

Draft SFY 2015 MississippiCAN Capitation Rate Development Methodology

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Background and Recent Rate Status

- MSCAN program goals
- MSCAN implementation dates
 - SSI / Foster Care / Breast Cervical Cancer (“Original”) – January 2011
 - MA adults and newborns (“Expansion”) – December 2012
- Major historical program changes
 - Added behavioral health services to capitation – December 2012
 - Made most SSI population mandatory enrolled – December 2012
- Current rate contract period
 - Original – CY 2013
 - Expansion – December 2012 to December 2013
- RFP contract period – July 2014 to June 2017
 - SFY 2015 Rate Development

Background and Recent Rate Status

(continued)

- 2013 rate development status
 - Approved rates have been paid throughout 2013
 - Rates include fully capitated provision for PCP E&M rate increase
 - Outstanding retrospective adjustment necessary for revised estimate of outpatient hospital APC reimbursement change
- January to June 2014 rate development status
 - Most base period data and draft projection assumptions are outlined in this presentation
 - There remain outstanding items around encounter data validation and APC change impact
 - Rate development gives substantial consideration to emerging CY 2013 experience

Background and Recent Rate Status

(continued)

- SFY 2015 rate development data and assumptions
 - Base data will be the same as the January to June 2014 rate development
 - Pricing assumptions will be substantially the same as the January to June 2014 rate development
 - Throughout this document, the draft January to June 2014 rate assumptions are shown
 - Pricing assumptions for SFY 2015 rates will be updated to reflect greater knowledge of CY 2013 results

SFY 2015 Expansion Population Rate Development

- Rate cells
 - Newborns 0 – 2 months
 - Newborns 3 - 12 months
 - MA Males ages 19 – 39 (risk adjusted)
 - MA Females ages 19 - 39 (risk adjusted)
 - MA Males ages 40+ (risk adjusted)
 - MA Females ages 40+ (risk adjusted)
 - COE 88 Pregnant women ages 8+
 - Mother's delivery payment (non-inpatient services)
- North, South, and Central Regions

SFY 2015 Expansion Population Rate Development *(continued)*

- Excluded populations
 - Dual eligibles
 - Hemophiliacs
 - Individuals in waiver programs
 - Institutionalized

SFY 2015 Expansion Population Rate Development *(continued)*

- Base data
 - January 2011 – November 2012 FFS data with all available runout
 - Exclude inpatient services
- Adjustments made to base data
 - IBNR – will be minimal impact for SFY 2015 rates
 - TPL adjustment – 2014 assumption: 0.75% recovery
 - MSCAN program changes
 - Coverage of NEMT effective 7/1/2014 – Will give consideration to results of FFS RFP and other state information
 - Coverage of power wheel chairs for adults effective 3/1/2012 – 2014 assumption: 5.94% increase to DME

SFY 2015 Expansion Population Rate Development *(continued)*

- Adjustments made to base data (continued)
 - Pharmacy
 - Reduce experience for manufacturer rebates realized under managed care – 2014 assumption: 1.3% reduction to pharmacy costs
 - Standardization of preferred drug list – Milliman will work with DOM and CCOs to understand allowed cost and rebate impact relative to base period experience
- Base period data blending
 - CY 2011 experience is trended and blended with January to November 2012 experience
 - 2014 assumption: 80% weight is given to 2012 experience to better reflect emerging 2013 results

SFY 2015 Expansion Population Rate Development *(continued)*

- Managed care adjustments
 - Projected impact of CCO care management activities
 - 2014 assumptions consider emerging 2013 results
 - Will be re-examined for SFY 2015 based on additional 2013 results

SFY 2015 Expansion Population Rate Development *(continued)*

Draft January to June 2014 Managed Care Assumptions		
Service Category	Monthly Capitation	Delivery Payment
Hospital OP	15%	0%
Emergency Room	15%	0%
Laboratory / Radiology	20%	0%
Physician / Professional	13%	0%
Dental	0%	0%
EPSDT	-10%	0%
Pharmacy	10%	0%
Behavioral Health	0%	0%
Total	~12.6%	0%

SFY 2015 Expansion Population Rate Development *(continued)*

- Medical utilization and unit cost trend
 - 30.5 months of trend applied to January to November 2012 level base data
 - Developed and applied at the broad category of service level
 - Data Sources
 - Recent program experience – Additional emerging 2013 experience will be considered for SFY 2015 rate development
 - Known changes to FFS provider reimbursement
 - Most OP hospital and physician reimbursement tied to Medicare
 - Include consideration for average service intensity unit cost trends
 - Experience from other state Medicaid programs

SFY 2015 Expansion Population Rate Development *(continued)*

Draft January to June 2014 Annualized Trend Assumptions			
	Utilization Trend		Unit Cost Trend
Service Category	Monthly Capitation	Delivery Payment	All Payments
Hospital OP	3.0%	0%	-2.3%*
Physician	4.0%	0%	0.1%
Other Professional	3.0%	0%	2.0%
Pharmacy	3.0%	0%	4.5%
Total	~3.5%	0%	~0.5%

* Includes draft impact of APC reimbursement change

SFY 2015 Expansion Population Rate Development *(continued)*

- Administrative allowance
 - Data Sources
 - Program experience reported from 2011 and 2012 financial reporting
 - Impact of growing enrollment with expansion
 - Experience from other state Medicaid programs
 - 2014 assumption: 10% of non-delivery capitation
- Other non-medical loads
 - Target margin – 2014 assumption: 2% of capitation
 - Premium tax – 3% of capitation
 - Health Insurer Fee – Will be incorporated into January to June 2014 and SFY 2015 CCO payments once additional guidance is received from CMS

SFY 2015 Expansion Population Rate Development *(continued)*

- Additional rate adjustments
 - ACA PCP E&M adjustment to 100% of Medicare
 - Full capitated without reconciliation
 - Calculated from actual utilization and provider specialty experience
 - Supplemental unit cost and premium tax components; no administrative load
 - 2014 overall results: About \$5.50 PMPM
 - Apply regional factors – 2014 results:
 - North – 0.972
 - Central – 1.000
 - South – 1.029
 - Risk adjustment for MA adults (described later)

SFY 2015 Original Population Rate Development

- Rate cells
 - SSI / Disabled (risk adjusted)
 - SSI / Disabled Newborns
 - Foster Care
 - Breast and Cervical Cancer
- Excluded populations
 - Dual eligibles
 - Hemophiliacs
 - Individuals in waiver programs
 - Institutionalized
- North, South, and Central regions

SFY 2015 Original Population Rate

Development *(continued)*

- Base data
 - CY 2012 financial reporting, CCO encounter data, and FFS data
 - Excludes inpatient services
 - Paid amounts in encounter data are validated and utilized in rate development
 - Goal is to increase reliance on encounters and decrease reliance on less granular financial reporting over time – 2014 assumption: 50% weight on encounters for outpatient, physician, and pharmacy services
 - 2014 preliminary result: Encounter paid amounts are 1.24% less than financials, though final validation is ongoing
 - Blend with 2012 FFS data for opt-outs and behavioral health claims
 - Opt out claims adjusted for expected managed care savings
 - Results in a risk-neutral (1.0 average risk score) PMPM cost for the entire eligible population

SFY 2015 Original Population Rate Development *(continued)*

- Adjustments made to base data
 - Best estimate IBNR
 - From financial reporting for CCO experience
 - Milliman analysis of FFS experience – Will be minimal impact for SFY 2015 rates
 - TPL adjustment for FFS data – 2014 assumption: 0.75% recovery
 - MSCAN program changes
 - Coverage of NEMT effective 7/1/2014 – Will give consideration to results of FFS RFP and other state information
 - Coverage of power wheel chairs for adults effective 3/1/2012 – 2014 assumption: 5.94% increase to DME

SFY 2015 Original Population Rate Development *(continued)*

- Adjustments made to base data (continued)
 - Pharmacy
 - Reduce experience for manufacturer rebates realized under managed care – 2014 assumption: 1.3% reduction to pharmacy costs
 - Standardization of preferred drug list – Milliman will work with DOM and CCOs to understand allowed cost and rebate impact relative to base period experience

