrator for Finance for the Mississippi Division of Medicaid (DOM), hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying MississippiCAN capitation rates was prepared under my direction and, to the best of my knowledge and belief, is accurate, complete, and consistent with the data used to develop the capitation rates. Capitation rates are effective July 1, 2022 to June 30, 2023.

Provided data or information used in the development of the capitation rates includes:

1. Data from DOM's Medicaid Management Information Systems (MMIS) vendor:
  - a. FFS claims through October 2019.
  - b. Encounter claims through October 2021.
  - c. Medicaid eligibility through November 2021.
2. Data from DOM's vendor Myers and Stauffer:
  - a. Detailed encounter claim status reports, including identification of duplicative or voided claims through November 1, 2021.
3. Data from DOM's vendor Change Healthcare:
  - a. PDL change analysis file and supporting exhibits for January 1, 2020 provided February 4, 2020.
  - b. PDL change analysis file and supporting exhibits for May 1, 2020 provided May 14, 2020.
  - c. PDL change analysis file and supporting exhibits for January 1, 2021 provided January 19, 2021 through February 1, 2021.
  - d. PDL change analysis files and supporting exhibits for January 1, 2022 provided January 23, 2022 and January 31, 2022.

4. Supporting documentation provided by DOM:
  - a. Data identification logic:
    - i. Logic for identifying members eligible for the MYPAC rate cell.
    - ii. Logic for identifying psychiatric residential treatment facility (PRTF) claims to be included for MississippiCAN members and estimated 10% savings due to the inclusion in MississippiCAN.
    - iii. Fee schedule for PRTF claims by facility effective January 1, 2021 provided on March 7, 2022.
    - iv. Logic for identifying Institution for Mental Disease (IMD) facilities.
    - v. Logic for identifying claims above state plan covered service limits.
    - vi. Detailed mapping of services and providers previously eligible for the 5% assessment.
    - vii. List of products reimbursed as clinician administered drugs and implantable drug system devices (CADDs).
  - b. Reimbursement and / or program changes:
    - i. SB 2799 passed March 30, 2021.
      1. Removal of 5% provider assessment effective July 1, 2021.
      2. Preventative and diagnostic dental reimbursement increases of 5% effective July 1, 2021 and July 1, 2022, achieved through the removal of the 5% provider assessment.
      3. No reimbursement changes on or after July 1, 2021, unless federally required.
    - ii. HB 657 passed April 18, 2022.
      1. Restorative dental reimbursement increase of 5% effective July 1, 2022.
      2. Unfreezing of pharmacy reimbursement effective July 1, 2021.
      3. Unfreezing of physician fee schedules effective July 1, 2022.
    - iii. Estimated increase in autism spectrum disorder (ASD) services costs for SFY 2023 compared to CY 2019 due to the ramp up of services after the fee schedule change.
    - iv. Inpatient DRG, outpatient APC, and professional fee re-pricing impacts for July 2019 and July 2020 prepared by Conduent.
    - v. Professional fee re-pricing impacts for July 2022 prepared by Conduent.
    - vi. OPSS reimbursement methodology changes for July 2018, including the removal of the 5% provider assessment on outpatient hospital services.
    - vii. Estimate of the impact of OP dental reimbursement changes provided by Conduent.

Jill A. Bruckert, FSA, MAAA  
Milliman, Inc.  
April 10, 2023  
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- viii. Estimated fee schedule increase for the ambulance reimbursement change effective July 1, 2020.
  - ix. Fee schedule for COVID-19 vaccine administration costs for SFY 2023 and vaccine uptake rates by population.
  - x. Payments for rural outpatient hospitals opting out of APC reimbursement.
- c. Directed payments:
- i. SFY 2023 Mississippi Hospital Access Program (MHAP) total funding amount of \$601,153,602 along with splits for a quality incentive payment pool (QIPP) amount of \$288,100,478, the inpatient fee schedule adjustment (FSA) amount of \$190,965,371, and the outpatient FSA amount of \$122,087,753 to be used in capitation rate development.
  - ii. SFY 2023 Mississippi Medicaid Access to Physician Services (MAPS) funding amount of \$38,018,361.
  - iii. ASD minimum fee schedule.
  - iv. SFY 2023 Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) funding amount of \$13,622,996.
- d. Historical data:
- i. Documentation of historical FFS third party liability (TPL) recoveries.
  - ii. Documentation of \$2.7 million of TPL recoveries by DOM for MississippiCAN claims incurred in calendar year (CY) 2019.
  - iii. Files summarizing claims for Hospital Presumptive Eligibility (HPE) newborns provided December 16, 2020.
  - iv. Files summarizing individuals in the Non-Newborn SSI / Disabled rate cell moved to FFS due to a PRTF stay in CY 2019.
  - v. Estimated costs for graduate medical education (GME) in SFY 2018, SFY 2019, and January to September 2019.
  - vi. MLR reports for CY 2018 through March 2022.
  - vii. Capitation reports showing monthly membership through July 2022.
  - viii. COVID-19 vaccination status for each MississippiCAN enrollee as of December 2021.
- e. Other data:
- i. Quality withhold parameters for SFY 2023.
  - ii. Potentially preventable hospital readmissions analysis prepared by Conduent provided July 25, 2022.
  - iii. April 2022 QIPP Statewide and CCO PPHR reports provided April 12, 2022.

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Milliman, Inc.  
April 10, 2023  
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- iv. Confirmation DOM is carving costs related to Zolgensma out of MississippiCAN for SFY 2023 and no other drugs are expected to be carved out of MississippiCAN for SFY 2023.
- v. Risk corridor parameters for SFY 2023.
- vi. Other computer files and clarifying correspondence.

Milliman relied on DOM and their MMIS vendor for the collection and processing of the FFS and CCO encounter data. Milliman relied on Myers and Stauffer's review of encounter data for duplicative or voided claims. Milliman relied on the CCOs to provide accurate CY 2018 and CY 2019 financial data as certified by each CCO. Milliman did not audit the FFS data, the CCO financial data, or the encounter data, but did assess the data for reasonableness as documented in the capitation rate report.

*Jennifer Westworth*

\_\_\_\_\_  
Name

Deputy Administrator for Finance  
\_\_\_\_\_  
Title

4/10/2023 | 9:11:03 AM CDT  
\_\_\_\_\_  
Date



**Caveats and Limitations**  
**Mississippi Division of Medicaid**  
**READ BEFORE PROCEEDING**

Milliman has developed certain models to estimate the values included in these exhibits and appendices. The intent of the models was to estimate SFY 2023 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial exhibits and appendices from January 2018 to September 2021 with runout through November 2021, FFS cost and eligibility data from January 2017 to December 2018, historical and projected reimbursement information, TPL recoveries, fee schedules, pharmacy and dispensing fee pricing, and other information from DOM, MississippiCAN CCOs, Myers and Stauffer, Change Healthcare, and CMS to calculate the preliminary MississippiCAN capitation rates shown in these exhibits and appendices. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix J for a full list of the data relied upon to develop the SFY 2023 capitation rates.

Differences between the capitation rates and actual experience will depend on the extent to which future experience conforms to the assumptions made in the capitation rate calculations. It is certain that actual experience will not conform exactly to the assumptions used. Actual amounts will differ from projected amounts to the extent that actual experience is better or worse than expected.

Our exhibits and appendices are intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2023. The exhibits and appendices and the models used to develop the values in these exhibits and appendices may not be appropriate for other purposes. We anticipate the exhibits and appendices will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

The results of these exhibits and appendices are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

The authors of these exhibits and appendices are actuaries employed by Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, these exhibits and appendices are complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with DOM effective December 1, 2021, apply to these exhibits and appendices and its use.

Exhibit 1A  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2019 Encounter Data

Non-Newborn SSI / Disabled Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	765,558	765,558	765,558	765,558	765,558	765,558	765,558	765,558
b	Total Allowed Dollars	\$147,482,789	\$157,980,759	\$170,679,044	\$236,660,714	\$7,166,959	\$47,509,448		\$767,479,712
c = b / a	CY 2019 PMPM Costs	\$192.65	\$206.36	\$222.95	\$309.13	\$9.36	\$62.06		\$1,002.51
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008		1.006
e	Non-Covered Services	1.000	1.000	0.986	0.963	1.000	1.000		0.986
f	Provider Reimbursement Adjustment	1.000	1.000	1.025	1.000	1.000	1.000		1.006
g	Zolgensma Carveout	1.000	1.000	0.963	1.000	1.000	1.000		0.992
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997		0.997
i	5% Assessment - Provider Adjustment	1.000	0.998	0.993	1.000	0.986	0.989		0.997
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000		1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000		1.000
m	SSI Children - COE Change	1.004	1.000	1.000	1.000	1.000	1.000		1.001
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000		0.999
o	Missing Data	1.000	1.000	1.000	1.000	1.000	1.000		1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$194.50	\$207.18	\$216.77	\$296.79	\$9.28	\$61.78		\$986.30

Breast and Cervical Cancer Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	1,187	1,187	1,187	1,187	1,187	1,187		1,187
b	Total Allowed Dollars	\$227,951	\$1,850,103	\$1,207,925	\$627,794	\$9,718	\$48,999		\$3,972,490
c = b / a	CY 2019 PMPM Costs	\$192.04	\$1,558.64	\$1,017.63	\$528.89	\$8.19	\$41.28		\$3,346.66
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008		1.007
e	Non-Covered Services	1.000	1.000	0.989	0.938	1.000	1.000		0.987
f	Provider Reimbursement Adjustment	1.000	1.000	1.008	1.000	1.000	1.000		1.002
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000		1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997		0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.999	1.000	0.975	0.993		0.999
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.993	1.000	1.000		0.999
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000		1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000		1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000		1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000		1.000
o	Missing Data	1.000	1.000	1.000	1.000	1.000	1.000		1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$193.10	\$1,566.99	\$1,018.87	\$490.82	\$8.03	\$41.23		\$3,319.04

Exhibit 1A  
Mississippi Division of Medicaid  
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CY 2019 Encounter Data

		MA Adult Rate Cell - Non-Deliveries							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	493,779	493,779	493,779	493,779	493,779	493,779	493,779	493,779
b	Total Allowed Dollars	\$21,107,291	\$55,207,997	\$60,705,110	\$56,566,654	\$3,443,218	\$6,198,467		\$203,228,738
c = b / a	CY 2019 PMPM Costs	\$42.75	\$111.81	\$122.94	\$114.56	\$6.97	\$12.55		\$411.58
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	1.006
e	Non-Covered Services	1.000	1.000	0.987	0.973	1.000	1.000	1.000	0.989
f	Provider Reimbursement Adjustment	1.000	1.000	1.006	1.000	1.000	1.000	1.000	1.002
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.995	1.000	0.988	0.990	0.990	0.998
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	0.999
o	Missing Data	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$43.05	\$112.46	\$122.14	\$111.02	\$6.93	\$12.49		\$408.09

		MA Adult Rate Cell - Deliveries							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	493,779	493,779	493,779	493,779	493,779	493,779	493,779	493,779
b	Total Allowed Dollars	\$16,140,778	\$56,718	\$4,299,548	\$79,816	\$323	\$92,096		\$20,669,280
c = b / a	CY 2019 PMPM Costs	\$32.69	\$0.11	\$8.71	\$0.16	\$0.00	\$0.19		\$41.86
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	1.008
e	Non-Covered Services	1.000	1.000	0.987	0.973	1.000	1.000	1.000	0.997
f	Provider Reimbursement Adjustment	1.000	1.000	1.005	1.000	1.000	1.000	1.000	1.001
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.986	0.992	0.992	1.000
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	1.000
o	Missing Data	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.001
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$32.91	\$0.12	\$8.67	\$0.16	\$0.00	\$0.19		\$42.04

PMPM costs are calculated using allowed amounts for 3,445 MA Adult deliveries and total MA Adult rate cell membership.

Exhibit 1A  
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CY 2019 Encounter Data

		Pregnant Women Rate Cell - Non-Deliveries							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	137,224	137,224	137,224	137,224	137,224	137,224	137,224	137,224
b	Total Allowed Dollars	\$4,833,205	\$15,870,522	\$27,127,388	\$7,075,967	\$686,206	\$1,273,137		\$56,866,427
c = b / a	CY 2019 PMPM Costs	\$35.22	\$115.65	\$197.69	\$51.57	\$5.00	\$9.28		\$414.41
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	1.007
e	Non-Covered Services	1.000	1.000	1.000	0.997	1.000	1.000	1.000	0.999
f	Provider Reimbursement Adjustment	1.000	1.000	1.003	1.000	1.000	1.000	1.000	1.001
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.993	0.994	0.994	0.999
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	1.000
o	Missing Data	1.000	1.002	1.000	1.000	1.000	1.000	1.000	1.001
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$35.43	\$116.54	\$198.96	\$51.19	\$4.99	\$9.27		\$416.38

		Pregnant Women Rate Cell - Deliveries							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	137,224	137,224	137,224	137,224	137,224	137,224	137,224	137,224
b	Total Allowed Dollars	\$62,938,644	\$191,123	\$17,084,088	\$317,743	\$324	\$202,941		\$80,734,863
c = b / a	CY 2019 PMPM Costs <sup>1</sup>	\$458.66	\$1.39	\$124.50	\$2.32	\$0.00	\$1.48		\$588.34
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	1.008
e	Non-Covered Services	1.000	1.000	1.000	0.997	1.000	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.003	1.000	1.000	1.000	1.000	1.001
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.999	1.000	1.000	0.993	0.993	1.000
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	1.000
o	Missing Data	1.000	1.001	1.000	1.000	1.000	1.000	1.000	1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$461.30	\$1.40	\$125.36	\$2.30	\$0.00	\$1.48		\$591.83

PMPM costs are calculated using allowed amounts for 15,813 Pregnant Women deliveries and total Pregnant Women rate cell membership.

Exhibit 1A  
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CY 2019 Encounter Data

SSI / Disabled Newborn Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	6,340	6,340	6,340	6,340	6,340	6,340	6,340	6,340
b	Total Allowed Dollars	\$30,953,749	\$1,435,846	\$9,864,800	\$3,717,886	\$4,494	\$1,676,424	\$47,653,200	
c = b / a	CY 2019 PMPM Costs	\$4,882.29	\$226.47	\$1,555.96	\$586.42	\$0.71	\$264.42	\$7,516.28	
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
f	Provider Reimbursement Adjustment	1.000	1.000	1.009	1.000	1.000	1.000	1.002	
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.990	0.988	0.999	
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	
o	Missing Data	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$4,909.13	\$227.69	\$1,576.10	\$584.17	\$0.71	\$262.73	\$7,560.52	

Non-SSI Newborns 0 to 2 Months Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	75,312	75,312	75,312	75,312	75,312	75,312	75,312	
b	Total Allowed Dollars	\$104,016,734	\$4,012,403	\$25,499,948	\$669,632	\$49,420	\$1,102,277	\$135,350,413	
c = b / a	CY 2019 PMPM Costs <sup>1</sup>	\$1,381.14	\$53.28	\$338.59	\$8.89	\$0.66	\$14.64	\$1,797.20	
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
f	Provider Reimbursement Adjustment	1.000	1.000	1.013	1.000	1.000	1.000	1.002	
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.997	0.995	1.000	
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	
o	Missing Data	1.002	1.000	1.000	1.001	1.000	1.000	1.001	
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$1,390.98	\$53.57	\$344.18	\$8.87	\$0.66	\$14.64	\$1,812.89	

Exhibit 1A  
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Non-SSI Newborns 3 to 12 Months Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	252,667	252,667	252,667	252,667	252,667	252,667	252,667	252,667
b	Total Allowed Dollars	\$9,650,331	\$14,738,237	\$27,081,847	\$6,016,033	\$249,559	\$1,361,943		\$59,097,951
c = b / a	CY 2019 PMPM Costs	\$38.19	\$58.33	\$107.18	\$23.81	\$0.99	\$5.39		\$233.90
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008		1.007
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000		1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.015	1.000	1.000	1.000		1.007
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000		1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997		0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.994	1.000	0.990	0.990		0.997
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000		1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000		1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000		1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000		1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000		1.000
o	Missing Data	1.000	1.000	1.000	1.001	1.000	1.000		1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$38.40	\$58.66	\$108.67	\$23.75	\$0.98	\$5.37		\$235.83

Foster Care Rate Cell

Calculation Step	CY 2019 PMPM Cost Development	Category of Service							Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	78,904	78,904	78,904	78,904	78,904	78,904	78,904	78,904
b	Total Allowed Dollars	\$23,516,494	\$3,420,852	\$10,269,470	\$5,836,415	\$2,145,298	\$958,907		\$46,147,435
c = b / a	CY 2019 PMPM Costs	\$298.04	\$43.35	\$130.15	\$73.97	\$27.19	\$12.15		\$584.86
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008		1.007
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000		1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.008	1.000	1.000	1.000		1.002
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000		1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997		0.997
i	5% Assessment - Provider Adjustment	1.000	0.991	0.981	1.000	0.976	0.976		0.993
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000		1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000		1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000		1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000		1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000		1.000
o	Missing Data	1.001	1.000	1.000	1.000	1.000	1.000		1.001
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		1.000
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$300.01	\$43.19	\$129.53	\$73.66	\$26.67	\$11.92		\$584.98

Exhibit 1A  
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		MYPAC Rate Cell							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service						Total	
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	7,776	7,776	7,776	7,776	7,776	7,776	7,776	
b	Total Allowed Dollars	\$3,957,611	\$416,512	\$22,198,644	\$1,276,733	\$245,929	\$146,732	\$28,242,161	
c = b / a	CY 2019 PMPM Costs	\$508.95	\$53.56	\$2,854.76	\$164.19	\$31.63	\$18.87	\$3,631.97	
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008	
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
f	Provider Reimbursement Adjustment	1.000	1.000	1.001	1.000	1.000	1.000	1.000	
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	
i	5% Assessment - Provider Adjustment	1.000	0.999	0.987	1.000	0.986	0.989	0.989	
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.998	1.000	1.000	1.000	
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000	
o	Missing Data	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$511.75	\$53.83	\$2,833.82	\$163.43	\$31.35	\$18.77	\$3,612.95	

		MA Children Rate Cell							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service						Total	
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2019 Member Months	3,071,992	3,071,992	3,071,992	3,071,992	3,071,992	3,071,992	3,071,992	
b	Total Allowed Dollars	\$57,206,280	\$109,716,005	\$190,146,059	\$106,880,645	\$79,120,267	\$15,182,129	\$558,251,384	
c = b / a	CY 2019 PMPM Costs	\$18.62	\$35.71	\$61.90	\$34.79	\$25.76	\$4.94	\$181.72	
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.007	
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
f	Provider Reimbursement Adjustment	1.000	1.000	1.008	1.000	1.000	1.000	1.003	
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997	
i	5% Assessment - Provider Adjustment	1.000	0.998	0.992	1.000	0.987	0.988	0.995	
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000	
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	0.999	
o	Missing Data	1.000	1.000	1.000	1.000	1.000	1.001	1.000	
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>Product of c through p</i> Adjusted CY 2019 PMPM Costs		\$18.73	\$35.84	\$62.27	\$34.67	\$25.55	\$4.91	\$181.96	

Exhibit 1A  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2019 Encounter Data

		Quasi-CHIP Rate Cell							
Calculation Step	CY 2019 PMPM Cost Development	Category of Service						Total	
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
<i>a</i>	CY 2019 Member Months	332,512	332,512	332,512	332,512	332,512	332,512	332,512	<b>332,512</b>
<i>b</i>	Total Allowed Dollars	\$5,367,303	\$9,045,012	\$19,307,958	\$14,449,149	\$10,862,854	\$1,851,030		<b>\$60,883,307</b>
<i>c = b / a</i>	CY 2019 PMPM Costs	\$16.14	\$27.20	\$58.07	\$43.45	\$32.67	\$5.57		<b>\$183.10</b>
<i>d</i>	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008		<b>1.007</b>
<i>e</i>	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>f</i>	Provider Reimbursement Adjustment	1.000	1.000	1.010	1.000	1.000	1.000		<b>1.003</b>
<i>g</i>	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>h</i>	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997		<b>0.997</b>
<i>i</i>	5% Assessment - Provider Adjustment	1.000	0.999	0.994	1.000	0.988	0.988		<b>0.995</b>
<i>j</i>	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000		<b>1.000</b>
<i>k</i>	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>l</i>	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>m</i>	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>n</i>	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000		<b>0.999</b>
<i>o</i>	Missing Data	1.000	1.000	1.000	1.001	1.000	1.000		<b>1.000</b>
<i>p</i>	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000		<b>1.000</b>
<i>Product of c through p</i>	<b>Adjusted CY 2019 PMPM Costs</b>	<b>\$16.23</b>	<b>\$27.32</b>	<b>\$58.59</b>	<b>\$43.31</b>	<b>\$32.45</b>	<b>\$5.53</b>		<b>\$183.42</b>



Exhibit 1B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 Encounter Data

Calculation Step		CY 2018 PMPM Cost Development		Breast and Cervical Cancer Rate Cell						Total
				Category of Service						
		Inpatient	Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2018 Member Months	1,090	1,090	1,090	1,090	1,090	1,090	1,090	1,090	
b	Total Allowed Dollars	\$216,492	\$1,593,617	\$1,021,306	\$423,271	\$8,377	\$51,999	\$3,315,063	\$3,315,063	
c	CY 2018 PMPM Costs	\$198.62	\$1,462.03	\$936.98	\$388.32	\$7.69	\$47.71	\$3,041.34	\$3,041.34	
d	Non-Covered Services	1,000	1,000	0.981	0.959	1,000	1,000	1,000	0.989	
e	Drug Services Rebate Adjustment	1,000	1,000	1,000	0.997	1,000	1,000	1,000	1,000	
f	Provider Reimbursement Adjustment	1,000	1,000	0.994	1,000	1,000	1,000	1,000	0.998	
g	HPE Newborn Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
h	IBNR Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
i	5% Assessment - Provider Adjustment	1,000	1,000	0.998	1,000	0.959	0.994	0.999	0.999	
j	5% Assessment - OPPS Adjustment	1,000	0.995	1,000	1,000	1,000	1,000	1,000	0.998	
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	
<i>Product of c through k</i>		<b>\$198.50</b>	<b>\$1,453.67</b>	<b>\$910.81</b>	<b>\$371.10</b>	<b>\$7.36</b>	<b>\$47.39</b>	<b>\$2,988.83</b>	<b>\$2,988.83</b>	
<b>CY 2018 to CY 2019 Trends</b>										
l	Utilization Trend 2018 to 2019	1.020	1.020	1.060	0.995	0.970	1.060	1.030	1.030	
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.100	1.000	1.001	1.017	1.017	
<b>CY 2018 to CY 2019 Program Changes</b>										
n	PRTF Services Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
o	PDL Adjustment	1,000	1,000	1,000	0.989	1,000	1,000	0.999	0.999	
p	Physician Limit Expansion Adjustment	1,000	1,000	1,010	1,000	1,000	1,000	1,003	1,003	
q	Rx Limit Adjustment	1,000	1,000	1,000	1.021	1,000	1,000	1,003	1,003	
r	Home Health Limit Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>										
s	OP Dental Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
t	NET Reimbursement Adjustment	1,000	1,000	1,000	1,000	1,000	0.853	0.998	0.998	
u	GME Adjustment	0.988	1,000	1,000	1,000	1,000	1,000	0.999	0.999	
<i>Product of c through u</i>		<b>\$199.94</b>	<b>\$1,497.24</b>	<b>\$976.69</b>	<b>\$410.12</b>	<b>\$7.14</b>	<b>\$42.90</b>	<b>\$3,134.04</b>	<b>\$3,134.04</b>	

Exhibit 1B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 Encounter Data

		Pregnant Women Rate Cell - Non-Deliveries						
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	135,337	135,337	135,337	135,337	135,337	135,337	135,337
b	Total Allowed Dollars	\$5,688,263	\$14,980,639	\$27,189,605	\$7,260,185	\$842,120	\$1,345,194	\$57,306,007
c	CY 2018 PMPM Costs	\$42.03	\$110.69	\$200.90	\$53.65	\$6.22	\$9.94	\$423.43
d	Non-Covered Services	1.000	1.000	0.998	0.989	1.000	1.000	0.997
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	0.997	1.000	1.000	1.000	0.998
g	HPE Newborn Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	1.000	0.994	1.000	0.964	0.983	0.996
j	5% Assessment - OPPS Adjustment	1.000	0.990	1.000	1.000	1.000	1.000	0.997
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
<i>Product of c through k</i>		<b>\$42.00</b>	<b>\$109.46</b>	<b>\$198.53</b>	<b>\$52.85</b>	<b>\$5.99</b>	<b>\$9.76</b>	<b>\$418.60</b>
<b>CY 2018 to CY 2019 Trends</b>								
l	Utilization Trend 2018 to 2019	0.990	1.000	1.000	0.995	0.970	1.000	0.998
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.095	1.000	1.001	1.015
<b>CY 2018 to CY 2019 Program Changes</b>								
n	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
o	PDL Adjustment	1.000	1.000	1.000	0.998	1.000	1.000	1.000
p	Physician Limit Expansion Adjustment	1.000	1.000	1.002	1.000	1.000	1.000	1.001
q	Rx Limit Adjustment	1.000	1.000	1.000	1.006	1.000	1.000	1.001
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>								
s	OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000	1.000
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.985	1.000
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.999
<i>Product of c through u</i>		<b>\$41.06</b>	<b>\$110.41</b>	<b>\$199.14</b>	<b>\$57.82</b>	<b>\$5.81</b>	<b>\$9.63</b>	<b>\$423.87</b>

		Pregnant Women Rate Cell - Deliveries						
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	135,337	135,337	135,337	135,337	135,337	135,337	135,337
b	Total Allowed Dollars	\$65,051,086	\$117,933	\$18,206,474	\$302,430	\$373	\$244,301	\$83,922,596
c	CY 2018 PMPM Costs <sup>1</sup>	\$480.66	\$0.87	\$134.53	\$2.23	\$0.00	\$1.81	\$620.10
d	Non-Covered Services	1.000	1.000	0.998	0.989	1.000	1.000	0.999
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.998	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	0.996	1.000	1.000	1.000	0.999
g	HPE Newborn Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	0.997	0.995	1.000	0.956	0.982	0.999
j	5% Assessment - OPPS Adjustment	1.000	0.988	1.000	1.000	1.000	1.000	1.000
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
<i>Product of c through k</i>		<b>\$480.37</b>	<b>\$0.86</b>	<b>\$132.84</b>	<b>\$2.20</b>	<b>\$0.00</b>	<b>\$1.77</b>	<b>\$618.04</b>
<b>CY 2018 to CY 2019 Trends</b>								
l	Utilization Trend 2018 to 2019	1.010	1.010	1.000	1.010	1.000	1.000	1.008
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.095	1.000	1.001	1.001
<b>CY 2018 to CY 2019 Program Changes</b>								
n	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
o	PDL Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000
p	Physician Limit Expansion Adjustment	1.000	1.000	1.002	1.000	1.000	1.000	1.000
q	Rx Limit Adjustment	1.000	1.000	1.000	1.006	1.000	1.000	1.000
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>								
s	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.996	1.000
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.990
<i>Product of c through u</i>		<b>\$479.11</b>	<b>\$0.88</b>	<b>\$133.24</b>	<b>\$2.45</b>	<b>\$0.00</b>	<b>\$1.77</b>	<b>\$617.44</b>

PMPM costs are calculated using allowed amounts for 16,007 Pregnant Women deliveries and total Pregnant Women rate cell membership.

Exhibit 1B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 Encounter Data

Calculation Step		CY 2018 PMPM Cost Development		SS1 / Disabled Newborn Rate Cell						Total
				Category of Service						
		Inpatient	Hospital	Outpatient	Physician	Drug	Dental	Other		
a	CY 2018 Member Months	6,311	6,311	6,311	6,311	6,311	6,311	6,311	6,311	
b	Total Allowed Dollars	\$32,864,910	\$2,416,812	\$8,931,077	\$3,081,961	\$3,714	\$2,315,469		\$49,613,945	
c	CY 2018 PMPM Costs	\$5,207.56	\$382.95	\$1,415.16	\$488.35	\$0.59	\$366.89		\$7,861.50	
d	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
e	Drug Services Rebate Adjustment	1,000	1,000	1,000	0.998	1,000	1,000	1,000	1,000	
f	Provider Reimbursement Adjustment	1,000	1,000	1,029	1,000	1,000	1,000	1,000	1,005	
g	HPE Newborn Adjustment	1,001	1,000	1,000	1,000	1,000	1,000	1,000	1,001	
h	IBNR Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
i	5% Assessment - Provider Adjustment	1,000	1,000	0.997	1,000	0.971	0.972		0.998	
j	5% Assessment - OPPS Adjustment	1,000	0.996	1,000	1,000	1,000	1,000	1,000	1,000	
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	
<i>Product of c through k</i>		<b>\$5,210.24</b>	<b>\$381.33</b>	<b>\$1,451.42</b>	<b>\$486.84</b>	<b>\$0.57</b>	<b>\$356.25</b>		<b>\$7,886.65</b>	
<b>CY 2018 to CY 2019 Trends</b>										
l	Utilization Trend 2018 to 2019	1,030	1,010	1,030	1,030	0.990	1,030	1,030	1,029	
m	Charge Trend 2018 to 2019	1,000	1,010	1,001	1,005	1,000	1,001	1,001	1,001	
<b>CY 2018 to CY 2019 Program Changes</b>										
n	PRTF Services Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
o	PDL Adjustment	1,000	1,000	1,000	1,003	1,000	1,000	1,000	1,000	
p	Physician Limit Expansion Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
q	Rx Limit Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
r	Home Health Limit Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>										
s	OP Dental Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
t	NET Reimbursement Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	0.990	1,000	
u	GME Adjustment	0.988	1,000	1,000	1,000	1,000	1,000	1,000	0.992	
<i>Product of c through u</i>		<b>\$5,299.48</b>	<b>\$388.91</b>	<b>\$1,496.84</b>	<b>\$505.26</b>	<b>\$0.57</b>	<b>\$363.85</b>		<b>\$8,054.90</b>	

Exhibit 1B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 Encounter Data

Calculation Step		CY 2018 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
<i>a</i>		CY 2018 Member Months	76,100	76,100	76,100	76,100	76,100	76,100	76,100
<i>b</i>		Total Allowed Dollars	\$101,925,618	\$3,851,733	\$25,111,112	\$644,480	\$43,105	\$1,369,822	\$132,945,870
<i>c</i>		CY 2018 PMPM Costs	\$1,339.36	\$50.61	\$329.98	\$8.47	\$0.57	\$18.00	\$1,746.99
<i>d</i>		Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>e</i>		Drug Services Rebate Adjustment	1,000	1,000	1,000	0.997	1,000	1,000	1,000
<i>f</i>		Provider Reimbursement Adjustment	1,000	1,000	1,023	1,000	1,000	1,000	1,004
<i>g</i>		HPE Newborn Adjustment	1,006	1,001	1,002	1,000	1,001	1,004	1,005
<i>h</i>		IBNR Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>i</i>		5% Assessment - Provider Adjustment	1,000	1,000	0.992	1,000	0.987	0.985	0.998
<i>j</i>		5% Assessment - OPPS Adjustment	1,000	0.992	1,000	1,000	1,000	1,000	1,000
<i>k</i>		TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
<i>Product of c through k</i>		<b>Subtotal: CY 2018 Adjusted Costs</b>	<b>\$1,346.31</b>	<b>\$50.20</b>	<b>\$335.15</b>	<b>\$8.44</b>	<b>\$0.56</b>	<b>\$17.79</b>	<b>\$1,758.45</b>
		<b>CY 2018 to CY 2019 Trends</b>							
<i>l</i>		Utilization Trend 2018 to 2019	1.030	1.010	1.030	1.030	0.990	1.030	1.029
<i>m</i>		Charge Trend 2018 to 2019	1.000	1.010	1.001	1.005	1.000	1.001	1.001
		<b>CY 2018 to CY 2019 Program Changes</b>							
<i>n</i>		PRTF Services Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>o</i>		PDL Adjustment	1,000	1,000	1,000	1,003	1,000	1,000	1,000
<i>p</i>		Physician Limit Expansion Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>q</i>		Rx Limit Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>r</i>		Home Health Limit Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
		<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>							
<i>s</i>		OP Dental Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000
<i>t</i>		NET Reimbursement Adjustment	1,000	1,000	1,000	1,000	1,000	0.997	1,000
<i>u</i>		GME Adjustment	0.988	1,000	1,000	1,000	1,000	1,000	0.990
<i>Product of c through u</i>		<b>CY 2018 PMPM Costs - Adjusted to CY 2019</b>	<b>\$1,369.37</b>	<b>\$51.19</b>	<b>\$345.64</b>	<b>\$8.76</b>	<b>\$0.55</b>	<b>\$18.29</b>	<b>\$1,793.81</b>

Exhibit 1B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 Encounter Data

Calculation Step		CY 2018 PMPM Cost Development		Foster Care Rate Cell						Total
				Category of Service						
		Inpatient	Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
a	CY 2018 Member Months	77,192	77,192	77,192	77,192	77,192	77,192	77,192	77,192	
b	Total Allowed Dollars	\$8,923,087	\$3,382,849	\$9,121,108	\$5,629,705	\$2,290,780	\$713,690		\$30,061,218	
c	CY 2018 PMPM Costs	\$115.60	\$43.82	\$118.16	\$72.93	\$29.68	\$9.25		\$389.43	
d	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
e	Drug Services Rebate Adjustment	1,000	1,000	1,000	0.997	1,000	1,000	1,000	0.999	
f	Provider Reimbursement Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
g	HPE Newborn Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
h	IBNR Adjustment	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
i	5% Assessment - Provider Adjustment	1,000	0.987	0.987	1,000	0.956	0.961		0.984	
j	5% Assessment - OPPS Adjustment	1,000	0.989	1,000	1,000	1,000	1,000	1,000	0.999	
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	
<i>Product of c through k</i>		<b>\$115.53</b>	<b>\$42.76</b>	<b>\$114.23</b>	<b>\$72.67</b>	<b>\$28.34</b>	<b>\$8.88</b>		<b>\$382.41</b>	
<b>CY 2018 to CY 2019 Trends</b>										
l	Utilization Trend 2018 to 2019	1.030	1.010	1.030	1.030	0.990	1.030		1.025	
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.005	1.000	1.001		1.002	
<b>CY 2018 to CY 2019 Program Changes</b>										
n	PRTF Services Adjustment	2.381	1.000	1.000	1.000	1.000	1.000	1.000	1.418	
o	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	1.000	1.000	
p	Physician Limit Expansion Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
q	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>										
s	OP Dental Adjustment	1.000	0.985	1.000	1.000	1.000	1.000	1.000	0.999	
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	1.000	0.994	
<i>Product of c through u</i>		<b>\$279.76</b>	<b>\$42.95</b>	<b>\$117.80</b>	<b>\$75.42</b>	<b>\$28.06</b>	<b>\$9.16</b>		<b>\$553.15</b>	

Exhibit 1C  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
CY 2018 FFS Data for MYPAC Rate Cell