SFY 2015 Original Population Rate Development *(continued)*

- Managed care adjustments
 - Applied to 2012 FFS opt-out experience only
 - Projected impact of CCO care management activities

SFY 2015 Original Population Rate Development *(continued)*

Draft 2014 Managed Care Assumptions	
Service Category	Monthly Capitation
Hospital OP	15%
Emergency Room	15%
Laboratory / Radiology	20%
Physician / Professional	15%
Dental	0%
EPSDT	-10%
Pharmacy	10%
Behavioral Health	0%
Total	~12.7%

SFY 2015 Original Population Rate Development *(continued)*

- Medical utilization and unit cost trend
 - 30 months of trend applied to CY 2012 level base data
 - Developed and applied at the broad category of service level
 - Data Sources
 - Recent program experience – Additional emerging 2013 experience will be considered for SFY 2015 rate development
 - Known changes to FFS provider reimbursement
 - Most OP hospital and physician reimbursement tied to Medicare
 - Include consideration for average service intensity in unit cost trends
 - Experience from other state Medicaid programs

SFY 2015 Original Population Rate Development *(continued)*

Draft 2014 Annualized Trend Assumptions		
	Utilization Trend	Unit Cost Trend
Service Category	All Payments	All Payments
Hospital OP	3.0%	-2.3%*
Physician	3.0%	0.1%
Other Professional	4.0%	2.0%
Pharmacy	4.0%	4.5%
Total	~3.8%	~1.4%

* Includes draft impact of APC reimbursement change

SFY 2015 Original Population Rate Development *(continued)*

- Administrative allowance
 - Data Sources
 - Program experience reported from 2011 and 2012 financial reporting
 - Impact of growing enrollment with expansion
 - Experience from other state Medicaid programs
 - 2014 assumption: 8% of capitation
- Other non-medical loads
 - Target margin – 2014 assumption: 2% of capitation
 - Premium tax – 3% of capitation
 - Health Insurer Fee – Will be incorporated into January to June 2014 and SFY 2015 CCO payments once additional guidance is received from CMS

SFY 2015 Original Population Rate Development *(continued)*

- Additional rate adjustments
 - ACA PCP E&M adjustment to 100% of Medicare
 - Full capitated without reconciliation
 - Calculated from actual utilization and provider specialty experience
 - Supplemental unit cost and premium tax components; no administrative load
 - 2014 overall results: About \$4.50 PMPM
 - Apply regional factors – 2014 results:
 - North – 0.919
 - Central – 1.038
 - South – 1.048
 - Risk adjustment for SSI non-newborns (described later)

Risk Adjustment

- Risk Score Overview
 - SSI / Disabled and MA Adult rates cells are risk adjusted
 - CDPS+Rx model from University of San Diego California
 - Milliman has developed custom cost weights excluding inpatient services for the SSI population and MA population based upon multiple years of FFS data
 - Prospective CCO risk scores are developed twice per year using actual CCO membership from two months earlier
 - Scores for new CCOs will be retrospectively adjusted
 - SFY 2013 diagnosis study period (combined FFS and encounter data) will be used for determining July to December 2014 member risk scores
 - Risk score adjustments will be regionally budget neutral across MSCAN enrollees and opt-outs, where applicable

Next Steps and Timing

- This document is posted to the procurement website
- Questions regarding rate development are due October 25
- Milliman and DOM responses will be posted November 1
- Draft SFY 2015 rates will be presented to contracted CCOs in late February



Questions?

Thank You!

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Data Reliance and Caveats

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify to its capitation rate development. Milliman's role is to certify that the capitation rates are actuarially sound and comply with Centers for Medicare and Medicaid Services (CMS) regulations.

Milliman used fee-for-service cost and eligibility data for January 2009 to June 2013, CCO encounters from January 2011 to June 2013, historical and projected reimbursement information, TPL recoveries, fee schedules, and other information from DOM, CCOs, and CMS to calculate the draft MississippiCAN capitation rate data and assumptions shown in this presentation. While we did not audit this data, we did review it for reasonableness. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

Differences between 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.

This presentation is intended for the use of DOM to understand factors influencing SFY 2015 MississippiCAN capitation rates. It may not be appropriate for other purposes. Milliman does not intend to benefit potential CCOs or other interested parties, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety.

The information in this presentation is technical in nature and reflects 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.

Michael Cook is a Consulting Actuary for Milliman, a member of the American Academy of Actuaries, and meets the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of his knowledge and belief, this presentation 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 signed on January 1, 2013 apply to this presentation and its use.

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: North
Eligibility Category: SSI and Disabled
MSCAN CY 2012 Member Months*: 196,324
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$21,029,057				\$107.11	1.0160	1.0000	\$108.83
Physician Services	17,620,169				89.75	1.0197	1.0000	91.51
Drug Services	26,964,007	372,383	22,761	72.41	137.34	1.0000	1.0000	137.35
Other Services	9,293,037				47.34	1.0258	1.0000	48.55
Total (Excluding Inpatient)	\$74,906,271				\$381.54			\$386.24

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled all ages)

Appendix A
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CCO Regional Financial Reporting Data - CY 2012

Region: North
Eligibility Category: Foster Care
MSCAN CY 2012 Member Months*: 2,498
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e**g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$63,538				\$25.44	1.0164	1.0000	\$25.85
Physician Services	90,952				36.41	1.0219	1.0000	37.21
Drug Services	330,463	1,434	6,889	230.45	132.29	1.0000	1.0000	132.29
Other Services	60,735				24.31	1.0083	1.0000	24.52
Total (Excluding Inpatient)	\$545,689				\$218.45			\$219.87

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Foster Care all ages)

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CCO Regional Financial Reporting Data - CY 2012

Region: North
Eligibility Category: Breast and Cervical Cancer
MSCAN CY 2012 Member Months*: 272
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$96,224				\$353.77	1.0140	1.0000	\$358.70
Physician Services	361,090				1,327.54	1.0122	1.0000	1,343.77
Drug Services	21,270	475	20,956	44.78	78.20	1.0000	1.0000	78.20
Other Services	19,737				72.56	1.0016	1.0000	72.68
Total (Excluding Inpatient)	\$498,322				\$1,832.07			\$1,853.35

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Breast and Cervical Cancer)

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: North
Eligibility Category: SSI / Disabled Newborn
MSCAN CY 2012 Member Months*: 849
Population Change: -3

	a	b	c	d=a/b	e	f	g	h=e**g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment **	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$177,118				\$208.62	1.0193	0.9999	\$212.61
Physician Services	188,038				221.48	1.0200	1.0005	226.03
Drug Services	349,590	2,017	28,509	173.32	411.77	1.0000	1.0007	412.07
Other Services	66,364				78.17	1.0262	1.0007	80.27
Total (Excluding Inpatient)	\$781,110				\$920.03			\$930.97

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled Newborns)

** Foster Care Newborns removed from the CY 2012 Newborn Rate Cell.

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: Central
Eligibility Category: SSI and Disabled
MSCAN CY 2012 Member Months*: 235,625
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$27,657,935				\$117.38	1.0150	1.0000	\$119.14
Physician Services	21,413,854				90.88	1.0195	1.0000	92.65
Drug Services	38,124,447	466,366	23,751	81.75	161.80	1.0000	1.0000	161.80
Other Services	11,474,135				48.70	1.0266	1.0000	49.99
Total (Excluding Inpatient)	\$98,670,371				\$418.76			\$423.59

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled all ages)

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: Central
Eligibility Category: Foster Care
MSCAN CY 2012 Member Months*: 3,645
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$110,354				\$30.28	1.0201	1.0000	\$30.88
Physician Services	148,548				40.75	1.0232	1.0000	41.70
Drug Services	449,517	2,785	9,169	161.41	123.32	1.0000	1.0000	123.33
Other Services	94,529				25.93	1.0139	1.0000	26.29
Total (Excluding Inpatient)	\$802,948				\$220.29			\$222.20

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Foster Care all ages)

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: Central
Eligibility Category: Breast and Cervical Cancer
MSCAN CY 2012 Member Months*: 324
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$200,887				\$620.02	1.0065	1.0000	\$624.03
Physician Services	210,635				650.11	1.0039	1.0000	652.64
Drug Services	210,719	339	12,556	621.59	650.37	1.0000	1.0000	650.37
Other Services	25,288				78.05	1.0037	1.0000	78.34
Total (Excluding Inpatient)	\$647,529				\$1,998.55			\$2,005.37

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Breast and Cervical Cancer)

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: Central
Eligibility Category: SSI / Disabled Newborn
MSCAN CY 2012 Member Months*: 1,360
Population Change: -32

	a	b	c	d=a/b	e	f	g	h=e**g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment **	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$309,550				\$227.61	1.0185	1.0225	\$237.05
Physician Services	395,966				291.15	1.0231	1.0213	304.21
Drug Services	529,583	3,694	32,594	143.36	389.40	1.0000	1.0221	398.03
Other Services	108,095				79.48	1.0324	1.0220	83.86
Total (Excluding Inpatient)	\$1,343,194				\$987.64			\$1,023.15

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled Newborns)

** Foster Care Newborns removed from the CY 2012 Newborn Rate Cell.

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: South
Eligibility Category: SSI and Disabled
MSCAN CY 2012 Member Months*: 159,884
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$19,526,530				\$122.13	1.0155	1.0000	\$124.02
Physician Services	15,829,994				99.01	1.0198	1.0000	100.97
Drug Services	26,266,251	333,357	25,020	78.79	164.28	1.0000	1.0000	164.28
Other Services	8,095,482				50.63	1.0276	1.0000	52.03
Total (Excluding Inpatient)	\$69,718,256				\$436.06			\$441.30

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled all ages)

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: South
Eligibility Category: Foster Care
MSCAN CY 2012 Member Months*: 3,582
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e*f*g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$62,497				\$17.45	1.0193	1.0000	\$17.78
Physician Services	113,651				31.73	1.0238	1.0000	32.48
Drug Services	359,182	1,911	6,402	187.96	100.27	1.0000	1.0000	100.27
Other Services	82,257				22.96	1.0115	1.0000	23.23
Total (Excluding Inpatient)	\$617,587				\$172.41			\$173.77

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Foster Care all ages)

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: South
Eligibility Category: Breast and Cervical Cancer
MSCAN CY 2012 Member Months*: 571
Population Change: 0

	a	b	c	d=a/b	e	f	g	h=e**g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$657,855				\$1,152.11	1.0035	1.0000	\$1,156.14
Physician Services	369,270				646.71	1.0054	1.0000	650.19
Drug Services	106,110	587	12,336	180.77	185.83	1.0000	1.0000	185.83
Other Services	65,159				114.11	1.0155	1.0000	115.88
Total (Excluding Inpatient)	\$1,198,394				\$2,098.76			\$2,108.04

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (Breast and Cervical Cancer)

Appendix A
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cell Enrollees
CCO Regional Financial Reporting Data - CY 2012

Region: South
Eligibility Category: SSI / Disabled Newborn
MSCAN CY 2012 Member Months*: 754
Population Change: -19

	a	b	c	d=a/b	e	f	g	h=e**g
Benefits	Total Allowed Dollars	Total Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	Population Adjustment **	Per Capita Monthly Allowed Cost
Outpatient Hospital Services	\$145,203				\$192.58	1.0200	1.0331	\$202.93
Physician Services	157,166				208.44	1.0251	1.0302	220.14
Drug Services	352,898	2,063	32,833	171.06	468.03	1.0000	1.0250	479.72
Other Services	56,843				75.39	1.0212	1.0295	79.26
Total (Excluding Inpatient)	\$712,111				\$944.44			\$982.06

* Member Months as reported in the financial exhibits based upon CY2012 rate cell definitions (SSI / Disabled Newborns)

** Foster Care Newborns removed from the CY 2012 Newborn Rate Cell.

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide
Eligibility Category: SSI and Disabled
Age Group: 1-18
MSCAN Opt-Out CY2011 Member Months: 79,758

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$17,423,699	13,266	1,574	\$1,313.41	\$ 172.32	1.0000	0.9925	1.000	\$0.00
Outpatient Hospital Services	9,727,657	292,988	34,772	33.20	96.21	1.0008	0.9925	0.850	81.23
Physician Services	15,422,225	559,713	66,426	27.55	152.52	1.0066	0.9925	0.863	131.53
Drug Services	25,423,970	229,769	27,269	110.65	251.44	1.0000	0.9925	0.900	224.66
Other Services	15,905,600	1,612,703	191,394	9.86	157.31	1.0066	0.9925	0.845	133.16
Total	\$83,903,151	2,708,439	321,435	\$30.98	\$ 829.80				\$570.58
Total (Excluding Inpatient)	\$66,479,452	2,695,173	319,861	\$24.67	\$ 657.48				\$570.58

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide
Eligibility Category: SSI and Disabled
Age Group: 19+
MSCAN Opt-Out CY2011 Member Months: 155,085

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$36,195,031	23,615	1,581	\$1,532.71	\$ 201.96	1.0000	0.9925	1.000	\$0.00
Outpatient Hospital Services	22,102,946	784,862	52,552	28.16	123.33	1.0008	0.9925	0.850	104.13
Physician Services	34,108,867	2,658,166	177,984	12.83	190.32	1.0066	0.9925	0.863	164.12
Drug Services	43,662,086	583,680	39,082	74.80	243.63	1.0000	0.9925	0.900	217.68
Other Services	12,917,431	1,846,445	123,633	7.00	72.08	1.0066	0.9925	0.845	61.01
Total	\$148,986,361	5,896,768	394,833	\$25.27	\$ 831.31				\$546.94
Total (Excluding Inpatient)	\$112,791,330	5,873,153	393,252	\$19.20	\$ 629.35				\$546.94

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide

Eligibility Category: Foster Care

Age Group: 1-18

MSCAN Opt-Out CY2011 Member Months: 10,434

COE 003 CY2011 Member Months: 34,125

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$4,230,311	5,449	1,324	\$776.35	\$ 85.67	1.0000	0.9925	1.000	\$0.00
Outpatient Hospital Services	1,194,667	32,555	7,911	36.70	24.19	1.0008	0.9925	0.850	20.43
Physician Services	4,938,920	125,516	30,501	39.35	100.01	1.0066	0.9925	0.896	89.49
Drug Services	4,870,196	54,457	13,233	89.43	98.62	1.0000	0.9925	0.901	88.17
Other Services	2,157,008	105,276	25,582	20.49	43.68	1.0066	0.9925	0.873	38.10
Total	\$17,391,101	323,253	78,552	\$53.80	\$ 352.17				\$236.18
Total (Excluding Inpatient)	\$13,160,790	317,804	77,227	\$41.41	\$ 266.51				\$236.18

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide

Eligibility Category: Foster Care

Age Group: 19+

MSCAN Opt-Out CY2011 Member Months: 461

COE 003 CY2011 Member Months: 1,283

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$126,606	136	935	\$930.92	\$ 72.51	1.0000	0.9925	1.000	\$0.00
Outpatient Hospital Services	70,245	2,714	18,653	25.88	40.23	1.0008	0.9925	0.850	33.97
Physician Services	240,158	9,979	68,584	24.07	137.55	1.0066	0.9925	0.896	123.07
Drug Services	121,825	1,749	12,021	69.65	69.77	1.0000	0.9925	0.901	62.38
Other Services	65,536	2,064	14,186	31.75	37.53	1.0066	0.9925	0.873	32.74
Total	\$624,369	16,642	114,378	\$37.52	\$ 357.60				\$252.16
Total (Excluding Inpatient)	\$497,763	16,506	113,443	\$30.16	\$ 285.09				\$252.16