		MYPAC Rate Cell							Total
		Category of Service							
Calculation Step	CY 2018 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
<i>a</i>	CY 2018 Member Months	5,469	5,469	5,469	5,469	5,469	5,469	5,469	
<i>b</i>	Total Allowed Dollars	\$1,444,616	\$260,218	\$16,192,576	\$874,965	\$163,588	\$133,103	<b>\$19,069,065</b>	
<i>c</i>	CY 2018 PMPM Costs	\$264.15	\$47.58	\$2,960.79	\$159.99	\$29.91	\$24.34	<b>\$3,486.76</b>	
<i>d</i>	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	<b>1.000</b>	
<i>e</i>	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>f</i>	TPL Adjustment	0.992	0.992	0.992	0.992	0.992	0.992	<b>0.992</b>	
<i>g</i>	Utilization Trend Q1 to Q3 2018 to CY 2018	1.004	1.001	1.000	1.004	0.999	1.004	<b>1.001</b>	
<i>h</i>	Charge Trend Q1 to Q3 2018 to CY 2018	1.000	1.001	1.000	1.001	1.000	1.000	<b>1.000</b>	
<i>i</i>	5% Assessment - OPPS Adjustment	1.000	1.004	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>j</i>	PRTF Append Q4 2018 Experience	1.026	1.000	1.000	1.000	1.000	1.000	<b>1.002</b>	
<i>k</i>	MYPAC Seasonality Adjustment	0.989	0.989	0.989	0.989	0.989	0.989	<b>0.989</b>	
<i>Product of c through k</i>	<b>Subtotal: CY 2018 Adjusted Costs</b>	<b>\$266.84</b>	<b>\$46.96</b>	<b>\$2,904.10</b>	<b>\$157.13</b>	<b>\$29.30</b>	<b>\$23.96</b>	<b>\$3,428.30</b>	
	<b>CY 2018 to CY 2019 Trends</b>								
<i>l</i>	Utilization Trend 2018 to 2019	1.030	1.010	1.001	1.030	0.990	1.030	<b>1.005</b>	
<i>m</i>	Charge Trend 2018 to 2019	1.000	1.010	1.000	1.005	1.000	1.001	<b>1.000</b>	
	<b>CY 2018 to CY 2019 Program Changes</b>								
<i>n</i>	PRTF Adjusting to CY 2019 Basis	1.076	1.000	1.000	1.000	1.000	1.000	<b>1.006</b>	
<i>o</i>	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	<b>1.000</b>	
	<b>CY 2018 to CY 2019 Reimbursement Methodology Changes</b>								
<i>p</i>	OP Dental Adjustment	1.000	0.997	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>q</i>	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	<b>0.999</b>	
<i>Product of c through q</i>	<b>CY 2018 PMPM Costs - Trended to CY 2019</b>	<b>\$292.14</b>	<b>\$47.74</b>	<b>\$2,907.51</b>	<b>\$163.08</b>	<b>\$29.00</b>	<b>\$24.71</b>	<b>\$3,464.18</b>	

**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 MississippiCAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

		Non-Newborn SSI / Disabled Rate Cell						
		Category of Service						
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
	<b>Base Period Summaries</b>							
a	CY 2019 PMPM Costs	\$194.50	\$207.18	\$216.77	\$296.79	\$9.28	\$61.78	\$986.30
	<b>Trends</b>							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.018	1.018	1.053	1.128	0.899	1.053	1.060
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.026	1.090	1.000	1.020	1.034
d	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000
e	Emergency Services Savings Adjustment	1.000	0.982	0.995	1.000	1.000	1.000	0.995
	<b>Population Changes</b>							
f	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<b>Program Changes</b>							
g	ASD Adjustment	1.000	1.000	1.001	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.031	1.000	1.000	1.011
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.982
	<b>Reimbursement Changes</b>							
k	OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.966	0.998
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.993
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.071	1.004
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.005	1.000	1.000	1.000	1.001
p	5% Assessment Removal Adjustment	1.000	1.007	1.023	1.000	1.048	1.036	1.009
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.019	1.000	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.009	1.000	1.000
s	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.001
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$189.65</b>	<b>\$208.36</b>	<b>\$239.67</b>	<b>\$366.92</b>	<b>\$8.99</b>	<b>\$71.08</b>	<b>\$1,074.67</b>

		Breast and Cervical Cancer Rate Cell						
		Category of Service						
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
	<b>Base Period Summaries</b>							
	CY 2018 MMs	1,090	1,090	1,090	1,090	1,090	1,090	1,090
	CY 2018 PMPM Costs - Trended to CY 2019	\$199.94	\$1,497.24	\$976.69	\$410.12	\$7.14	\$42.90	\$3,134.04
	CY 2019 MMs	1,187	1,187	1,187	1,187	1,187	1,187	1,187
	CY 2019 PMPM Costs	\$193.10	\$1,566.99	\$1,018.87	\$490.82	\$8.03	\$41.23	\$3,319.04
a	Blended CY 2018 & CY 2019 PMPM Costs	\$196.37	\$1,533.60	\$998.68	\$452.19	\$7.60	\$42.03	\$3,230.48
	<b>Trends</b>							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.018	1.018	1.053	1.128	0.899	1.053	1.060
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.026	1.090	1.000	1.020	1.019
d	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000
e	Emergency Services Savings Adjustment	1.000	0.998	0.999	1.000	1.000	1.000	0.999
	<b>Population Changes</b>							
f	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<b>Program Changes</b>							
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.122	1.000	1.000	1.020
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.991
	<b>Reimbursement Changes</b>							
k	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.987	1.000
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.998
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.044	1.001
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.001	1.000	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.004	1.000	1.051	1.027	1.002
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.011	1.000	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
s	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.003
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$191.38</b>	<b>\$1,569.13</b>	<b>\$1,083.29</b>	<b>\$691.42</b>	<b>\$7.27</b>	<b>\$47.78</b>	<b>\$3,480.27</b>

**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 MississippiCAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

Calculation Step		MA Adult Rate Cell - Non-Deliveries							Total
		Category of Service							
SFY 2023 PMPM Cost Development		Inpatient	Hospital	Physician	Drug	Dental	Other		
<i>a</i>	<b>Base Period Summaries</b>								
	CY 2019 PMPM Costs	\$43.05	\$112.46	\$122.14	\$111.02	\$6.93	\$12.49	<b>\$408.09</b>	
<i>b</i>	<b>Trends</b>								
	Utilization Trend Factors CY 2019 to SFY 2023	0.965	1.000	1.000	1.147	0.899	1.000	<b>1.035</b>	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.051	1.109	1.000	1.020	<b>1.046</b>	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.937	0.983	1.000	1.000	1.000	<b>0.979</b>	
<i>f</i>	<b>Population Changes</b>								
	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>g</i>	<b>Program Changes</b>								
	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.034	1.000	1.000	<b>1.011</b>	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.959	1.000	1.000	<b>0.986</b>	
<i>k</i>	<b>Reimbursement Changes</b>								
	OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.932	<b>0.998</b>	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	<b>0.996</b>	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.126	<b>1.003</b>	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.012	1.000	1.000	1.000	<b>1.004</b>	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.001	1.018	1.000	1.047	1.038	<b>1.007</b>	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.017	1.000	<b>1.000</b>	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.001	1.000	<b>1.000</b>	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	<b>1.002</b>	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$39.81</b>	<b>\$105.42</b>	<b>\$130.01</b>	<b>\$140.09</b>	<b>\$6.64</b>	<b>\$13.87</b>	<b>\$435.83</b>	

Calculation Step		MA Adult Rate Cell - Deliveries							Total
		Category of Service							
SFY 2023 PMPM Cost Development		Inpatient	Hospital	Physician	Drug	Dental	Other		
<i>a</i>	<b>Base Period Summaries</b>								
	CY 2019 PMPM Costs	\$32.91	\$0.12	\$8.67	\$0.16	\$0.00	\$0.19	<b>\$42.04</b>	
<i>b</i>	<b>Trends</b>								
	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.035	1.000	1.035	1.000	1.000	<b>1.028</b>	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.051	1.109	1.000	1.020	<b>1.007</b>	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>e</i>	Emergency Services Savings Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>f</i>	<b>Population Changes</b>								
	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>g</i>	<b>Program Changes</b>								
	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.034	1.000	1.000	<b>1.000</b>	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.995	1.000	1.000	<b>1.000</b>	
<i>k</i>	<b>Reimbursement Changes</b>								
	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.910	<b>1.000</b>	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	<b>0.971</b>	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.401	<b>1.002</b>	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.000	1.008	1.000	1.051	1.045	<b>1.002</b>	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000	<b>1.000</b>	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.001	1.000	<b>1.000</b>	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	<b>1.000</b>	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$32.63</b>	<b>\$0.12</b>	<b>\$9.19</b>	<b>\$0.19</b>	<b>\$0.00</b>	<b>\$0.25</b>	<b>\$42.38</b>	

PMPM costs are calculated using allowed amounts for 3,445 MA Adult deliveries and total MA Adult rate cell membership in 2019.



**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 MississippiCAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

		Pregnant Women Rate Cell - Non-Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service						Total	
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
<b>Base Period Summaries</b>									
	CY 2018 MMs	135,337	135,337	135,337	135,337	135,337	135,337	135,337	
	CY 2018 PMPM Costs - Trended to CY 2019	\$41.06	\$110.41	\$199.14	\$57.82	\$5.81	\$9.63	\$423.87	
	CY 2019 MMs	137,224	137,224	137,224	137,224	137,224	137,224	137,224	
	CY 2019 PMPM Costs	\$35.43	\$116.54	\$198.96	\$51.19	\$4.99	\$9.27	\$416.38	
<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$38.23	\$113.50	\$199.05	\$54.48	\$5.40	\$9.45	\$420.10	
<b>Trends</b>									
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	0.965	1.000	1.000	1.147	0.899	1.000	1.015	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.051	1.109	1.000	1.020	1.038	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.936	0.988	1.000	1.000	1.000	0.978	
<b>Population Changes</b>									
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>Program Changes</b>									
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.008	1.000	1.000	1.001	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.959	1.000	1.000	0.993	
<b>Reimbursement Changes</b>									
<i>k</i>	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.970	0.999	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.997	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.181	1.004	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.008	1.000	1.000	1.000	1.004	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.000	1.010	1.000	1.048	1.039	1.006	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000	1.000	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.006	1.000	1.000	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.002	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$35.35</b>	<b>\$106.24</b>	<b>\$210.42</b>	<b>\$66.97</b>	<b>\$5.21</b>	<b>\$11.48</b>	<b>\$435.67</b>	

		Pregnant Women Rate Cell - Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service						Total	
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
<b>Base Period Summaries</b>									
	CY 2018 MMs	135,337	135,337	135,337	135,337	135,337	135,337	135,337	
	CY 2018 PMPM Costs - Trended to CY 2019	\$479.11	\$0.88	\$133.24	\$2.45	\$0.00	\$1.77	\$617.44	
	CY 2019 MMs	137,224	137,224	137,224	137,224	137,224	137,224	137,224	
	CY 2019 PMPM Costs	\$461.30	\$1.40	\$125.36	\$2.30	\$0.00	\$1.48	\$591.83	
<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$470.14	\$1.14	\$129.27	\$2.37	\$0.00	\$1.62	\$604.55	
<b>Trends</b>									
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.035	1.000	1.035	1.000	1.000	1.028	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.051	1.109	1.000	1.020	1.007	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>e</i>	Emergency Services Savings Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>Population Changes</b>									
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>Program Changes</b>									
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.008	1.000	1.000	1.000	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.995	1.000	1.000	1.000	
<b>Reimbursement Changes</b>									
<i>k</i>	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.970	1.000	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.971	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.398	1.001	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.000	1.008	1.000	1.047	1.048	1.002	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000	1.000	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.007	1.000	1.000	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.000	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$466.23</b>	<b>\$1.18</b>	<b>\$136.91</b>	<b>\$2.73</b>	<b>\$0.00</b>	<b>\$2.35</b>	<b>\$609.41</b>	

PMPM costs are calculated using allowed amounts for 15,813 Pregnant Women deliveries and total Pregnant Women rate cell membership in 2019.

**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 MississippiCAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

		SSI / Disabled Newborn Rate Cell							
		Category of Service							
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total	
<b>Base Period Summaries</b>									
	CY 2018 MMs	6,311	6,311	6,311	6,311	6,311	6,311	6,311	
	CY 2018 PMPM Costs - Trended to CY 2019	\$5,299.48	\$388.91	\$1,496.84	\$505.26	\$0.57	\$363.85	\$8,054.90	
	CY 2019 MMs	6,340	6,340	6,340	6,340	6,340	6,340	6,340	
	CY 2019 PMPM Costs	\$4,909.13	\$227.69	\$1,576.10	\$584.17	\$0.71	\$262.73	\$7,560.52	
<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$5,103.86	\$308.11	\$1,536.56	\$544.81	\$0.64	\$313.17	\$7,807.15	
<b>Trends</b>									
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.037	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.010	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.976	0.999	1.000	1.000	1.000	0.999	
<b>Population Changes</b>									
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>Program Changes</b>									
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.996	
<b>Reimbursement Changes</b>									
<i>k</i>	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.945	0.998	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.976	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.060	1.002	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.001	1.005	1.000	1.038	1.041	1.003	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.059	1.000	1.000	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.000	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$5,061.45</b>	<b>\$306.53</b>	<b>\$1,667.33</b>	<b>\$583.15</b>	<b>\$0.67</b>	<b>\$344.83</b>	<b>\$7,963.96</b>	

		Non-SSI Newborns 0 to 2 Months Rate Cell							
		Category of Service							
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total	
<b>Base Period Summaries</b>									
	CY 2018 MMs	76,100	76,100	76,100	76,100	76,100	76,100	76,100	
	CY 2018 PMPM Costs - Trended to CY 2019	\$1,369.37	\$51.19	\$345.64	\$8.76	\$0.55	\$18.29	\$1,793.81	
	CY 2019 MMs	75,312	75,312	75,312	75,312	75,312	75,312	75,312	
	CY 2019 PMPM Costs	\$1,390.98	\$53.57	\$344.18	\$8.87	\$0.66	\$14.64	\$1,812.89	
<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$1,380.12	\$52.37	\$344.91	\$8.81	\$0.61	\$16.47	\$1,803.30	
<b>Trends</b>									
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.035	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.005	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.954	0.998	1.000	1.000	1.000	0.998	
<b>Population Changes</b>									
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<b>Program Changes</b>									
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	1.000	
<b>Reimbursement Changes</b>									
<i>k</i>	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.964	1.000	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.972	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.334	1.003	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.000	1.011	1.000	1.024	1.030	1.003	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.064	1.000	1.000	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.000	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$1,368.65</b>	<b>\$50.89</b>	<b>\$375.78</b>	<b>\$9.43</b>	<b>\$0.64</b>	<b>\$23.03</b>	<b>\$1,828.43</b>	

**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 MississippiCAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

Calculation Step		SFY 2023 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
		<b>Base Period Summaries</b>							
	<i>a</i>	CY 2019 PMPM Costs	\$38.40	\$58.66	\$108.67	\$23.75	\$0.98	\$5.37	\$235.83
		<b>Trends</b>							
	<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.034
	<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.024
	<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>e</i>	Emergency Services Savings Adjustment	1.000	0.951	0.992	1.000	1.000	1.000	0.984
		<b>Population Changes</b>							
	<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
		<b>Program Changes</b>							
	<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.994
		<b>Reimbursement Changes</b>							
	<i>k</i>	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.964	0.999
	<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.994
	<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.183	1.004
	<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>p</i>	5% Assessment Removal Adjustment	1.000	1.000	1.021	1.000	1.036	1.041	1.011
	<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.063	1.000	1.000
	<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.002
<i>Product of a through s</i>		<b>Projected SFY 2023 PMPM Costs</b>	<b>\$38.08</b>	<b>\$56.78</b>	<b>\$118.98</b>	<b>\$25.42</b>	<b>\$1.04</b>	<b>\$6.73</b>	<b>\$247.04</b>

Calculation Step		SFY 2023 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
		<b>Base Period Summaries</b>							
		CY 2018 MMs	77,192	77,192	77,192	77,192	77,192	77,192	77,192
		CY 2018 PMPM Costs - Trended to CY 2019	\$279.76	\$42.95	\$117.80	\$75.42	\$28.06	\$9.16	\$553.15
		CY 2019 MMs	78,904	78,904	78,904	78,904	78,904	78,904	78,904
		CY 2019 PMPM Costs	\$300.01	\$43.19	\$129.53	\$73.66	\$26.67	\$11.92	\$564.98
	<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$289.99	\$43.07	\$123.73	\$74.53	\$27.36	\$10.56	\$569.24
		<b>Trends</b>							
	<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.034
	<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.014
	<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.034	1.000	1.000	1.000	1.000	1.000	1.017
	<i>e</i>	Emergency Services Savings Adjustment	1.000	0.978	0.998	1.000	1.000	1.000	0.998
		<b>Population Changes</b>							
	<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
		<b>Program Changes</b>							
	<i>g</i>	ASD Adjustment	1.000	1.000	1.001	1.000	1.000	1.000	1.000
	<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.993
		<b>Reimbursement Changes</b>							
	<i>k</i>	OP Dental Adjustment	1.000	0.996	1.000	1.000	1.000	1.000	1.000
	<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.998	1.000
	<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.981
	<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.053	1.001
	<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.004	1.000	1.000	1.000	1.001
	<i>p</i>	5% Assessment Removal Adjustment	1.000	1.015	1.037	1.000	1.049	1.046	1.013
	<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.022	1.000	1.001
	<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.013	1.000	1.001
	<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.000
<i>Product of a through s</i>		<b>Projected SFY 2023 PMPM Costs</b>	<b>\$297.33</b>	<b>\$43.36</b>	<b>\$139.06</b>	<b>\$79.78</b>	<b>\$28.69</b>	<b>\$12.27</b>	<b>\$600.48</b>

**Exhibit 2A**  
**Mississippi Division of Medicaid**  
**All Regions SFY 2023 Mississippi/CAN Capitation Rate Development**  
**Final Base Data and Projection Assumptions**

		MYPAC Rate Cell							
		Category of Service							
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total	
	<b>Base Period Summaries</b>								
	CY 2018 MMs	5,469	5,469	5,469	5,469	5,469	5,469	5,469	
	CY 2018 PMPM Costs - Trended to CY 2019	\$292.14	\$47.74	\$2,907.51	\$163.08	\$29.00	\$24.71	\$3,464.18	
	CY 2019 MMs	7,776	7,776	7,776	7,776	7,776	7,776	7,776	
	CY 2019 PMPM Costs	\$511.75	\$53.83	\$2,833.82	\$163.43	\$31.35	\$18.77	\$3,612.95	
<i>a</i>	Blended CY 2018 & CY 2019 PMPM Costs	\$421.07	\$51.31	\$2,864.25	\$163.28	\$30.38	\$21.22	\$3,551.52	
	<b>Trends</b>								
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.001	1.072	0.965	1.035	1.009	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.002	1.053	1.000	1.020	1.003	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.008	1.000	1.000	1.000	1.000	1.000	1.001	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.954	1.000	1.000	1.000	1.000	0.999	
	<b>Population Changes</b>								
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
	<b>Program Changes</b>								
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.997	
	<b>Reimbursement Changes</b>								
<i>k</i>	OP Dental Adjustment	1.000	0.993	1.000	1.000	1.000	1.000	1.000	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.921	1.000	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.995	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.219	1.001	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.001	1.050	1.000	1.049	1.039	1.041	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.021	1.000	1.000	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.013	1.000	1.000	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.000	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$420.85</b>	<b>\$49.53</b>	<b>\$3,016.99</b>	<b>\$174.77</b>	<b>\$31.82</b>	<b>\$26.15</b>	<b>\$3,720.12</b>	

		MA Children Rate Cell							
		Category of Service							
Calculation Step	SFY 2023 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total	
	<b>Base Period Summaries</b>								
<i>a</i>	CY 2019 PMPM Costs	\$18.73	\$35.84	\$62.27	\$34.67	\$25.55	\$4.91	\$181.96	
	<b>Trends</b>								
<i>b</i>	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.029	
<i>c</i>	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.024	
<i>d</i>	PRTF Specific Charge Trend CY 2019 to SFY 2023	1.009	1.000	1.000	1.000	1.000	1.000	1.001	
<i>e</i>	Emergency Services Savings Adjustment	1.000	0.966	0.994	1.000	1.000	1.000	0.991	
	<b>Population Changes</b>								
<i>f</i>	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
	<b>Program Changes</b>								
<i>g</i>	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>h</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>i</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
<i>j</i>	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.989	
	<b>Reimbursement Changes</b>								
<i>k</i>	OP Dental Adjustment	1.000	0.989	1.000	1.000	1.000	1.000	0.998	
<i>l</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.981	0.999	
<i>m</i>	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.996	
<i>n</i>	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.093	1.003	
<i>o</i>	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.009	1.000	1.000	1.000	1.003	
<i>p</i>	5% Assessment Removal Adjustment	1.000	1.007	1.027	1.000	1.050	1.043	1.019	
<i>q</i>	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.020	1.000	1.003	
<i>r</i>	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.014	1.000	1.002	
<i>s</i>	Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.001	
<i>Product of a through s</i>	<b>Projected SFY 2023 PMPM Costs</b>	<b>\$18.74</b>	<b>\$35.13</b>	<b>\$69.34</b>	<b>\$37.11</b>	<b>\$26.78</b>	<b>\$5.80</b>	<b>\$192.91</b>	

Exhibit 2A  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
Final Base Data and Projection Assumptions

Calculation Step		SFY 2023 PMPM Cost Development	Quasi-CHIP Rate Cell					Total	
			Inpatient	Outpatient	Physician	Drug	Dental		Other
			Hospital	Hospital					
<b>Base Period Summaries</b>									
<i>a</i>		CY 2019 PMPM Costs	\$16.23	\$27.32	\$58.59	\$43.31	\$32.45	\$5.53	\$183.42
<b>Trends</b>									
<i>b</i>		Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.029
<i>c</i>		Charge Trend Factors CY 2019 to SFY 2023	0.995	0.994	1.044	1.053	1.000	1.020	1.026
<i>d</i>		PRTF Specific Charge Trend CY 2019 to SFY 2023	1.010	1.000	1.000	1.000	1.000	1.000	1.001
<i>e</i>		Emergency Services Savings Adjustment	1.000	0.969	0.996	1.000	1.000	1.000	0.994
<b>Population Changes</b>									
<i>f</i>		COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<b>Program Changes</b>									
<i>g</i>		ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>h</i>		Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>i</i>		Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>j</i>		PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.987
<b>Reimbursement Changes</b>									
<i>k</i>		OP Dental Adjustment	1.000	0.994	1.000	1.000	1.000	1.000	0.999
<i>l</i>		NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.986	1.000
<i>m</i>		GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.997
<i>n</i>		Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.060	1.002
<i>o</i>		COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.010	1.000	1.000	1.000	1.003
<i>p</i>		5% Assessment Removal Adjustment	1.000	1.006	1.026	1.000	1.050	1.048	1.019
<i>q</i>		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.020	1.000	1.003
<i>r</i>		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.010	1.000	1.002
<i>s</i>		Non-APC Rural Outpatient Hospital Adjustment	1.000	1.007	1.000	1.000	1.000	1.000	1.001
<i>Product of a through s</i>		<b>Projected SFY 2023 PMPM Costs</b>	<b>\$16.26</b>	<b>\$26.93</b>	<b>\$65.29</b>	<b>\$46.36</b>	<b>\$33.89</b>	<b>\$6.39</b>	<b>\$195.12</b>

Exhibit 2B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
MA Adult and Pregnant Women Aggregate Service PMPMs

Projected SFY 2023 PMPM Cost Development	MA Adult Rate Cell							Total
	Category of Service							
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
Projected SFY 2023 PMPM Costs Net of Deliveries	\$39.81	\$105.42	\$130.01	\$140.09	\$6.64	\$13.87		\$435.83
Projected Delivery Costs PMPM	\$32.63	\$0.12	\$9.19	\$0.19	\$0.00	\$0.25		\$42.38
<b>Projected SFY 2023 PMPM Costs Including Deliveries</b>	<b>\$72.44</b>	<b>\$105.54</b>	<b>\$139.19</b>	<b>\$140.27</b>	<b>\$6.64</b>	<b>\$14.13</b>		<b>\$478.21</b>

<sup>1</sup> PMPM costs are calculated using allowed amounts for 3,445 MA Adult deliveries in 2019.

Exhibit 2B  
Mississippi Division of Medicaid  
All Regions SFY 2023 MississippiCAN Capitation Rate Development  
MA Adult and Pregnant Women Aggregate Service PMPMs

Projected SFY 2023 PMPM Cost Development	Pregnant Women Rate Cell							Total
	Category of Service							
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other		
Projected SFY 2023 PMPM Costs Net of Deliveries	\$35.35	\$106.24	\$210.42	\$66.97	\$5.21	\$11.48		\$435.67
Projected Delivery Costs PMPM	\$466.23	\$1.18	\$136.91	\$2.73	\$0.00	\$2.35		\$609.41
<b>Projected SFY 2023 PMPM Costs Including Deliveries</b>	<b>\$501.58</b>	<b>\$107.42</b>	<b>\$347.34</b>	<b>\$69.71</b>	<b>\$5.21</b>	<b>\$13.83</b>		<b>\$1,045.09</b>

<sup>1</sup> PMPM costs are calculated using allowed amounts for 16,007 Pregnant Women deliveries in 2018 and 15,813 Pregnant Women deliveries in 2019.

Exhibit 3  
Mississippi Division of Medicaid  
SFY 2023 MississippiCAN Capitation Rate Development  
Statewide Non-Service Expense Allocation Development

Rate Cell	<i>a</i>	<i>b</i>	<i>c</i>	<i>e = d × j</i>		<i>f</i>	<i>g = f × j</i>	<i>h</i>	<i>i = h × j</i>	<i>j = (b + c) / (f - d - f - h)</i>
	Projected SFY 2023 Membership	SFY 2023 PMPM Cost	Fixed Non-Service Expense Load	Non-Service Percentage	Non-Service PMPM	Margin Percentage	Margin PMPM	Premium Tax Percentage	Premium Tax PMPM	Total
Non-Newborn SSI / Disabled	729,676	\$1,074.67	\$10.56	5.22%	\$62.91	1.80%	\$21.71	3.00%	\$36.18	\$1,206.03
Breast and Cervical Cancer	1,524	\$3,480.27	\$10.56	5.22%	\$202.36	1.80%	\$69.83	3.00%	\$116.38	\$3,879.40
MA Adult	524,684	\$478.21	\$10.56	5.22%	\$28.33	1.80%	\$9.78	3.00%	\$16.30	\$543.17
Pregnant Women	109,464	\$1,045.09	\$10.56	5.22%	\$61.19	1.80%	\$21.12	3.00%	\$35.19	\$1,173.15
SSI / Disabled Newborn	4,762	\$7,963.96	\$10.56	5.22%	\$462.26	1.80%	\$159.52	3.00%	\$265.87	\$8,862.17
Non-SSI Newborns 0 to 2 Months	70,746	\$1,828.43	\$10.56	5.22%	\$106.60	1.80%	\$36.79	3.00%	\$61.31	\$2,043.69
Non-SSI Newborns 3 to 12 Months	235,585	\$247.04	\$10.56	5.22%	\$14.93	1.80%	\$5.15	3.00%	\$8.59	\$286.28
Foster Care	81,194	\$600.48	\$10.56	5.22%	\$35.42	1.80%	\$12.22	3.00%	\$20.37	\$679.06
MYPAC	9,035	\$3,720.12	\$10.56	5.22%	\$216.26	1.80%	\$74.63	3.00%	\$124.38	\$4,145.94
MA Children	2,987,221	\$192.91	\$10.56	5.22%	\$11.79	1.80%	\$4.07	3.00%	\$6.78	\$226.11
Quasi-CHIP	312,973	\$195.12	\$10.56	5.22%	\$11.92	1.80%	\$4.11	3.00%	\$6.86	\$228.57
<b>Total</b>	<b>5,066,865</b>	<b>\$414.45</b>	<b>\$10.56</b>	<b>5.22%</b>	<b>\$24.64</b>	<b>1.80%</b>	<b>\$8.50</b>	<b>3.00%</b>	<b>\$14.17</b>	<b>\$472.31</b>

**Exhibit 4**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**Final SFY 2023 Capitation Rates**

Rate Cell	a SFY 2023 Statewide Capitation Rates	b Area Adjustments	c = a x b SFY 2023 Regional Capitation Rates	d = c x -1.00% Quality Withhold	e = c + d Total Rate at 1.0 Risk Score after Withhold	f Projected SFY 2023 Member Months
<b>Non-Newborn SSI / Disabled</b>	\$1,206.03					
North Region		0.912	\$1,099.90	(\$12.06)	\$1,193.97	729,676
Central Region		1.049	1,265.12	(\$11.00)	\$1,088.90	251,278
South Region		1.041	1,255.47	(\$12.65)	\$1,252.47	266,791
				(\$12.55)	\$1,242.92	211,608
<b>Breast and Cervical Cancer</b>	\$3,879.40					
North Region		0.912	\$3,538.01	(\$38.79)	\$3,840.60	1,524
Central Region		1.049	4,069.49	(\$35.38)	\$3,502.63	299
South Region		1.041	4,038.45	(\$40.69)	\$4,028.79	462
				(\$40.38)	\$3,998.07	763
<b>MA Adult</b>	\$543.17					
North Region		0.945	\$513.30	(\$5.43)	\$537.74	524,684
Central Region		1.041	565.44	(\$5.13)	\$508.16	168,220
South Region		1.009	548.06	(\$5.65)	\$559.79	176,457
				(\$5.48)	\$542.58	180,008
<b>Pregnant Women</b>	\$1,173.15					
North Region		0.945	\$1,108.63	(\$11.73)	\$1,161.42	109,464
Central Region		1.041	1,221.25	(\$11.09)	\$1,097.54	33,792
South Region		1.009	1,183.71	(\$12.21)	\$1,209.04	40,379
				(\$11.84)	\$1,171.87	35,293
<b>SSI / Disabled Newborn</b>	\$8,862.17					
North Region		0.981	\$8,693.79	(\$88.62)	\$8,773.55	4,762
Central Region		1.019	9,030.55	(\$86.94)	\$8,606.85	1,471
South Region		0.997	8,835.59	(\$90.31)	\$8,940.25	2,066
				(\$88.36)	\$8,747.23	1,225
<b>Non-SSI Newborns 0 to 2 Months</b>	\$2,043.69					
North Region		0.981	\$2,004.86	(\$20.44)	\$2,023.25	70,746
Central Region		1.019	2,082.52	(\$20.05)	\$1,984.81	22,225
South Region		0.997	2,037.56	(\$20.83)	\$2,061.69	25,996
				(\$20.38)	\$2,017.18	22,525
<b>Non-SSI Newborns 3 to 12 Months</b>	\$286.28					
North Region		0.981	\$280.84	(\$2.86)	\$283.41	235,585
Central Region		1.019	291.72	(\$2.81)	\$278.03	73,270
South Region		0.997	285.42	(\$2.92)	\$288.80	87,059
				(\$2.85)	\$282.56	75,255
<b>Foster Care</b>	\$679.06					
North Region		0.981	\$666.15	(\$6.79)	\$672.27	81,194
Central Region		1.019	691.96	(\$6.66)	\$659.49	22,409
South Region		0.997	677.02	(\$6.92)	\$685.04	23,588
				(\$6.77)	\$670.25	35,197
<b>MYPAC</b>	\$4,145.94					
North Region		0.981	\$4,067.17	(\$41.46)	\$4,104.48	9,035
Central Region		1.019	4,224.72	(\$40.67)	\$4,026.50	2,826
South Region		0.997	4,133.51	(\$42.25)	\$4,182.47	2,988
				(\$41.34)	\$4,092.17	3,221
<b>MA Children</b>	\$226.11					
North Region		0.981	\$221.82	(\$2.26)	\$223.85	2,987,221
Central Region		1.019	230.41	(\$2.22)	\$219.60	852,793
South Region		0.997	225.43	(\$2.30)	\$228.10	1,089,299
				(\$2.25)	\$223.18	945,129
<b>Quasi-CHIP</b>	\$228.57					
North Region		0.981	\$224.23	(\$2.29)	\$226.29	312,973
Central Region		1.019	232.92	(\$2.24)	\$221.99	101,044
South Region		0.997	227.89	(\$2.33)	\$230.59	117,384
				(\$2.28)	\$225.61	94,546
<b>Total Capitation Dollars</b>						
Statewide Capitation Rates			\$2,393,137,184			
Regional Capitation Rates			\$2,392,678,107			



**Exhibit 5**  
**Mississippi Division of Medicaid**  
**SFY 2022 to SFY 2023 Rate Change<sup>1</sup>**

	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi- CHIP	Total - Aggregated with Actual CY 2019 MMs	Total - Aggregated with Projected SFY 2023 MMs
<b>Membership</b>													
Actual CY 2019 MMs	765,558	1,187	493,779	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251	N/A
Projected SFY 2023 MMs	729,676	1,524	524,684	109,464	4,762	70,746	235,585	81,194	9,035	2,987,221	312,973	N/A	5,066,865
<b>SFY 2022 Capitation Rate</b>	<b>\$1,200.70</b>	<b>\$3,824.19</b>	<b>\$498.08</b>	<b>\$1,190.95</b>	<b>\$8,765.03</b>	<b>\$2,099.14</b>	<b>\$288.32</b>	<b>\$690.44</b>	<b>\$4,248.00</b>	<b>\$222.66</b>	<b>\$224.76</b>	<b>\$472.10</b>	<b>\$466.11</b>
Base Period Data Update	0.998	0.999	0.991	0.989	1.028	0.991	1.004	1.001	0.989	0.998	0.997	0.997	0.997
Restate TPL on CY 2019 Claims	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Restate Benefits Exceeding Medicaid Limits	0.999	1.007	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Restate CY 2018 to SFY 2022 Trends	0.975	0.970	1.001	0.997	0.953	0.951	0.968	0.959	0.991	0.972	0.973	0.976	0.976
Remove SFY 2021 to SFY 2022 Charge Trends	1.002	1.001	0.995	0.988	0.997	0.997	0.995	0.998	0.999	0.996	0.997	0.998	0.998
Restate CY 2019 to CY 2020 PDL Adjustment <sup>2</sup>	0.996	0.998	0.994	0.999	0.999	1.000	0.999	0.998	0.999	0.998	0.997	0.997	0.997
Remove COVID-19 Population Acuity Adjustments <sup>3</sup>	1.000	1.000	1.093	1.000	1.000	1.000	1.000	1.000	1.000	1.031	1.031	1.019	1.020
Other Restated Assumptions	0.999	1.000	0.999	1.000	0.999	1.000	0.999	0.998	0.994	0.999	0.999	0.999	0.999
<b>Restated SFY 2022 Rate</b>	<b>0.967</b>	<b>0.974</b>	<b>1.070</b>	<b>0.972</b>	<b>0.975</b>	<b>0.940</b>	<b>0.963</b>	<b>0.954</b>	<b>0.973</b>	<b>0.993</b>	<b>0.994</b>	<b>0.984</b>	<b>0.985</b>
SFY 2022 to SFY 2023 Trends	1.044	1.042	1.031	1.023	1.041	1.041	1.047	1.039	1.008	1.036	1.035	1.038	1.038
Emergency Services Savings Adjustment <sup>3</sup>	0.996	0.999	0.982	0.991	0.999	0.998	0.986	0.998	0.999	0.992	0.995	0.993	0.993
PDL CY 2021 to CY 2022 Adjustment <sup>2</sup>	0.998	0.999	0.998	1.000	0.998	1.000	0.998	0.997	0.999	0.996	0.995	0.998	0.998
SFY 2022 to SFY 2023 COVID-19 Vaccine Administration Change <sup>2,3</sup>	1.000	1.000	1.002	1.001	1.000	1.000	1.000	0.997	1.000	0.993	0.993	0.998	0.998
SFY 2023 Preventative and Diagnostic Dental Reimbursement Change <sup>2</sup>	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.003	1.001	1.001
SFY 2023 Restorative Dental Reimbursement Change <sup>2</sup>	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.002	1.001	1.001
Non-APC Rural Outpatient Hospital Adjustment <sup>2</sup>	1.001	1.003	1.001	1.001	1.000	1.000	1.001	1.000	1.000	1.001	1.001	1.001	1.001
Update Admin	0.999	0.999	1.004	0.998	0.999	0.997	0.999	0.998	0.997	1.000	1.001	1.000	1.000
<b>Preliminary SFY 2023 Rate Change</b>	<b>1.004</b>	<b>1.014</b>	<b>1.091</b>	<b>0.985</b>	<b>1.011</b>	<b>0.974</b>	<b>0.993</b>	<b>0.984</b>	<b>0.976</b>	<b>1.016</b>	<b>1.017</b>	<b>1.012</b>	<b>1.013</b>
<b>SFY 2023 Rate Change - Excluding Program Changes<sup>2</sup></b>	<b>1.009</b>	<b>1.015</b>	<b>1.095</b>	<b>0.985</b>	<b>1.013</b>	<b>0.974</b>	<b>0.995</b>	<b>0.989</b>	<b>0.978</b>	<b>1.024</b>	<b>1.027</b>	<b>1.017</b>	<b>1.018</b>
<b>SFY 2023 Rate Change - Excluding COVID-19 Adjustments<sup>3</sup></b>	<b>1.009</b>	<b>1.015</b>	<b>1.014</b>	<b>0.993</b>	<b>1.012</b>	<b>0.975</b>	<b>1.007</b>	<b>0.988</b>	<b>0.977</b>	<b>1.000</b>	<b>0.998</b>	<b>1.002</b>	<b>1.002</b>

<sup>1</sup> Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.