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide

Eligibility Category: Foster Care, COE 026

MSCAN Opt-Out CY2011 Member Months: 10,895

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$2,100,447	2,693	2,107	\$779.97	\$ 136.97	0.0000	0.0000	1.000	\$136.97
Outpatient Hospital Services	458,471	15,466	12,103	29.64	29.90	1.0008	0.9925	0.850	25.24
Physician Services	2,226,033	51,360	40,190	43.34	145.16	1.0066	0.9925	0.896	129.88
Drug Services	1,804,604	21,788	17,050	82.83	117.68	1.0000	0.9925	0.901	105.21
Other Services	864,191	35,595	27,854	24.28	56.35	1.0066	0.9925	0.873	49.15
Total	\$7,453,746	126,902	99,304	\$58.74	\$ 486.06				\$446.46
Total (Excluding Inpatient)	\$5,353,299	124,209	97,196	\$43.10	\$ 349.09				\$309.49

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Statewide
Eligibility Category: Foster Care, COE 003
COE 003 CY2011 Member Months: 35,408

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$2,256,470	2,892	1,059	\$780.25	\$ 68.89	1.0000	0.9925	1.000	\$0.00
Outpatient Hospital Services	806,441	19,803	7,255	40.72	24.62	1.0008	0.9925	1.000	24.45
Physician Services	2,953,044	84,135	30,822	35.10	90.15	1.0066	0.9925	1.000	90.07
Drug Services	3,187,417	34,418	12,609	92.61	97.31	1.0000	0.9925	1.000	96.58
Other Services	1,358,352	71,745	26,283	18.93	41.47	1.0066	0.9925	1.000	41.45
Total	\$10,561,724	212,993	78,029	\$49.59	\$ 322.44				\$252.55
Total (Excluding Inpatient)	\$8,305,254	210,101	76,969	\$39.53	\$ 253.55				\$252.55

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: North
Eligibility Category: SSI and Disabled
MSCAN Opt-Out CY2011 Member Months: 86,396

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$18,400,575	12,597	1,370	\$1,460.71	\$ 166.82	1.0000	0.9925	1.000	\$165.57
Outpatient Hospital Services	10,762,899	354,893	38,611	30.33	97.58	1.0008	0.9925	0.850	82.39
Physician Services	17,770,396	1,151,889	125,320	15.43	161.11	1.0066	0.9925	0.863	138.93
Drug Services	23,481,375	294,886	32,082	79.63	212.89	1.0000	0.9925	0.900	190.21
Other Services	10,471,030	1,242,382	135,165	8.43	94.93	1.0066	0.9925	0.845	80.36
Total	\$80,886,275	3,056,647	332,548	\$26.46	\$ 733.34				\$657.46
Total (Excluding Inpatient)	\$62,485,700	3,044,050	331,178	\$20.53	\$ 566.51				\$491.89

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: North
Eligibility Category: Foster Care
MSCAN Opt-Out CY2011 Member Months: 2,521

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$1,135,454	1,561	1,345	\$727.39	\$ 81.53	1.0000	0.9925	1.000	\$80.92
Outpatient Hospital Services	347,367	10,146	8,742	34.24	24.94	1.0008	0.9925	0.850	21.06
Physician Services	1,483,360	43,794	37,734	33.87	106.51	1.0066	0.9925	0.896	95.30
Drug Services	1,379,820	16,186	13,946	85.25	99.08	1.0000	0.9925	0.901	88.58
Other Services	724,546	35,976	30,998	20.14	52.02	1.0066	0.9925	0.873	45.39
Total	\$5,070,548	107,663	92,766	\$47.10	\$ 364.08				\$331.24
Total (Excluding Inpatient)	\$3,935,094	106,102	91,421	\$37.09	\$ 282.55				\$250.32

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: North
Eligibility Category: Breast and Cervical Cancer
MSCAN Opt-Out CY2011 Member Months: 202

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$123,283	74	3,828	\$1,665.99	\$ 531.39	1.0000	0.9925	1.000	\$527.41
Outpatient Hospital Services	174,753	5,839	302,017	29.93	753.25	1.0008	0.9925	0.850	635.97
Physician Services	323,078	7,858	406,448	41.11	1,392.58	1.0066	0.9925	0.850	1,182.60
Drug Services	86,133	862	44,586	99.92	371.26	1.0000	0.9925	0.900	331.63
Other Services	18,630	1,206	62,379	15.45	80.30	1.0066	0.9925	0.835	67.12
Total	\$725,877	15,839	819,259	\$45.83	\$ 3,128.78				\$2,744.72
Total (Excluding Inpatient)	\$602,594	15,765	815,431	\$38.22	\$ 2,597.39				\$2,217.31

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: North
Eligibility Category: SSI / Disabled Newborn
MSCAN Opt-Out CY2011 Member Months: 368

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$266,986	125	5,474	\$2,135.89	\$ 974.40	1.0000	0.9925	1.000	\$967.09
Outpatient Hospital Services	32,827	922	40,380	35.60	119.81	1.0008	0.9925	0.852	101.40
Physician Services	137,182	3,889	170,321	35.27	500.66	1.0066	0.9925	0.875	437.60
Drug Services	189,332	525	22,993	360.63	690.99	1.0000	0.9925	0.900	617.23
Other Services	33,843	3,625	158,759	9.34	123.51	1.0066	0.9925	0.839	103.82
Total	\$660,170	9,086	397,927	\$72.66	\$ 2,409.38				\$2,227.15
Total (Excluding Inpatient)	\$393,184	8,961	392,453	\$43.88	\$ 1,434.98				\$1,260.05

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Central
Eligibility Category: SSI and Disabled
MSCAN Opt-Out CY2011 Member Months: 72,124

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$16,399,927	12,105	1,637	\$1,354.81	\$ 184.84	1.0000	0.9925	1.000	\$183.46
Outpatient Hospital Services	9,559,467	308,392	41,710	31.00	107.74	1.0008	0.9925	0.850	90.97
Physician Services	16,202,757	1,214,624	164,279	13.34	182.62	1.0066	0.9925	0.863	157.48
Drug Services	21,152,888	237,508	32,123	89.06	238.41	1.0000	0.9925	0.900	213.02
Other Services	9,256,718	1,067,570	144,390	8.67	104.33	1.0066	0.9925	0.845	88.31
Total	\$72,571,757	2,840,199	384,139	\$25.55	\$ 817.95				\$733.24
Total (Excluding Inpatient)	\$56,171,830	2,828,094	382,502	\$19.86	\$ 633.11				\$549.78

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Central
Eligibility Category: Foster Care
MSCAN Opt-Out CY2011 Member Months: 3,075
COE 003 CY2011 Member Months: 12,605

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$1,658,711	2,174	1,618	\$762.98	\$ 102.86	1.0000	0.9925	1.000	\$102.09
Outpatient Hospital Services	483,196	11,039	8,215	43.77	29.96	1.0008	0.9925	0.850	25.30
Physician Services	2,185,882	55,185	41,065	39.61	135.55	1.0066	0.9925	0.896	121.28
Drug Services	1,732,047	18,628	13,862	92.98	107.41	1.0000	0.9925	0.901	96.02
Other Services	713,620	37,863	28,175	18.85	44.25	1.0066	0.9925	0.873	38.60
Total	\$6,773,456	124,889	92,935	\$54.24	\$ 420.03				\$383.30
Total (Excluding Inpatient)	\$5,114,745	122,715	91,317	\$41.68	\$ 317.17				\$281.21

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Central
Eligibility Category: Breast and Cervical Cancer
MSCAN Opt-Out CY2011 Member Months: 145

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$7,473	4	364	\$1,868.23	\$ 56.61	1.0000	0.9925	1.000	\$56.19
Outpatient Hospital Services	83,366	2,721	247,364	30.64	631.56	1.0008	0.9925	0.850	533.23
Physician Services	125,296	4,673	424,818	26.81	949.21	1.0066	0.9925	0.850	806.08
Drug Services	26,131	456	41,455	57.30	197.96	1.0000	0.9925	0.900	176.83
Other Services	5,162	568	51,636	9.09	39.11	1.0066	0.9925	0.835	32.66
Total	\$247,427	8,422	765,636	\$29.38	\$ 1,874.45				\$1,604.98
Total (Excluding Inpatient)	\$239,954	8,418	765,273	\$28.50	\$ 1,817.83				\$1,548.80