<sup>2</sup> Program change that increases or decreases total program costs outside of the control of the CCOs.

<sup>3</sup> COVID-19 Adjustments include the COVID-19 Vaccine Administration Expense and the COVID-19 Population Acuity Adjustment.

**Exhibit 6**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**Service Category to Milliman HCGs Grouped Category Mapping**

Broad Category		Broad Category	
MR Line of Service	Description	MR Line of Service	Description
I11a	Inpatient Facility Medical - General	P37d	Physician Miscellaneous Medical - Otorhinolaryngology
I11b	Inpatient Facility Medical - Rehabilitation	P37e	Physician Miscellaneous Medical - Vestibular Function Tests
I12	Inpatient Facility Surgical	P37f	Physician Miscellaneous Medical - Non-Invas. Vasc. Diag. Studies
I13a	Inpatient Facility Psychiatric - Hospital	P37g	Physician Miscellaneous Medical - Pulmonology
I13b	Inpatient Facility Psychiatric - Residential	P37h	Physician Miscellaneous Medical - Neurology
I14a	Inpatient Facility Alcohol and Drug Abuse - Hospital	P37i	Physician Miscellaneous Medical - Central Nervous System Tests
I14b	Inpatient Facility Alcohol and Drug Abuse - Residential	P37j	Physician Miscellaneous Medical - Dermatology
I21a	Inpatient Facility Mat Norm Delivery	P37k	Physician Miscellaneous Medical - Dialysis
I21b	Inpatient Facility Mat Norm Delivery - Mom / Baby Combined	P40a	Physician Preventive Other - General
I22a	Inpatient Facility Mat Csect Delivery	P40b	Physician Preventive Other - Colonoscopy
I22b	Inpatient Facility Mat Csect Delivery - Mom / Baby Combined	P40c	Physician Preventive Other - Mammography
I23a	Inpatient Facility Well Newborn - Normal Delivery	P40d	Physician Preventive Other - Lab
I23b	Inpatient Facility Well Newborn - Csect Delivery	P41	Physician Preventive Immunizations
I23c	Inpatient Facility Well Newborn - Unknown Delivery	P42	Physician Preventive Well Baby Exams
I24	Inpatient Facility Other Newborn	P43	Physician Preventive Physical Exams
I25	Inpatient Facility Maternity Non-Delivery	P44	Physician Vision Exams
I31	Inpatient Facility SNF	P45	Physician Hearing and Speech Exams
O10a	Outpatient Facility Observation - Without ED	P51a	Physician ER Visits and Observation Care - Observation Care
O10b	Outpatient Facility Observation - With ED	P51b	Physician ER Visits and Observation Care - ER Visits
O11	Outpatient Facility Emergency Room	P53	Physician Physical Therapy
O12a	Outpatient Facility Surgery - Hospital Outpatient	P54	Physician Cardiovascular
O12b	Outpatient Facility Surgery - Ambulatory Surgery Center	P55b	Physician Radiology IP - CT Scan
O13a	Outpatient Facility Radiology General - Therapeutic	P55c	Physician Radiology IP - MRI
O13b	Outpatient Facility Radiology General - Diagnostic	P55d	Physician Radiology IP - PET
O14a	Outpatient Facility Radiology - CT/MRI/PET - CT Scan	P55e	Physician Radiology IP - General - Therapeutic
O14b	Outpatient Facility Radiology - CT/MRI/PET - MRI	P55f	Physician Radiology IP - General - Diagnostic
O14c	Outpatient Facility Radiology - CT/MRI/PET - PET	P56a	Physician Radiology OP - General - Therapeutic
O15	Outpatient Facility Pathology/Lab	P56b	Physician Radiology OP - General - Diagnostic
O16a	Outpatient Facility Pharmacy - General	P57a	Physician Radiology OP-CT/MRI/PET - CT Scan
O16b	Outpatient Facility Pharmacy - Chemotherapy	P57b	Physician Radiology OP-CT/MRI/PET - MRI
O17	Outpatient Facility Cardiovascular	P57c	Physician Radiology OP-CT/MRI/PET - PET
O18	Outpatient Facility PT/OT/ST	P58c	Physician Radiology Office - General - Therapeutic
O31a	Outpatient Facility Psychiatric - Partial Hospitalization	P58d	Physician Radiology Office - General - Diagnostic
O31b	Outpatient Facility Psychiatric - Intensive Outpatient	P58e	Physician Radiology Office - General - Radiology Center - Therapeutic
O32a	Outpatient Facility Alcohol & Drug Abuse - Partial Hospitalization	P58f	Physician Radiology Office - General - Radiology Center - Diagnostic
O32b	Outpatient Facility Alcohol & Drug Abuse - Intensive Outpatient	P59a	Physician Radiology Office - CT/MRI/PET - CT Scan
O41a	Outpatient Facility Other - General	P59b	Physician Radiology Office - CT/MRI/PET - MRI
O41b	Outpatient Facility Other - Blood	P59c	Physician Radiology Office - CT/MRI/PET - PET
O41c	Outpatient Facility Other - Clinic	P59d	Physician Radiology Office - CT/MRI/PET - CT Scan - Radiology Center
O41d	Outpatient Facility Other - Diagnostic	P59e	Physician Radiology Office - CT/MRI/PET - MRI - Radiology Center
O41e	Outpatient Facility Other - Dialysis	P59f	Physician Radiology Office - CT/MRI/PET - PET - Radiology Center
O41f	Outpatient Facility Other - DME/Supplies	P61a	Physician Pathology/Lab - Inpatient & Outpatient - Inpatient
O41g	Outpatient Facility Other - Trfms/SpcltySvcs	P61b	Physician Pathology/Lab - Inpatient & Outpatient - Outpatient
O41h	Outpatient Facility Other - Pulmonary	P63a	Physician Pathology/Lab - Office - General
O41i	Outpatient Facility Other - Urgent Care	P63b	Physician Pathology/Lab - Office - Venipuncture
O51a	Outpatient Facility Preventive - General	P63c	Physician Pathology/Lab - Office - Independent Lab
O51b	Outpatient Facility Preventive - Colonoscopy	P65	Physician Chiropractor
O51c	Outpatient Facility Preventive - Mammography	P66	Physician Outpatient Psychiatric
O51d	Outpatient Facility Preventive - Lab	P67	Physician Outpatient Alcohol & Drug Abuse
P11	Physician Inpatient Surgery	P81a	Pharmacy Prescription Drugs - Non-Specialty Generic
P13	Physician Inpatient Anesthesia	P81b	Pharmacy Prescription Drugs - Non-Specialty Multi-Source Brand
P14	Physician Outpatient Surgery	P81c	Pharmacy Prescription Drugs - Non-Specialty Single-Source Brand
P15	Physician Office Surgery	P81e	Pharmacy Prescription Drugs - OTC
P16	Physician Outpatient Anesthesia	P81g	Pharmacy Prescription Drugs - Specialty
P21a	Physician Maternity - Normal Deliveries	P82a	Other Private Duty Nursing/Home Health - HH
P21b	Physician Maternity - Cesarean Deliveries	P82b	Other Private Duty Nursing/Home Health - Hospice
P21c	Physician Maternity - Non-Deliveries	P83	Other Ambulance
P21d	Physician Maternity - Ancillary	P84	Other DME and Supplies
P21e	Physician Maternity - Anesthesia	P85	Other Prosthetics
P31d	Physician Inpatient Visits - Medical	P88	Other Glasses/Contacts
P31e	Physician Inpatient Visits - Psychiatric	P99a	Other - General
P31f	Physician Inpatient Visits - Alcohol and Drug Abuse	P99b	Other - Hearing Aids
P32c	Physician Office/Home Visits - PCP	P99c	Dental Other - Dental
P32d	Physician Office/Home Visits - Specialist	P99d	Other - Acupuncture
P33	Physician Urgent Care Visits	P99e	Physician Other - Reproductive Medicine
P34a	Physician Office Administered Drugs - General	P99f	Physician Other - Temporary Codes
P34b	Physician Office Administered Drugs - Chemotherapy	P99g	Physician Other - Documentation/Unclassified
P35	Physician Allergy Testing	P99h	Other - Non-Emergency Transportation
P36	Physician Allergy Immunotherapy	P99c	Physician Other - Unclassified
P37a	Physician Miscellaneous Medical - General		
P37b	Physician Miscellaneous Medical - Gastroenterology		
P37c	Physician Miscellaneous Medical - Ophthalmology		

**Exhibit 7A**  
**Mississippi Division of Medicaid**  
**Mississippi/CAN Historical Completed Non-Pharmacy PMPM Costs and Trends**  
**All Populations**  
**PMPM Costs by Month<sup>1</sup>**

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	488,894	\$72.99	\$64.96	\$95.68	\$22.73	\$13.11	\$269.46
February 2017	488,069	\$71.87	\$62.72	\$94.59	\$21.47	\$12.29	\$262.94
March 2017	487,638	\$77.29	\$68.28	\$99.43	\$23.51	\$14.13	\$282.63
April 2017	486,695	\$72.00	\$63.73	\$98.85	\$20.37	\$12.98	\$257.93
May 2017	486,717	\$77.61	\$64.32	\$92.76	\$20.26	\$13.83	\$268.80
June 2017	487,844	\$73.14	\$65.53	\$86.20	\$21.92	\$13.35	\$260.15
July 2017	485,763	\$71.16	\$64.73	\$84.65	\$22.00	\$13.10	\$255.64
August 2017	483,228	\$73.77	\$67.95	\$104.07	\$25.44	\$14.16	\$285.40
September 2017	480,198	\$75.29	\$66.81	\$94.27	\$21.92	\$13.31	\$270.59
October 2017	479,517	\$74.67	\$69.12	\$101.59	\$24.18	\$14.35	\$283.91
November 2017	479,334	\$74.36	\$67.22	\$96.56	\$22.32	\$13.19	\$273.65
December 2017	474,479	\$75.19	\$65.37	\$87.18	\$17.64	\$12.37	\$257.75
<b>CY 2017<sup>2</sup></b>	<b>484,031</b>	<b>\$74.11</b>	<b>\$66.81</b>	<b>\$93.82</b>	<b>\$21.98</b>	<b>\$13.35</b>	<b>\$269.07</b>
January 2018	469,721	\$80.51	\$68.21	\$99.90	\$20.14	\$13.23	\$281.99
February 2018	463,513	\$73.37	\$65.04	\$97.90	\$19.97	\$12.34	\$268.63
March 2018	456,311	\$75.54	\$66.70	\$95.62	\$21.47	\$13.45	\$272.77
April 2018	452,014	\$74.02	\$66.56	\$97.54	\$20.71	\$13.61	\$272.44
May 2018	450,874	\$77.73	\$68.73	\$95.36	\$18.99	\$13.98	\$274.80
June 2018	446,592	\$77.11	\$68.15	\$84.71	\$19.85	\$13.56	\$263.38
July 2018	440,538	\$74.20	\$63.01	\$91.23	\$21.86	\$14.80	\$265.10
August 2018	434,107	\$77.48	\$67.11	\$105.66	\$22.86	\$15.12	\$288.23
September 2018	429,738	\$70.01	\$62.07	\$91.92	\$18.67	\$13.86	\$256.53
October 2018	428,967	\$80.72	\$68.82	\$107.14	\$22.05	\$14.72	\$293.46
November 2018	430,443	\$76.99	\$64.46	\$95.85	\$18.48	\$12.82	\$268.60
December 2018	434,997	\$81.82	\$61.33	\$86.41	\$15.06	\$12.65	\$257.28
<b>CY 2018<sup>3</sup></b>	<b>444,818</b>	<b>\$76.63</b>	<b>\$66.85</b>	<b>\$95.77</b>	<b>\$20.01</b>	<b>\$13.68</b>	<b>\$271.93</b>
January 2019	437,158	\$80.76	\$73.14	\$110.27	\$21.65	\$14.50	\$300.32
February 2019	435,711	\$75.45	\$70.78	\$106.62	\$18.89	\$13.52	\$285.26
March 2019	434,378	\$79.68	\$66.07	\$99.57	\$19.27	\$14.13	\$278.73
April 2019	434,409	\$81.55	\$69.35	\$104.33	\$20.32	\$14.76	\$290.31
May 2019	435,803	\$84.22	\$68.39	\$99.13	\$17.34	\$14.29	\$283.37
June 2019	436,693	\$76.87	\$67.25	\$88.08	\$18.09	\$13.51	\$263.81
July 2019	435,305	\$82.20	\$68.59	\$97.96	\$22.24	\$15.30	\$286.30
August 2019	432,317	\$80.46	\$66.66	\$106.50	\$21.33	\$16.05	\$289.99
September 2019	431,774	\$81.67	\$65.09	\$103.35	\$19.85	\$15.19	\$285.15
October 2019	432,441	\$89.83	\$70.77	\$112.63	\$22.95	\$15.38	\$311.55
November 2019	433,570	\$76.34	\$63.92	\$100.86	\$18.25	\$14.64	\$274.01
December 2019	435,872	\$83.39	\$66.25	\$99.73	\$16.24	\$14.59	\$280.20
<b>CY 2019<sup>4</sup></b>	<b>434,619</b>	<b>\$81.03</b>	<b>\$67.94</b>	<b>\$102.42</b>	<b>\$19.70</b>	<b>\$14.66</b>	<b>\$285.75</b>
January 2020	434,836	\$83.56	\$71.63	\$113.50	\$20.49	\$15.99	\$305.16
February 2020	431,864	\$74.54	\$66.75	\$105.95	\$18.80	\$14.61	\$280.65
March 2020	430,053	\$77.09	\$54.47	\$89.27	\$12.04	\$14.56	\$247.41
April 2020	430,222	\$68.28	\$34.70	\$66.16	\$1.31	\$11.37	\$181.82
May 2020	434,732	\$75.34	\$47.64	\$76.13	\$10.05	\$12.47	\$221.62
June 2020	443,217	\$81.38	\$56.50	\$90.90	\$16.24	\$13.70	\$258.72
July 2020	450,697	\$81.65	\$56.98	\$91.91	\$17.38	\$13.20	\$261.12
August 2020	456,712	\$79.35	\$55.17	\$92.51	\$17.24	\$14.00	\$258.28
September 2020	460,699	\$76.08	\$56.87	\$94.31	\$17.42	\$13.67	\$255.55
October 2020	465,019	\$77.18	\$58.93	\$98.62	\$17.98	\$14.45	\$267.15
November 2020	470,298	\$71.43	\$55.20	\$89.34	\$15.69	\$13.64	\$245.29
December 2020	474,990	\$77.95	\$55.04	\$89.87	\$15.54	\$13.89	\$252.29
<b>CY 2020<sup>5</sup></b>	<b>448,612</b>	<b>\$76.99</b>	<b>\$56.82</b>	<b>\$91.54</b>	<b>\$15.01</b>	<b>\$13.81</b>	<b>\$253.17</b>
<b>Annual PMPM Trends</b>							
CY 2017 to CY 2018		3.4%	0.1%	2.1%	-9.0%	2.5%	1.1%
CY 2018 to CY 2019		5.8%	3.2%	6.9%	-1.5%	7.1%	5.1%
CY 2019 to CY 2020		-5.0%	-17.8%	-10.6%	-23.8%	-5.8%	-11.4%

<sup>1</sup> Mississippi/CAN PMPM figures have been adjusted for: the carveout of Zolgensma claims; adjustments related to the 5% assessment application and removal; OPSS reimbursement changes not related to the 5% assessment; PAD reimbursement changes; annual PDL changes to drug costs; AAC inclusion in drug pricing logic; PRTF inclusion in managed care; OP Dental reimbursement changes; GME removal from capitation rates; NET subcapitation changes; provider settlements; emergency ambulance reimbursement increases; financial to encounter adjustments; population acuity; and IBNR; and blend Mississippi/CAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.  
<sup>2</sup> CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.  
<sup>3</sup> CY 2020 IBNR as reported by CCOs in financial templates.

**Exhibit 7B**  
**Mississippi Division of Medicaid**  
**MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends**  
**SSI+ Population**  
**PMPM Costs by Month<sup>1</sup>**

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	64,675	\$179.01	\$191.88	\$196.59	\$11.64	\$58.35	\$637.48
February 2017	64,516	\$172.38	\$185.62	\$187.58	\$10.83	\$53.63	\$610.04
March 2017	64,529	\$187.06	\$207.91	\$207.80	\$11.92	\$62.25	\$676.74
April 2017	64,477	\$159.15	\$188.22	\$185.34	\$9.80	\$57.82	\$600.33
May 2017	64,406	\$195.46	\$193.51	\$202.28	\$10.21	\$61.88	\$663.34
June 2017	64,492	\$172.56	\$197.50	\$197.95	\$10.88	\$60.37	\$639.25
July 2017	64,412	\$162.96	\$198.01	\$185.10	\$10.18	\$55.84	\$612.09
August 2017	64,439	\$153.04	\$207.24	\$218.37	\$12.83	\$61.02	\$652.50
September 2017	64,346	\$180.54	\$199.64	\$199.02	\$11.07	\$57.68	\$647.95
October 2017	64,474	\$172.80	\$206.04	\$213.88	\$12.43	\$61.51	\$666.66
November 2017	64,549	\$166.74	\$196.35	\$194.98	\$10.90	\$57.01	\$625.99
December 2017	64,562	\$178.71	\$186.48	\$174.98	\$9.18	\$53.56	\$602.91
<b>CY 2017<sup>2</sup></b>	<b>64,490</b>	<b>\$173.37</b>	<b>\$196.53</b>	<b>\$196.97</b>	<b>\$10.99</b>	<b>\$58.41</b>	<b>\$636.28</b>
January 2018	64,468	\$187.21	\$202.36	\$207.52	\$10.36	\$57.68	\$665.13
February 2018	64,351	\$171.53	\$194.02	\$202.13	\$10.13	\$53.49	\$631.31
March 2018	64,286	\$183.55	\$203.10	\$206.97	\$10.63	\$59.41	\$663.65
April 2018	64,208	\$169.94	\$203.18	\$212.52	\$10.58	\$61.15	\$657.36
May 2018	64,357	\$177.07	\$216.18	\$214.56	\$10.30	\$63.85	\$681.96
June 2018	64,050	\$167.18	\$209.49	\$194.72	\$9.92	\$61.46	\$642.77
July 2018	64,219	\$172.93	\$199.12	\$211.12	\$9.66	\$63.75	\$656.58
August 2018	64,087	\$187.71	\$212.46	\$233.75	\$11.12	\$64.38	\$709.42
September 2018	63,974	\$166.91	\$192.52	\$203.76	\$9.38	\$60.47	\$633.04
October 2018	63,957	\$177.21	\$212.20	\$232.93	\$10.68	\$63.56	\$696.59
November 2018	63,969	\$176.05	\$199.35	\$203.05	\$9.71	\$55.33	\$643.49
December 2018	63,998	\$173.48	\$178.94	\$180.23	\$7.47	\$55.60	\$595.73
<b>CY 2018<sup>3</sup></b>	<b>64,160</b>	<b>\$175.90</b>	<b>\$201.91</b>	<b>\$208.60</b>	<b>\$10.00</b>	<b>\$60.01</b>	<b>\$656.42</b>
January 2019	63,950	\$198.55	\$229.13	\$235.10	\$10.35	\$62.70	\$735.83
February 2019	63,920	\$174.52	\$214.58	\$216.09	\$8.93	\$60.70	\$674.81
March 2019	63,698	\$179.52	\$207.73	\$220.33	\$9.04	\$63.03	\$679.65
April 2019	63,889	\$184.20	\$217.69	\$229.03	\$9.79	\$64.57	\$705.28
May 2019	63,755	\$193.42	\$220.09	\$226.57	\$8.66	\$64.86	\$713.61
June 2019	63,925	\$162.58	\$210.76	\$208.73	\$7.85	\$61.90	\$651.84
July 2019	64,022	\$184.28	\$211.74	\$222.11	\$10.19	\$65.18	\$693.50
August 2019	63,859	\$176.24	\$209.17	\$232.56	\$10.26	\$67.80	\$696.02
September 2019	63,883	\$196.06	\$203.48	\$221.67	\$9.59	\$65.67	\$696.69
October 2019	63,882	\$218.41	\$219.32	\$241.03	\$11.01	\$67.02	\$756.79
November 2019	63,905	\$184.39	\$186.38	\$203.65	\$8.42	\$65.42	\$648.26
December 2019	64,012	\$191.10	\$195.87	\$206.00	\$7.60	\$63.74	\$664.31
<b>CY 2019<sup>4</sup></b>	<b>63,892</b>	<b>\$187.11</b>	<b>\$210.49</b>	<b>\$221.91</b>	<b>\$9.31</b>	<b>\$64.40</b>	<b>\$693.22</b>
January 2020	63,825	\$196.67	\$230.98	\$237.82	\$10.34	\$69.93	\$745.74
February 2020	63,815	\$172.64	\$209.94	\$218.36	\$9.39	\$63.82	\$674.16
March 2020	63,560	\$189.61	\$182.21	\$198.84	\$5.45	\$68.19	\$644.31
April 2020	63,477	\$141.70	\$142.69	\$150.08	\$1.42	\$56.73	\$492.61
May 2020	63,612	\$173.45	\$173.86	\$171.89	\$4.78	\$58.90	\$582.88
June 2020	63,837	\$195.53	\$196.17	\$208.35	\$7.49	\$63.67	\$671.21
July 2020	63,760	\$182.57	\$193.69	\$201.08	\$7.88	\$58.22	\$643.44
August 2020	63,722	\$172.69	\$183.49	\$201.06	\$8.42	\$60.64	\$626.30
September 2020	63,702	\$172.73	\$191.68	\$206.04	\$8.47	\$61.98	\$640.90
October 2020	63,619	\$181.21	\$197.00	\$211.92	\$8.83	\$65.01	\$663.96
November 2020	63,603	\$162.68	\$181.58	\$188.82	\$7.16	\$61.71	\$601.95
December 2020	63,427	\$178.61	\$186.46	\$190.04	\$7.39	\$64.67	\$627.18
<b>CY 2020<sup>5</sup></b>	<b>63,663</b>	<b>\$176.67</b>	<b>\$189.15</b>	<b>\$198.69</b>	<b>\$7.25</b>	<b>\$62.79</b>	<b>\$634.55</b>
<b>Annual PMPM Trends</b>							
CY 2017 to CY 2018		1.5%	2.7%	5.9%	-9.0%	2.7%	3.2%
CY 2018 to CY 2019		6.4%	4.3%	6.4%	-6.9%	7.3%	5.6%
CY 2019 to CY 2020		-5.6%	-10.1%	-10.5%	-22.1%	-2.5%	-8.5%

<sup>1</sup> MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims; adjustments related to the 5% assessment application and removal; OPSS reimbursement changes not related to the 5% assessment; PAD reimbursement changes; annual PDL changes to drug costs; AAC inclusion in drug pricing logic; PRTF inclusion in managed care; OP Dental reimbursement changes; GME removal from capitation rates; NET subcapitation changes; provider settlements; emergency ambulance reimbursement increases; financial to encounter adjustments; population acuity; and IBNR; and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.  
<sup>2</sup> CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.  
<sup>3</sup> CY 2020 IBNR as reported by CCOs in financial templates.

**Exhibit 7C**  
**Mississippi Division of Medicaid**  
**MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends**  
**Adults Population**  
**PMPM Costs by Month<sup>1</sup>**

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	60,149	\$39.01	\$107.84	\$137.09	\$9.45	\$12.12	\$305.50
February 2017	60,044	\$43.34	\$96.16	\$125.92	\$8.51	\$10.97	\$284.91
March 2017	60,362	\$54.13	\$112.30	\$143.29	\$10.28	\$12.07	\$332.08
April 2017	59,813	\$49.14	\$106.18	\$129.94	\$9.54	\$11.69	\$306.50
May 2017	59,843	\$47.76	\$110.02	\$140.42	\$8.88	\$12.10	\$319.18
June 2017	60,204	\$44.25	\$107.93	\$136.65	\$8.65	\$12.62	\$310.10
July 2017	60,025	\$48.09	\$109.38	\$128.44	\$7.54	\$11.90	\$305.35
August 2017	59,608	\$44.95	\$118.64	\$148.02	\$10.39	\$12.60	\$334.59
September 2017	59,041	\$44.48	\$109.01	\$128.04	\$9.03	\$11.47	\$302.03
October 2017	58,835	\$46.55	\$112.41	\$136.93	\$10.03	\$12.93	\$318.85
November 2017	58,450	\$41.38	\$105.84	\$129.99	\$8.17	\$11.33	\$296.71
December 2017	57,762	\$37.16	\$99.83	\$115.55	\$6.74	\$10.55	\$269.83
<b>CY 2017<sup>2</sup></b>	<b>59,511</b>	<b>\$45.02</b>	<b>\$107.96</b>	<b>\$133.36</b>	<b>\$8.94</b>	<b>\$11.86</b>	<b>\$307.14</b>
January 2018	56,854	\$41.80	\$109.83	\$136.60	\$8.04	\$11.98	\$308.26
February 2018	55,841	\$32.00	\$100.41	\$124.60	\$7.41	\$10.13	\$274.55
March 2018	55,036	\$36.42	\$110.99	\$132.84	\$8.61	\$10.96	\$301.81
April 2018	54,406	\$45.62	\$113.34	\$134.20	\$8.50	\$11.47	\$313.43
May 2018	54,659	\$41.07	\$115.13	\$136.51	\$8.14	\$11.40	\$312.26
June 2018	54,110	\$37.56	\$112.15	\$125.35	\$7.44	\$11.53	\$294.03
July 2018	53,669	\$38.06	\$110.69	\$132.16	\$6.65	\$12.77	\$300.33
August 2018	52,766	\$44.74	\$115.02	\$141.25	\$8.01	\$13.29	\$322.31
September 2018	52,073	\$35.60	\$105.08	\$120.51	\$5.97	\$12.27	\$279.43
October 2018	51,923	\$45.62	\$112.56	\$136.77	\$7.64	\$13.10	\$315.70
November 2018	51,978	\$39.57	\$101.03	\$120.31	\$6.18	\$11.64	\$278.73
December 2018	52,527	\$41.65	\$99.19	\$111.64	\$4.88	\$11.21	\$268.57
<b>CY 2018<sup>3</sup></b>	<b>53,820</b>	<b>\$40.17</b>	<b>\$108.79</b>	<b>\$129.39</b>	<b>\$7.29</b>	<b>\$11.81</b>	<b>\$297.45</b>
January 2019	52,768	\$34.01	\$115.77	\$141.90	\$7.69	\$12.64	\$312.00
February 2019	52,343	\$32.57	\$103.37	\$126.21	\$6.39	\$11.48	\$280.02
March 2019	52,150	\$37.40	\$104.62	\$125.67	\$6.40	\$10.95	\$285.05
April 2019	52,058	\$41.79	\$110.16	\$132.84	\$7.69	\$11.68	\$304.17
May 2019	52,619	\$44.10	\$108.40	\$134.67	\$6.41	\$12.32	\$305.88
June 2019	52,923	\$37.27	\$105.30	\$123.35	\$5.54	\$11.59	\$283.05
July 2019	53,124	\$39.60	\$116.18	\$134.20	\$5.81	\$12.45	\$308.24
August 2019	52,726	\$38.07	\$107.81	\$136.54	\$6.51	\$13.56	\$302.49
September 2019	52,769	\$37.64	\$101.65	\$128.80	\$5.64	\$12.69	\$286.41
October 2019	52,673	\$41.49	\$111.64	\$141.70	\$6.60	\$13.58	\$315.02
November 2019	52,416	\$35.64	\$95.88	\$120.52	\$4.82	\$12.52	\$269.38
December 2019	52,415	\$33.38	\$100.92	\$124.21	\$4.75	\$12.27	\$275.53
<b>CY 2019<sup>4</sup></b>	<b>52,584</b>	<b>\$37.76</b>	<b>\$106.81</b>	<b>\$130.88</b>	<b>\$6.19</b>	<b>\$12.31</b>	<b>\$293.94</b>
January 2020	51,771	\$46.35	\$110.51	\$145.14	\$6.06	\$13.71	\$321.77
February 2020	51,104	\$39.30	\$99.26	\$129.83	\$5.68	\$12.34	\$286.43
March 2020	50,857	\$31.22	\$85.35	\$118.68	\$5.17	\$11.44	\$251.86
April 2020	50,734	\$25.64	\$56.04	\$97.11	\$2.59	\$9.29	\$190.67
May 2020	51,945	\$37.03	\$79.90	\$114.07	\$4.38	\$11.24	\$246.62
June 2020	53,638	\$39.32	\$96.65	\$133.75	\$6.68	\$11.66	\$288.06
July 2020	55,515	\$40.92	\$100.82	\$134.24	\$6.26	\$12.01	\$294.25
August 2020	56,432	\$53.62	\$96.02	\$129.09	\$5.83	\$12.14	\$298.71
September 2020	57,081	\$37.40	\$93.44	\$131.05	\$6.03	\$11.89	\$279.81
October 2020	57,499	\$34.34	\$96.64	\$133.37	\$5.80	\$12.70	\$282.85
November 2020	58,167	\$35.72	\$95.73	\$121.14	\$4.96	\$11.71	\$269.27
December 2020	58,730	\$37.17	\$93.74	\$129.47	\$5.01	\$11.60	\$276.99
<b>CY 2020<sup>5</sup></b>	<b>54,456</b>	<b>\$38.17</b>	<b>\$92.18</b>	<b>\$126.41</b>	<b>\$5.37</b>	<b>\$11.81</b>	<b>\$273.94</b>
<b>Annual PMPM Trends</b>							
CY 2017 to CY 2018		-10.8%	0.8%	-3.0%	-18.4%	-0.4%	-3.2%
CY 2018 to CY 2019		-6.0%	-1.8%	1.2%	-15.1%	4.2%	-1.2%
CY 2019 to CY 2020		1.1%	-13.7%	-3.4%	-13.2%	-4.1%	-6.8%

<sup>1</sup> MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims; adjustments related to the 5% assessment application and removal; OPSS reimbursement changes not related to the 5% assessment; PAD reimbursement changes; annual PDL changes to drug costs; AAC inclusion in drug pricing logic; PRTF inclusion in managed care; OP Dental reimbursement changes; GME removal from capitation rates; NET subcapitation changes; provider settlements; emergency ambulance reimbursement increases; financial to encounter adjustments; population acuity; and IBNR; and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.  
<sup>2</sup> CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.  
<sup>3</sup> CY 2020 IBNR as reported by CCOs in financial templates.