Appendix B
Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: Central
Eligibility Category: SSI / Disabled Newborn
MSCAN Opt-Out CY2011 Member Months: 517

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$263,002	196	5,954	\$1,341.85	\$ 665.83	1.0000	0.9925	1.000	\$660.83
Outpatient Hospital Services	64,506	1,339	40,678	48.18	163.31	1.0008	0.9925	0.852	138.22
Physician Services	120,505	3,735	113,468	32.26	305.08	1.0066	0.9925	0.875	266.65
Drug Services	202,481	743	22,572	272.52	512.61	1.0000	0.9925	0.900	457.89
Other Services	84,466	5,357	162,744	15.77	213.84	1.0066	0.9925	0.839	179.67
Total	\$734,961	11,370	345,418	\$64.64	\$ 1,860.66				\$1,703.26
Total (Excluding Inpatient)	\$471,959	11,174	339,463	\$42.24	\$ 1,194.83				\$1,042.43

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: South
Eligibility Category: SSI and Disabled
MSCAN Opt-Out CY2011 Member Months: 76,323

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$18,818,228	12,179	1,589	\$1,545.14	\$ 204.59	1.0000	0.9925	1.000	\$203.06
Outpatient Hospital Services	11,508,238	414,565	54,086	27.76	125.12	1.0008	0.9925	0.850	105.64
Physician Services	15,557,939	851,366	111,073	18.27	169.15	1.0066	0.9925	0.863	145.86
Drug Services	24,451,793	281,055	36,668	87.00	265.84	1.0000	0.9925	0.900	237.53
Other Services	9,095,282	1,149,196	149,929	7.91	98.88	1.0066	0.9925	0.845	83.72
Total	\$79,431,480	2,708,361	353,345	\$29.33	\$ 863.58				\$775.81
Total (Excluding Inpatient)	\$60,613,252	2,696,182	351,756	\$22.48	\$ 658.99				\$572.75

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: South
Eligibility Category: Foster Care
MSCAN Opt-Out CY2011 Member Months: 5,299
COE 003 CY2011 Member Months: 11,842

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$1,562,752	1,850	1,231	\$844.73	\$ 86.64	1.0000	0.9925	1.000	\$85.99
Outpatient Hospital Services	434,348	14,084	9,370	30.84	24.08	1.0008	0.9925	0.850	20.33
Physician Services	1,509,835	36,516	24,293	41.35	83.70	1.0066	0.9925	0.896	74.89
Drug Services	1,880,154	21,392	14,231	87.89	104.23	1.0000	0.9925	0.901	93.19
Other Services	784,378	33,501	22,287	23.41	43.48	1.0066	0.9925	0.873	37.92
Total	\$6,171,467	107,343	71,411	\$57.49	\$ 342.14				\$312.32
Total (Excluding Inpatient)	\$4,608,715	105,493	70,181	\$43.69	\$ 255.50				\$226.33

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: South
Eligibility Category: Breast and Cervical Cancer
MSCAN Opt-Out CY2011 Member Months: 330

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$90,684	53	3,383	\$1,711.01	\$ 482.36	1.0000	0.9925	1.000	\$478.74
Outpatient Hospital Services	176,414	6,415	409,468	27.50	938.37	1.0008	0.9925	0.850	792.27
Physician Services	148,724	7,650	488,298	19.44	791.09	1.0066	0.9925	0.850	671.80
Drug Services	36,371	576	36,766	63.14	193.46	1.0000	0.9925	0.900	172.81
Other Services	15,773	1,571	100,277	10.04	83.90	1.0066	0.9925	0.835	70.16
Total	\$467,966	16,265	1,038,191	\$28.77	\$ 2,489.18				\$2,185.79
Total (Excluding Inpatient)	\$377,283	16,212	1,034,809	\$23.27	\$ 2,006.82				\$1,707.05

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Mississippi Division of Medicaid
January 2014 - June 2014 MississippiCAN Capitation Rate Development
MississippiCAN Original Rate Cells
CY 2012 FFS Data - MississippiCAN Opt-Outs and COE 003

Region: South
Eligibility Category: SSI / Disabled Newborn
MSCAN Opt-Out CY2011 Member Months: 322

	a	b	c	d=a/b	e	f	g	h	i=e*f*g*h
Benefits	Adjusted Allowed Dollars	Adjusted Allowed Services	Utilization Per 1,000	Average Allowed Charge	Per Capita Monthly Allowed Cost	IBNR Adjustment	TPL Adjustment	CCO Savings Adjustment	Per Capita Monthly Allowed Cost
Inpatient Hospital Services	\$705,706	371	20,804	\$1,902.17	\$ 3,297.69	1.0000	0.9925	1.000	\$3,272.96
Outpatient Hospital Services	51,004	1,405	78,785	36.30	238.34	1.0008	0.9925	0.852	201.72
Physician Services	146,233	2,657	148,991	55.04	683.33	1.0066	0.9925	0.875	597.26
Drug Services	149,923	495	27,757	302.87	700.57	1.0000	0.9925	0.900	625.79
Other Services	86,720	6,837	383,383	12.68	405.24	1.0066	0.9925	0.839	340.40
Total	\$1,139,586	11,765	659,720	\$96.86	\$ 5,325.17				\$5,038.12
Total (Excluding Inpatient)	\$433,880	11,394	638,916	\$38.08	\$ 2,027.48				\$1,765.17

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 19-39 Male

Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	31,089	1,438	\$ 1,981,355	555	1,377.85	\$ 63.73	31,215	1,213	\$ 1,864,136	466	1,536.80	\$ 59.72
02	Outpatient Hospital Services	31,089	60,572	1,815,240	23,380	29.97	\$ 58.39	31,215	62,130	1,982,725	23,885	31.91	\$ 63.52
03	Lab and Radiology Services	31,089	7,234	118,049	2,792	16.32	\$ 3.80	31,215	4,610	83,718	1,772	18.16	\$ 2.68
05	Physician Services	31,089	46,281	1,486,388	17,864	32.12	\$ 47.81	31,215	46,192	1,452,213	17,758	31.44	\$ 46.52
06	Home and Community Based Services	31,089	0	-	0	0.00	\$ -	31,215	0	-	0	0.00	\$ -
07	Home Health Agency Services	31,089	573	8,641	221	15.08	\$ 0.28	31,215	428	6,993	165	16.34	\$ 0.22
09	Mental Health Clinic Services	31,089	3,533	133,476	1,364	37.78	\$ 4.29	31,215	2,628	120,005	1,010	45.66	\$ 3.84
10	Periodic Screening Services (EPDST)	31,089	28	715	11	25.54	\$ 0.02	31,215	22	577	8	26.22	\$ 0.02
11	Emergency/Non-Emergency Transportation	31,089	2,067	77,959	798	37.72	\$ 2.51	31,215	3,332	105,593	1,281	31.69	\$ 3.38
12	Dental Services	31,089	5,463	316,760	2,109	57.98	\$ 10.19	31,215	5,208	296,514	2,002	56.93	\$ 9.50
13	Eyeglass Services	31,089	2,146	87,460	828	40.75	\$ 2.81	31,215	2,183	89,422	839	40.96	\$ 2.86
15	Drug Services ¹	31,089	35,336	1,401,655	13,639	39.67	\$ 45.09	31,215	37,340	1,538,324	14,355	41.20	\$ 49.28
16	Dental Screening	31,089	310	18,750	120	60.48	\$ 0.60	31,215	180	11,389	69	63.27	\$ 0.36
17	Eyeglass Screening	31,089	70	2,690	27	38.42	\$ 0.09	31,215	98	3,992	38	40.73	\$ 0.13
18	Hearing Screening Services	31,089	2	46	1	22.87	\$ 0.00	31,215	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	31,089	3,507	166,746	1,354	47.55	\$ 5.36	31,215	3,095	159,556	1,190	51.55	\$ 5.11
23	FQHC (Federally Qualified Health Center)	31,089	974	65,396	376	67.14	\$ 2.10	31,215	937	62,579	360	66.79	\$ 2.00
24	DME (Durable Medical Equipment Services)	31,089	2,834	45,680	1,094	16.12	\$ 1.47	31,215	4,691	54,996	1,803	11.72	\$ 1.76
25	Therapy Services, (outside the Home Health Program)	31,089	288	7,312	111	25.39	\$ 0.24	31,215	446	10,976	171	24.61	\$ 0.35
27	Inpatient Psychiatric Hospital Services	31,089	0	-	0	0.00	\$ -	31,215	0	-	0	0.00	\$ -
28	Nurse Services	31,089	23,890	165,813	9,221	6.94	\$ 5.33	31,215	28,059	223,372	10,787	7.96	\$ 7.16
29	Ambulatory Surgical Centers	31,089	216	60,947	83	282.16	\$ 1.96	31,215	263	77,614	101	295.11	\$ 2.49
31	Hospice Services	31,089	0	-	0	0.00	\$ -	31,215	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	31,089	0	-	0	0.00	\$ -	31,215	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	31,089	28	2,566	11	91.64	\$ 0.08	31,215	55	4,812	21	87.50	\$ 0.15
34	Family Planning Drug Services*	31,089	0	-	0	0.00	\$ -	31,215	2	201	1	100.28	\$ 0.01
35	Freestanding Dialysis Services	31,089	1,084	4,488	418	4.14	\$ 0.14	31,215	7,185	11,299	2,762	1.57	\$ 0.36
98	Unknown	31,089	0	3	0	0.00	\$ 0.00	31,215	0	15	0	0.00	\$ 0.00
Total		31,089		\$ 7,968,134			\$ 256.30	31,215		\$ 8,161,019			\$ 261.45
Total Excluding Inpatient Hospital Services		31,089		\$ 5,986,780			\$ 192.57	31,215		\$ 6,296,883			\$ 201.73

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 40+ Male
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	11,705	716	\$ 1,169,076	734	1,632.79	\$ 99.88	12,288	847	\$ 1,354,279	827	1,598.91	\$ 110.21
02	Outpatient Hospital Services	11,705	44,387	1,240,772	45,506	27.95	\$ 106.00	12,288	42,727	1,276,159	41,726	29.87	\$ 103.85
03	Lab and Radiology Services	11,705	3,232	52,984	3,313	16.39	\$ 4.53	12,288	2,690	48,686	2,627	18.10	\$ 3.96
05	Physician Services	11,705	28,526	968,202	29,245	33.94	\$ 82.72	12,288	33,431	1,005,432	32,647	30.07	\$ 81.82
06	Home and Community Based Services	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
07	Home Health Agency Services	11,705	912	17,902	935	19.63	\$ 1.53	12,288	586	13,606	572	23.22	\$ 1.11
09	Mental Health Clinic Services	11,705	3,197	75,067	3,278	23.48	\$ 6.41	12,288	3,807	68,018	3,718	17.87	\$ 5.54
10	Periodic Screening Services (EPDST)	11,705	8	148	8	18.50	\$ 0.01	12,288	7	72	7	10.28	\$ 0.01
11	Emergency/Non-Emergency Transportation	11,705	1,051	33,171	1,077	31.56	\$ 2.83	12,288	1,169	40,356	1,142	34.52	\$ 3.28
12	Dental Services	11,705	1,955	114,361	2,004	58.50	\$ 9.77	12,288	1,902	115,897	1,857	60.93	\$ 9.43
13	Eyeglass Services	11,705	1,530	62,476	1,569	40.83	\$ 5.34	12,288	1,498	63,358	1,463	42.30	\$ 5.16
15	Drug Services ¹	11,705	23,237	1,119,498	23,823	48.18	\$ 95.64	12,288	25,025	1,427,894	24,438	57.06	\$ 116.20
16	Dental Screening	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
17	Eyeglass Screening	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
18	Hearing Screening Services	11,705	6	131	6	21.82	\$ 0.01	12,288	7	198	7	28.22	\$ 0.02
22	Rural Health Clinic Services	11,705	1,669	86,653	1,711	51.92	\$ 7.40	12,288	1,645	84,863	1,606	51.59	\$ 6.91
23	FQHC (Federally Qualified Health Center)	11,705	978	55,508	1,003	56.76	\$ 4.74	12,288	627	44,559	612	71.07	\$ 3.63
24	DME (Durable Medical Equipment Services)	11,705	5,009	71,317	5,135	14.24	\$ 6.09	12,288	8,329	65,574	8,134	7.87	\$ 5.34
25	Therapy Services, (outside the Home Health Program)	11,705	364	7,725	373	21.22	\$ 0.66	12,288	334	8,371	326	25.06	\$ 0.68
27	Inpatient Psychiatric Hospital Services	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
28	Nurse Services	11,705	14,526	78,895	14,892	5.43	\$ 6.74	12,288	18,551	116,783	18,116	6.30	\$ 9.50
29	Ambulatory Surgical Centers	11,705	148	43,515	152	294.02	\$ 3.72	12,288	214	67,182	209	313.93	\$ 5.47
31	Hospice Services	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	11,705	4	370	4	92.43	\$ 0.03	12,288	16	1,412	16	88.25	\$ 0.11
34	Family Planning Drug Services*	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	11,705	0	-	0	0.00	\$ -	12,288	2	228	2	113.83	\$ 0.02
98	Unknown	11,705	0	-	0	0.00	\$ -	12,288	0	-	0	0.00	\$ -
Total		11,705		\$ 5,197,769			\$ 444.06	12,288		\$ 5,802,927			\$ 472.24
Total Excluding Inpatient Hospital Services		11,705		\$ 4,028,693			\$ 344.19	12,288		\$ 4,448,648			\$ 362.03