**Exhibit 7D**  
**Mississippi Division of Medicaid**  
**MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends**  
**Children Population**  
**PMPM Costs by Month<sup>1</sup>**

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	364,070	\$43.27	\$34.97	\$65.79	\$26.93	\$5.03	\$176.00
February 2017	363,509	\$42.42	\$35.02	\$67.72	\$25.55	\$4.99	\$175.69
March 2017	362,747	\$44.96	\$35.82	\$67.59	\$27.79	\$5.72	\$181.88
April 2017	362,405	\$43.62	\$34.25	\$59.03	\$24.08	\$5.06	\$168.64
May 2017	362,468	\$45.13	\$33.45	\$60.25	\$23.96	\$5.39	\$168.19
June 2017	363,148	\$43.42	\$34.73	\$52.58	\$26.12	\$4.93	\$161.77
July 2017	361,326	\$42.13	\$33.31	\$54.32	\$26.54	\$5.53	\$161.82
August 2017	359,181	\$48.00	\$34.45	\$71.28	\$30.22	\$5.91	\$189.85
September 2017	356,811	\$45.40	\$34.52	\$64.95	\$26.01	\$5.53	\$176.42
October 2017	356,208	\$45.19	\$37.26	\$70.63	\$28.65	\$5.98	\$187.70
November 2017	356,335	\$46.45	\$37.56	\$68.39	\$26.73	\$5.55	\$184.88
December 2017	352,155	\$46.40	\$37.84	\$61.81	\$20.98	\$5.17	\$172.20
<b>CY 2017<sup>2</sup></b>	<b>360,030</b>	<b>\$44.70</b>	<b>\$35.26</b>	<b>\$63.74</b>	<b>\$26.13</b>	<b>\$5.40</b>	<b>\$175.24</b>
January 2018	348,399	\$51.01	\$37.14	\$69.51	\$23.91	\$5.33	\$186.91
February 2018	343,321	\$45.63	\$35.94	\$69.81	\$23.83	\$5.15	\$180.37
March 2018	336,989	\$45.94	\$34.76	\$64.49	\$25.56	\$5.48	\$176.23
April 2018	333,400	\$44.21	\$34.16	\$65.75	\$24.56	\$5.29	\$173.97
May 2018	331,858	\$48.99	\$34.46	\$62.12	\$22.35	\$5.25	\$173.17
June 2018	328,432	\$51.01	\$35.39	\$53.24	\$23.70	\$5.14	\$168.49
July 2018	322,650	\$46.20	\$30.58	\$58.17	\$26.58	\$6.24	\$167.77
August 2018	317,254	\$46.50	\$32.98	\$71.95	\$27.45	\$6.44	\$185.32
September 2018	313,891	\$41.68	\$31.43	\$62.28	\$22.45	\$5.57	\$163.42
October 2018	313,087	\$52.64	\$35.73	\$74.88	\$26.49	\$6.08	\$195.82
November 2018	314,496	\$48.93	\$34.10	\$67.72	\$22.10	\$5.25	\$178.10
December 2018	318,472	\$55.08	\$33.86	\$60.79	\$18.12	\$5.07	\$172.91
<b>CY 2018<sup>3</sup></b>	<b>326,837</b>	<b>\$48.15</b>	<b>\$34.21</b>	<b>\$65.06</b>	<b>\$23.93</b>	<b>\$5.53</b>	<b>\$176.87</b>
January 2019	320,440	\$50.54	\$37.98	\$77.80	\$26.00	\$6.07	\$198.39
February 2019	319,448	\$48.09	\$39.46	\$79.04	\$22.75	\$5.31	\$194.64
March 2019	318,530	\$51.97	\$34.15	\$68.93	\$23.25	\$5.79	\$184.08
April 2019	318,462	\$53.19	\$35.84	\$72.58	\$24.32	\$6.21	\$192.14
May 2019	319,429	\$53.95	\$34.40	\$65.56	\$20.72	\$5.43	\$180.05
June 2019	319,845	\$51.42	\$35.06	\$55.98	\$22.02	\$5.04	\$169.53
July 2019	318,159	\$54.56	\$34.88	\$65.08	\$27.15	\$6.74	\$188.40
August 2019	315,732	\$53.74	\$32.80	\$74.13	\$25.78	\$7.07	\$193.51
September 2019	315,102	\$51.24	\$34.06	\$73.10	\$24.06	\$6.42	\$188.89
October 2019	315,886	\$57.50	\$37.20	\$79.73	\$27.81	\$6.30	\$208.53
November 2019	317,249	\$46.92	\$36.52	\$74.19	\$22.26	\$5.76	\$185.65
December 2019	319,445	\$55.16	\$37.13	\$71.65	\$19.71	\$6.05	\$189.70
<b>CY 2019<sup>4</sup></b>	<b>318,144</b>	<b>\$52.36</b>	<b>\$35.79</b>	<b>\$71.48</b>	<b>\$23.82</b>	<b>\$6.02</b>	<b>\$189.46</b>
January 2020	319,240	\$51.84	\$36.44	\$81.00	\$24.71	\$6.60	\$200.59
February 2020	316,945	\$45.36	\$35.55	\$76.91	\$22.87	\$6.03	\$186.52
March 2020	315,636	\$46.98	\$26.31	\$59.91	\$14.36	\$5.35	\$152.91
April 2020	316,011	\$44.86	\$11.69	\$41.14	\$1.07	\$3.48	\$102.24
May 2020	319,175	\$46.44	\$19.51	\$47.66	\$11.94	\$4.24	\$129.78
June 2020	325,742	\$50.52	\$24.65	\$57.80	\$19.40	\$4.98	\$157.35
July 2020	331,422	\$52.89	\$25.06	\$60.28	\$20.94	\$5.24	\$164.40
August 2020	336,558	\$48.73	\$24.92	\$61.84	\$20.73	\$5.86	\$162.07
September 2020	339,916	\$47.82	\$26.52	\$63.33	\$20.92	\$5.48	\$164.07
October 2020	343,901	\$48.47	\$27.78	\$67.42	\$21.65	\$5.57	\$170.88
November 2020	348,528	\$43.96	\$25.67	\$61.39	\$19.00	\$5.22	\$155.25
December 2020	352,833	\$49.47	\$24.93	\$60.39	\$18.76	\$5.07	\$158.61
<b>CY 2020<sup>5</sup></b>	<b>330,492</b>	<b>\$48.11</b>	<b>\$25.75</b>	<b>\$61.59</b>	<b>\$18.01</b>	<b>\$5.26</b>	<b>\$158.72</b>
<b>Annual PMPM Trends</b>							
CY 2017 to CY 2018		7.7%	-3.0%	2.1%	-8.4%	2.3%	0.9%
CY 2018 to CY 2019		8.7%	4.6%	9.9%	-0.4%	8.9%	7.1%
CY 2019 to CY 2020		-8.1%	-28.0%	-13.8%	-24.4%	-12.6%	-16.2%

<sup>1</sup> MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims; adjustments related to the 5% assessment application and removal; OPSS reimbursement changes not related to the 5% assessment; PAD reimbursement changes; annual PDL changes to drug costs; AAC inclusion in drug pricing logic; PRTF inclusion in managed care; OP Dental reimbursement changes; GME removal from capitation rates; NET subcapitation changes; provider settlements; emergency ambulance reimbursement increases; financial to encounter adjustments; population acuity; and IBNR; and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.  
<sup>2</sup> CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.  
<sup>3</sup> CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 7E Mississippi Division of Medicaid MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends Deliveries Per-Delivery Costs by Month <sup>1</sup>								
Month	Deliveries	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total	
January 2017	1,689	\$3,867.36	\$6.97	\$1,153.77	\$0.03	\$25.84	\$5,053.96	
February 2017	1,496	\$3,825.11	\$8.70	\$1,173.53	\$0.00	\$20.62	\$5,027.95	
March 2017	1,545	\$3,903.46	\$5.66	\$1,206.98	\$0.00	\$23.23	\$5,139.33	
April 2017	1,294	\$3,914.71	\$7.26	\$1,193.78	\$0.00	\$18.91	\$5,134.66	
May 2017	1,520	\$3,856.76	\$9.60	\$1,180.45	\$0.00	\$21.64	\$5,048.45	
June 2017	1,486	\$3,950.50	\$5.61	\$1,219.67	\$0.00	\$21.38	\$5,197.16	
July 2017	1,646	\$3,881.34	\$6.78	\$1,181.62	\$0.06	\$21.07	\$5,090.87	
August 2017	1,869	\$3,871.29	\$6.29	\$1,168.19	\$0.04	\$19.61	\$5,065.42	
September 2017	1,732	\$3,815.61	\$7.40	\$1,153.82	\$0.00	\$26.13	\$5,002.96	
October 2017	1,639	\$3,916.63	\$12.05	\$1,161.72	\$0.00	\$29.22	\$5,119.61	
November 2017	1,671	\$3,980.71	\$6.46	\$1,164.49	\$0.00	\$17.26	\$5,168.92	
December 2017	1,748	\$3,915.51	\$5.40	\$1,153.01	\$0.00	\$21.16	\$5,095.08	
<b>CY 2017<sup>2</sup></b>	<b>1,611</b>	<b>\$3,891.58</b>	<b>\$7.35</b>	<b>\$1,174.25</b>	<b>\$0.01</b>	<b>\$22.17</b>	<b>\$5,095.37</b>	
January 2018	1,692	\$3,974.00	\$6.12	\$1,168.85	\$0.00	\$26.78	\$5,175.74	
February 2018	1,496	\$4,026.70	\$6.57	\$1,163.32	\$0.00	\$40.55	\$5,237.13	
March 2018	1,565	\$3,878.17	\$9.44	\$1,167.46	\$0.00	\$30.30	\$5,085.39	
April 2018	1,514	\$4,091.26	\$13.67	\$1,189.96	\$0.11	\$28.30	\$5,323.30	
May 2018	1,555	\$4,026.45	\$10.79	\$1,178.37	\$0.08	\$46.64	\$5,262.33	
June 2018	1,566	\$3,909.70	\$6.30	\$1,169.08	\$0.09	\$34.79	\$5,119.95	
July 2018	1,689	\$3,856.00	\$6.91	\$1,111.78	\$0.05	\$25.51	\$5,000.24	
August 2018	1,820	\$3,939.42	\$5.90	\$1,129.05	\$0.00	\$28.69	\$5,103.06	
September 2018	1,666	\$3,944.94	\$6.00	\$1,132.83	\$0.00	\$39.39	\$5,123.16	
October 2018	1,642	\$3,931.58	\$7.71	\$1,119.02	\$0.00	\$31.85	\$5,090.17	
November 2018	1,617	\$3,909.22	\$7.31	\$1,135.38	\$0.00	\$29.69	\$5,081.61	
December 2018	1,682	\$4,018.55	\$7.00	\$1,081.57	\$0.00	\$25.92	\$5,133.04	
<b>CY 2018<sup>3</sup></b>	<b>1,625</b>	<b>\$3,958.83</b>	<b>\$7.81</b>	<b>\$1,145.56</b>	<b>\$0.03</b>	<b>\$32.37</b>	<b>\$5,144.59</b>	
January 2019	1,696	\$3,989.84	\$6.74	\$1,128.04	\$0.05	\$19.19	\$5,143.86	
February 2019	1,414	\$3,957.96	\$12.92	\$1,101.04	\$0.04	\$17.58	\$5,089.53	
March 2019	1,508	\$3,983.83	\$11.12	\$1,098.80	\$0.00	\$19.61	\$5,103.36	
April 2019	1,468	\$3,919.07	\$11.53	\$1,086.50	\$0.08	\$27.15	\$5,044.32	
May 2019	1,493	\$4,106.97	\$16.44	\$1,124.98	\$0.00	\$23.10	\$5,271.50	
June 2019	1,450	\$3,943.40	\$16.34	\$1,075.50	\$0.00	\$21.77	\$5,057.01	
July 2019	1,797	\$3,883.88	\$13.85	\$1,074.62	\$0.00	\$16.61	\$4,988.96	
August 2019	1,721	\$3,928.22	\$11.36	\$1,116.25	\$0.06	\$21.44	\$5,077.34	
September 2019	1,717	\$3,991.61	\$15.36	\$1,123.56	\$0.17	\$18.13	\$5,148.83	
October 2019	1,732	\$4,052.67	\$14.55	\$1,180.21	\$0.00	\$22.64	\$5,310.08	
November 2019	1,521	\$3,976.26	\$15.42	\$1,165.48	\$0.00	\$25.81	\$5,182.97	
December 2019	1,741	\$4,074.26	\$10.74	\$1,163.23	\$0.00	\$22.01	\$5,270.25	
<b>CY 2019<sup>4</sup></b>	<b>1,605</b>	<b>\$3,987.33</b>	<b>\$13.03</b>	<b>\$1,119.02</b>	<b>\$0.03</b>	<b>\$21.25</b>	<b>\$5,140.67</b>	
January 2020	1,684	\$4,169.84	\$15.78	\$1,157.14	\$0.07	\$17.02	\$5,359.85	
February 2020	1,416	\$4,128.79	\$11.38	\$1,151.69	\$0.00	\$27.09	\$5,318.95	
March 2020	1,479	\$4,152.51	\$12.08	\$1,129.06	\$0.00	\$20.20	\$5,313.84	
April 2020	1,404	\$4,107.97	\$10.73	\$1,134.01	\$0.21	\$19.40	\$5,272.32	
May 2020	1,449	\$4,182.57	\$17.18	\$1,171.10	\$0.00	\$20.11	\$5,390.97	
June 2020	1,554	\$4,113.50	\$14.11	\$1,150.95	\$0.00	\$20.03	\$5,298.59	
July 2020	1,667	\$4,126.04	\$13.73	\$1,177.44	\$0.00	\$15.05	\$5,332.26	
August 2020	1,705	\$4,299.50	\$11.59	\$1,201.48	\$0.00	\$17.73	\$5,530.29	
September 2020	1,691	\$4,110.02	\$6.91	\$1,132.24	\$0.07	\$15.32	\$5,264.56	
October 2020	1,552	\$4,064.53	\$12.29	\$1,196.71	\$0.00	\$18.94	\$5,292.47	
November 2020	1,527	\$4,031.32	\$13.87	\$1,133.20	\$0.00	\$22.72	\$5,201.11	
December 2020	1,488	\$4,071.23	\$9.66	\$1,158.01	\$0.00	\$18.42	\$5,257.31	
<b>CY 2020<sup>5</sup></b>	<b>1,551</b>	<b>\$4,129.82</b>	<b>\$12.44</b>	<b>\$1,157.75</b>	<b>\$0.03</b>	<b>\$19.33</b>	<b>\$5,319.38</b>	
<b>Annual PMPM Trends</b>								
CY 2017 to CY 2018		1.7%	6.3%	-2.4%	145.9%	46.0%	1.0%	
CY 2018 to CY 2019		0.7%	66.9%	-2.3%	22.6%	-34.3%	-0.1%	
CY 2019 to CY 2020		3.6%	-4.5%	3.5%	-11.0%	-9.0%	3.5%	

<sup>1</sup> MississippiCAN PMPM figures have been adjusted for: the carveout of Zoigenma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR.  
<sup>2</sup> CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.  
<sup>3</sup> CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 8A  
Mississippi Division of Medicaid  
Mississippi/CAN Historical and Projected Pharmacy Utilization and Cost  
S/I Rate Grouping

Traditional Top 25	Cost / Script			CY 2019 Util / 1000			PMPM Cost			Annualized Prospective Trends					Projected PMPM					
	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Months of Trend	Generic	Brand	Total	Months of Trend	Generic	Brand	Total
1210 Antiretrovirals	\$552.92	\$2,237.51	\$1,899.89	33.6	131.0	164.6	\$1.63	\$24.43	\$26.06	1.0%	5.0%	4.8%	24	-2.0%	-2.0%	-2.0%	42	\$1.55	\$25.09	\$26.65
5907 Dibenazepines / Quinolone Derivatives / Benzisoxazoles	\$36.96	\$2,346.94	\$614.22	279.6	93.3	372.9	\$0.84	\$18.25	\$19.08	5.0%	5.0%	5.0%	24	2.0%	2.0%	2.0%	42	\$0.99	\$21.56	\$22.55
7260 Fibromyalgia Agents	\$24.72	\$720.59	\$106.21	1,513.8	200.8	1,714.6	\$3.12	\$12.06	\$15.18	1.0%	3.0%	2.8%	24	0.0%	0.0%	0.0%	42	\$3.18	\$13.79	\$15.97
2710L Insulin - Long Acting	\$0.00	\$548.30	\$548.30	0.0	280.6	280.6	\$0.00	\$18.82	\$18.82	-1.0%	0.0%	0.0%	24	1.0%	1.0%	1.0%	42	\$0.00	\$13.27	\$13.27
4420 Sympathomimetics	\$318.87	\$170.57	\$140.85	215.0	789.2	1,003.1	\$0.57	\$11.20	\$11.77	7.0%	1.0%	1.3%	24	1.0%	1.0%	1.0%	42	\$0.68	\$11.83	\$12.51
5925 Dibenazepines / Quinolone Derivatives / Benzisoxazoles	\$24.31	\$2,027.31	\$453.71	207.3	56.6	263.9	\$0.42	\$9.56	\$9.98	-1.0%	4.0%	3.8%	24	8.0%	8.0%	8.0%	42	\$0.54	\$13.53	\$14.07
2710S Insulin - Short / Intermediate Acting	\$0.00	\$612.20	\$612.20	0.0	211.9	211.9	\$0.00	\$10.81	\$10.81	-1.0%	-10.0%	-10.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$8.76	\$8.76
5940 Dibenazepines / Quinolone Derivatives / Benzisoxazoles	\$32.57	\$1,313.36	\$755.00	45.1	58.3	103.4	\$0.12	\$6.38	\$6.50	-1.0%	3.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.12	\$6.77	\$6.89
2717 Insulin Mimetic Agents (GLP-1 Receptor Agonists)	\$0.00	\$740.76	\$740.76	0.0	90.1	90.1	\$0.00	\$5.56	\$5.56	-1.0%	5.0%	5.0%	24	9.0%	9.0%	9.0%	42	\$0.00	\$8.29	\$8.29
6110 Amphetamine Stimulants	\$70.61	\$293.64	\$178.45	215.5	201.7	417.2	\$1.27	\$4.94	\$6.20	-10.0%	5.0%	2.1%	24	0.0%	0.0%	0.0%	42	\$1.03	\$5.44	\$6.47
2770 SGLT-2 Agents	\$0.00	\$545.19	\$545.19	0.0	70.1	70.1	\$0.00	\$3.18	\$3.18	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$6.65	\$6.65
8337 Anticoagulants	\$0.00	\$443.91	\$443.91	0.0	102.7	102.7	\$0.00	\$3.80	\$3.80	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$7.93	\$7.93
2755 DPP-IV Agents	\$0.00	\$503.25	\$503.25	0.0	96.9	96.9	\$0.00	\$4.06	\$4.06	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$4.48	\$4.48
6140 Stimulants - Misc.	\$127.98	\$351.63	\$218.03	150.1	101.2	251.3	\$1.60	\$2.97	\$4.57	-15.0%	4.0%	-2.2%	24	0.0%	0.0%	0.0%	42	\$1.16	\$3.21	\$4.36
2799 Antidiabetic Combinations	\$23.96	\$471.45	\$379.65	16.2	62.8	79.0	\$0.03	\$2.47	\$2.50	-1.0%	5.0%	4.9%	24	0.0%	0.0%	0.0%	42	\$0.03	\$2.72	\$2.75
4410 Bronchodilators - Anticholinergics	\$21.46	\$424.82	\$383.82	7.9	69.9	77.8	\$0.01	\$2.47	\$2.49	-1.0%	6.0%	6.0%	24	-3.0%	-3.0%	-3.0%	42	\$0.01	\$2.50	\$2.51
4099 Cardiovascular Agents Misc. - Combinations	\$109.33	\$493.37	\$478.62	1.7	41.9	43.6	\$0.02	\$1.72	\$1.74	-1.0%	7.0%	6.9%	24	20.0%	20.0%	20.0%	42	\$0.03	\$3.74	\$3.76
5915 Dibenazepines / Quinolone Derivatives / Benzisoxazoles	\$19.93	\$380.58	\$61.15	424.1	21.3	445.3	\$0.70	\$1.56	\$2.27	0.0%	0.0%	0.0%	24	2.0%	2.0%	2.0%	42	\$0.75	\$1.68	\$2.43
5812 Modified Cyclics	\$15.13	\$371.46	\$70.73	306.8	56.7	363.6	\$0.39	\$1.76	\$2.14	-1.0%	5.0%	3.9%	24	0.0%	0.0%	0.0%	42	\$0.38	\$1.94	\$2.32
6520 Opioid Partial Agonists	\$212.47	\$406.42	\$385.30	7.1	57.8	64.8	\$0.12	\$1.96	\$2.08	-1.0%	3.0%	2.8%	24	3.0%	3.0%	3.0%	42	\$0.14	\$2.30	\$2.44
6510 Opioid Agonists	\$37.85	\$1,128.87	\$89.15	326.4	16.1	342.5	\$1.03	\$1.52	\$2.54	-3.0%	15.0%	8.1%	24	-10.0%	-10.0%	-10.0%	42	\$0.67	\$1.39	\$2.06
4927 Proton Pump Inhibitors	\$18.15	\$329.63	\$23.18	915.0	15.0	930.0	\$1.38	\$0.41	\$1.80	1.0%	4.0%	1.7%	24	0.0%	0.0%	0.0%	42	\$1.41	\$0.45	\$1.86
7210 Anticonvulsants - Benzodiazepines	\$21.72	\$1,032.69	\$116.24	189.5	19.5	209.1	\$0.34	\$1.68	\$2.03	-1.0%	6.0%	4.8%	24	0.0%	0.0%	0.0%	42	\$0.34	\$1.89	\$2.23
8120 Nutritional Supplements	\$107.03	\$283.74	\$283.29	0.2	73.6	73.7	\$0.00	\$1.74	\$1.74	-1.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$2.06	\$2.07
5120 Digestive Enzymes	\$0.00	\$1,475.22	\$1,475.22	0.0	11.0	11.0	\$0.00	\$1.35	\$1.35	-1.0%	6.0%	6.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$1.80	\$1.80
Other Traditional	\$21.89	\$146.79	\$39.80	17,947.6	1,393.6	19,341.2	\$32.73	\$17.05	\$49.78	-1.0%	7.0%	1.8%	24	0.0%	0.0%	0.0%	42	\$32.08	\$19.52	\$51.60
Total Traditional	\$24.39	\$460.01	\$93.80	22,802.3	4,322.3	27,124.6	\$46.34	\$165.69	\$212.03	-1.2%	3.4%	2.8%	24	-0.09%	2.24%	1.74%	42	\$45.08	\$191.56	\$236.65
Specialty Top 25																				
6627 Autoimmune Agents	\$0.00	\$6,123.06	\$6,123.06	0.0	21.8	21.8	\$0.00	\$11.11	\$11.11	0.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$17.75	\$17.75
2153 Antineoplastic Enzyme Inhibitors	\$430.05	\$12,082.88	\$10,832.50	1.1	9.4	10.5	\$0.04	\$9.44	\$9.48	0.0%	5.0%	5.0%	24	12.0%	12.0%	12.0%	42	\$0.06	\$15.47	\$15.53
4530 Cystic Fibrosis Agents	\$0.00	\$10,895.05	\$10,895.05	0.0	6.5	6.5	\$0.00	\$5.93	\$5.93	0.0%	0.0%	0.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$11.22	\$11.22
9310 Antidotes - Chelating Agents	\$4,748.61	\$10,910.66	\$10,827.81	0.1	9.2	9.3	\$0.05	\$8.35	\$8.40	0.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.07	\$11.66	\$11.73
6240 Multiple Sclerosis Agents	\$854.74	\$7,194.82	\$6,036.53	2.1	9.3	11.4	\$0.15	\$5.58	\$5.73	0.0%	4.0%	3.9%	24	-10.0%	-10.0%	-10.0%	42	\$0.10	\$4.18	\$4.28
1235C Hepatitis C Agents	\$86.47	\$13,794.90	\$13,635.06	0.1	5.3	5.4	\$0.00	\$6.10	\$6.10	0.0%	-10.0%	-10.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.00	\$3.42	\$3.42
9025 Anticoagulants	\$196.83	\$8,100.67	\$6,601.22	1.0	4.4	5.4	\$0.02	\$2.95	\$2.96	0.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.03	\$6.15	\$6.18
6629 Autoimmune Agents	\$0.00	\$4,802.51	\$4,802.51	0.0	10.4	10.4	\$0.00	\$4.15	\$4.15	0.0%	8.0%	8.0%	24	4.0%	4.0%	4.0%	42	\$0.00	\$5.55	\$5.55
6238 Movement Disorder Drug Therapy	\$1,871.29	\$6,398.05	\$5,720.47	0.7	4.2	4.9	\$0.11	\$2.23	\$2.34	0.0%	5.0%	4.8%	24	5.0%	5.0%	5.0%	42	\$0.14	\$2.91	\$3.05
7217 GABA Modulators	\$8,369.66	\$9,014.65	\$8,508.04	3.4	0.9	4.3	\$2.36	\$0.89	\$3.05	-5.0%	9.0%	-1.6%	24	-5.0%	-5.0%	-5.0%	42	\$1.78	\$0.89	\$2.47
1910 Immune Serums	\$0.00	\$9,243.04	\$9,243.04	0.0	2.7	2.7	\$0.00	\$2.11	\$2.11	0.0%	0.0%	0.0%	24	25.0%	25.0%	25.0%	42	\$0.00	\$4.61	\$4.61
9939 Immunomodulators	\$0.00	\$14,695.68	\$14,695.68	0.0	1.6	1.6	\$0.00	\$1.94	\$1.94	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.94	\$1.94
3090 Metabolic Modifiers	\$183.31	\$3,666.90	\$706.41	24.4	4.3	28.8	\$0.37	\$1.32	\$1.69	0.0%	5.0%	3.9%	24	1.0%	1.0%	1.0%	42	\$0.39	\$1.51	\$1.89
4016 Pulmonary Arterial Hypertension	\$3,270.44	\$9,546.77	\$8,319.79	0.6	2.3	2.9	\$0.15	\$1.84	\$2.00	0.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.21	\$2.57	\$2.79
3010 Growth Hormones	\$0.00	\$3,197.59	\$3,197.59	0.0	6.5	6.5	\$0.00	\$1.72	\$1.72	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$2.50	\$2.50
3030 Corticotropin	\$0.00	\$57,665.34	\$57,665.34	0.0	0.3	0.3	\$0.00	\$1.58	\$1.58	0.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$1.87	\$1.87
6646 Interleukin-1 Blockers	\$0.00	\$25,378.21	\$25,378.21	0.0	0.8	0.8	\$0.00	\$1.66	\$1.66	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.66	\$1.66
6660 Autoimmune Agents	\$0.00	\$4,330.00	\$4,330.00	0.0	3.2	3.2	\$0.00	\$1.14	\$1.14	0.0%	8.0%	8.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$3.33	\$3.33
2140 Antineoplastic - Hormonal Agents	\$103.17	\$8,863.20	\$414.28	51.4	1.9	53.2	\$0.44	\$1.40	\$1.84	0.0%	6.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.44	\$1.57	\$2.01
9027 Atopic Dermatitis - Monoclonal Antibodies	\$0.00	\$3,085.38	\$3,085.38	0.0	2.6	2.6	\$0.00	\$0.72	\$0.72	0.0%	2.0%	2.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$3.10	\$3.10
5640 Cystinosis Agents	\$0.00	\$65,744.47	\$65,744.47	0.0	0.3	0.3	\$0.00	\$1.63	\$1.63	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.63	\$1.63
4014 Pulmonary Arterial Hypertension	\$1,617.01	\$8,053.65	\$3,084.75	5.1	1.5	6.6	\$0.69	\$1.01	\$1.69	-10.0%	2.0%	-2.7%	24	10.0%	10.0%	10.0%	42	\$0.78	\$1.46	\$2.24
5253 Short Bowel Syndrome (SBS) Agents	\$0.00	\$39,047.06	\$39,047.06	0.0	0.2	0.2	\$0.00	\$0.61	\$0.61	0.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$0.72	\$0.72
8240 Erythropoietin Agents	\$0.00	\$4,714.50	\$4,714.50	0.0	1.7	1.7	\$0.00	\$0.68	\$0.68	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.99	\$0.99
8580 Hereditary Angioedema Agents	\$0.00	\$40,241.92	\$40,241.92	0.0	0.2	0.2	\$0.00	\$0.73	\$0.73	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.73	\$0.73
Other Specialty	\$79.68	\$3,838.65	\$834.04	165.1	41.4	206.5	\$1.10	\$13.26	\$14.35	0.0%	2.0%	1.8%	24	3.0%	3.0%	3.0%	42	\$1.22	\$15.30	\$16.51
Total Specialty	\$257.69	\$7,045.14	\$2,803.05	255.1	153.1	408.2														



**Exhibit 8B**  
Mississippi Division of Medicaid  
Mississippi/CAN Historical and Projected Pharmacy Utilization and Cost  
Adult Rate Grouping

Traditional Top 25	Cost / Script			CY 2019 Util / 1000			PMPM Cost			Annualized Prospective Trends													
	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Cost / Script			Utilization <sup>1</sup>			Projected PMPM							
GPI#	GPI Description			Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Months of Trend	Generic	Brand	Total	Months of Trend	Generic	Brand	Total			
1210	Antiretrovirals			\$502.46	\$2,329.50	\$2,105.86	4.7	33.8	38.5	\$0.20	\$6.56	\$6.76	-1.0%	5.0%	4.8%	24	0.0%	0.0%	0.0%	42	\$0.19	\$7.24	\$7.43
2600	Progestins			\$51.36	\$3,231.14	\$1,335.99	42.5	28.8	71.3	\$0.18	\$7.76	\$7.94	-1.0%	0.0%	0.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.12	\$5.37	\$5.49
6520	Opioid Partial Agonists			\$156.36	\$398.36	\$349.09	36.3	142.0	178.3	\$0.47	\$4.71	\$5.19	-1.0%	2.0%	1.7%	24	0.0%	0.0%	0.0%	42	\$0.46	\$4.90	\$5.37
2710L	Insulin - Long Acting			\$0.00	\$501.31	\$501.31	0.0	95.9	95.9	\$0.00	\$4.01	\$4.01	-1.0%	0.0%	0.0%	24	3.0%	3.0%	3.0%	42	\$0.00	\$4.44	\$4.44
2710S	Insulin - Short / Intermediate Acting			\$0.00	\$496.67	\$496.67	0.0	98.2	98.2	\$0.00	\$4.07	\$4.07	-1.0%	-5.0%	-5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$3.67	\$3.67
2717	Incretin Mimetic Agents (GLP-1 Receptor Agonists)			\$0.00	\$732.04	\$732.04	0.0	44.4	44.4	\$0.00	\$2.71	\$2.71	-1.0%	5.0%	5.0%	24	15.0%	15.0%	15.0%	42	\$0.00	\$4.87	\$4.87
7260	Fibromyalgia Agents			\$18.67	\$597.65	\$81.42	602.0	73.2	675.2	\$0.94	\$3.64	\$4.58	1.0%	5.0%	4.2%	24	-2.0%	-2.0%	-2.0%	42	\$0.89	\$3.74	\$4.63
4420	Sympathomimetics			\$30.36	\$129.60	\$116.34	41.2	267.4	308.6	\$0.10	\$2.89	\$2.99	-1.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.12	\$3.43	\$3.55
5940	Dibenzapines / Quinolone Derivatives / Benzisoxazoles			\$31.43	\$1,216.31	\$930.57	8.5	23.6	32.1	\$0.22	\$2.39	\$2.41	-1.0%	4.0%	4.0%	24	0.0%	0.0%	0.0%	42	\$0.22	\$2.59	\$2.61
5812	Modified Cyclics			\$14.58	\$357.43	\$128.66	120.7	60.2	180.8	\$0.15	\$1.79	\$1.94	-1.0%	5.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.14	\$1.98	\$2.12
2770	SGLT-2 Agents			\$0.00	\$528.38	\$528.38	0.0	26.1	26.1	\$0.00	\$1.15	\$1.15	-1.0%	5.0%	5.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$3.18	\$3.18
5925	Dibenzapines / Quinolone Derivatives / Benzisoxazoles			\$21.32	\$1,704.29	\$286.32	48.4	9.1	57.5	\$0.09	\$1.29	\$1.37	-1.0%	4.0%	3.7%	24	15.0%	15.0%	15.0%	42	\$0.14	\$2.27	\$2.41
6110	Amphetamine Stimulants			\$43.32	\$291.48	\$99.33	111.2	32.4	143.7	\$0.40	\$0.79	\$1.19	-1.0%	5.0%	3.0%	24	15.0%	15.0%	15.0%	42	\$0.64	\$1.42	\$2.06
6810	Nonsteroidal Anti-inflammatory Agents (NSAIDs)			\$14.66	\$216.33	\$14.87	1,013.2	1.0	1,014.3	\$1.24	\$0.02	\$1.26	1.0%	7.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$1.26	\$0.02	\$1.28
2755	DPP-IV Agents			\$0.00	\$489.44	\$489.44	0.0	26.4	26.4	\$0.00	\$1.08	\$1.08	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.19	\$1.19
6599	Opioid Agonists			\$15.13	\$0.00	\$15.13	974.2	0.0	974.2	\$1.23	\$0.00	\$1.23	-1.0%	0.0%	-1.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.83	\$0.00	\$0.83
2599	Combination Contraceptives - Oral			\$20.41	\$192.90	\$42.00	275.9	39.5	315.4	\$0.47	\$0.83	\$1.10	-1.0%	8.0%	4.3%	24	0.0%	0.0%	0.0%	42	\$0.46	\$0.74	\$1.20
6337	Anticoagulants			\$0.00	\$444.75	\$444.75	0.0	18.5	18.5	\$0.00	\$0.69	\$0.69	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$1.43	\$1.43
2799	Antidiabetic Combinations			\$21.53	\$465.53	\$404.13	3.3	20.5	23.8	\$0.01	\$0.80	\$0.80	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.01	\$0.88	\$0.88
4927	Proton Pump Inhibitors			\$15.51	\$305.90	\$18.06	432.2	3.8	436.0	\$0.56	\$0.10	\$0.66	-1.0%	7.0%	0.2%	24	2.0%	2.0%	2.0%	42	\$0.59	\$0.12	\$0.71
2596	Combination Contraceptives - Transdermal			\$135.12	\$0.00	\$135.12	59.2	0.0	59.2	\$0.67	\$0.00	\$0.67	0.0%	7.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.67	\$0.00	\$0.67
6770	Migraine Products - Monoclonal Antibodies			\$0.00	\$578.28	\$578.28	0.0	6.6	6.6	\$0.00	\$9.32	\$9.32	-1.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$9.51	\$9.51
5816	Selective Serotonin Reuptake Inhibitors (SSRIs)			\$13.38	\$0.00	\$13.38	573.0	0.0	573.0	\$0.64	\$0.00	\$0.64	0.0%	7.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.64	\$0.00	\$0.64
5907	Dibenzapines / Quinolone Derivatives / Benzisoxazoles			\$18.24	\$2,238.11	\$210.82	18.6	1.8	20.4	\$0.03	\$0.33	\$0.36	-1.0%	7.0%	6.4%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.38	\$0.41
5255	Irritable Bowel Syndrome (IBS) Agents			\$0.00	\$437.59	\$437.59	0.0	14.3	14.3	\$0.00	\$0.52	\$0.52	-1.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.83	\$0.83
Other Traditional	\$19.82	\$347.45	\$58.63	14,086.9	1,894.8	15,983.7	9,733.7	827.2	10,560.9	\$15.90	\$6.62	\$22.52	-1.0%	10.0%	2.4%	24	0.0%	0.0%	0.0%	42	\$15.58	\$8.01	\$23.60
<b>Total Traditional</b>	<b>\$19.82</b>	<b>\$347.45</b>	<b>\$58.63</b>	<b>14,086.9</b>	<b>1,894.8</b>	<b>15,983.7</b>	<b>9,733.7</b>	<b>827.2</b>	<b>10,560.9</b>	<b>\$15.90</b>	<b>\$6.62</b>	<b>\$22.52</b>	<b>-0.8%</b>	<b>3.6%</b>	<b>2.4%</b>	<b>24</b>	<b>-0.16%</b>	<b>2.6%</b>	<b>1.40%</b>	<b>42</b>	<b>\$22.89</b>	<b>\$63.20</b>	<b>\$86.01</b>
<b>Specialty Top 25</b>																							
6627	Autoimmune Agents			\$0.00	\$6,243.72	\$6,243.72	0.0	12.6	12.6	\$0.00	\$6.53	\$6.53	2.0%	7.0%	7.0%	24	15.0%	15.0%	15.0%	42	\$0.00	\$12.19	\$12.19
1235C	Hepatitis C Agents			\$330.58	\$14,412.00	\$14,329.17	0.0	3.2	3.2	\$0.00	\$3.86	\$3.86	2.0%	-10.0%	-10.0%	24	-5.0%	-5.0%	-5.0%	42	\$0.00	\$2.61	\$2.61
9025	Antipsychotics			\$211.40	\$7,170.82	\$6,210.90	0.3	1.9	2.2	\$0.01	\$1.14	\$1.14	2.0%	5.0%	5.0%	24	40.0%	40.0%	40.0%	42	\$0.02	\$4.07	\$4.09
6240	Multiple Sclerosis Agents			\$1,403.13	\$7,043.92	\$6,245.45	0.6	3.6	4.2	\$0.07	\$2.10	\$2.17	2.0%	1.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.07	\$2.14	\$2.21
3030	Corticosteroids			\$0.00	\$41,731.14	\$41,731.14	0.0	0.3	0.3	\$0.00	\$0.93	\$0.93	2.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.93	\$0.93
6629	Autoimmune Agents			\$0.00	\$5,148.90	\$5,148.90	0.0	3.7	3.7	\$0.00	\$1.58	\$1.58	2.0%	7.0%	7.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.81	\$1.81
1910	Immune Serums			\$0.00	\$6,815.01	\$6,815.01	0.0	0.4	0.4	\$0.00	\$0.29	\$0.29	2.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.29	\$0.29
2153	Antineoplastic Enzyme Inhibitors			\$462.75	\$12,786.84	\$11,165.24	0.1	0.6	0.7	\$0.00	\$0.67	\$0.67	2.0%	5.0%	5.0%	24	12.0%	12.0%	12.0%	42	\$0.01	\$1.10	\$1.10
9027	Atopic Dermatitis - Monoclonal Antibodies			\$0.00	\$3,004.09	\$3,004.09	0.0	1.8	1.8	\$0.00	\$0.45	\$0.45	2.0%	3.0%	3.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$1.98	\$1.98
5250	Inflammatory Bowel Agents			\$115.18	\$1,910.12	\$1,084.07	2.5	3.0	5.5	\$0.02	\$0.47	\$0.50	2.0%	5.0%	4.9%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.52	\$0.55
6860	Autoimmune Agents			\$0.00	\$4,361.77	\$4,361.77	0.0	1.3	1.3	\$0.00	\$0.48	\$0.48	2.0%	8.0%	8.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$2.30	\$2.30
8582	Hereditary Angioedema Agents			\$0.00	\$50,235.70	\$50,235.70	0.0	0.3	0.3	\$0.00	\$1.19	\$1.19	2.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$1.67	\$1.67
3045	Vasopressin Receptor Antagonists			\$0.00	\$14,290.82	\$14,290.82	0.0	0.2	0.2	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.35	\$0.35
9942	Systemic Lupus Erythematosus Agents			\$0.00	\$3,712.42	\$3,712.42	0.0	0.8	0.8	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.36	\$0.36
5253	Short Bowel Syndrome (SBS) Agents			\$0.00	\$30,333.02	\$30,333.02	0.0	0.1	0.1	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.36	\$0.36
4460	Antisthmatic - Monoclonal Antibodies			\$0.00	\$2,589.93	\$2,589.93	0.0	1.0	1.0	\$0.00	\$0.22	\$0.22	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.32	\$0.32
6640	Autoimmune Agents			\$0.00	\$4,263.29	\$4,263.29	0.0	0.5	0.5	\$0.00	\$0.19	\$0.19	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.27	\$0.27
2140	Antineoplastic - Hormonal Agents			\$80.87	\$3,428.28	\$204.34	13.4	0.5	13.9	\$0.09	\$0.15	\$0.24	2.0%	1.0%	1.4%	24	10.0%	10.0%	10.0%	42	\$0.13	\$0.21	\$0.34
8584	Hereditary Angioedema Agents			\$0.00	\$79,452.00	\$79,452.00	0.0	0.1	0.1	\$0.00	\$0.50	\$0.50	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.72	\$0.72
2730	Diabetic Other			\$0.00	\$267.48	\$267.48	0.0	1.4	1.4	\$0.00	\$0.03	\$0.03	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.04	\$0.04
6238	Movement Disorder Drug Therapy			\$0.00	\$5,154.74	\$5,154.74	0.0	0.4	0.4	\$0.00	\$0.17	\$0.17	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.24	\$0.24
3090	Metabolic Modifiers			\$26.80	\$0.00	\$26.80	2.2	0.0	2.2	\$0.00	\$0.00	\$0.00	2.0%	1.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.01	\$0.00	\$0.01
6670	Autoimmune Agents			\$0.00	\$3,350.65	\$3,350.65	0.0	0.5	0.5	\$0.00	\$0.13	\$0.13	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.19	\$0.19
4555	Pulmonary Fibrosis Agents			\$0.00	\$9,952.21	\$9,952.21	0.0	0.0	0.0	\$0.00	\$0.03	\$0.03	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.04	