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 19-39 Female
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	446,585	16,117	\$ 23,954,496	433	1,486.29	\$ 53.64	415,852	15,521	\$ 23,154,203	448	1,491.80	\$ 55.68
02	Outpatient Hospital Services	446,585	1,238,341	32,782,247	33,275	26.47	\$ 73.41	415,852	1,235,652	31,855,276	35,656	25.78	\$ 76.60
03	Lab and Radiology Services	446,585	193,648	4,254,631	5,203	21.97	\$ 9.53	415,852	163,159	3,686,043	4,708	22.59	\$ 8.86
05	Physician Services	446,585	786,756	28,398,294	21,141	36.10	\$ 63.59	415,852	752,900	26,702,177	21,726	35.47	\$ 64.21
06	Home and Community Based Services	446,585	0	-	0	0.00	\$ -	415,852	0	-	0	0.00	\$ -
07	Home Health Agency Services	446,585	7,201	108,425	193	15.06	\$ 0.24	415,852	4,070	80,270	117	19.72	\$ 0.19
09	Mental Health Clinic Services	446,585	120,345	2,340,610	3,234	19.45	\$ 5.24	415,852	89,301	2,009,803	2,577	22.51	\$ 4.83
10	Periodic Screening Services (EPDST)	446,585	1,261	55,781	34	44.24	\$ 0.12	415,852	1,064	39,268	31	36.91	\$ 0.09
11	Emergency/Non-Emergency Transportation	446,585	34,603	1,266,512	930	36.60	\$ 2.84	415,852	32,691	1,284,971	943	39.31	\$ 3.09
12	Dental Services	446,585	65,548	3,409,967	1,761	52.02	\$ 7.64	415,852	64,258	3,414,767	1,854	53.14	\$ 8.21
13	Eyeglass Services	446,585	37,817	1,617,485	1,016	42.77	\$ 3.62	415,852	34,755	1,517,629	1,003	43.67	\$ 3.65
15	Drug Services ¹	446,585	565,512	18,853,405	15,196	33.34	\$ 42.22	415,852	556,118	19,590,113	16,048	35.23	\$ 47.11
16	Dental Screening	446,585	12,903	763,164	347	59.15	\$ 1.71	415,852	10,729	642,570	310	59.89	\$ 1.55
17	Eyeglass Screening	446,585	5,873	213,785	158	36.40	\$ 0.48	415,852	5,050	187,749	146	37.18	\$ 0.45
18	Hearing Screening Services	446,585	56	1,223	2	21.84	\$ 0.00	415,852	38	877	1	23.08	\$ 0.00
22	Rural Health Clinic Services	446,585	75,008	4,399,775	2,016	58.66	\$ 9.85	415,852	70,930	4,200,272	2,047	59.22	\$ 10.10
23	FQHC (Federally Qualified Health Center)	446,585	40,524	2,692,769	1,089	66.45	\$ 6.03	415,852	34,216	2,348,064	987	68.62	\$ 5.65
24	DME (Durable Medical Equipment Services)	446,585	50,050	552,989	1,345	11.05	\$ 1.24	415,852	38,943	485,561	1,124	12.47	\$ 1.17
25	Therapy Services, (outside the Home Health Program)	446,585	2,011	48,849	54	24.29	\$ 0.11	415,852	4,467	107,122	129	23.98	\$ 0.26
27	Inpatient Psychiatric Hospital Services	446,585	40	18,734	1	468.36	\$ 0.04	415,852	62	35,154	2	567.01	\$ 0.08
28	Nurse Services	446,585	435,573	3,468,463	11,704	7.96	\$ 7.77	415,852	441,854	3,789,402	12,750	8.58	\$ 9.11
29	Ambulatory Surgical Centers	446,585	1,893	628,997	51	332.28	\$ 1.41	415,852	2,102	970,809	61	461.85	\$ 2.33
31	Hospice Services	446,585	83	10,745	2	129.46	\$ 0.02	415,852	15	2,051	0	136.70	\$ 0.00
32	Outpatient Psychiatric Hospital Services	446,585	0	-	0	0.00	\$ -	415,852	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	446,585	676	57,575	18	85.17	\$ 0.13	415,852	1,067	91,173	31	85.45	\$ 0.22
34	Family Planning Drug Services*	446,585	39,177	1,645,694	1,053	42.01	\$ 3.69	415,852	35,261	1,469,215	1,018	41.67	\$ 3.53
35	Freestanding Dialysis Services	446,585	13,542	22,043	364	1.63	\$ 0.05	415,852	2,314	4,077	67	1.76	\$ 0.01
98	Unknown	446,585	0	27	0	0.00	\$ 0.00	415,852	0	42	0	0.00	\$ 0.00
Total		446,585		\$ 131,566,684			\$ 294.61	415,852		\$ 127,668,659			\$ 307.01
Total Excluding Inpatient Hospital Services		446,585		\$ 107,593,454			\$ 240.92	415,852		\$ 104,479,301			\$ 251.24

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 40+ Female
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	57,343	3,271	\$ 4,738,456	685	1,448.63	\$ 82.63	54,985	3,159	\$ 4,944,500	689	1,565.21	\$ 89.92
02	Outpatient Hospital Services	57,343	205,180	5,789,868	42,937	28.22	\$ 100.97	54,985	197,329	5,561,574	43,065	28.18	\$ 101.15
03	Lab and Radiology Services	57,343	19,773	380,303	4,138	19.23	\$ 6.63	54,985	17,142	353,573	3,741	20.63	\$ 6.43
05	Physician Services	57,343	137,002	4,397,136	28,670	32.10	\$ 76.68	54,985	142,366	4,367,931	31,070	30.68	\$ 79.44
06	Home and Community Based Services	57,343	620	2,058	130	3.32	\$ 0.04	54,985	0	-	0	0.00	\$ -
07	Home Health Agency Services	57,343	3,217	55,859	673	17.36	\$ 0.97	54,985	1,168	45,330	255	38.81	\$ 0.82
09	Mental Health Clinic Services	57,343	25,969	519,559	5,434	20.01	\$ 9.06	54,985	24,852	521,756	5,424	20.99	\$ 9.49
10	Periodic Screening Services (EPDST)	57,343	138	3,926	29	28.45	\$ 0.07	54,985	146	3,526	32	24.15	\$ 0.06
11	Emergency/Non-Emergency Transportation	57,343	4,096	172,835	857	42.20	\$ 3.01	54,985	3,968	176,742	866	44.54	\$ 3.21
12	Dental Services	57,343	7,221	385,018	1,511	53.32	\$ 6.71	54,985	7,351	398,274	1,604	54.18	\$ 7.24
13	Eyeglass Services	57,343	7,775	335,333	1,627	43.13	\$ 5.85	54,985	7,592	333,151	1,657	43.88	\$ 6.06
15	Drug Services ¹	57,343	129,796	5,269,302	27,162	40.60	\$ 91.89	54,985	130,890	5,546,514	28,566	42.38	\$ 100.87
16	Dental Screening	57,343	0	-	0	0.00	\$ -	54,985	0	-	0	0.00	\$ -
17	Eyeglass Screening	57,343	0	-	0	0.00	\$ -	54,985	0	-	0	0.00	\$ -
18	Hearing Screening Services	57,343	7	171	1	24.46	\$ 0.00	54,985	24	580	5	24.18	\$ 0.01
22	Rural Health Clinic Services	57,343	10,313	503,611	2,158	48.83	\$ 8.78	54,985	10,215	512,516	2,229	50.17	\$ 9.32
23	FQHC (Federally Qualified Health Center)	57,343	5,536	389,003	1,159	70.27	\$ 6.78	54,985	5,095	351,046	1,112	68.90	\$ 6.38
24	DME (Durable Medical Equipment Services)	57,343	19,314	251,556	4,042	13.02	\$ 4.39	54,985	21,428	224,221	4,676	10.46	\$ 4.08
25	Therapy Services, (outside the Home Health Program)	57,343	1,023	23,747	214	23.21	\$ 0.41	54,985	1,572	37,076	343	23.59	\$ 0.67
27	Inpatient Psychiatric Hospital Services	57,343	0	-	0	0.00	\$ -	54,985	0	-	0	0.00	\$ -
28	Nurse Services	57,343	73,409	458,503	15,362	6.25	\$ 8.00	54,985	88,840	558,114	19,389	6.28	\$ 10.15
29	Ambulatory Surgical Centers	57,343	579	172,933	121	298.67	\$ 3.02	54,985	795	245,734	174	309.10	\$ 4.47
31	Hospice Services	57,343	264	33,790	55	127.99	\$ 0.59	54,985	162	29,397	35	181.46	\$ 0.53
32	Outpatient Psychiatric Hospital Services	57,343	0	-	0	0.00	\$ -	54,985	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	57,343	135	11,031	28	81.71	\$ 0.19	54,985	130	11,048	28	84.99	\$ 0.20
34	Family Planning Drug Services*	57,343	999	36,915	209	36.95	\$ 0.64	54,985	932	34,346	203	36.85	\$ 0.62
35	Freestanding Dialysis Services	57,343	0	-	0	0.00	\$ -	54,985	2,961	5,610	646	1.89	\$ 0.10
98	Unknown	57,343	0	6	0	0.00	\$ 0.00	54,985	0	6	0	0.00	\$ 0.00
Total		57,343		\$ 23,930,921			\$ 417.33	54,985		\$ 24,262,566			\$ 441.26
Total Excluding Inpatient Hospital Services		57,343		\$ 19,192,464			\$ 334.70	54,985		\$ 19,318,066			\$ 351.33