**Exhibit 8C**  
**Mississippi Division of Medicaid**  
**Mississippi/CAN Historical and Projected Pharmacy Utilization and Cost**  
**Children's Rate Grouping**

Traditional Top 25	CY 2019												Annualized Prospective Trends											
	Cost / Script			Util / 1000			PMPM Cost			Cost / Script			Months of Trend			Utilization'			Projected PMPM					
	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total			
<b>6110</b>	Amphetamine Stimulants	\$77.47	\$295.36	\$209.89	141.9	219.8	361.7	\$0.92	\$5.41	\$6.33	-10.0%	5.0%	3.0%	24	0.0%	0.0%	0.0%	42	\$0.74	\$5.97	\$6.71			
<b>6140</b>	Stimulants - Misc.	\$128.29	\$351.77	\$218.94	139.4	95.1	234.5	\$1.49	\$2.79	\$4.28	-20.0%	4.0%	-3.7%	24	0.0%	0.0%	0.0%	42	\$0.95	\$3.02	\$3.97			
<b>4420</b>	Sympathomimetics	\$26.46	\$110.46	\$70.81	153.6	171.8	325.4	\$0.34	\$1.58	\$1.92	3.0%	0.0%	0.5%	24	0.0%	0.0%	0.0%	42	\$0.36	\$1.58	\$1.94			
<b>4440</b>	Steroid Inhalants	\$99.89	\$209.23	\$153.25	35.0	33.3	68.3	\$0.29	\$0.58	\$0.87	-5.0%	4.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$0.26	\$0.63	\$0.89			
<b>1250</b>	Influenza Agents	\$100.44	\$239.15	\$102.12	205.6	2.5	208.1	\$1.72	\$0.05	\$1.77	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$1.72	\$0.05	\$1.77			
<b>2710S</b>	Insulin - Short / Intermediate Acting	\$0.00	\$947.00	\$947.00	0.0	16.7	16.7	\$0.00	\$0.90	\$0.90	0.0%	-10.0%	-10.0%	24	3.0%	3.0%	3.0%	42	\$0.00	\$0.81	\$0.81			
<b>8799</b>	Otic Combinations	\$62.59	\$234.26	\$220.80	3.4	40.0	43.4	\$0.02	\$0.78	\$0.80	0.0%	1.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.80	\$0.81			
<b>4155</b>	Anesthetics - Non-Sedating	\$16.40	\$32.37	\$16.40	57.4	0.0	57.4	\$0.78	\$0.00	\$0.78	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.78	\$0.00	\$0.78			
<b>4927</b>	Proton Pump Inhibitors	\$61.54	\$337.65	\$87.07	57.3	1.3	58.6	\$0.39	\$0.04	\$0.42	0.0%	5.0%	0.4%	24	2.0%	2.0%	2.0%	42	\$0.42	\$0.04	\$0.46			
<b>4359</b>	Cough/Cold/Allergy Combinations	\$20.38	\$14.76	\$15.33	47.4	418.8	466.2	\$0.08	\$0.52	\$0.60	0.0%	5.0%	4.3%	24	0.0%	0.0%	0.0%	42	\$0.08	\$0.57	\$0.65			
<b>9055</b>	Corticosteroids - Topical	\$24.15	\$229.49	\$25.94	220.8	1.9	222.8	\$0.44	\$0.04	\$0.48	-3.0%	5.0%	-2.4%	24	0.0%	0.0%	0.0%	42	\$0.42	\$0.04	\$0.46			
<b>0120</b>	Penicillin	\$13.63	\$0.00	\$13.63	443.4	0.0	443.4	\$0.50	\$0.00	\$0.50	1.0%	5.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.51	\$0.00	\$0.51			
<b>9005</b>	Acne Products	\$76.83	\$206.14	\$114.89	40.5	16.9	57.3	\$0.26	\$0.29	\$0.55	-5.0%	5.0%	0.4%	24	2.0%	2.0%	2.0%	42	\$0.25	\$0.34	\$0.59			
<b>4450</b>	Leukotriene Modulators	\$17.80	\$239.59	\$17.81	286.3	0.0	286.3	\$0.42	\$0.00	\$0.42	-2.0%	5.0%	-2.0%	24	0.0%	0.0%	0.0%	42	\$0.41	\$0.00	\$0.41			
<b>2599</b>	Combination Contraceptives - Oral	\$20.53	\$188.72	\$42.03	87.4	12.8	100.2	\$0.15	\$0.20	\$0.35	0.0%	5.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.15	\$0.22	\$0.37			
<b>0340</b>	Macrolides	\$20.43	\$205.12	\$20.44	246.3	0.0	246.3	\$0.42	\$0.00	\$0.42	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.42	\$0.00	\$0.42			
<b>7260</b>	Fibromyalgia Agents	\$23.12	\$820.82	\$51.48	65.9	2.4	68.3	\$0.13	\$0.17	\$0.29	0.0%	5.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.13	\$0.18	\$0.31			
<b>2710L</b>	Insulin - Long Acting	\$0.00	\$366.10	\$366.10	0.0	10.1	10.1	\$0.00	\$0.31	\$0.31	0.0%	5.0%	5.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$0.40	\$0.40			
<b>3890</b>	Anaphylaxis Therapy Agents	\$287.54	\$611.40	\$294.81	14.2	0.3	14.6	\$0.34	\$0.02	\$0.36	0.0%	5.0%	0.2%	24	10.0%	10.0%	10.0%	42	\$0.48	\$0.03	\$0.50			
<b>5915</b>	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$15.09	\$738.53	\$139.51	19.6	4.1	23.7	\$0.02	\$0.25	\$0.28	0.0%	5.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.28	\$0.30			
<b>2210</b>	Glucocorticosteroids	\$15.57	\$409.12	\$15.61	259.3	0.0	259.3	\$0.34	\$0.00	\$0.34	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.34	\$0.00	\$0.34			
<b>9090</b>	Scabicides & Pediculicides	\$41.51	\$269.02	\$159.68	12.2	13.2	25.3	\$0.04	\$0.30	\$0.34	0.0%	5.0%	4.4%	24	0.0%	0.0%	0.0%	42	\$0.04	\$0.33	\$0.37			
<b>4220</b>	Nasal Antiallergy	\$17.16	\$231.89	\$27.64	155.9	8.0	163.8	\$0.22	\$0.15	\$0.38	0.0%	5.0%	2.1%	24	0.0%	0.0%	0.0%	42	\$0.22	\$0.17	\$0.39			
<b>3620</b>	Antidiabetic Agents	\$17.89	\$210.71	\$17.91	175.3	0.0	175.3	\$0.26	\$0.00	\$0.26	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.26	\$0.00	\$0.26			
<b>0230</b>	Cephalosporin	\$23.03	\$0.00	\$23.03	159.2	0.0	159.2	\$0.31	\$0.00	\$0.31	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.31	\$0.00	\$0.31			
<b>Other Traditional</b>		\$24.13	\$115.98	\$33.28	2,031.6	224.9	2,256.6	\$4.08	\$2.17	\$6.26	0.0%	3.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$4.08	\$2.31	\$6.39			
<b>Total Traditional</b>		<b>\$30.08</b>	<b>\$153.36</b>	<b>\$53.30</b>	<b>5,575.7</b>	<b>1,294.1</b>	<b>6,869.8</b>	<b>\$13.98</b>	<b>\$16.54</b>	<b>\$30.51</b>	<b>-2.8%</b>	<b>3.0%</b>	<b>0.4%</b>	<b>24</b>	<b>0.37%</b>	<b>0.52%</b>	<b>0.34%</b>	<b>42</b>	<b>\$13.38</b>	<b>\$17.76</b>	<b>\$31.13</b>			
<b>Specialty Top 25</b>																								
<b>6627</b>	Autoimmune Agents	\$0.00	\$6,339.62	\$6,339.62	0.0	1.5	1.5	\$0.00	\$0.79	\$0.79	0.0%	8.0%	8.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$2.30	\$2.30			
<b>4330</b>	Cystic Fibrosis Agents	\$0.00	\$10,135.43	\$10,135.43	0.0	0.7	0.7	\$0.00	\$0.56	\$0.56	0.0%	0.0%	0.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$1.40	\$1.40			
<b>1950</b>	Monoclonal Antibodies	\$0.00	\$2,289.65	\$2,289.65	0.0	4.4	4.4	\$0.00	\$0.84	\$0.84	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.84	\$0.84			
<b>3010</b>	Growth Hormones	\$0.00	\$4,422.26	\$4,422.26	0.0	2.0	2.0	\$0.00	\$0.74	\$0.74	0.0%	8.0%	8.0%	24	2.0%	2.0%	2.0%	42	\$0.00	\$0.93	\$0.93			
<b>3090</b>	Metabolic Modifiers	\$70.57	\$17,266.58	\$4,003.97	0.8	0.2	1.1	\$0.00	\$0.35	\$0.36	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.01	\$0.51	\$0.52			
<b>9027</b>	Atopic Dermatitis - Monoclonal Antibodies	\$0.00	\$3,356.71	\$3,356.71	0.0	0.9	0.9	\$0.00	\$0.25	\$0.25	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.26	\$0.26			
<b>6629</b>	Autoimmune Agents	\$0.00	\$4,727.85	\$4,727.85	0.0	0.8	0.8	\$0.00	\$0.33	\$0.33	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.34	\$0.34			
<b>3030</b>	Corticosteroid	\$0.00	\$62,258.43	\$62,258.43	0.0	0.1	0.1	\$0.00	\$0.33	\$0.33	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.34	\$0.34			
<b>3008</b>	LHRH/GnRH Agonist Analog Pituitary Suppressants	\$0.00	\$6,785.29	\$6,785.29	0.0	0.3	0.3	\$0.00	\$0.18	\$0.18	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.18	\$0.18			
<b>2153</b>	Antineoplastic Enzyme Inhibitors	\$0.00	\$14,490.14	\$14,490.14	0.0	0.1	0.1	\$0.00	\$0.10	\$0.10	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.10	\$0.10			
<b>6546</b>	Interleukin-1 Blockers	\$0.00	\$16,065.30	\$16,065.30	0.0	0.1	0.1	\$0.00	\$0.11	\$0.11	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.11	\$0.11			
<b>9025</b>	Antispasmodics	\$137.21	\$7,644.51	\$5,204.63	0.0	0.1	0.1	\$0.00	\$0.05	\$0.05	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06			
<b>7217</b>	GABA Modulators	\$7,016.77	\$8,828.18	\$7,036.90	0.3	0.0	0.3	\$0.16	\$0.00	\$0.17	0.0%	2.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.16	\$0.00	\$0.17			
<b>4460</b>	Antiasthmatic - Monoclonal Antibodies	\$0.00	\$3,387.22	\$3,387.22	0.0	0.6	0.6	\$0.00	\$0.17	\$0.17	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.18	\$0.18			
<b>5250</b>	Inflammatory Bowel Agents	\$36.14	\$734.11	\$462.13	0.5	0.8	1.3	\$0.00	\$0.05	\$0.05	0.0%	2.0%	1.9%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.05	\$0.05			
<b>2170</b>	Antineoplastics Misc.	\$28.57	\$54,661.87	\$1,474.74	1.0	0.0	1.1	\$0.00	\$0.13	\$0.13	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.13	\$0.14			
<b>8580</b>	Hereditary Angioedema Agents	\$0.00	\$13,063.14	\$13,063.14	0.0	0.0	0.0	\$0.00	\$0.02	\$0.02	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.02	\$0.02			
<b>9310</b>	Antidotes - Chelating Agents	\$0.00	\$8,781.45	\$8,781.45	0.0	0.1	0.1	\$0.00	\$0.11	\$0.11	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.11	\$0.11			
<b>1255C</b>	Hepatitis C Agents	\$0.00	\$28,617.70	\$28,617.70	0.0	0.0	0.0	\$0.00	\$0.06	\$0.06	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06			
<b>2730</b>	Diabetic Other	\$0.00	\$366.86	\$366.86	0.0	1.9	1.9	\$0.00	\$0.06	\$0.06	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06			
<b>6240</b>	Multiple Sclerosis Agents	\$0.00	\$7,195.36	\$7,195.36	0.0	0.1	0.1	\$0.00	\$0.05	\$0.05	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.05	\$0.05			
<b>4014</b>	Pulmonary Arterial Hypertension	\$2,551.77	\$7,033.77	\$3,758.46	0.1	0.0	0.2	\$0.03	\$0.03	\$0.05	0.0%	2.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.03	\$0.05			
<b>1910</b>	Immune Serums	\$0.00	\$3,713.97	\$3,713.97	0.0	0.1	0.1	\$0.00	\$0.04	\$0.04	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.04	\$0.04			
<b>0700</b>	Aminoglycosides	\$1,508.99	\$5,950.07	\$2,746.17	0.1	0.1	0.2	\$0.02	\$0.03	\$0.04	0.0%	2.0%	1.2%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.03	\$0.04			
<b>8240</b>	Erythropoietin Agents	\$0.00	\$3,517.80	\$3,517.80	0.0	0.																		

**Exhibit 9A**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**Development of Vaccine Administration Expenses for SFY 2023 Rates**

	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Rate Cell Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP
<b>Age Distribution<sup>1</sup></b>											
a1	Newborn	0.0%	0.0%	0.0%	0.0%	89.6%	100.0%	90.0%	0.0%	0.0%	0.0%
a2	Children 1-4	3.7%	0.0%	0.0%	0.0%	10.4%	0.0%	10.0%	20.3%	1.2%	25.2%
a3	Children 5-11	11.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.4%	30.5%	37.7%
a4	Children 12-17	10.6%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%	33.9%	65.6%	50.6%
a5	Non-Children	74.3%	100.0%	100.0%	99.5%	0.0%	0.0%	0.0%	3.3%	2.6%	4.8%
<b>Starting Vaccine %<sup>2</sup></b>											
b1	Newborn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
b2	Children 1-4	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
b3	Children 5-11	3.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.2%	3.1%	2.6%
b4	Children 12-17	21.8%	0.0%	0.0%	21.3%	0.0%	0.0%	0.0%	22.4%	26.1%	22.4%
b5	Non-Children	31.6%	42.7%	22.7%	16.3%	0.0%	0.0%	0.0%	17.8%	23.5%	23.3%
c = sum(a × b)	<b>Rate-Cell Specific</b>	<b>26.1%</b>	<b>42.7%</b>	<b>22.7%</b>	<b>16.3%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>10.4%</b>	<b>18.7%</b>	<b>9.3%</b>
<b>Vaccine Target %<sup>2</sup></b>											
d1	Newborn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
d1	Children 1-4	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
d2	Children 5-11	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%
d3	Children 12-17	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%
d4	Non-Children	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%
e = sum(a × d)	<b>Rate-Cell Specific</b>	<b>50.9%</b>	<b>60.0%</b>	<b>60.0%</b>	<b>59.9%</b>	<b>1.0%</b>	<b>0.0%</b>	<b>1.0%</b>	<b>24.0%</b>	<b>32.5%</b>	<b>24.0%</b>
<b>Baseline Vaccinations</b>											
f = max (e - c, 0)	Vaccination % to Increase	24.8%	17.3%	37.3%	43.6%	1.0%	0.0%	1.0%	13.5%	13.9%	14.6%
g	Doses Per Baseline Vaccination	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
h = f × g	<b>Base Doses Per Member</b>	<b>0.495</b>	<b>0.345</b>	<b>0.746</b>	<b>0.871</b>	<b>0.021</b>	<b>0.000</b>	<b>0.020</b>	<b>0.271</b>	<b>0.277</b>	<b>0.292</b>
<b>% of Members Getting Boosted<sup>3</sup></b>											
i1 = d1 × 25%	Newborn	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
i2 = d2 × 25%	Children 1-4	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%
i3 = d3 × 25%	Children 5-11	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%
i4 = d4 × 25%	Children 12-17	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%
i5 = d5 × 25%	Non-Children	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%
j = sum(i × j)	<b>Rate-Cell Specific</b>	<b>12.72%</b>	<b>15.00%</b>	<b>15.00%</b>	<b>14.97%</b>	<b>0.26%</b>	<b>0.00%</b>	<b>0.25%</b>	<b>5.99%</b>	<b>8.13%</b>	<b>5.99%</b>
<b>Booster Vaccinations</b>											
k	Doses per Booster Vaccination	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
l = j × k	<b>Booster Doses per Member</b>	<b>0.264</b>	<b>0.300</b>	<b>0.300</b>	<b>0.299</b>	<b>0.005</b>	<b>0.000</b>	<b>0.005</b>	<b>0.120</b>	<b>0.163</b>	<b>0.120</b>
<b>Baseline + Booster Calculations</b>											
m = h + l	Total Doses per Member	0.750	0.645	1.046	1.171	0.026	0.000	0.025	0.391	0.440	0.412
n	Cost per Dose	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87
o = m × n	<b>Cost per Member</b>	<b>\$26.90</b>	<b>\$23.15</b>	<b>\$37.52</b>	<b>\$42.00</b>	<b>\$0.93</b>	<b>\$0.00</b>	<b>\$0.90</b>	<b>\$14.01</b>	<b>\$15.79</b>	<b>\$14.74</b>
p = o / 12	<b>Cost PMPM</b>	<b>\$2.24</b>	<b>\$1.93</b>	<b>\$3.13</b>	<b>\$3.50</b>	<b>\$0.08</b>	<b>\$0.00</b>	<b>\$0.07</b>	<b>\$1.17</b>	<b>\$1.32</b>	<b>\$1.23</b>
<b>TPL Impact</b>											
q	TPL Paid %	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%
r = p × (1 - q)	<b>Cost PMPM - Net of TPL</b>	<b>\$1.12</b>	<b>\$0.96</b>	<b>\$1.56</b>	<b>\$1.75</b>	<b>\$0.04</b>	<b>\$0.00</b>	<b>\$0.04</b>	<b>\$0.58</b>	<b>\$0.66</b>	<b>\$0.62</b>

<sup>1</sup> Calculated as of December 2021.

<sup>2</sup> Based on statewide Mississippi vaccination rates as of Feb 23, 2022. See Exhibit 9b row 'e' for more information.

<sup>3</sup> Assuming 25% of vaccinated members will receive booster shots in SFY 2023. See Exhibit 9b row 'h' (18 to 64 age category) for more information.

**Exhibit 9B**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**Development of Vaccination Targets for SFY 2023 Rates**

		Age						
		5 to 11	12 to 17	18 to 24	25 to 39	40 to 49	50 to 64	18 to 64
<i>a</i>	Fully Vaccinated - % of Mississippians <sup>1</sup>	10%	38%	40%	44%	58%	70%	54.40%
<i>b</i>	Fully Vaccinated Mississippians <sup>1</sup>	28,024	91,902	113,327	254,008	208,248	394,491	970,074
<i>c = b / a</i>	<b>Total Mississippians in Age Bucket</b>	<b>280,240</b>	<b>241,847</b>	<b>283,318</b>	<b>577,291</b>	<b>359,048</b>	<b>563,559</b>	<b>1,783,215</b>
<i>d</i>	Mississippians with 1+ Vaccine Dose <sup>1</sup>	37,942	106,738	139,739	301,354	233,991	425,964	1,101,048
<i>e = d / c</i>	<b>% of Mississippians with 1+ Vaccine Dose</b>	<b>13.54%</b>	<b>44.13%</b>	<b>49.32%</b>	<b>52.20%</b>	<b>65.17%</b>	<b>75.58%</b>	<b>61.75%</b>
<i>f</i>	Count Boosted Members <sup>1</sup>	0	8,212	16,532	46,412	55,399	152,698	271,041
<i>g = f / c</i>	<b>% of Mississippians with a Booster Dose</b>	<b>0.0%</b>	<b>3.4%</b>	<b>5.8%</b>	<b>8.0%</b>	<b>15.4%</b>	<b>27.1%</b>	<b>15.2%</b>
<i>h = g / e</i>	<b>% of Vaccinated Mississippians with a Booster Dose</b>	<b>0.0%</b>	<b>7.7%</b>	<b>11.8%</b>	<b>15.4%</b>	<b>23.7%</b>	<b>35.8%</b>	<b>24.6%</b>

<sup>1</sup> Based on source, updated as of February 23, 2022: [https://msdh.ms.gov/msdhsite/\\_static/resources/12130.pdf](https://msdh.ms.gov/msdhsite/_static/resources/12130.pdf).

**Exhibit 9C**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**Illustration of Withhold Calculation for COVID-19 Vaccines**

	Age						(A) Withhold Numerator (All Ages)	(B) Withhold Denominator (Ages 12+)	(C) = (A) / (B) Vaccination % for Withhold Calculation
	Newborn	Children 1-4	Children 5-11	Children 12-17	Non- Children	All Ages			
December 2021 Members <sup>1</sup>	23,126	66,663	111,885	100,065	110,638	<b>412,377</b>	412,377	210,703	
Starting Vaccine % <sup>2</sup>	0.0%	0.0%	2.8%	23.2%	26.0%	<b>13.4%</b>	55,148	210,703	<b>26.2%</b>
Vaccine Target % <sup>3</sup>	0.0%	10.0%	15.0%	40.0%	60.0%	<b>31.5%</b>	129,858	210,703	<b>61.6%</b>
							<b>Vaccine Target for Withhold Return</b>		<b>40.0%</b>

<sup>1</sup> For illustrative purposes December 2021 membership used. Actual calculation will use SFY 2023 member months.

<sup>2</sup> Calculated as of December 2021.

<sup>3</sup> Based on statewide Mississippi vaccination rates as of Feb 23, 2022. See Exhibit 9b row 'e' for more information.

Exhibit 10  
Mississippi Division of Medicaid  
SFY 2023 MississippiCAN Capitation Rate Development  
Enhanced Match Services

	Medical Portion of Capitation Rate	COVID-19 Vaccine Administration	Family Planning (Non-waiver)	Breast and Cervical Cancer	Indian Health Services	Home Health Services	Rehab Services	Private Duty Nursing
<b>Non-Newborn SSI / Disabled</b>	<b>\$1,074.67</b>	\$1.12	\$0.81	\$0.13	\$0.34	\$2.22	\$27.79	\$6.61
North Region	980.10	1.02	0.73	0.12	0.31	2.03	25.34	6.03
Central Region	1,127.33	1.18	0.84	0.14	0.36	2.33	29.15	6.94
South Region	1,118.73	1.17	0.84	0.14	0.35	2.32	28.93	6.89
<b>Breast and Cervical Cancer</b>	<b>\$3,480.27</b>	\$0.96	\$0.35	\$3,478.96	\$0.00	\$0.00	\$0.00	\$0.00
North Region	3,174.01	0.88	0.32	3,172.81	0.00	0.00	0.00	0.00
Central Region	3,650.81	1.01	0.36	3,649.43	0.00	0.00	0.00	0.00
South Region	3,622.96	1.00	0.36	3,621.60	0.00	0.00	0.00	0.00
<b>MA Adult</b>	<b>\$478.21</b>	\$1.56	\$5.53	\$0.00	\$0.27	\$0.26	\$1.05	\$0.00
North Region	451.91	1.48	5.23	0.00	0.25	0.24	0.99	0.00
Central Region	497.81	1.63	5.76	0.00	0.28	0.27	1.09	0.00
South Region	482.51	1.58	5.58	0.00	0.27	0.26	1.06	0.00
<b>Pregnant Women</b>	<b>\$1,045.09</b>	\$1.75	\$15.25	\$0.00	\$0.01	\$0.18	\$0.24	\$0.00
North Region	987.61	1.65	14.41	0.00	0.01	0.17	0.23	0.00
Central Region	1,087.94	1.82	15.87	0.00	0.01	0.19	0.25	0.00
South Region	1,054.49	1.77	15.39	0.00	0.01	0.18	0.25	0.00
<b>SSI / Disabled Newborn</b>	<b>\$7,963.96</b>	\$0.04	\$0.00	\$0.00	\$0.10	\$4.66	\$0.00	\$109.93
North Region	7,812.65	0.04	0.00	0.00	0.10	4.58	0.00	107.84
Central Region	8,115.28	0.04	0.00	0.00	0.10	4.75	0.00	112.02
South Region	7,940.07	0.04	0.00	0.00	0.10	4.65	0.00	109.60
<b>Non-SSI Newborns 0 to 2 Months</b>	<b>\$1,828.43</b>	\$0.00	\$0.00	\$0.00	\$1.97	\$0.17	\$0.00	\$0.13
North Region	1,793.69	0.00	0.00	0.00	1.93	0.17	0.00	0.13
Central Region	1,863.17	0.00	0.00	0.00	2.01	0.18	0.00	0.13
South Region	1,822.94	0.00	0.00	0.00	1.96	0.17	0.00	0.13
<b>Non-SSI Newborns 3 to 12 Months</b>	<b>\$247.04</b>	\$0.04	\$0.00	\$0.00	\$2.22	\$0.06	\$0.00	\$0.02
North Region	242.35	0.04	0.00	0.00	2.17	0.06	0.00	0.02
Central Region	251.74	0.04	0.00	0.00	2.26	0.06	0.00	0.02
South Region	246.30	0.04	0.00	0.00	2.21	0.06	0.00	0.02
<b>Foster Care</b>	<b>\$600.48</b>	\$0.58	\$1.22	\$0.00	\$0.02	\$0.02	\$19.44	\$2.22
North Region	589.07	0.57	1.19	0.00	0.02	0.02	19.07	2.18
Central Region	611.89	0.59	1.24	0.00	0.02	0.02	19.81	2.26
South Region	598.68	0.58	1.21	0.00	0.02	0.02	19.38	2.22
<b>MYPAC</b>	<b>\$3,720.12</b>	\$0.66	\$3.27	\$0.00	\$0.00	\$0.00	\$4.50	\$0.00
North Region	3,649.44	0.65	3.21	0.00	0.00	0.00	4.42	0.00
Central Region	3,790.80	0.67	3.33	0.00	0.00	0.00	4.59	0.00
South Region	3,708.96	0.66	3.26	0.00	0.00	0.00	4.49	0.00
<b>MA Children</b>	<b>\$192.91</b>	\$0.62	\$1.00	\$0.00	\$0.35	\$0.01	\$6.49	\$0.10
North Region	189.24	0.60	0.98	0.00	0.34	0.01	6.37	0.10
Central Region	196.57	0.63	1.02	0.00	0.36	0.01	6.62	0.10
South Region	192.33	0.61	0.99	0.00	0.35	0.01	6.48	0.10
<b>Quasi-CHIP</b>	<b>\$195.12</b>	\$0.61	\$1.65	\$0.00	\$0.15	\$0.01	\$4.21	\$0.02
North Region	191.41	0.60	1.62	0.00	0.15	0.01	4.13	0.02
Central Region	198.83	0.63	1.68	0.00	0.15	0.01	4.29	0.03
South Region	194.53	0.61	1.64	0.00	0.15	0.01	4.20	0.02

Exhibit 11A  
Mississippi Division of Medicaid  
Summary of CY 2018\* MississippiCAN Encounter and FFS Claims  
Summary of Total Costs by Rate Cell

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non- Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$49,435,074	\$104,104	\$5,442,913	\$0	\$343,640	\$6,901	\$1,693,358	\$2,682,624	\$5,150,631	\$461,899	\$52,927	\$10,055,941	\$795,279	\$75,225,279
Surgical	\$65,321,875	\$118,200	\$11,684,562	\$0	\$716,881	\$9,556	\$5,219,189	\$7,005,471	\$4,096,276	\$937,606	\$52,495	\$12,191,552	\$1,098,197	\$108,451,860
Maternity / Deliveries	\$2,867,588	\$0	\$1,900,233	\$16,215,238	\$4,373,883	\$65,015,599	\$25,948,640	\$92,276,515	\$50,676	\$89,871	\$7,420	\$3,871,404	\$425,563	\$213,042,630
Psychiatric / Substance Abuse	\$24,553,589	\$0	\$3,837,268	\$0	\$252,661	\$0	\$0	\$0	\$0	\$0	\$7,429,710	\$1,448,523	\$20,091,900	\$1,897,200
Skilled Nursing Facility	\$1,429	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,429
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Inpatient Behavioral Health Total</b>	<b>\$4,535,758</b>	<b>\$0</b>	<b>\$57,619</b>	<b>\$0</b>	<b>\$13,890</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$5,974,164</b>	<b>\$841,403</b>	<b>\$13,960,748</b>	<b>\$1,269,806</b>	<b>\$26,653,386</b>
<b>Inpatient Facility Total</b>	<b>\$141,179,556</b>	<b>\$222,304</b>	<b>\$22,864,976</b>	<b>\$16,215,238</b>	<b>\$5,687,066</b>	<b>\$65,032,056</b>	<b>\$32,861,187</b>	<b>\$101,964,610</b>	<b>\$9,297,582</b>	<b>\$8,919,076</b>	<b>\$1,561,366</b>	<b>\$46,210,797</b>	<b>\$1,269,806</b>	<b>\$26,653,386</b>
<b>Outpatient Facility Services</b>														
Emergency Room	\$27,884,653	\$34,872	\$17,537,158	\$10,344	\$4,788,306	\$33,989	\$344,960	\$1,803,984	\$6,916,309	\$701,113	\$105,560	\$35,238,374	\$2,696,968	\$98,096,592
Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$153	\$1,007	\$0	\$0	\$2,761	\$47	\$3,968
Radiology / Pathology	\$24,633,878	\$433,441	\$11,205,120	\$5,996	\$3,501,878	\$28,979	\$177,860	\$642,311	\$2,171,543	\$402,864	\$50,318	\$14,137,765	\$1,431,788	\$58,823,740
Psychiatric / Alcohol & Drug Abuse	\$6,550,059	\$0	\$6,336	\$0	\$113	\$0	\$0	\$0	\$0	\$948,196	\$847	\$16,326,373	\$884,669	\$24,716,592
Pharmacy	\$30,547,093	\$725,032	\$6,196,219	\$4,373	\$1,479,330	\$22,192	\$952,594	\$95,510	\$600,204	\$82,282	\$4,734	\$4,711,039	\$383,072	\$45,803,673
Other	\$61,787,364	\$334,367	\$22,240,524	\$8,858	\$5,199,431	\$32,716	\$946,988	\$1,313,654	\$4,506,204	\$1,247,577	\$98,795	\$38,012,865	\$3,236,112	\$138,965,456
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Outpatient Behavioral Health Total</b>	<b>\$6,601,420</b>	<b>\$0</b>	<b>\$6,366</b>	<b>\$0</b>	<b>\$113</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$948,968</b>	<b>\$847</b>	<b>\$16,416,431</b>	<b>\$890,515</b>	<b>\$24,864,660</b>
<b>Outpatient Facility Total</b>	<b>\$151,403,046</b>	<b>\$1,527,712</b>	<b>\$57,185,357</b>	<b>\$29,572</b>	<b>\$14,969,058</b>	<b>\$117,876</b>	<b>\$2,422,403</b>	<b>\$3,855,612</b>	<b>\$14,195,265</b>	<b>\$3,382,032</b>	<b>\$260,254</b>	<b>\$108,429,177</b>	<b>\$8,632,656</b>	<b>\$366,410,021</b>
<b>Physician Services</b>														
IP Visits	\$11,944,032	\$17,018	\$1,697,120	\$53,574	\$406,404	\$199,271	\$6,925,645	\$11,460,127	\$1,518,430	\$331,878	\$76,829	\$2,727,389	\$231,414	\$37,589,131
IP Surgery	\$4,599,885	\$24,869	\$1,203,205	\$30,823	\$119,077	\$100,908	\$409,078	\$469,939	\$328,176	\$47,682	\$1,339	\$1,039,952	\$101,709	\$8,476,641
Office / Home Visits	\$35,248,846	\$111,559	\$18,356,126	\$639	\$1,386,626	\$4,727	\$404,424	\$2,885,824	\$9,296,952	\$1,916,983	\$147,522	\$64,074,393	\$6,258,566	\$140,093,187
Preventive Exams & Immunizations	\$4,854,763	\$14,664	\$7,336,040	\$160,969	\$14,172,797	\$535,841	\$225,656	\$8,684,093	\$9,250,573	\$698,145	\$37,479	\$21,121,093	\$1,553,947	\$68,646,061
Urgent Care Visits	\$240,165	\$89	\$386,294	\$0	\$442,442	\$86	\$654	\$1,225	\$102,610	\$57,244	\$1,194	\$1,898,376	\$204,644	\$2,935,023
ER Visits and Observation Care	\$8,607,132	\$11,337	\$5,180,261	\$16,559	\$1,616,289	\$71,645	\$110,808	\$563,487	\$2,171,764	\$202,094	\$34,795	\$10,602,353	\$798,112	\$29,986,637
OP Surgery	\$11,827,398	\$120,434	\$6,547,683	\$1,188	\$471,617	\$2,373	\$95,016	\$204,153	\$1,046,199	\$389,796	\$22,422	\$12,626,715	\$1,277,557	\$34,632,551
Physical Therapy	\$5,839,514	\$16,095	\$1,141,257	\$0	\$33,596	\$95	\$106,266	\$8,580	\$266,853	\$472,004	\$15,918	\$7,085,492	\$515,540	\$15,501,210
Psychiatric / Substance Abuse	\$3,126,509	\$4,919	\$3,023,869	\$809	\$157,142	\$772	\$115	\$0	\$2,930	\$3,611,333	\$15,761,452	\$30,423,156	\$2,642,606	\$87,255,614
Radiology / Pathology	\$13,958,987	\$146,370	\$9,477,856	\$157,176	\$7,002,857	\$630,921	\$180,960	\$406,786	\$1,152,715	\$300,861	\$42,644	\$11,014,053	\$1,191,044	\$45,663,229
Vision, Hearing, and Speech Exams	\$3,748,914	\$6,999	\$2,120,518	\$142	\$444,105	\$481	\$36,523	\$24,217	\$93,244	\$393,744	\$33,455	\$11,109,971	\$1,477,406	\$19,489,718
Other	\$35,918,219	\$583,024	\$5,903,911	\$4,016,253	\$1,338,344	\$16,660,554	\$455,927	\$413,214	\$638,607	\$687,844	\$32,374	\$7,436,087	\$1,006,576	\$75,090,934
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Physician Behavioral Health Total</b>	<b>\$44,614,846</b>	<b>\$5,750</b>	<b>\$4,173,051</b>	<b>\$556</b>	<b>\$198,667</b>	<b>\$708</b>	<b>\$4,796</b>	<b>\$7,359</b>	<b>\$60,453</b>	<b>\$4,037,834</b>	<b>\$15,766,787</b>	<b>\$33,645,151</b>	<b>\$2,957,585</b>	<b>\$105,473,542</b>
<b>Physician Total</b>	<b>\$168,414,364</b>	<b>\$1,057,378</b>	<b>\$62,374,141</b>	<b>\$4,438,132</b>	<b>\$27,191,294</b>	<b>\$18,207,673</b>	<b>\$8,951,073</b>	<b>\$25,121,646</b>	<b>\$25,869,052</b>	<b>\$9,109,609</b>	<b>\$16,207,422</b>	<b>\$181,159,031</b>	<b>\$17,259,121</b>	<b>\$565,359,937</b>
<b>Pharmacy Services</b>														
Pharmacy	\$213,067,045	\$443,592	\$52,581,793	\$69,669	\$7,257,950	\$302,281	\$3,083,773	\$644,595	\$6,551,721	\$5,631,821	\$877,813	\$106,350,231	\$14,063,633	\$410,925,917
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Pharmacy Total</b>	<b>\$213,067,045</b>	<b>\$443,592</b>	<b>\$52,581,793</b>	<b>\$69,669</b>	<b>\$7,257,950</b>	<b>\$302,281</b>	<b>\$3,083,773</b>	<b>\$644,595</b>	<b>\$6,551,721</b>	<b>\$5,631,821</b>	<b>\$877,813</b>	<b>\$106,350,231</b>	<b>\$14,063,633</b>	<b>\$410,925,917</b>
<b>Dental Services</b>														
Dental	\$7,986,259	\$8,606	\$4,261,392	\$153	\$842,570	\$372	\$3,712	\$42,736	\$274,952	\$2,291,896	\$163,621	\$84,579,993	\$11,012,096	\$111,468,358
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Dental Total</b>	<b>\$7,986,259</b>	<b>\$8,606</b>	<b>\$4,261,392</b>	<b>\$153</b>	<b>\$842,570</b>	<b>\$372</b>	<b>\$3,712</b>	<b>\$42,736</b>	<b>\$274,952</b>	<b>\$2,291,896</b>	<b>\$163,621</b>	<b>\$84,579,993</b>	<b>\$11,012,096</b>	<b>\$111,468,358</b>
<b>Other Services</b>														
Ambulance	\$8,108,634	\$5,581	\$1,975,858	\$65,865	\$537,840	\$226,651	\$234,412	\$1,043,198	\$658,340	\$117,961	\$31,672	\$3,250,411	\$231,159	\$16,487,583
Non-Emergency Transportation	\$11,127,992	\$27,075	\$1,694,657	\$7,764	\$428,716	\$14,853	\$202,704	\$76,817	\$220,043	\$56,243	\$0	\$2,232,564	\$95,602	\$16,185,030
DME	\$15,229,992	\$18,411	\$1,485,459	\$722	\$206,111	\$2,743	\$734,099	\$236,503	\$507,226	\$271,329	\$15,055	\$3,655,661	\$604,117	\$22,967,429
Glasses / Contacts	\$1,215,312	\$1,884	\$757,182	\$0	\$169,140	\$173	\$180	\$39	\$1,773	\$152,715	\$17,172	\$4,028,936	\$573,170	\$6,917,676
Other	\$9,591,836	\$1,289	\$149,621	\$0	\$2,439	\$74	\$1,144,476	\$10,828	\$77,087	\$114,473	\$62,868	\$727,517	\$74,791	\$11,957,299
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Other Behavioral Health Total</b>	<b>\$606,611</b>	<b>\$166</b>	<b>\$72,511</b>	<b>\$0</b>	<b>\$2,219</b>	<b>\$74</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$22,291</b>	<b>\$368</b>	<b>\$421,316</b>	<b>\$38,278</b>	<b>\$1,163,834</b>
<b>Other Total</b>	<b>\$45,273,767</b>	<b>\$54,241</b>	<b>\$6,062,776</b>	<b>\$74,351</b>	<b>\$1,344,247</b>	<b>\$244,494</b>	<b>\$2,315,870</b>	<b>\$1,367,385</b>	<b>\$1,464,469</b>	<b>\$712,721</b>	<b>\$126,767</b>	<b>\$13,895,089</b>	<b>\$1,578,839</b>	<b>\$74,515,017</b>
<b>Total Behavioral Health</b>	<b>\$56,358,635</b>	<b>\$5,916</b>	<b>\$4,309,547</b>	<b>\$556</b>	<b>\$214,889</b>	<b>\$781</b>	<b>\$4,796</b>	<b>\$7,359</b>	<b>\$60,453</b>	<b>\$10,983,257</b>	<b>\$16,609,404</b>	<b>\$64,443,646</b>	<b>\$5,156,184</b>	<b>\$188,155,422</b>
<b>Grand Total</b>	<b>\$727,324,037</b>	<b>\$3,313,833</b>	<b>\$205,330,435</b>	<b>\$20,827,115</b>	<b>\$57,292,185</b>	<b>\$63,904,752</b>	<b>\$49,638,019</b>	<b>\$132,996,584</b>	<b>\$57,653,042</b>	<b>\$30,047,155</b>	<b>\$19,197,244</b>	<b>\$540,624,317</b>	<b>\$56,762,583</b>	<b>\$1,984,911,301</b>

\* The MYPAC rate cell contains FFS claims from Q1 to Q3 2018 rather than the full CY 2018 period.

Exhibit 11B  
Mississippi Division of Medicaid  
Summary of CY 2018\* MississippiCAN Encounter and FFS Claims  
Summary of Allowed PMPM by Rate Cell

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
PMPM Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MISCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$63.00	\$95.51	\$10.66	\$0.00	\$2.54	\$0.05	\$268.32	\$35.25	\$19.90	\$5.98	\$9.68	\$3.17	\$2.38	\$14.08
Surgical	\$84.96	\$108.44	\$22.89	\$0.00	\$5.30	\$0.07	\$827.00	\$92.06	\$15.83	\$12.15	\$9.60	\$3.85	\$3.29	\$20.30
Maternity / Deliveries	\$3.73	\$0.00	\$3.72	\$31.76	\$32.32	\$480.40	\$4,111.65	\$1,212.57	\$0.20	\$1.16	\$1.36	\$1.22	\$1.27	\$39.87
Psychiatric / Substance Abuse	\$31.94	\$0.00	\$7.52	\$0.00	\$1.87	\$0.00	\$0.00	\$0.00	\$0.00	\$96.25	\$264.86	\$6.34	\$5.68	\$11.14
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Inpatient Behavioral Health Total</b>	<b>\$5.90</b>	<b>\$0.00</b>	<b>\$0.11</b>	<b>\$0.00</b>	<b>\$0.10</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$77.39</b>	<b>\$153.85</b>	<b>\$4.40</b>	<b>\$3.80</b>	<b>\$4.99</b>
<b>Inpatient Facility Total</b>	<b>\$183.63</b>	<b>\$203.95</b>	<b>\$44.79</b>	<b>\$31.76</b>	<b>\$42.02</b>	<b>\$480.52</b>	<b>\$5,206.97</b>	<b>\$1,339.88</b>	<b>\$35.93</b>	<b>\$115.54</b>	<b>\$285.49</b>	<b>\$14.58</b>	<b>\$12.62</b>	<b>\$85.38</b>
<b>Outpatient Facility Services</b>														
Emergency Room	\$36.27	\$31.99	\$34.35	\$0.02	\$35.38	\$0.25	\$54.66	\$23.71	\$26.73	\$9.08	\$19.30	\$11.12	\$8.07	\$18.36
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$32.04	\$397.65	\$21.95	\$0.01	\$25.88	\$0.21	\$28.18	\$8.44	\$8.39	\$5.22	\$9.20	\$4.46	\$4.28	\$11.01
Psychiatric / Alcohol & Drug Abuse	\$8.52	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.28	\$0.15	\$5.15	\$2.65	\$4.63
Pharmacy	\$39.73	\$665.17	\$12.14	\$0.01	\$10.93	\$0.16	\$150.94	\$1.26	\$2.32	\$1.07	\$0.87	\$1.49	\$1.15	\$8.57
Other	\$80.37	\$306.76	\$43.57	\$0.02	\$38.42	\$0.24	\$150.05	\$17.26	\$17.41	\$16.16	\$18.06	\$11.99	\$9.68	\$26.01
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Outpatient Behavioral Health Total</b>	<b>\$8.69</b>	<b>\$0.00</b>	<b>\$0.01</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$12.29</b>	<b>\$0.15</b>	<b>\$5.18</b>	<b>\$2.66</b>	<b>\$4.65</b>
<b>Outpatient Facility Total</b>	<b>\$196.93</b>	<b>\$1,401.57</b>	<b>\$112.02</b>	<b>\$0.06</b>	<b>\$110.61</b>	<b>\$0.87</b>	<b>\$383.84</b>	<b>\$50.67</b>	<b>\$54.85</b>	<b>\$43.81</b>	<b>\$47.59</b>	<b>\$34.21</b>	<b>\$25.83</b>	<b>\$68.57</b>
<b>Physician Services</b>														
IP Visits	\$15.54	\$15.61	\$3.32	\$0.10	\$3.00	\$1.47	\$1,097.39	\$150.59	\$5.87	\$4.30	\$14.05	\$0.86	\$0.69	\$7.03
IP Surgery	\$5.98	\$22.82	\$2.36	\$0.06	\$0.88	\$0.75	\$64.82	\$6.18	\$1.27	\$0.62	\$0.24	\$0.33	\$0.30	\$1.59
Office / Home Visits	\$45.85	\$102.35	\$35.96	\$0.00	\$10.25	\$0.03	\$64.08	\$37.92	\$35.92	\$24.83	\$26.97	\$20.22	\$18.73	\$26.22
Preventive Exams & Immunizations	\$6.31	\$13.45	\$14.37	\$0.32	\$104.72	\$3.96	\$35.76	\$114.11	\$35.75	\$9.04	\$6.85	\$6.66	\$4.65	\$12.85
Urgent Care Visits	\$0.31	\$0.08	\$0.76	\$0.00	\$0.31	\$0.00	\$0.10	\$0.02	\$0.40	\$0.74	\$0.22	\$0.60	\$0.61	\$0.55
ER Visits and Observation Care	\$11.20	\$10.40	\$10.15	\$0.03	\$11.94	\$0.53	\$17.56	\$7.40	\$8.39	\$2.62	\$6.36	\$3.35	\$2.39	\$5.61
OP Surgery	\$15.38	\$110.49	\$12.83	\$0.00	\$3.48	\$0.02	\$15.06	\$2.68	\$4.04	\$5.05	\$4.10	\$3.98	\$3.82	\$6.48
Physical Therapy	\$7.60	\$14.77	\$2.24	\$0.00	\$0.25	\$0.00	\$16.84	\$0.11	\$1.03	\$6.11	\$2.91	\$2.24	\$1.54	\$2.90
Psychiatric / Substance Abuse	\$41.14	\$4.51	\$5.92	\$0.00	\$1.16	\$0.01	\$0.02	\$0.00	\$0.01	\$46.78	\$2,881.96	\$9.60	\$7.91	\$16.33
Radiology / Pathology	\$18.16	\$134.28	\$18.57	\$0.31	\$51.74	\$4.66	\$28.67	\$5.35	\$4.45	\$3.90	\$7.80	\$3.48	\$3.56	\$8.55
Vision, Hearing, and Speech Exams	\$4.88	\$6.42	\$4.15	\$0.00	\$3.28	\$0.00	\$5.79	\$0.32	\$0.36	\$5.10	\$6.12	\$3.51	\$4.42	\$3.65
Other	\$46.72	\$534.88	\$11.56	\$7.87	\$9.89	\$123.10	\$72.24	\$5.43	\$2.47	\$8.91	\$5.92	\$2.35	\$3.01	\$14.05
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Physician Behavioral Health Total</b>	<b>\$58.03</b>	<b>\$5.28</b>	<b>\$8.17</b>	<b>\$0.00</b>	<b>\$1.47</b>	<b>\$0.01</b>	<b>\$0.76</b>	<b>\$0.10</b>	<b>\$0.23</b>	<b>\$52.31</b>	<b>\$2,882.94</b>	<b>\$10.62</b>	<b>\$8.85</b>	<b>\$19.74</b>
<b>Physician Total</b>	<b>\$219.05</b>	<b>\$970.07</b>	<b>\$122.18</b>	<b>\$8.69</b>	<b>\$200.92</b>	<b>\$134.54</b>	<b>\$1,418.33</b>	<b>\$330.11</b>	<b>\$99.96</b>	<b>\$118.01</b>	<b>\$2,963.51</b>	<b>\$57.16</b>	<b>\$51.64</b>	<b>\$105.81</b>
<b>Pharmacy Services</b>														
Pharmacy	\$277.13	\$406.97	\$103.00	\$0.14	\$53.63	\$2.23	\$488.63	\$8.47	\$25.32	\$72.96	\$160.51	\$33.55	\$42.08	\$76.91
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Pharmacy Total</b>	<b>\$277.13</b>	<b>\$406.97</b>	<b>\$103.00</b>	<b>\$0.14</b>	<b>\$53.63</b>	<b>\$2.23</b>	<b>\$488.63</b>	<b>\$8.47</b>	<b>\$25.32</b>	<b>\$72.96</b>	<b>\$160.51</b>	<b>\$33.55</b>	<b>\$42.08</b>	<b>\$76.91</b>
<b>Dental Services</b>														
Dental	\$10.39	\$7.90	\$8.35	\$0.00	\$6.23	\$0.00	\$0.59	\$0.56	\$1.06	\$29.69	\$29.92	\$26.69	\$32.95	\$20.86
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Dental Total</b>	<b>\$10.39</b>	<b>\$7.90</b>	<b>\$8.35</b>	<b>\$0.00</b>	<b>\$6.23</b>	<b>\$0.00</b>	<b>\$0.59</b>	<b>\$0.56</b>	<b>\$1.06</b>	<b>\$29.69</b>	<b>\$29.92</b>	<b>\$26.69</b>	<b>\$32.95</b>	<b>\$20.86</b>
<b>Other Services</b>														
Ambulance	\$10.55	\$5.12	\$3.87	\$0.13	\$3.97	\$1.67	\$37.14	\$13.71	\$2.54	\$1.53	\$5.79	\$1.03	\$0.69	\$3.09
Non-Emergency Transportation	\$14.47	\$24.84	\$3.32	\$0.02	\$3.17	\$0.11	\$32.12	\$1.01	\$0.85	\$0.73	\$0.00	\$0.70	\$0.29	\$3.03
DME	\$19.81	\$16.89	\$2.91	\$0.00	\$1.52	\$0.02	\$116.32	\$3.11	\$1.96	\$3.51	\$2.75	\$1.15	\$1.81	\$4.30
Glasses / Contacts	\$1.58	\$1.73	\$1.48	\$0.00	\$1.25	\$0.00	\$0.03	\$0.00	\$0.01	\$1.98	\$3.14	\$1.27	\$1.72	\$1.29
Other	\$12.48	\$1.18	\$0.29	\$0.00	\$0.02	\$0.00	\$181.35	\$0.14	\$0.30	\$1.48	\$11.50	\$0.23	\$0.22	\$2.24
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Other Behavioral Health Total</b>	<b>\$0.79</b>	<b>\$0.15</b>	<b>\$0.14</b>	<b>\$0.00</b>	<b>\$0.02</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.29</b>	<b>\$0.07</b>	<b>\$0.13</b>	<b>\$0.11</b>	<b>\$0.22</b>
<b>Other Total</b>	<b>\$58.89</b>	<b>\$49.76</b>	<b>\$11.88</b>	<b>\$0.15</b>	<b>\$9.93</b>	<b>\$1.81</b>	<b>\$366.96</b>	<b>\$17.97</b>	<b>\$5.66</b>	<b>\$9.23</b>	<b>\$23.18</b>	<b>\$4.38</b>	<b>\$4.72</b>	<b>\$13.95</b>
<b>Total Behavioral Health</b>	<b>\$73.30</b>	<b>\$5.43</b>	<b>\$8.44</b>	<b>\$0.00</b>	<b>\$1.59</b>	<b>\$0.01</b>	<b>\$0.76</b>	<b>\$0.10</b>	<b>\$0.23</b>	<b>\$142.28</b>	<b>\$3,037.01</b>	<b>\$20.33</b>	<b>\$15.43</b>	<b>\$29.60</b>
<b>Grand Total</b>	<b>\$946.01</b>	<b>\$3,040.21</b>	<b>\$402.21</b>	<b>\$40.80</b>	<b>\$423.33</b>	<b>\$619.97</b>	<b>\$7,865.32</b>	<b>\$1,747.66</b>	<b>\$222.78</b>	<b>\$389.25</b>	<b>\$3,510.19</b>	<b>\$170.57</b>	<b>\$169.85</b>	<b>\$371.48</b>

\* The MYPAC rate cell contains FFS claims from Q1 to Q3 2018 rather than the full CY 2018 period.



Exhibit 11C  
Mississippi Division of Medicaid  
Summary of CY 2018\* MississippiCAN Encounter and FFS Claims  
Summary of Total Costs by Rate Cell

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
	% of Total Allowed Cost													
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	6.7%	3.1%	2.7%	0.0%	0.6%	0.0%	3.4%	2.0%	8.9%	1.5%	0.3%	1.9%	1.4%	3.8%
Surgical	9.0%	3.6%	5.7%	0.0%	1.3%	0.0%	10.5%	5.3%	7.1%	3.1%	0.3%	2.3%	1.9%	5.5%
Maternity / Deliveries	0.4%	0.0%	0.9%	77.9%	7.6%	77.5%	52.3%	69.4%	0.1%	0.3%	0.0%	0.7%	0.7%	10.7%
Psychiatric / Substance Abuse	3.4%	0.0%	1.9%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	24.7%	7.5%	3.7%	3.3%	3.0%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Inpatient Behavioral Health Total</b>	<b>0.6%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>19.9%</b>	<b>4.4%</b>	<b>2.6%</b>	<b>2.2%</b>	<b>1.3%</b>
<b>Inpatient Facility Total</b>	<b>19.4%</b>	<b>6.7%</b>	<b>11.1%</b>	<b>77.9%</b>	<b>9.9%</b>	<b>77.5%</b>	<b>66.2%</b>	<b>76.7%</b>	<b>16.1%</b>	<b>29.7%</b>	<b>8.1%</b>	<b>8.5%</b>	<b>7.4%</b>	<b>23.0%</b>
<b>Outpatient Facility Services</b>														
Emergency Room	3.8%	1.1%	8.5%	0.0%	8.4%	0.0%	0.7%	1.4%	12.0%	2.3%	0.5%	6.5%	4.8%	4.9%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.4%	13.1%	5.5%	0.0%	6.1%	0.0%	0.4%	0.5%	3.8%	1.3%	0.3%	2.6%	2.5%	3.0%
Psychiatric / Alcohol & Drug Abuse	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	3.2%	0.0%	3.0%	1.6%	1.2%
Pharmacy	4.2%	21.9%	3.0%	0.0%	2.6%	0.0%	1.9%	0.1%	1.0%	0.3%	0.0%	0.9%	0.7%	2.3%
Other	8.5%	10.1%	10.8%	0.0%	9.1%	0.0%	1.9%	1.0%	7.8%	4.2%	0.5%	7.9%	5.7%	7.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Outpatient Behavioral Health Total</b>	<b>0.9%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>3.2%</b>	<b>0.0%</b>	<b>3.0%</b>	<b>1.6%</b>	<b>1.3%</b>
<b>Outpatient Facility Total</b>	<b>20.8%</b>	<b>46.1%</b>	<b>27.9%</b>	<b>0.1%</b>	<b>26.1%</b>	<b>0.1%</b>	<b>4.9%</b>	<b>2.9%</b>	<b>24.6%</b>	<b>11.3%</b>	<b>1.4%</b>	<b>20.1%</b>	<b>15.2%</b>	<b>18.5%</b>
<b>Physician Services</b>														
IP Visits	1.6%	0.5%	0.8%	0.3%	0.7%	0.2%	14.0%	8.6%	2.6%	1.1%	0.4%	0.5%	0.4%	1.9%
IP Surgery	0.6%	0.8%	0.6%	0.1%	0.2%	0.1%	0.8%	0.4%	0.6%	0.2%	0.0%	0.2%	0.2%	0.4%
Office / Home Visits	4.8%	3.4%	8.9%	0.0%	2.4%	0.0%	2.2%	16.1%	6.4%	8.8%	11.9%	11.0%	7.1%	7.1%
Preventive Exams & Immunizations	0.7%	0.4%	3.6%	0.8%	24.7%	0.6%	0.5%	6.5%	16.0%	2.3%	0.2%	3.9%	2.7%	3.5%
Urgent Care Visits	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.2%	0.0%	0.4%	0.4%	0.1%
ER Visits and Observation Care	1.2%	0.3%	2.5%	0.1%	2.8%	0.1%	0.2%	0.4%	3.8%	0.7%	0.2%	2.0%	1.4%	1.5%
OP Surgery	1.6%	3.6%	3.2%	0.0%	0.8%	0.0%	0.2%	1.8%	1.3%	0.1%	2.3%	2.3%	1.7%	2.3%
Physical Therapy	0.8%	0.5%	0.6%	0.0%	0.1%	0.0%	0.2%	0.0%	0.5%	1.6%	0.1%	1.3%	0.9%	0.8%
Psychiatric / Substance Abuse	4.3%	0.1%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	12.0%	82.1%	5.6%	4.7%	4.4%
Radiology / Pathology	1.9%	4.4%	4.6%	0.8%	12.2%	0.8%	0.4%	0.3%	2.0%	1.0%	0.2%	2.0%	2.1%	2.3%
Vision, Hearing, and Speech Exams	0.5%	0.2%	1.0%	0.0%	0.8%	0.0%	0.1%	0.2%	0.2%	1.3%	0.2%	2.1%	2.6%	1.0%
Other	4.9%	17.6%	2.9%	19.3%	2.3%	19.9%	0.9%	0.3%	1.1%	2.3%	0.2%	1.4%	1.8%	3.8%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Physician Behavioral Health Total</b>	<b>6.1%</b>	<b>0.2%</b>	<b>2.0%</b>	<b>0.0%</b>	<b>0.3%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>13.4%</b>	<b>82.1%</b>	<b>6.2%</b>	<b>5.2%</b>	<b>5.3%</b>
<b>Physician Total</b>	<b>23.2%</b>	<b>31.9%</b>	<b>30.4%</b>	<b>21.3%</b>	<b>47.5%</b>	<b>21.7%</b>	<b>18.0%</b>	<b>18.9%</b>	<b>44.9%</b>	<b>30.3%</b>	<b>84.4%</b>	<b>33.5%</b>	<b>30.4%</b>	<b>28.5%</b>
<b>Pharmacy Services</b>														
Pharmacy	29.3%	13.4%	25.6%	0.3%	12.7%	0.4%	6.2%	0.5%	11.4%	18.7%	4.6%	19.7%	24.8%	20.7%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Pharmacy Total</b>	<b>29.3%</b>	<b>13.4%</b>	<b>25.6%</b>	<b>0.3%</b>	<b>12.7%</b>	<b>0.4%</b>	<b>6.2%</b>	<b>0.5%</b>	<b>11.4%</b>	<b>18.7%</b>	<b>4.6%</b>	<b>19.7%</b>	<b>24.8%</b>	<b>20.7%</b>
<b>Dental Services</b>														
Dental	1.1%	0.3%	2.1%	0.0%	1.5%	0.0%	0.0%	0.0%	0.5%	7.6%	0.9%	15.6%	19.4%	5.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Dental Total</b>	<b>1.1%</b>	<b>0.3%</b>	<b>2.1%</b>	<b>0.0%</b>	<b>1.5%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.5%</b>	<b>7.6%</b>	<b>0.9%</b>	<b>15.6%</b>	<b>19.4%</b>	<b>5.6%</b>
<b>Other Services</b>														
Ambulance	1.1%	0.2%	1.0%	0.3%	0.9%	0.3%	0.5%	0.8%	1.1%	0.4%	0.2%	0.6%	0.4%	0.8%
Non-Emergency Transportation	1.5%	0.8%	0.8%	0.0%	0.7%	0.0%	0.4%	0.1%	0.4%	0.2%	0.0%	0.4%	0.2%	0.8%
DME	2.1%	0.6%	0.7%	0.0%	0.4%	0.0%	1.5%	0.2%	0.9%	0.9%	0.1%	0.7%	1.1%	1.2%
Glasses / Contacts	0.2%	0.1%	0.4%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.5%	0.1%	0.7%	1.0%	0.3%
Other	1.3%	0.0%	0.1%	0.0%	0.0%	0.0%	2.3%	0.0%	0.1%	0.4%	0.3%	0.1%	0.1%	0.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Other Behavioral Health Total</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.1%</b>	<b>0.1%</b>
<b>Other Total</b>	<b>6.2%</b>	<b>1.6%</b>	<b>3.0%</b>	<b>0.4%</b>	<b>2.3%</b>	<b>0.3%</b>	<b>4.7%</b>	<b>1.0%</b>	<b>2.5%</b>	<b>2.4%</b>	<b>0.7%</b>	<b>2.8%</b>	<b>2.8%</b>	<b>3.8%</b>
<b>Total Behavioral Health</b>	<b>7.7%</b>	<b>0.2%</b>	<b>2.1%</b>	<b>0.0%</b>	<b>0.4%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>36.8%</b>	<b>86.5%</b>	<b>11.9%</b>	<b>9.1%</b>	<b>8.0%</b>
<b>Grand Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

\* The MYPAC rate cell contains FFS claims from Q1 to Q3 2018 rather than the full CY 2018 period.

Exhibit 11D  
Mississippi Division of Medicaid  
Summary of CY 2018\* MississippiCAN Encounter and FFS Claims  
Summary of Utilization/1000 and Average Charge by Rate Cell

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
Utilization/1000														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	101.7	55.0	22.5	0.0	5.3	0.0	294.7	71.1	50.3	10.1	17.6	7.7	5.0	25.8
Surgical	52.4	121.1	20.7	0.0	3.8	0.1	193.9	38.6	10.2	6.5	6.6	2.7	2.0	12.7
Maternity / Deliveries	6.5	0.0	6.8	65.5	70.0	1,103.1	427.8	3,093.5	0.4	3.0	4.4	2.7	3.1	84.0
Psychiatric / Substance Abuse	52.6	0.0	16.2	0.0	4.4	0.0	0.0	0.0	0.0	82.9	449.8	9.3	8.0	16.9
Skilled Nursing Facility	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Inpatient Behavioral Health Total</b>	<b>8.6</b>	<b>0.0</b>	<b>0.2</b>	<b>0.0</b>	<b>0.2</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>53.2</b>	<b>247.9</b>	<b>6.0</b>	<b>5.0</b>	<b>6.1</b>
<b>Inpatient Facility Total</b>	<b>213.2</b>	<b>176.1</b>	<b>66.2</b>	<b>65.5</b>	<b>83.5</b>	<b>1,103.2</b>	<b>916.5</b>	<b>3,203.3</b>	<b>60.9</b>	<b>102.4</b>	<b>478.3</b>	<b>22.4</b>	<b>18.0</b>	<b>139.4</b>
<b>Pharmacy Services</b>														
Pharmacy	27,768.0	38,587.2	17,546.2	98.1	9,717.8	1,601.2	13,709.4	3,367.6	7,568.9	10,804.9	24,065.8	6,456.8	6,362.6	10,815.2
<b>Pharmacy Total</b>	<b>27,768.0</b>	<b>38,587.2</b>	<b>17,546.2</b>	<b>98.1</b>	<b>9,717.8</b>	<b>1,601.2</b>	<b>13,709.4</b>	<b>3,367.6</b>	<b>7,568.9</b>	<b>10,804.9</b>	<b>24,065.8</b>	<b>6,456.8</b>	<b>6,362.6</b>	<b>10,815.2</b>
Average Charge														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$7,434.39	\$20,820.76	\$5,675.61	\$0.00	\$5,727.33	\$0.00	\$10,924.89	\$5,948.17	\$4,751.50	\$7,105.98	\$6,615.92	\$4,919.74	\$5,762.89	\$6,550.44
Surgical	\$19,470.01	\$10,745.46	\$13,293.02	\$0.00	\$16,671.66	\$9,555.72	\$51,168.52	\$28,593.76	\$18,619.43	\$22,323.94	\$17,498.40	\$17,416.50	\$19,967.21	\$19,174.66
Maternity / Deliveries	\$6,860.26	\$0.00	\$6,552.53	\$5,818.17	\$5,543.58	\$5,225.91	\$115,327.29	\$4,703.67	\$5,630.62	\$4,730.08	\$3,709.79	\$5,347.24	\$5,006.62	\$5,695.26
Psychiatric / Substance Abuse	\$7,290.26	\$0.00	\$5,561.26	\$0.00	\$5,053.23	\$0.00	\$0.00	\$0.00	\$0.00	\$13,939.42	\$7,065.97	\$8,184.07	\$8,545.94	\$7,910.52
Skilled Nursing Facility	\$1,429.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$714.61
<b>Inpatient Behavioral Health Total</b>	<b>\$8,276.93</b>	<b>\$0.00</b>	<b>\$6,402.07</b>	<b>\$0.00</b>	<b>\$6,945.03</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$17,468.32</b>	<b>\$7,446.04</b>	<b>\$8,813.60</b>	<b>\$9,201.49</b>	<b>\$9,741.73</b>
<b>Inpatient Facility Total</b>	<b>\$10,337.62</b>	<b>\$13,893.99</b>	<b>\$8,113.90</b>	<b>\$5,818.17</b>	<b>\$6,037.22</b>	<b>\$5,226.82</b>	<b>\$68,176.74</b>	<b>\$5,019.43</b>	<b>\$7,081.17</b>	<b>\$13,534.26</b>	<b>\$7,162.23</b>	<b>\$7,800.61</b>	<b>\$8,432.48</b>	<b>\$7,350.05</b>
<b>Pharmacy Services</b>														
Pharmacy	\$119.76	\$126.56	\$70.44	\$16.69	\$66.22	\$16.74	\$427.71	\$30.18	\$40.14	\$81.03	\$80.03	\$62.36	\$79.37	\$85.33
<b>Pharmacy Total</b>	<b>\$119.76</b>	<b>\$126.56</b>	<b>\$70.44</b>	<b>\$16.69</b>	<b>\$66.22</b>	<b>\$16.74</b>	<b>\$427.71</b>	<b>\$30.18</b>	<b>\$40.14</b>	<b>\$81.03</b>	<b>\$80.03</b>	<b>\$62.36</b>	<b>\$79.37</b>	<b>\$85.33</b>

\* The MYPAC rate cell contains FFS claims from Q1 to Q3 2018 rather than the full CY 2018 period.

Exhibit 11E  
Mississippi Division of Medicaid  
Summary of CY 2019 MississippiCAN Encounter Claims  
Summary of Total Costs by Rate Cell

Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$49,048,956	\$93,607	\$5,696,101	\$4,774	\$290,622	\$0	\$1,384,220	\$2,440,819	\$4,087,342	\$395,662	\$69,248	\$8,766,093	\$647,376	\$72,914,821
Surgical	\$69,917,176	\$134,344	\$10,692,345	\$0	\$423,608	\$11,995	\$7,016,284	\$6,299,626	\$5,023,959	\$605,211	\$564,472	\$14,245,804	\$1,194,170	\$116,028,994
Maternity / Deliveries	\$2,255,061	\$0	\$1,737,145	\$16,136,004	\$3,973,247	\$62,926,649	\$22,541,756	\$95,276,289	\$522,479	\$78,494	\$33,605	\$3,831,013	\$388,667	\$209,700,410
Psychiatric / Substance Abuse	\$26,261,596	\$0	\$3,081,700	\$0	\$145,728	\$0	\$11,489	\$0	\$16,551	\$22,447,128	\$3,290,286	\$30,363,369	\$3,137,090	\$88,754,937
Skilled Nursing Facility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Missing Data	\$901	\$0	\$28,702	\$19,398	\$1,260	\$16,442	\$0	\$169,012	\$0	\$26,057	\$0	\$6,716	\$0	\$268,488
<b>Inpatient Behavioral Health Total</b>	<b>\$7,263,628</b>	<b>\$0</b>	<b>\$188,241</b>	<b>\$0</b>	<b>\$25,424</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$21,257,226</b>	<b>\$2,331,344</b>	<b>\$24,849,047</b>	<b>\$2,610,178</b>	<b>\$2,610,178</b>	<b>\$58,524,988</b>
<b>Inpatient Facility Total</b>	<b>\$147,483,689</b>	<b>\$227,951</b>	<b>\$21,135,993</b>	<b>\$16,160,176</b>	<b>\$4,834,465</b>	<b>\$62,955,087</b>	<b>\$30,953,749</b>	<b>\$104,185,746</b>	<b>\$9,650,331</b>	<b>\$23,542,551</b>	<b>\$3,967,611</b>	<b>\$24,849,047</b>	<b>\$2,610,178</b>	<b>\$487,667,649</b>
<b>Outpatient Facility Services</b>														
Emergency Room	\$28,467,029	\$34,884	\$17,397,827	\$12,061	\$5,117,500	\$40,245	\$344,227	\$1,840,069	\$7,273,334	\$735,853	\$192,379	\$37,237,670	\$2,797,528	\$101,490,605
Urgent Care	\$173	\$0	\$103	\$0	\$0	\$0	\$0	\$0	\$1,351	\$0	\$0	\$2,171	\$192	\$3,990
Radiology / Pathology	\$24,538,892	\$396,253	\$10,779,802	\$5,867	\$3,750,480	\$27,745	\$187,279	\$710,413	\$2,364,271	\$435,073	\$90,570	\$15,222,433	\$1,566,005	\$60,075,083
Psychiatric / Alcohol & Drug Abuse	\$6,036,510	\$0	\$1,862	\$0	\$0	\$0	\$0	\$0	\$0	\$958,661	\$7,264	\$14,886,062	\$927,553	\$22,817,911
Pharmacy	\$36,791,153	\$1,111,201	\$5,867,515	\$6,622	\$1,645,719	\$27,379	\$35,077	\$109,766	\$372,728	\$53,810	\$11,848	\$5,090,180	\$579,933	\$51,702,932
Other	\$62,147,002	\$307,765	\$21,160,888	\$32,169	\$5,356,824	\$95,753	\$869,263	\$1,352,154	\$4,726,551	\$1,237,456	\$114,452	\$37,277,488	\$3,173,802	\$137,851,568
Missing Data	\$57,075	\$0	\$23,481	\$14	\$34,460	\$261	\$57	\$28	\$1,226	\$104	\$0	\$14,122	\$169	\$130,997
<b>Outpatient Behavioral Health Total</b>	<b>\$6,081,195</b>	<b>\$0</b>	<b>\$1,722</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$960,774</b>	<b>\$7,423</b>	<b>\$14,957,416</b>	<b>\$932,732</b>	<b>\$22,941,262</b>	
<b>Outpatient Facility Total</b>	<b>\$158,037,834</b>	<b>\$1,850,103</b>	<b>\$55,231,478</b>	<b>\$56,733</b>	<b>\$15,904,982</b>	<b>\$191,383</b>	<b>\$1,435,903</b>	<b>\$4,012,431</b>	<b>\$14,739,463</b>	<b>\$3,420,956</b>	<b>\$416,512</b>	<b>\$109,730,127</b>	<b>\$9,045,181</b>	<b>\$374,073,086</b>
<b>Physician Services</b>														
IP Visits	\$12,735,356	\$12,184	\$1,624,765	\$46,674	\$352,803	\$190,485	\$7,373,070	\$11,828,265	\$1,875,115	\$377,959	\$166,445	\$2,718,673	\$210,103	\$39,511,897
IP Surgery	\$4,934,763	\$27,264	\$1,149,585	\$36,341	\$115,445	\$83,905	\$439,383	\$496,311	\$330,372	\$43,634	\$29,965	\$1,351,492	\$136,756	\$9,175,215
Office / Home Visits	\$35,414,626	\$123,452	\$18,076,527	\$437	\$1,423,904	\$3,358	\$431,054	\$3,008,137	\$9,451,806	\$2,154,300	\$241,654	\$68,030,028	\$6,823,981	\$145,183,262
Preventive Exams & Immunizations	\$4,812,262	\$12,092	\$7,139,031	\$165,458	\$14,104,940	\$474,677	\$220,184	\$8,377,947	\$9,220,359	\$729,482	\$72,326	\$21,675,379	\$1,611,657	\$68,615,793
Urgent Care Visits	\$311,680	\$328	\$492,612	\$0	\$46,952	\$0	\$1,538	\$2,664	\$125,828	\$81,436	\$6,718	\$2,502,109	\$273,479	\$3,845,343
ER Visits and Observation Care	\$8,973,379	\$12,448	\$5,228,836	\$17,757	\$1,687,160	\$68,918	\$112,620	\$587,489	\$2,213,469	\$230,813	\$64,492	\$11,467,520	\$849,875	\$31,514,774
OP Surgery	\$11,830,790	\$90,957	\$6,180,337	\$2,269	\$446,410	\$3,473	\$132,470	\$213,296	\$1,032,759	\$457,798	\$41,199	\$12,405,290	\$1,210,666	\$34,047,714
Physical Therapy	\$6,798,634	\$5,719	\$1,109,538	\$0	\$26,735	\$0	\$199,541	\$3,936	\$285,003	\$549,010	\$43,965	\$6,861,486	\$533,781	\$16,417,346
Psychiatric / Substance Abuse	\$31,733,693	\$3,700	\$3,108,629	\$575	\$169,637	\$538	\$113	\$1,555	\$477	\$3,843,569	\$21,336,734	\$31,392,413	\$3,021,992	\$94,613,624
Radiology / Pathology	\$13,726,173	\$138,649	\$9,133,239	\$152,508	\$7,083,465	\$557,542	\$205,024	\$477,032	\$1,651,171	\$377,897	\$66,289	\$13,326,825	\$1,447,394	\$48,343,209
Vision, Hearing, and Speech Exams	\$3,778,979	\$6,518	\$2,048,567	\$0	\$433,688	\$0	\$34,673	\$21,327	\$90,609	\$405,072	\$43,626	\$10,862,569	\$1,472,382	\$19,198,011
Other	\$35,628,709	\$774,615	\$5,413,444	\$3,877,530	\$1,236,251	\$15,701,192	\$715,131	\$481,988	\$804,879	\$1,018,501	\$85,231	\$7,552,275	\$1,715,893	\$75,005,639
Missing Data	\$37,990	\$0	\$11,588	\$677	\$558	\$388	\$0	\$210	\$1,522	\$4,435	\$498	\$43,141	\$4,256	\$105,264
<b>Physician Behavioral Health Total</b>	<b>\$36,073,150</b>	<b>\$4,952</b>	<b>\$3,781,353</b>	<b>\$423</b>	<b>\$197,451</b>	<b>\$712</b>	<b>\$2,487</b>	<b>\$9,113</b>	<b>\$70,617</b>	<b>\$4,243,636</b>	<b>\$21,367,713</b>	<b>\$34,892,907</b>	<b>\$3,374,708</b>	<b>\$104,009,220</b>
<b>Physician Total</b>	<b>\$170,717,035</b>	<b>\$1,207,925</b>	<b>\$60,716,697</b>	<b>\$4,300,224</b>	<b>\$27,127,947</b>	<b>\$17,084,477</b>	<b>\$9,864,800</b>	<b>\$25,500,158</b>	<b>\$27,083,369</b>	<b>\$10,273,904</b>	<b>\$22,199,141</b>	<b>\$190,189,200</b>	<b>\$19,312,214</b>	<b>\$585,577,092</b>
<b>Pharmacy Services</b>														
Pharmacy	\$236,660,714	\$627,794	\$56,566,654	\$79,816	\$7,075,967	\$317,743	\$3,717,886	\$669,632	\$6,016,033	\$5,836,415	\$1,276,733	\$106,880,645	\$14,449,149	\$440,175,181
Missing Data	\$89,566	\$12	\$15,168	\$18	\$2,163	\$89	\$157	\$512	\$7,817	\$101	\$463	\$33,330	\$9,003	\$158,501
<b>Pharmacy Total</b>	<b>\$236,750,280</b>	<b>\$627,806</b>	<b>\$56,581,822</b>	<b>\$79,834</b>	<b>\$7,078,131</b>	<b>\$317,833</b>	<b>\$3,718,043</b>	<b>\$670,244</b>	<b>\$6,023,850</b>	<b>\$5,836,516</b>	<b>\$1,277,196</b>	<b>\$106,913,975</b>	<b>\$14,458,152</b>	<b>\$440,333,682</b>
<b>Dental Services</b>														
Dental	\$7,166,959	\$9,718	\$3,443,218	\$323	\$686,206	\$324	\$4,494	\$49,420	\$249,559	\$2,145,298	\$245,929	\$79,120,267	\$10,862,854	\$103,984,570
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$328	\$328
<b>Dental Total</b>	<b>\$7,166,959</b>	<b>\$9,718</b>	<b>\$3,443,218</b>	<b>\$323</b>	<b>\$686,206</b>	<b>\$324</b>	<b>\$4,494</b>	<b>\$49,420</b>	<b>\$249,559</b>	<b>\$2,145,298</b>	<b>\$245,929</b>	<b>\$79,120,267</b>	<b>\$10,863,182</b>	<b>\$103,984,898</b>
<b>Other Services</b>														
Ambulance	\$7,843,235	\$4,994	\$1,817,679	\$86,109	\$537,961	\$188,481	\$235,937	\$858,893	\$581,810	\$118,720	\$75,076	\$3,304,100	\$257,947	\$15,910,940
Non-Emergency Transportation	\$10,482,618	\$24,320	\$1,491,484	\$4,922	\$323,884	\$9,259	\$186,284	\$68,031	\$180,461	\$45,797	\$29,433	\$1,918,173	\$83,973	\$14,848,640
DME	\$18,322,669	\$17,247	\$1,983,188	\$1,066	\$239,677	\$5,096	\$637,979	\$166,909	\$590,534	\$417,109	\$20,596	\$5,104,971	\$848,289	\$28,355,329
Glasses / Contacts	\$1,192,871	\$1,942	\$721,485	\$0	\$167,646	\$105	\$947	\$0	\$1,568	\$155,979	\$19,245	\$3,962,384	\$580,960	\$6,805,132
Other	\$9,668,055	\$496	\$184,631	\$0	\$3,969	\$0	\$615,277	\$8,444	\$7,571	\$221,302	\$2,382	\$892,500	\$79,861	\$11,884,489
Missing Data	\$12,274	\$0	\$394	\$4	\$0	\$0	\$0	\$0	\$0	\$37	\$0	\$12,364	\$0	\$25,073
<b>Other Behavioral Health Total</b>	<b>\$592,014</b>	<b>\$160</b>	<b>\$61,186</b>	<b>\$0</b>	<b>\$2,098</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$26,134</b>	<b>\$2,346</b>	<b>\$450,188</b>	<b>\$52,519</b>	<b>\$1,186,644</b>	
<b>Other Total</b>	<b>\$47,521,722</b>	<b>\$48,999</b>	<b>\$6,198,861</b>	<b>\$92,100</b>	<b>\$1,273,137</b>	<b>\$202,941</b>	<b>\$1,676,424</b>	<b>\$1,102,277</b>	<b>\$1,361,943</b>	<b>\$958,944</b>	<b>\$146,732</b>	<b>\$15,194,493</b>	<b>\$1,851,030</b>	<b>\$77,629,604</b>
<b>Total Behavioral Health</b>	<b>\$50,009,887</b>	<b>\$5,111</b>	<b>\$4,032,501</b>	<b>\$423</b>	<b>\$224,973</b>	<b>\$712</b>	<b>\$2,487</b>	<b>\$9,113</b>	<b>\$70,617</b>	<b>\$26,487,770</b>	<b>\$23,698,826</b>	<b>\$75,149,558</b>	<b>\$6,370,136</b>	<b>\$186,662,114</b>
<b>Grand Total</b>	<b>\$767,677,519</b>	<b>\$3,972,503</b>	<b>\$203,308,069</b>	<b>\$20,689,391</b>	<b>\$56,904,869</b>	<b>\$80,752,044</b>	<b>\$47,653,414</b>	<b>\$135,520,276</b>	<b>\$59,108,516</b>	<b>\$46,178,169</b>	<b>\$28,243,122</b>	<b>\$558,361,057</b>	<b>\$60,897,062</b>	<b>\$2,069,266,011</b>

Exhibit 11F  
Mississippi Division of Medicaid  
Summary of CY 2019 MississippiCAN Encounter Claims  
Summary of Allowed PMPM by Rate Cell

Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
PMPM Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$64.07	\$78.86	\$11.54	\$0.01	\$2.12	\$0.00	\$218.33	\$32.41	\$16.18	\$4.89	\$8.91	\$2.85	\$1.95	\$13.96
Surgical	\$91.33	\$113.18	\$21.45	\$0.00	\$3.09	\$0.09	\$1,106.67	\$83.65	\$19.88	\$7.67	\$72.59	\$4.64	\$3.59	\$22.21
Maternity / Deliveries	\$2.95	\$0.00	\$3.52	\$32.68	\$28.95	\$458.57	\$3,555.48	\$1,265.09	\$2.07	\$0.99	\$4.32	\$1.25	\$1.17	\$40.15
Psychiatric / Substance Abuse	\$34.30	\$0.00	\$6.24	\$0.00	\$1.06	\$0.00	\$1.81	\$0.00	\$0.07	\$284.49	\$423.13	\$9.88	\$9.43	\$16.99
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.00	\$0.00	\$0.06	\$0.04	\$0.01	\$0.12	\$0.00	\$2.24	\$0.00	\$0.33	\$0.00	\$0.00	\$0.00	\$0.05
<b>Inpatient Behavioral Health Total</b>	<b>\$9.49</b>	<b>\$0.00</b>	<b>\$0.38</b>	<b>\$0.00</b>	<b>\$0.19</b>	<b>\$0.00</b>	<b>\$4.80</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$269.41</b>	<b>\$299.81</b>	<b>\$8.09</b>	<b>\$7.85</b>	<b>\$11.20</b>
<b>Inpatient Facility Total</b>	<b>\$192.65</b>	<b>\$192.04</b>	<b>\$42.80</b>	<b>\$32.73</b>	<b>\$35.23</b>	<b>\$458.78</b>	<b>\$4,882.29</b>	<b>\$1,383.39</b>	<b>\$38.19</b>	<b>\$298.37</b>	<b>\$508.95</b>	<b>\$18.62</b>	<b>\$16.14</b>	<b>\$93.36</b>
<b>Outpatient Facility Services</b>														
Emergency Room	\$37.18	\$29.39	\$35.23	\$0.02	\$37.29	\$0.29	\$54.29	\$24.43	\$28.79	\$9.33	\$24.74	\$12.12	\$8.41	\$19.43
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$32.05	\$333.83	\$21.83	\$0.01	\$27.33	\$0.20	\$29.54	\$9.43	\$9.36	\$5.51	\$11.65	\$4.96	\$4.71	\$11.50
Psychiatric / Alcohol & Drug Abuse	\$7.89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.15	\$0.93	\$4.85	\$2.79	\$4.37
Pharmacy	\$48.06	\$936.14	\$11.88	\$0.01	\$11.99	\$0.20	\$5.53	\$1.46	\$1.48	\$0.68	\$1.52	\$1.66	\$1.74	\$9.90
Other	\$81.18	\$259.28	\$42.85	\$0.07	\$39.04	\$0.70	\$137.11	\$17.95	\$18.71	\$15.68	\$14.72	\$12.13	\$9.54	\$26.39
Missing Data	\$0.07	\$0.00	\$0.05	\$0.00	\$0.25	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.03
<b>Outpatient Behavioral Health Total</b>	<b>\$7.94</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$12.18</b>	<b>\$0.95</b>	<b>\$4.87</b>	<b>\$2.81</b>	<b>\$4.39</b>
<b>Outpatient Facility Total</b>	<b>\$206.43</b>	<b>\$1,558.64</b>	<b>\$111.85</b>	<b>\$0.11</b>	<b>\$115.91</b>	<b>\$1.39</b>	<b>\$226.48</b>	<b>\$53.28</b>	<b>\$58.34</b>	<b>\$43.36</b>	<b>\$53.56</b>	<b>\$35.72</b>	<b>\$27.20</b>	<b>\$71.62</b>
<b>Physician Services</b>														
IP Visits	\$16.64	\$10.26	\$3.29	\$0.09	\$2.57	\$1.39	\$1,162.94	\$157.06	\$7.42	\$4.79	\$21.41	\$0.88	\$0.63	\$7.56
IP Surgery	\$6.45	\$22.97	\$2.33	\$0.07	\$0.84	\$0.61	\$69.30	\$6.59	\$1.31	\$0.55	\$3.85	\$0.44	\$0.41	\$1.76
Office / Home Visits	\$46.26	\$104.00	\$36.61	\$0.00	\$10.38	\$0.02	\$67.99	\$39.94	\$37.41	\$27.30	\$31.08	\$22.15	\$20.52	\$27.80
Preventive Exams & Immunizations	\$6.29	\$10.19	\$14.46	\$0.34	\$102.79	\$3.46	\$34.73	\$111.24	\$36.49	\$9.25	\$9.30	\$7.06	\$4.85	\$13.14
Urgent Care Visits	\$0.41	\$0.28	\$1.00	\$0.00	\$0.34	\$0.00	\$0.24	\$0.04	\$0.50	\$1.03	\$0.86	\$0.81	\$0.82	\$0.74
ER Visits and Observation Care	\$11.72	\$10.49	\$10.59	\$0.04	\$12.29	\$0.50	\$17.76	\$7.80	\$8.76	\$2.93	\$8.29	\$3.73	\$2.56	\$6.03
OP Surgery	\$15.45	\$76.63	\$12.52	\$0.00	\$3.25	\$0.03	\$20.89	\$2.83	\$4.09	\$5.80	\$5.30	\$4.04	\$3.64	\$6.52
Physical Therapy	\$8.88	\$4.82	\$2.25	\$0.00	\$0.19	\$0.00	\$31.47	\$0.05	\$1.13	\$6.96	\$5.65	\$2.23	\$1.61	\$3.14
Psychiatric / Substance Abuse	\$41.45	\$3.12	\$6.30	\$0.00	\$1.24	\$0.00	\$0.02	\$0.32	\$0.00	\$48.71	\$2,743.92	\$10.22	\$9.09	\$18.11
Radiology / Pathology	\$17.93	\$116.81	\$18.50	\$0.31	\$51.62	\$4.06	\$32.34	\$6.33	\$6.53	\$4.79	\$8.52	\$4.34	\$4.35	\$9.26
Vision, Hearing, and Speech Exams	\$4.94	\$5.49	\$4.15	\$0.00	\$3.16	\$0.00	\$5.47	\$0.28	\$0.36	\$5.13	\$5.61	\$3.54	\$4.43	\$3.68
Other	\$46.54	\$652.58	\$10.96	\$7.85	\$9.01	\$114.42	\$112.80	\$6.40	\$3.19	\$12.91	\$10.96	\$2.46	\$5.16	\$14.36
Missing Data	\$0.05	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.06	\$0.00	\$0.01	\$0.01	\$0.02
<b>Physician Behavioral Health Total</b>	<b>\$47.12</b>	<b>\$4.17</b>	<b>\$7.66</b>	<b>\$0.00</b>	<b>\$1.44</b>	<b>\$0.01</b>	<b>\$0.39</b>	<b>\$0.12</b>	<b>\$0.28</b>	<b>\$63.78</b>	<b>\$2,746.62</b>	<b>\$11.36</b>	<b>\$10.15</b>	<b>\$19.91</b>
<b>Physician Total</b>	<b>\$223.00</b>	<b>\$1,017.63</b>	<b>\$122.96</b>	<b>\$8.71</b>	<b>\$197.69</b>	<b>\$124.50</b>	<b>\$1,555.96</b>	<b>\$338.59</b>	<b>\$107.19</b>	<b>\$130.21</b>	<b>\$2,854.83</b>	<b>\$61.91</b>	<b>\$58.08</b>	<b>\$112.11</b>
<b>Pharmacy Services</b>														
Pharmacy	\$309.13	\$528.89	\$114.56	\$0.16	\$51.57	\$2.32	\$586.42	\$6.89	\$23.81	\$73.97	\$164.19	\$34.79	\$43.45	\$84.27
Missing Data	\$0.12	\$0.01	\$0.03	\$0.00	\$0.02	\$0.00	\$0.02	\$0.01	\$0.03	\$0.00	\$0.06	\$0.01	\$0.03	\$0.03
<b>Pharmacy Total</b>	<b>\$309.25</b>	<b>\$528.90</b>	<b>\$114.59</b>	<b>\$0.16</b>	<b>\$51.58</b>	<b>\$2.32</b>	<b>\$586.44</b>	<b>\$6.90</b>	<b>\$23.84</b>	<b>\$73.97</b>	<b>\$164.25</b>	<b>\$34.80</b>	<b>\$43.48</b>	<b>\$84.30</b>
<b>Dental Services</b>														
Dental	\$9.36	\$8.19	\$6.97	\$0.00	\$5.00	\$0.00	\$0.71	\$0.66	\$0.99	\$27.19	\$31.63	\$25.76	\$32.67	\$19.91
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Dental Total</b>	<b>\$9.36</b>	<b>\$8.19</b>	<b>\$6.97</b>	<b>\$0.00</b>	<b>\$5.00</b>	<b>\$0.00</b>	<b>\$0.71</b>	<b>\$0.66</b>	<b>\$0.99</b>	<b>\$27.19</b>	<b>\$31.63</b>	<b>\$25.76</b>	<b>\$32.67</b>	<b>\$19.91</b>
<b>Other Services</b>														
Ambulance	\$10.25	\$4.21	\$3.68	\$0.17	\$3.92	\$1.37	\$37.21	\$11.40	\$2.30	\$1.50	\$9.65	\$1.08	\$0.78	\$3.05
Non-Emergency Transportation	\$13.69	\$20.49	\$3.02	\$0.01	\$2.36	\$0.07	\$29.38	\$0.90	\$0.71	\$0.58	\$3.79	\$0.62	\$0.25	\$2.84
DME	\$23.93	\$14.53	\$4.02	\$0.00	\$1.75	\$0.04	\$100.63	\$2.22	\$2.34	\$5.29	\$2.65	\$1.66	\$2.55	\$5.43
Glasses / Contacts	\$1.56	\$1.64	\$1.46	\$0.00	\$1.22	\$0.00	\$0.15	\$0.00	\$0.01	\$1.98	\$2.47	\$1.29	\$1.75	\$1.30
Other	\$12.63	\$0.42	\$0.37	\$0.00	\$0.03	\$0.00	\$97.05	\$0.11	\$0.03	\$2.80	\$0.31	\$0.29	\$0.24	\$2.24
Missing Data	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Other Behavioral Health Total</b>	<b>\$0.77</b>	<b>\$0.13</b>	<b>\$0.12</b>	<b>\$0.00</b>	<b>\$0.02</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.33</b>	<b>\$0.30</b>	<b>\$0.15</b>	<b>\$0.16</b>	<b>\$0.23</b>
<b>Other Total</b>	<b>\$62.07</b>	<b>\$41.28</b>	<b>\$12.55</b>	<b>\$0.19</b>	<b>\$9.28</b>	<b>\$1.48</b>	<b>\$264.42</b>	<b>\$14.64</b>	<b>\$5.39</b>	<b>\$12.15</b>	<b>\$18.87</b>	<b>\$4.95</b>	<b>\$5.57</b>	<b>\$14.86</b>
<b>Total Behavioral Health</b>	<b>\$65.32</b>	<b>\$4.31</b>	<b>\$8.17</b>	<b>\$0.00</b>	<b>\$1.64</b>	<b>\$0.01</b>	<b>\$0.39</b>	<b>\$0.12</b>	<b>\$0.28</b>	<b>\$335.70</b>	<b>\$3,047.69</b>	<b>\$24.46</b>	<b>\$20.96</b>	<b>\$35.74</b>
<b>Grand Total</b>	<b>\$1,002.77</b>	<b>\$3,346.67</b>	<b>\$411.74</b>	<b>\$41.90</b>	<b>\$414.69</b>	<b>\$588.47</b>	<b>\$7,616.31</b>	<b>\$1,799.45</b>	<b>\$233.94</b>	<b>\$585.24</b>	<b>\$3,632.09</b>	<b>\$181.76</b>	<b>\$183.14</b>	<b>\$396.16</b>

Exhibit 11G  
Mississippi Division of Medicaid  
Summary of CY 2019 MississippiCAN Encounter Claims  
Summary of Total Costs by Rate Cell

Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
% of Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	6.4%	2.4%	2.8%	0.0%	0.5%	0.0%	2.9%	1.8%	6.9%	0.8%	0.2%	1.6%	1.1%	3.5%
Surgical	9.1%	3.4%	5.2%	0.0%	0.7%	0.0%	14.7%	4.6%	8.5%	1.3%	2.0%	2.6%	2.0%	5.6%
Maternity / Deliveries	0.3%	0.0%	0.9%	78.0%	7.0%	77.9%	47.3%	70.3%	0.9%	0.2%	0.1%	0.7%	0.6%	10.1%
Psychiatric / Substance Abuse	3.4%	0.0%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	48.6%	11.6%	5.4%	5.2%	4.3%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
<b>Inpatient Behavioral Health Total</b>	<b>0.9%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>46.0%</b>	<b>8.3%</b>	<b>4.5%</b>	<b>4.3%</b>	<b>2.8%</b>
<b>Inpatient Facility Total</b>	<b>19.2%</b>	<b>5.7%</b>	<b>10.4%</b>	<b>78.1%</b>	<b>8.5%</b>	<b>78.0%</b>	<b>65.0%</b>	<b>76.9%</b>	<b>16.3%</b>	<b>51.0%</b>	<b>14.0%</b>	<b>10.2%</b>	<b>8.8%</b>	<b>23.6%</b>
<b>Outpatient Facility Services</b>														
Emergency Room	3.7%	0.9%	8.6%	0.1%	9.0%	0.0%	0.7%	1.4%	12.3%	1.6%	0.7%	6.7%	4.6%	4.9%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.2%	10.0%	5.3%	0.0%	6.6%	0.0%	0.4%	0.5%	4.0%	0.9%	0.3%	2.7%	2.6%	2.9%
Psychiatric / Alcohol & Drug Abuse	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.1%	0.0%	2.7%	1.5%	1.1%
Pharmacy	4.8%	28.0%	2.9%	0.0%	2.9%	0.0%	0.1%	0.1%	0.6%	0.1%	0.0%	0.9%	1.0%	2.5%
Other	8.1%	7.7%	10.4%	0.2%	9.4%	0.1%	1.8%	1.0%	8.0%	2.7%	0.4%	6.7%	5.2%	6.7%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Outpatient Behavioral Health Total</b>	<b>0.8%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>2.1%</b>	<b>0.0%</b>	<b>2.7%</b>	<b>1.5%</b>	<b>1.1%</b>
<b>Outpatient Facility Total</b>	<b>20.6%</b>	<b>46.6%</b>	<b>27.2%</b>	<b>0.3%</b>	<b>28.0%</b>	<b>0.2%</b>	<b>3.0%</b>	<b>3.0%</b>	<b>24.9%</b>	<b>7.4%</b>	<b>1.5%</b>	<b>19.7%</b>	<b>14.9%</b>	<b>18.1%</b>
<b>Physician Services</b>														
IP Visits	1.7%	0.3%	0.8%	0.2%	0.6%	0.2%	15.5%	8.7%	3.2%	0.8%	0.6%	0.5%	0.3%	1.9%
IP Surgery	0.6%	0.7%	0.6%	0.2%	0.2%	0.1%	0.9%	0.4%	0.6%	0.1%	0.1%	0.2%	0.0%	0.4%
Office / Home Visits	4.6%	3.1%	8.9%	0.0%	2.5%	0.0%	0.9%	2.2%	16.0%	4.7%	0.9%	12.2%	11.2%	7.0%
Preventive Exams & Immunizations	0.6%	0.3%	3.5%	0.8%	24.8%	0.6%	0.5%	6.2%	15.6%	1.6%	0.3%	3.9%	2.6%	3.3%
Urgent Care Visits	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.2%	0.0%	0.4%	0.4%	0.2%
ER Visits and Observation Care	1.2%	0.3%	2.6%	0.1%	3.0%	0.1%	0.2%	0.4%	3.7%	0.5%	0.2%	2.1%	1.4%	1.5%
OP Surgery	1.5%	2.3%	3.0%	0.0%	0.8%	0.0%	0.3%	0.2%	1.7%	1.0%	0.1%	2.2%	2.0%	1.6%
Physical Therapy	0.9%	0.1%	0.5%	0.0%	0.0%	0.0%	0.4%	0.0%	0.5%	1.2%	0.2%	1.2%	0.9%	0.8%
Psychiatric / Substance Abuse	4.1%	0.1%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	8.3%	75.5%	5.6%	5.0%	4.6%
Radiology / Pathology	1.8%	3.5%	4.5%	0.7%	12.4%	0.7%	0.4%	0.4%	2.8%	0.8%	0.2%	2.4%	2.4%	2.3%
Vision, Hearing, and Speech Exams	0.5%	0.2%	1.0%	0.0%	0.8%	0.0%	0.1%	0.0%	0.2%	0.9%	0.2%	1.9%	2.4%	0.9%
Other	4.6%	19.5%	2.7%	18.7%	2.2%	19.4%	1.5%	0.4%	1.4%	2.2%	0.3%	1.4%	2.8%	3.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Physician Behavioral Health Total</b>	<b>4.7%</b>	<b>0.1%</b>	<b>1.9%</b>	<b>0.0%</b>	<b>0.3%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>9.2%</b>	<b>75.6%</b>	<b>6.2%</b>	<b>5.5%</b>	<b>5.0%</b>
<b>Physician Total</b>	<b>22.2%</b>	<b>30.4%</b>	<b>29.9%</b>	<b>20.8%</b>	<b>47.7%</b>	<b>21.2%</b>	<b>20.7%</b>	<b>18.8%</b>	<b>45.8%</b>	<b>22.2%</b>	<b>78.6%</b>	<b>34.1%</b>	<b>31.7%</b>	<b>28.3%</b>
<b>Pharmacy Services</b>														
Pharmacy	30.8%	15.8%	27.8%	0.4%	12.4%	0.4%	7.8%	0.5%	10.2%	12.6%	4.5%	19.1%	23.7%	21.3%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Pharmacy Total</b>	<b>30.8%</b>	<b>15.8%</b>	<b>27.8%</b>	<b>0.4%</b>	<b>12.4%</b>	<b>0.4%</b>	<b>7.8%</b>	<b>0.5%</b>	<b>10.2%</b>	<b>12.6%</b>	<b>4.5%</b>	<b>19.1%</b>	<b>23.7%</b>	<b>21.3%</b>
<b>Dental Services</b>														
Dental	0.9%	0.2%	1.7%	0.0%	1.2%	0.0%	0.0%	0.0%	0.4%	4.6%	0.9%	14.2%	17.8%	5.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Dental Total</b>	<b>0.9%</b>	<b>0.2%</b>	<b>1.7%</b>	<b>0.0%</b>	<b>1.2%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.4%</b>	<b>4.6%</b>	<b>0.9%</b>	<b>14.2%</b>	<b>17.8%</b>	<b>5.0%</b>
<b>Other Services</b>														
Ambulance	1.0%	0.1%	0.9%	0.4%	0.9%	0.2%	0.5%	0.6%	1.0%	0.3%	0.3%	0.6%	0.4%	0.8%
Non-Emergency Transportation	1.4%	0.6%	0.7%	0.0%	0.6%	0.0%	0.4%	0.1%	0.3%	0.1%	0.1%	0.3%	0.1%	0.7%
DME	2.4%	0.4%	1.0%	0.0%	0.4%	0.0%	1.3%	0.1%	1.0%	0.9%	0.1%	0.9%	1.4%	1.4%
Glasses / Contacts	0.2%	0.0%	0.4%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.3%	0.1%	0.7%	1.0%	0.3%
Other	1.3%	0.0%	0.1%	0.0%	0.0%	0.0%	1.3%	0.0%	0.0%	0.5%	0.0%	0.2%	0.1%	0.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
<b>Other Behavioral Health Total</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>0.1%</b>	<b>0.1%</b>
<b>Other Total</b>	<b>6.2%</b>	<b>1.2%</b>	<b>3.0%</b>	<b>0.4%</b>	<b>2.2%</b>	<b>0.3%</b>	<b>3.5%</b>	<b>0.8%</b>	<b>2.3%</b>	<b>2.1%</b>	<b>0.5%</b>	<b>2.7%</b>	<b>3.0%</b>	<b>3.8%</b>
<b>Total Behavioral Health</b>	<b>6.5%</b>	<b>0.1%</b>	<b>2.0%</b>	<b>0.0%</b>	<b>0.4%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>	<b>0.1%</b>	<b>57.4%</b>	<b>83.9%</b>	<b>13.5%</b>	<b>11.4%</b>	<b>9.0%</b>
<b>Grand Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

Exhibit 11H  
Mississippi Division of Medicaid  
Summary of CY 2019 MississippiCAN Encounter Claims  
Summary of Utilization/1000 and Average Charge by Rate Cell

Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
Utilization/1000														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	102.7	131.4	24.7	0.0	4.9	0.0	314.2	66.1	44.2	8.7	15.4	7.2	4.3	25.7
Surgical	56.6	121.3	19.4	0.0	3.1	0.1	215.6	42.2	9.8	4.7	1.5	2.9	2.8	13.6
Maternity / Deliveries	5.8	0.0	8.5	74.2	77.4	1,128.5	353.9	3,508.1	0.6	1.8	6.2	3.2	3.0	93.5
Psychiatric / Substance Abuse	62.3	0.0	16.5	0.0	2.7	0.0	1.9	0.0	0.0	140.7	564.8	13.1	11.1	22.1
Skilled Nursing Facility	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>Inpatient Behavioral Health Total</b>	<b>13.1</b>	<b>0.0</b>	<b>0.9</b>	<b>0.0</b>	<b>0.3</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>113.8</b>	<b>392.0</b>	<b>9.7</b>	<b>8.2</b>	<b>10.5</b>
<b>Inpatient Facility Total</b>	<b>227.4</b>	<b>252.7</b>	<b>69.1</b>	<b>74.2</b>	<b>88.1</b>	<b>1,128.6</b>	<b>885.8</b>	<b>3,616.5</b>	<b>54.7</b>	<b>155.9</b>	<b>588.0</b>	<b>26.4</b>	<b>21.2</b>	<b>154.9</b>
<b>Pharmacy Services</b>														
Pharmacy	27,488.8	38,527.4	17,401.4	108.5	9,423.1	1,582.7	13,487.7	3,428.6	7,366.1	11,538.7	26,095.7	6,779.4	6,712.0	11,032.0
<b>Pharmacy Total</b>	<b>27,488.8</b>	<b>38,527.4</b>	<b>17,401.4</b>	<b>108.5</b>	<b>9,423.1</b>	<b>1,582.7</b>	<b>13,487.7</b>	<b>3,428.6</b>	<b>7,366.1</b>	<b>11,538.7</b>	<b>26,095.7</b>	<b>6,779.4</b>	<b>6,712.0</b>	<b>11,032.0</b>
Average Charge														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
<b>Inpatient Facility Services</b>														
Medical	\$7,484.96	\$7,200.57	\$5,606.40	\$4,774.06	\$5,189.68	\$0.00	\$8,338.68	\$5,881.49	\$4,390.27	\$6,765.99	\$6,924.79	\$4,759.01	\$5,440.14	\$6,522.48
Surgical	\$19,373.01	\$11,195.33	\$13,240.43	\$0.00	\$12,103.07	\$11,995.12	\$61,546.35	\$23,772.17	\$24,270.33	\$19,522.92	\$564,472.15	\$18,994.41	\$15,508.70	\$19,659.27
Maternity / Deliveries	\$6,111.28	\$0.00	\$4,977.49	\$5,287.03	\$4,489.55	\$4,876.14	\$120,544.15	\$4,327.40	\$40,190.67	\$6,541.16	\$8,401.31	\$4,729.65	\$4,626.99	\$5,153.99
Psychiatric / Substance Abuse	\$6,603.37	\$0.00	\$4,551.99	\$0.00	\$4,700.91	\$0.00	\$11,488.65	\$0.00	\$16,550.98	\$24,267.17	\$8,989.85	\$9,058.28	\$10,185.36	\$9,206.85
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Inpatient Behavioral Health Total</b>	<b>\$8,698.84</b>	<b>\$0.00</b>	<b>\$5,228.91</b>	<b>\$0.00</b>	<b>\$6,356.05</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$28,418.75</b>	<b>\$9,178.52</b>	<b>\$10,027.86</b>	<b>\$11,549.46</b>	<b>\$12,775.59</b>
<b>Inpatient Facility Total</b>	<b>\$10,165.68</b>	<b>\$9,118.05</b>	<b>\$7,437.01</b>	<b>\$5,293.21</b>	<b>\$4,800.86</b>	<b>\$4,877.97</b>	<b>\$66,140.49</b>	<b>\$4,690.29</b>	<b>\$8,377.02</b>	<b>\$22,968.34</b>	<b>\$10,387.43</b>	<b>\$8,470.98</b>	<b>\$9,128.07</b>	<b>\$7,234.78</b>
<b>Pharmacy Services</b>														
Pharmacy	\$134.95	\$164.73	\$79.00	\$17.88	\$65.67	\$17.56	\$521.74	\$31.12	\$38.79	\$76.93	\$75.50	\$61.58	\$77.69	\$91.67
<b>Pharmacy Total</b>	<b>\$135.00</b>	<b>\$164.74</b>	<b>\$79.02</b>	<b>\$17.88</b>	<b>\$65.69</b>	<b>\$17.56</b>	<b>\$521.76</b>	<b>\$31.15</b>	<b>\$38.84</b>	<b>\$76.93</b>	<b>\$75.53</b>	<b>\$61.60</b>	<b>\$77.74</b>	<b>\$91.70</b>

Exhibit 12  
Mississippi Division of Medicaid  
Encounter Data - 5% Assessment Categories

COS	COS Description	Rendering Provider Code	Rendering Provider Type Description	Mapped Broad Category of Service	Percent of Total 2018 Allowed in COS and Rendering Provider	Percent of Total 2019 Allowed in COS and Rendering Provider
03	LABORATORY AND RADIOLOGY	B00	INDEPENDENT LAB	Physician	0.41%	0.22%
05	PHYSICIAN	A08	CHIROPRACTOR	Physician	0.03%	0.01%
05	PHYSICIAN	A09	PODIATRIST	Physician, Other	0.07%	0.03%
06	HOME & COMM BASED SERVICES	L00	HHA UNCLASSIFIED	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	L02	HHA HOSPITAL BASED PROGRAM	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W01	PERSONAL CARE SERVICES	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W03	RESPIRE CARE, IN HOME	Other	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W04	ADULT DAY CARE	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	WC0	ASSISTED LIVING SERVICES PROV	N/A - No Claims	0.00%	0.00%
07	HOME HEALTH SERVICES	L00	HHA UNCLASSIFIED	Outpatient	0.00%	0.02%
07	HOME HEALTH SERVICES	L02	HHA HOSPITAL BASED PROGRAM	Outpatient	0.01%	0.01%
09	MENTAL HEALTH CLINIC SERVICES	X00	COMMUNITY MENTAL HEALTH	Physician, Outpatient	3.76%	1.27%
09	MENTAL HEALTH CLINIC SERVICES	X01	PRIVATE MENTAL HEALTH	Physician	0.45%	0.25%
10	EPSDT SCREENING	E00	NURSE SCREENING	Physician	0.22%	0.09%
10	EPSDT SCREENING	E01	NURSE SCREENING WITH CASE MGMT	Physician, Dental	0.00%	0.00%
10	EPSDT SCREENING	E04	PHYSICIANS SCREENER	Physician	0.50%	0.17%
10	EPSDT SCREENING	E06	FEDERAL CLINIC, SCREEN ONLY	Physician	0.00%	0.00%
10	EPSDT SCREENING	ED0	SCHOOL BASED SCREEN & CS MGT	Physician	0.00%	0.00%
10	EPSDT SCREENING	EVO	VACCINE FOR CHILDREN PROVIDER	Physician	0.20%	0.07%
11	EMERG/NON-EMERG TRANS	J00	AMBULANCE	Other	0.38%	0.18%
12	DENTAL SERVICES	K00	DENTIST, UNCLASSIFIED	Dental	0.28%	0.07%
13	EYEGLASS SERVICES	N00	OPTOMETRIST	Physician, Other	0.30%	0.23%
13	EYEGLASS SERVICES	N01	OPTICAL DISPENSARY	Other	0.02%	0.01%
16	DENTAL SCREENING	K00	DENTIST, UNCLASSIFIED	Dental	3.88%	1.30%
17	EYEGLASS SCREENING	N00	OPTOMETRIST	Physician, Other	0.77%	0.50%
17	EYEGLASS SCREENING	N01	OPTICAL DISPENSARY	Other	0.05%	0.02%
18	HEARING SCREENING	M00	AUDIOLOGIST	Other, Physician	0.01%	0.00%
24	MEDICAL SUPPLY (DME)	I00	DME, MEDICAL EQUIP SUPPLIES	Other	0.57%	0.38%
24	MEDICAL SUPPLY (DME)	I01	DME, HOME HEALTH	Other	0.01%	0.01%
24	MEDICAL SUPPLY (DME)	I03	DME, PHARMACY BASED, COMMUNITY	Other, Physician	0.06%	0.03%
24	MEDICAL SUPPLY (DME)	S02	NURSE PRACTITIONER	Physician, Other	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	Y03	NF, COUNTY OWNED	N/A - No Claims	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	ZA0	GROUP, PHYSICIANS	N/A - No Claims	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	ZZ0	GROUP, OTHERS	N/A - No Claims	0.00%	0.00%
25	THERAPY SERVICES (OUTSIDE HH)	T00	OCCUPATIONAL THERAPISTS	Physician	0.09%	0.05%
25	THERAPY SERVICES (OUTSIDE HH)	T01	PHYSICAL THERAPISTS	Physician	0.22%	0.10%
25	THERAPY SERVICES (OUTSIDE HH)	T02	SPEECH/LANGUAGE THERAPISTS	Physician	0.24%	0.12%
28	NURSE SERVICES	S00	NURSE ANESTHETIST	Physician	0.26%	0.07%
28	NURSE SERVICES	S01	NURSE MIDWIVES	Physician	0.03%	0.01%
28	NURSE SERVICES	S02	NURSE PRACTITIONER	Physician	1.71%	0.75%
28	NURSE SERVICES	S05	PRIVATE DUTY NURSING	Other	0.24%	0.08%
28	NURSE SERVICES	S06	PHYSICIAN ASSISTANT	Physician	0.09%	0.04%
29	AMBULATORY SURGICAL CENTER	V00	AMBULATORY SURGICAL CENTERS	Physician, Outpatient	0.24%	0.13%
30	PERSONAL CARE SERVICES	W06	PERSONAL CARE ATTENDANT	N/A - No Claims	0.00%	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X02	SOCIAL WORKER	Physician	0.11%	0.05%
33	MENTAL HEALTH PRIVATE SERVICES	X03	PSYCHOLOGIST	Physician	0.05%	0.02%
33	MENTAL HEALTH PRIVATE SERVICES	X05	IDD COMMUNITY SUPPORT PROGRAM	Physician	0.00%	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X07	LICENSED PROFESSIONAL COUNSELOR	Physician	0.10%	0.05%
33	MENTAL HEALTH PRIVATE SERVICES	X08	BOARD CERTIFD BEHAVIOR ANALYST	Physician	0.01%	0.01%
35	FREE STANDING DIALYSIS	Q01	KIDNEY DIALYSIS FREESTANDING	Outpatient	0.54%	0.16%
35	FREE STANDING DIALYSIS	Q02	KIDNEY DIALYSIS HOSPITAL BASED	Outpatient	0.00%	0.00%
61	PRESCRIBED PED EXT CARE CENTER	S07	PRESCRIBED PED EXT CARE CENTER	Physician	0.29%	0.18%
57	MYPAC SERVICES	X04	N/A	Physician	0.00%	0.26%
<b>Percent of Allowed Eligible for 5% Assessment (A)</b>					<b>16.21%</b>	<b>6.94%</b>
<b>5% Assessment Adjustment (B) = 1 - (A) * 0.05</b>					<b>0.9919</b>	<b>0.9965</b>

**Exhibit 13**  
**Mississippi Division of Medicaid**  
**Summary of Program, Population, and Reimbursement Changes**

<b>Change</b>	<b>Change Type</b>	<b>Effective Date</b>	<b>Impacted Rate Cells</b>	<b>Where Reflected in Rate Development</b>
ASD Services	Program	July 1, 2019	SSI, Foster Care, MA Children, and Quasi-CHIP	Exhibit 2A
PDL Adjustment	Program	January 1, 2019, January 1, 2020, May 1, 2020, and January 1, 2021	All	Exhibits 1B, 1C, and 2A
Non-Facility 5% Assessment Application	Reimbursement	July 1, 2018	All	Exhibits 1A and 1B
OPPS Reimbursement	Reimbursement	July 1, 2018	All	Exhibits 1A, 1B, 1C, and 2A
Physician Administered Drug Reimbursement	Reimbursement	July 1, 2018	SSI and MA Adult (non-delivery)	Exhibit 2A
PRTF Services	Program	October 1, 2018	SSI, Foster Care, MA Children, Quasi-CHIP, and MYPAC	Exhibits 1B, 1C, 1D, and 2A
DRG Overpayments	Reimbursement	October 1, 2018	All	N/A
Usual and Customary Pharmacy Overpayments	Reimbursement	November 1, 2018	All	N/A
340B Pharmacy Overpayments	Reimbursement	January 1, 2019	All	Exhibit 1A
Physician Limit Expansion	Program	January 1, 2019	Excludes Children	Exhibit 2A
Dental and Orthodontic Reimbursement	Reimbursement	March 1, 2019	All	N/A
Zolgensma Carveout to FFS	Reimbursement	May 24, 2019	All	Exhibit 1A
ER Leveling Policy Adjustment	Reimbursement	July 1, 2019	All	Exhibit 1A
OP Dental Billing	Reimbursement	July 1, 2019	All	Exhibit 2A
Rx Limit Expansion	Program	July 1, 2019	Excludes Children	Exhibit 2A
Home Health Limit Expansion	Program	July 1, 2019	Excludes Children	Exhibit 2A
Quality Withhold	Program	July 1, 2019	All	Exhibit 4
IMD Services	Program	July 1, 2019	All	N/A
Rural Hospital Policy Adjuster	Program	July 1, 2019	All	N/A
Non-Emergency Transportation Contracting Change	Reimbursement	August 1, 2019 and September 1, 2020	All	Exhibit 2A
Transition GME Payments to FFS	Reimbursement	October 1, 2019	All	Exhibit 2A
Increase Reimbursement for Emergency Transportation	Reimbursement	July 1, 2020	All	Exhibit 2A
COVID-19 Vaccine Administration Expense	Program	March 15, 2021	All	Exhibit 2A
SSI Children - COE Change	Program	July 1, 2021	SSI	Exhibit 1A
Removal of 5% Assessment	Reimbursement	July 1, 2021	All	Exhibit 2A
Preventative and Diagnostic Dental Reimbursement Change	Reimbursement	July 1, 2021 and July 1, 2022	All	Exhibit 2A
Restorative Dental Reimbursement Change	Reimbursement	July 1, 2022	All	Exhibit 2A
Non-APC Outpatient Hospital Adjustment	Reimbursement	July 1, 2022	All	Exhibit 2A



**Exhibit 14A**  
**Mississippi Division of Medicaid**  
**Projected SFY 2022 and SFY 2023 Exposures**

<b>Cap Cell</b>	<b>SFY 2022 Exposures</b>	<b>SFY 2023 Exposures</b>
Non-Newborn SSI / Disabled	759,634	729,676
Breast and Cervical Cancer	1,762	1,524
MA Adult	616,693	524,684
Pregnant Women	126,929	109,464
SSI / Disabled Newborn	4,920	4,762
Non-SSI Newborns 0 to 2 Months	75,599	70,746
Non-SSI Newborns 3 to 12 Months	243,840	235,585
Foster Care	81,472	81,194
MYPAC	9,765	9,035
MA Children	3,658,185	2,987,221
Quasi-CHIP	385,859	312,973
<b>Total - All Cap Cells</b>	<b>5,964,659</b>	<b>5,066,865</b>

**Exhibit 14B**  
**Mississippi Division of Medicaid**  
**Components of SFY 2022 Capitation Rates**

Cap Cell	Non-Service			Total Capitation Rate Prior to Withhold	Total Capitation Rate after Withhold
	Medical Costs PMPM	Expenses PMPM <sup>1</sup>	Quality Withhold		
Non-Newborn SSI / Disabled	\$1,068.13	\$132.57	(\$12.01)	\$1,200.70	\$1,188.69
Breast and Cervical Cancer	\$3,424.36	\$399.83	(\$38.24)	\$3,824.19	\$3,785.95
MA Adult	\$437.09	\$60.99	(\$4.98)	\$498.08	\$493.10
Pregnant Women	\$1,059.37	\$131.58	(\$11.91)	\$1,190.95	\$1,179.04
SSI / Disabled Newborn	\$7,861.86	\$903.16	(\$87.65)	\$8,765.03	\$8,677.38
Non-SSI Newborns 0 to 2 Months	\$1,875.04	\$224.10	(\$20.99)	\$2,099.14	\$2,078.15
Non-SSI Newborns 3 to 12 Months	\$248.70	\$39.62	(\$2.88)	\$288.32	\$285.44
Foster Care	\$609.85	\$80.59	(\$6.90)	\$690.44	\$683.53
MYPAC	\$3,805.00	\$443.00	(\$42.48)	\$4,248.00	\$4,205.52
MA Children	\$189.73	\$32.93	(\$2.23)	\$222.66	\$220.43
Quasi-CHIP	\$191.61	\$33.15	(\$2.25)	\$224.76	\$222.51
<b>Total - All Cap Cells<sup>1</sup></b>					
Using SFY 2022 Exposures	\$388.51	\$55.48	(\$4.44)	\$443.99	\$439.55
Using SFY 2023 Exposures	\$408.38	\$57.73	(\$4.66)	\$466.11	\$461.45
<b>Total Expenditures</b>					
Using SFY 2022 Exposures	\$2,317,339,863	\$330,928,546	(\$26,482,684)	\$2,648,268,409	\$2,621,785,725
Using SFY 2023 Exposures	\$2,069,198,771	\$292,535,409	(\$23,617,342)	\$2,361,734,180	\$2,338,116,838

<sup>1</sup> "Non-Benefit Expenses PMPM" include margin, administrative costs, and premium tax prior to MHAP.

**Exhibit 14C**  
**Mississippi Division of Medicaid**  
**Components of SFY 2023 Capitation Rates**

Cap Cell	Medical Costs PMPM	Non-Service Expenses PMPM <sup>1</sup>	Quality Withhold	Total Capitation Rate Prior to Withhold	Total Capitation Rate after Withhold
Non-Newborn SSI / Disabled	\$1,074.67	\$131.36	(\$12.06)	\$1,206.03	\$1,193.97
Breast and Cervical Cancer	\$3,480.27	\$399.12	(\$38.79)	\$3,879.40	\$3,840.60
MA Adult	\$478.21	\$64.96	(\$5.43)	\$543.17	\$537.74
Pregnant Women	\$1,045.09	\$128.06	(\$11.73)	\$1,173.15	\$1,161.42
SSI / Disabled Newborn	\$7,963.96	\$898.21	(\$88.62)	\$8,862.17	\$8,773.55
Non-SSI Newborns 0 to 2 Months	\$1,828.43	\$215.26	(\$20.44)	\$2,043.69	\$2,023.25
Non-SSI Newborns 3 to 12 Months	\$247.04	\$39.23	(\$2.86)	\$286.28	\$283.41
Foster Care	\$600.48	\$78.57	(\$6.79)	\$679.06	\$672.27
MYPAC	\$3,720.12	\$425.82	(\$41.46)	\$4,145.94	\$4,104.48
MA Children	\$192.91	\$33.21	(\$2.26)	\$226.11	\$223.85
Quasi-CHIP	\$195.12	\$33.45	(\$2.29)	\$228.57	\$226.29
<b>Total - All Cap Cells<sup>1</sup></b>					
Using SFY 2022 Exposures	\$394.65	\$55.66	(\$4.50)	\$450.31	\$445.80
Using SFY 2023 Exposures	\$414.45	\$57.87	(\$4.72)	\$472.31	\$467.59
<b>Total Expenditures</b>					
Using SFY 2022 Exposures	\$2,353,924,233	\$332,004,576	(\$26,859,288)	\$2,685,928,810	\$2,659,069,522
Using SFY 2023 Exposures	\$2,099,938,418	\$293,198,766	(\$23,931,372)	\$2,393,137,184	\$2,369,205,813

<sup>1</sup> "Non-Benefit Expenses PMPM" include margin, administrative costs, and premium tax prior to MHAP.

**Exhibit 15**  
**Mississippi Division of Medicaid**  
**SFY 2023 MississippiCAN Capitation Rate Development**  
**SFY 2023 MississippiCAN Expenditure Estimates**

Rate Cell	a	b	c		d		e		f		g		h		i		j		k = sum of b through j	l = a * k	m	n = j * m
	Projected SFY 2023 Member Months	SFY 2023 Statewide Capitation Rates <sup>1</sup>	MHAP-FSA PMPM	Premium Tax on MHAP-FSA PMPM <sup>2</sup>	MHAP-QIPP PMPM	Premium Tax on MHAP-QIPP PMPM <sup>2</sup>	TREAT PMPM	Premium Tax on TREAT PMPM <sup>2</sup>	MAPS PMPM	Premium Tax on MAPS PMPM <sup>2</sup>	Total Rate at 1.0 Risk Score after Withhold	MississippiCAN Estimated Cost	FMAP / EFMAP <sup>3</sup>	Federal Estimated Cost								
<b>Non-Newborn SSI / Disabled</b>	729,676	\$1,208.03	\$151.58	\$4.69	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$1,431.42	\$1,044,037,180	83.87%	\$875,660,084								
North Region	251,278	1,099.90	132.31	4.00	56.86	1.76	2.69	0.08	7.50	0.23	1,305.42	328,023,604	83.87%	275,121,597								
Central Region	285,791	1,255.12	162.91	5.04	56.86	1.76	2.69	0.08	7.50	0.23	1,502.20	400,772,915	83.87%	336,138,011								
South Region	211,608	1,255.47	160.18	4.95	56.86	1.76	2.69	0.08	7.50	0.23	1,489.74	315,240,962	83.87%	264,400,476								
<b>Breast and Cervical Cancer</b>	1,524	\$3,879.40	\$613.85	\$18.99	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$4,581.36	\$7,089,024	83.87%	\$5,945,742								
North Region	299	3,538.01	546.67	16.91	56.86	1.76	2.69	0.08	7.50	0.23	4,170.72	1,247,673	83.87%	1,046,455								
Central Region	462	4,069.49	344.68	10.66	56.86	1.76	2.69	0.08	7.50	0.23	4,493.95	2,077,137	83.87%	1,742,147								
South Region	763	4,038.45	803.33	24.85	56.86	1.76	2.69	0.08	7.50	0.23	4,935.76	3,764,214	83.87%	3,157,140								
<b>MA Adult</b>	524,684	\$543.17	\$66.77	\$2.06	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$681.13	\$357,161,422	83.87%	\$299,560,214								
North Region	168,220	513.30	62.62	1.94	56.86	1.76	2.69	0.08	7.50	0.23	646.98	108,834,324	83.87%	91,282,058								
Central Region	176,457	565.44	70.27	2.17	56.86	1.76	2.69	0.08	7.50	0.23	707.01	124,756,956	83.87%	104,636,778								
South Region	180,006	549.06	67.21	2.08	56.86	1.76	2.69	0.08	7.50	0.23	686.47	123,570,142	83.87%	103,941,367								
<b>Pregnant Women</b>	109,464	\$1,173.15	\$249.32	\$7.71	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$1,499.30	\$164,254,053	83.87%	\$137,763,980								
North Region	33,792	1,108.63	243.91	7.54	56.86	1.76	2.69	0.08	7.50	0.23	1,420.20	48,296,053	83.87%	40,507,107								
Central Region	40,379	1,221.25	280.82	8.07	56.86	1.76	2.69	0.08	7.50	0.23	1,559.26	62,961,265	83.87%	52,807,187								
South Region	35,293	1,183.71	241.33	7.46	56.86	1.76	2.69	0.08	7.50	0.23	1,501.63	52,996,734	83.87%	44,449,686								
<b>SSI / Disabled Newborn</b>	4,762	\$8,882.17	\$2,250.20	\$69.59	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$11,251.09	\$53,645,402	83.87%	\$44,993,740								
North Region	1,471	8,693.79	2,053.49	63.51	56.86	1.76	2.69	0.08	7.50	0.23	10,879.92	16,008,918	83.87%	13,427,079								
Central Region	2,066	9,030.55	2,541.27	78.60	56.86	1.76	2.69	0.08	7.50	0.23	11,719.54	24,207,249	83.87%	20,303,225								
South Region	1,225	8,835.59	1,995.71	61.72	56.86	1.76	2.69	0.08	7.50	0.23	10,962.14	13,429,236	83.87%	11,263,436								
<b>Non-SSI Newborns 0 to 2 Months</b>	70,746	\$2,043.69	\$597.54	\$18.48	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$2,728.83	\$183,061,832	83.87%	\$161,925,785								
North Region	22,225	2,004.86	624.32	19.31	56.86	1.76	2.69	0.08	7.50	0.23	2,717.61	60,397,645	83.87%	50,657,015								
Central Region	25,996	2,082.52	605.58	18.73	56.86	1.76	2.69	0.08	7.50	0.23	2,775.96	72,164,135	83.87%	60,525,864								
South Region	22,525	2,037.56	561.83	17.98	56.86	1.76	2.69	0.08	7.50	0.23	2,685.89	60,500,051	83.87%	50,742,906								
<b>Non-SSI Newborns 3 to 12 Months</b>	235,585	\$286.28	\$35.55	\$1.10	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$392.05	\$92,370,390	83.87%	\$77,473,356								
North Region	73,270	280.84	41.22	1.27	56.86	1.76	2.69	0.08	7.50	0.23	392.45	28,755,103	83.87%	24,117,624								
Central Region	87,059	291.72	35.32	1.09	56.86	1.76	2.69	0.08	7.50	0.23	397.26	34,584,973	83.87%	29,007,281								
South Region	75,255	285.42	30.28	0.94	56.86	1.76	2.69	0.08	7.50	0.23	385.76	29,030,314	83.87%	24,348,450								
<b>Foster Care</b>	81,194	\$679.06	\$140.85	\$4.36	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$893.38	\$72,481,376	83.87%	\$60,791,942								
North Region	22,409	666.15	139.12	4.30	56.86	1.76	2.69	0.08	7.50	0.23	878.70	19,691,019	83.87%	16,515,350								
Central Region	23,588	691.96	180.45	5.58	56.86	1.76	2.69	0.08	7.50	0.23	947.11	22,340,948	83.87%	18,737,912								
South Region	35,197	677.02	115.40	3.57	56.86	1.76	2.69	0.08	7.50	0.23	865.12	30,449,409	83.87%	25,538,680								
<b>MYPAC</b>	9,035	\$4,145.94	\$195.32	\$6.04	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$4,416.43	\$39,874,054	83.87%	\$33,443,366								
North Region	2,826	4,067.17	166.05	5.14	56.86	1.76	2.69	0.08	7.50	0.23	4,307.48	12,171,576	83.87%	10,208,695								
Central Region	2,988	4,224.72	251.03	7.76	56.86	1.76	2.69	0.08	7.50	0.23	4,552.84	13,604,861	83.87%	11,410,737								
South Region	3,221	4,133.51	169.29	5.24	56.86	1.76	2.69	0.08	7.50	0.23	4,377.16	14,097,617	83.87%	11,824,024								
<b>MA Children</b>	2,987,221	\$226.11	\$19.95	\$0.62	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$315.80	\$843,317,729	83.87%	\$791,184,163								
North Region	952,793	221.82	18.91	0.58	56.86	1.76	2.69	0.08	7.50	0.23	310.44	295,784,016	83.87%	248,081,449								
Central Region	1,089,299	230.41	21.76	0.67	56.86	1.76	2.69	0.08	7.50	0.23	321.97	350,723,135	83.87%	294,160,261								
South Region	945,129	225.43	18.90	0.58	56.86	1.76	2.69	0.08	7.50	0.23	314.04	296,810,578	83.87%	248,942,452								
<b>Quasi-CHIP</b>	312,973	\$228.57	\$16.09	\$0.50	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$314.29	\$98,370,138	85.00%	\$83,614,617								
North Region	101,044	224.23	14.82	0.46	56.86	1.76	2.69	0.08	7.50	0.23	308.64	31,185,907	85.00%	26,508,021								
Central Region	117,384	232.92	17.35	0.54	56.86	1.76	2.69	0.08	7.50	0.23	319.92	37,553,864	85.00%	31,920,784								
South Region	94,545	227.89	15.89	0.49	56.86	1.76	2.69	0.08	7.50	0.23	313.40	29,630,367	85.00%	25,165,812								
<b>Total - All Rate Cells</b>	5,066,865	\$472.31	\$61.78	\$1.91	\$56.86	\$1.76	\$2.69	\$0.08	\$7.50	\$0.23	\$695.13	\$3,065,662,601	83.91%	\$2,572,356,988								
North Region	1,629,626	453.84	58.42	1.81	56.86	1.76	2.69	0.08	7.50	0.23	583.20	950,395,839	83.91%	797,472,371								
Central Region	1,832,469	487.84	69.23	2.05	56.86	1.76	2.69	0.08	7.50	0.23	625.25	1,145,747,137	83.91%	961,360,187								
South Region	1,604,770	473.05	60.12	1.86	56.86	1.76	2.69	0.08	7.50	0.23	604.15	969,519,625	83.91%	813,494,430								

<sup>1</sup> Capitation rates prior to quality withhold, excluding MHAP, MAPS, and TREAT.

<sup>2</sup> Calculated using a premium tax of 3.00%.

<sup>3</sup> For SFY 2023, FMAP is calculated as the blend of three months using an FMAP of 84.51%, six months using an FMAP of 84.06%, and three months using an FMAP of 82.86%. For SFY 2023, EFMAP is 85.00%. These FMAP and EFMAP projections include the phase-down of the additional federal match as described in the 2023 Consolidated Appropriations Act.

**Exhibit 16**  
**Mississippi Division of Medicaid**  
**SFY 2023 Mississippian Capitation Rate Development**  
**Illustrative MLR Development**

Rate Cell	a	b	c	d=bxc	e	f=d*(e*1%) / (1-1%)	g	h	i	j	k=d+f+g+h+i+j	l	m=g+h+i+j+l	n	o=g+h+i+j+n	p=m/k	q=o/k
	Projected SFY 2023 Membership	SFY 2023 Regional Capitation Rates net of Withhold <sup>1</sup>	Illustrative Risk Score <sup>2</sup>	Risk Adjusted Premium Net of Withhold	% of Withhold Returned <sup>3</sup>	Withhold Returned PMPM	MHAP-FSA PMPM Gross of Premium Tax <sup>4</sup>	MHAP-QIPP Gross of Premium Tax <sup>4</sup>	MAPS Gross of Premium Tax <sup>4</sup>	TREAT Gross of Premium Tax <sup>4</sup>	Total Revenue PMPM	Projected SFY 2023 Medical Costs PMPM <sup>5</sup>	Projected Total Service Costs PMPM	Illustrative Actual SFY 2023 Medical Costs PMPM <sup>5</sup>	Illustrative Actual Total Service Costs PMPM	Illustrative Target MLR	Illustrative Actual MLR
Non-Newborn SSI / Disabled	129,676	\$1,193.97	1.000	\$1,193.97	100%	\$12.06	\$166.27	\$58.62	\$7.74	\$2.77	\$1,431.42	\$1,074.67	\$1,300.07	\$1,130.00	\$1,255.40	90.8%	94.7%
Breast and Cervical Cancer	1,524	\$3,840.60	1.000	\$3,840.60	100%	\$38.79	\$632.83	\$58.62	\$7.74	\$2.77	\$4,581.36	\$3,480.27	\$4,182.23	\$3,650.00	\$4,351.96	91.3%	95.0%
MA Adult	524,684	\$537.74	1.000	\$537.74	100%	\$5.43	\$68.83	\$58.62	\$7.74	\$2.77	\$681.13	\$478.21	\$616.16	\$500.00	\$637.96	90.5%	93.7%
Pregnant Women	109,464	\$1,161.42	1.000	\$1,161.42	100%	\$11.73	\$257.03	\$58.62	\$7.74	\$2.77	\$1,499.30	\$1,045.09	\$1,371.24	\$1,100.00	\$1,426.15	91.5%	95.1%
SSI / Disabled Newborn	4,762	\$8,773.55	1.000	\$8,773.55	100%	\$88.62	\$2,319.79	\$58.62	\$7.74	\$2.77	\$11,251.09	\$7,963.96	\$10,352.89	\$8,360.00	\$10,748.92	92.0%	95.5%
Non-SSI Newborns 0 to 2 Months	70,746	\$2,023.25	1.000	\$2,023.25	100%	\$20.44	\$616.02	\$58.62	\$7.74	\$2.77	\$2,728.83	\$1,828.43	\$2,513.57	\$1,920.00	\$2,605.14	92.1%	95.5%
Non-SSI Newborns 3 to 12 Months	235,585	\$283.41	1.000	\$283.41	100%	\$2.86	\$36.64	\$58.62	\$7.74	\$2.77	\$392.05	\$247.04	\$352.81	\$260.00	\$365.77	90.0%	93.3%
Foster Care	81,194	\$672.27	1.000	\$672.27	100%	\$6.79	\$145.20	\$58.62	\$7.74	\$2.77	\$893.38	\$600.48	\$814.81	\$630.00	\$844.33	91.2%	94.5%
MYPAC	9,035	\$4,104.48	1.000	\$4,104.48	100%	\$41.46	\$201.36	\$58.62	\$7.74	\$2.77	\$4,416.43	\$3,720.12	\$3,990.60	\$3,910.00	\$4,180.48	90.4%	94.7%
MA Children	2,987,221	\$223.85	1.000	\$223.85	100%	\$2.26	\$20.56	\$58.62	\$7.74	\$2.77	\$315.80	\$192.91	\$282.60	\$200.00	\$289.69	89.5%	91.7%
Quasi-CHIP	312,973	\$226.29	1.000	\$226.29	100%	\$2.29	\$16.59	\$58.62	\$7.74	\$2.77	\$314.29	\$195.12	\$280.84	\$200.00	\$285.72	89.8%	90.9%
<b>Total</b>	<b>5,066,868</b>	<b>\$467.59</b>	<b>1.000</b>	<b>\$467.59</b>	<b>100%</b>	<b>\$4.72</b>	<b>\$63.70</b>	<b>\$58.62</b>	<b>\$7.74</b>	<b>\$2.77</b>	<b>\$606.13</b>	<b>\$414.45</b>	<b>\$547.27</b>	<b>\$433.46</b>	<b>\$566.38</b>	<b>90.4%</b>	<b>93.6%</b>
Illustrative Actual MLR																	
Illustrative Target MLR																	
MLR Difference																	
MLR Difference Exceeding Corridor																	
Total Revenue		\$3,066,121,678															
Risk Corridor Settlement Received (Paid) by DOM		(\$35,000,530)															

<sup>1</sup> MLR calculation will be populated with actual SFY 2023 COO-specific values.

<sup>2</sup> Illustrative values demonstrate projected regional enrollment mix. Actual values will use COO-specific regional enrollment mix.

<sup>3</sup> Includes all services incurred during SFY 2023 with payments made to providers as defined in Exhibit C of the COO Contract, including fee-for-service payments, subcapitation payments, and settlement payments. Actual MLR, but not target MLR, will be populated with actual SFY 2023 COO-specific values. Additionally, both actual and target costs will use COO-specific regional enrollment mix. Actual MLR will include adjustments for items found in MLR audits and adjustments not covered by the Mississippi state plan.

Exhibit 17A Mississippi Division of Medicaid Procedure Codes for Non-Psychiatric Physician Visits			
W9009	90066	90544	92004
W9348	90067	90545	92012
W9349	90068	90546	92014
90000	90069	90547	99062
90001	90070	90548	99063
90002	90071	90549	99064
90003	90072	90550	99065
90004	90073	90551	99241
90005	90074	90552	99242
90006	90075	90553	99243
90007	90076	90554	99244
90008	90077	90555	99245
90009	90078	90556	99271
90010	90079	90557	99272
90011	90080	90558	99273
90012	90500	90559	99274
90013	90501	90560	99275
90014	90502	90561	99341
90015	90503	90562	99342
90016	90504	90563	99343
90017	90505	90564	99344
90018	90506	90565	99345
90019	90507	90566	99347
90020	90508	90567	99348
90040	90509	90568	99349
90041	90510	90569	99350
90042	90511	90570	
90043	90512	90571	
90044	90513	90572	
90045	90514	90573	
90046	90515	90574	
90047	90516	90575	
90048	90517	90576	
90049	90518	90577	
90050	90519	90578	
90051	90520	90579	
90052	90530	90580	
90053	90531	90600	
90054	90532	90605	
90055	90533	90610	
90056	90534	90620	
90057	90535	90630	
90058	90536	90640	
90059	90537	90641	
90060	90538	90642	
90061	90539	90643	
90062	90540	90650	
90063	90541	90651	
90064	90542	90652	
90065	90543	92002	

**Exhibit 17B**  
**Mississippi Division of Medicaid**  
**Procedure Codes for Psychiatric Physician Visits**

90791  
90792  
90832  
90834  
90837  
90846  
90847  
90849  
90853  
90870  
99201  
99202  
99203  
99204  
99205  
99212  
99213  
99214  
99215

Exhibit 17C  
Mississippi Division of Medicaid  
NDCs Excluded from Monthly Pharmacy Script Limits

0002763511	0005206032	0013056201	0022300493	0037699789	00891057101	0174102096	0538800866	0801123520	0801175017	0801196862	0808022610	0808031149	0808036180	0808044215	0808053106	0808061100	08080660218	0808070401	
0002763611	0005243301	0013056204	0022300475	0040050510	00891059101	0174100475	0538800867	0801123530	0801175031	0801197105	0808016045	0808031248	0808036180	0808044216	0808053200	0808061120	08080660320	0808070850	
0002763711	0006402202	0013055701	0022300486	0044073156	0089105911	0174100809	0538800868	0801123620	0801175037	0802645680	0808016124	0808022630	0808031347	0808036230	0808044217	0808053300	0808061130	08080660330	0808070860
0002956001	0006501802	0013056901	0022300498	0044073179	0089105921	0174100887	0538800869	0801123630	0801175039	0802674680	0808016140	0808022630	0808031446	0808036310	0808044218	0808053600	0808061140	08080660340	0808070870
0002956101	0006501807	0013056903	0022300498	0044073179	0089105921	0174100978	0538800869	0801151012	0801177075	0808000555	0808016160	0808022910	0808031545	0808036850	0808044219	0808054011	0808061150	08080660350	0808070880
0002956201	0006502650	0013056021	0022300499	0045607413	0089105931	0174100988	0538800386	0801151013	0801177114	0808000077	0808016190	0808022920	0808031714	0808036840	0808044250	0808054040	0808061160	08080660400	0808071000
0002967301	0006592073	0013060301	0022304124	0045607451	0089105931	0174105361	0538800426	0801151018	0801177215	0808003210	0808016210	0808022930	0808031410	0808039220	0808044251	0808054050	0808061200	08080660410	0808071050
0002967361	0006592074	0013060304	0022304146	0045607461	0089105941	0174105384	0538801832	0801151011	0801177214	0808005535	0808016220	0808023000	0808031440	0808039300	0808044420	0808054104	0808061210	08080660420	0808071071
0002967611	0006592075	0013060307	0022304168	0045607483	0089105951	0174105406	0538802248	0801151014	0801177213	0808005535	0808016230	0808023010	0808031450	0808039400	0808044430	0808054114	0808061220	08080660430	0808071091
0002967911	0006592076	0013060310	0022304190	0045607505	0089105961	0174105428	0538802662	0801151017	0801177212	0808005535	0808016240	0808023020	0808031460	0808039500	0808044440	0808054128	0808061230	08080660440	0808071111
0002968211	0006592077	0013060313	0022304212	0045607527	0089105971	0174105450	0538803076	0801151020	0801177211	0808005535	0808016250	0808023030	0808031470	0808039600	0808044450	0808054142	0808061240	08080660450	0808071131
0002968511	0006592078	0013060316	0022304234	0045607549	0089105981	0174105472	0538803490	0801151023	0801177210	0808005535	0808016260	0808023040	0808031480	0808039700	0808044460	0808054154	0808061250	08080660460	0808071151
0002968811	0006592079	0013060319	0022304256	0045607571	0089105991	0174105494	0538803904	0801151026	0801177209	0808005535	0808016270	0808023050	0808031490	0808039800	0808044470	0808054166	0808061260	08080660470	0808071171
0002969111	0006592080	0013060322	0022304278	0045607593	0089106001	0174105516	0538804318	0801151029	0801177208	0808005535	0808016280	0808023060	0808031500	0808039900	0808044480	0808054178	0808061270	08080660480	0808071191
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**Exhibit 17C**  
**Mississippi Division of Medicaid**  
**NDCs Excluded from Monthly Pharmacy Script Limits**

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35664015001	36000001394	36000016178	36000019381	36000021912	36000037429	36000044362	36000051357	36000055033	36652030418	37000026003	37000050585	37000082752	38396000425	383960033070	38396044464	38415030021	38420369095	38472044316	38472058451
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5000206803	5041904201	5042803297	5042804394	5042816502	5042848936	50486008257	50632000759	51079074620	51103102039	51144000580	51927922000	52569013645	53483000807	53858098425	55283079600	56151171301	57513000603	57515009545	57599033901
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Mississippi Division of Medicaid																														
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