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Pregnant Women
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	190,843	8,238	\$ 12,076,409	518	1,465.94	\$ 63.28	174,414	8,608	\$ 12,000,049	592	1,394.06	\$ 68.80
02	Outpatient Hospital Services	190,843	1,707,784	17,145,165	107,384	10.04	\$ 89.84	174,414	645,148	15,421,909	44,387	23.90	\$ 88.42
03	Lab and Radiology Services	190,843	217,392	3,992,286	13,669	18.36	\$ 20.92	174,414	191,453	3,533,115	13,172	18.45	\$ 20.26
05	Physician Services	190,843	458,623	28,788,713	28,838	62.77	\$ 150.85	174,414	431,742	26,308,558	29,705	60.94	\$ 150.84
06	Home and Community Based Services	190,843	0	-	0	0.00	\$ -	174,414	0	-	0	0.00	\$ -
07	Home Health Agency Services	190,843	1,560	50,561	98	32.41	\$ 0.26	174,414	1,986	53,800	137	27.09	\$ 0.31
09	Mental Health Clinic Services	190,843	7,517	168,269	473	22.39	\$ 0.88	174,414	3,351	118,884	231	35.48	\$ 0.68
10	Periodic Screening Services (EPDST)	190,843	219	8,170	14	37.31	\$ 0.04	174,414	253	7,632	17	30.17	\$ 0.04
11	Emergency/Non-Emergency Transportation	190,843	22,301	538,238	1,402	24.14	\$ 2.82	174,414	19,423	469,354	1,336	24.16	\$ 2.69
12	Dental Services	190,843	48	3,366	3	70.13	\$ 0.02	174,414	66	2,800	5	42.43	\$ 0.02
13	Eyeglass Services	190,843	1,442	92,440	91	64.11	\$ 0.48	174,414	1,336	89,442	92	66.95	\$ 0.51
15	Drug Services ¹	190,843	179,606	4,944,414	11,293	27.53	\$ 25.91	174,414	159,181	4,338,106	10,952	27.25	\$ 24.87
16	Dental Screening	190,843	755	38,909	47	51.53	\$ 0.20	174,414	563	28,367	39	50.39	\$ 0.16
17	Eyeglass Screening	190,843	1,945	75,445	122	38.79	\$ 0.40	174,414	1,619	63,521	111	39.23	\$ 0.36
18	Hearing Screening Services	190,843	11	379	1	34.50	\$ 0.00	174,414	11	248	1	22.56	\$ 0.00
22	Rural Health Clinic Services	190,843	33,433	2,700,065	2,102	80.76	\$ 14.15	174,414	29,192	2,503,252	2,008	85.75	\$ 14.35
23	FQHC (Federally Qualified Health Center)	190,843	25,038	1,748,009	1,574	69.81	\$ 9.16	174,414	23,386	1,722,497	1,609	73.66	\$ 9.88
24	DME (Durable Medical Equipment Services)	190,843	19,741	248,711	1,241	12.60	\$ 1.30	174,414	14,994	242,598	1,032	16.18	\$ 1.39
25	Therapy Services, (outside the Home Health Program)	190,843	64	1,843	4	28.79	\$ 0.01	174,414	135	3,672	9	27.20	\$ 0.02
27	Inpatient Psychiatric Hospital Services	190,843	23	11,119	1	483.42	\$ 0.06	174,414	29	17,723	2	611.15	\$ 0.10
28	Nurse Services	190,843	145,361	2,441,930	9,140	16.80	\$ 12.80	174,414	123,086	2,037,584	8,469	16.55	\$ 11.68
29	Ambulatory Surgical Centers	190,843	150	51,438	9	342.92	\$ 0.27	174,414	134	102,560	9	765.37	\$ 0.59
31	Hospice Services	190,843	10	6,028	1	602.84	\$ 0.03	174,414	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	190,843	0	-	0	0.00	\$ -	174,414	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	190,843	189	15,816	12	83.68	\$ 0.08	174,414	269	20,640	19	76.73	\$ 0.12
34	Family Planning Drug Services*	190,843	11,572	425,492	728	36.77	\$ 2.23	174,414	10,237	365,712	704	35.72	\$ 2.10
35	Freestanding Dialysis Services	190,843	0	-	0	0.00	\$ -	174,414	6	691	0	115.18	\$ 0.00
98	Unknown	190,843	0	-	0	0.00	\$ -	174,414	0	-	0	0.00	\$ -
Total		190,843		\$ 75,573,213			\$ 396.00	174,414		\$ 69,452,714			\$ 398.21
Total Excluding Inpatient Hospital Services		190,843		\$ 63,485,686			\$ 332.66	174,414		\$ 57,434,942			\$ 329.30

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Newborns 0-2 Months
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	66,914	31,466	\$ 52,542,138	5,643	1,669.81	\$ 785.22	57,758	34,962	\$ 54,940,375	7,264	1,571.43	\$ 951.22
02	Outpatient Hospital Services	66,914	63,617	2,244,631	11,409	35.28	\$ 33.55	57,758	52,768	2,062,650	10,963	39.09	\$ 35.71
03	Lab and Radiology Services	66,914	910	13,466	163	14.80	\$ 0.20	57,758	810	11,535	168	14.24	\$ 0.20
05	Physician Services	66,914	191,225	12,820,569	34,293	67.04	\$ 191.60	57,758	173,912	11,955,772	36,133	68.75	\$ 207.00
06	Home and Community Based Services	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
07	Home Health Agency Services	66,914	877	33,255	157	37.92	\$ 0.50	57,758	396	13,861	82	35.00	\$ 0.24
09	Mental Health Clinic Services	66,914	233	4,850	42	20.82	\$ 0.07	57,758	73	1,780	15	24.39	\$ 0.03
10	Periodic Screening Services (EPDST)	66,914	89,741	2,646,489	16,094	29.49	\$ 39.55	57,758	93,506	2,446,680	19,427	26.17	\$ 42.36
11	Emergency/Non-Emergency Transportation	66,914	23,239	548,279	4,168	23.59	\$ 8.19	57,758	20,031	443,251	4,162	22.13	\$ 7.67
12	Dental Services	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
13	Eyeglass Services	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
15	Drug Services ¹	66,914	36,449	1,334,804	6,537	36.62	\$ 19.95	57,758	32,059	1,134,234	6,661	35.38	\$ 19.64
16	Dental Screening	66,914	33	1,808	6	54.78	\$ 0.03	57,758	22	2,829	5	128.61	\$ 0.05
17	Eyeglass Screening	66,914	18	1,063	3	59.04	\$ 0.02	57,758	17	1,248	4	73.43	\$ 0.02
18	Hearing Screening Services	66,914	211	15,919	38	75.44	\$ 0.24	57,758	154	10,422	32	67.68	\$ 0.18
22	Rural Health Clinic Services	66,914	14,639	1,038,535	2,625	70.94	\$ 15.52	57,758	14,882	961,813	3,092	64.63	\$ 16.65
23	FQHC (Federally Qualified Health Center)	66,914	10,876	630,985	1,950	58.02	\$ 9.43	57,758	7,304	471,154	1,518	64.51	\$ 8.16
24	DME (Durable Medical Equipment Services)	66,914	2,948	199,055	529	67.52	\$ 2.97	57,758	3,409	174,358	708	51.15	\$ 3.02
25	Therapy Services, (outside the Home Health Program)	66,914	47	2,036	8	43.33	\$ 0.03	57,758	14	793	3	56.66	\$ 0.01
27	Inpatient Psychiatric Hospital Services	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
28	Nurse Services	66,914	41,753	449,755	7,488	10.77	\$ 6.72	57,758	44,997	452,588	9,349	10.06	\$ 7.84
29	Ambulatory Surgical Centers	66,914	1	239	0	239.11	\$ 0.00	57,758	1	755	0	755.18	\$ 0.01
31	Hospice Services	66,914	12	1,597	2	133.05	\$ 0.02	57,758	23	6,286	5	273.30	\$ 0.11
32	Outpatient Psychiatric Hospital Services	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	66,914	1	105	0	104.50	\$ 0.00	57,758	1	128	0	127.56	\$ 0.00
34	Family Planning Drug Services*	66,914	0	-	0	0.00	\$ -	57,758	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	66,914	0	-	0	0.00	\$ -	57,758	69	2,374	14	34.40	\$ 0.04
98	Unknown	66,914	0	155	0	0.00	\$ 0.00	57,758	0	-	0	0.00	\$ -
Total		66,914		\$ 74,529,732			\$ 1,113.81	57,758		\$ 75,094,887			\$ 1,300.16
Total Excluding Inpatient Hospital Services		66,914		\$ 21,987,595			\$ 328.59	57,758		\$ 20,154,512			\$ 348.95

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Newborns 3-12 Months
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	286,647	11,072	\$ 17,953,804	464	1,621.55	\$ 62.63	258,758	10,280	\$ 16,628,884	477	1,617.60	\$ 64.26
02	Outpatient Hospital Services	286,647	248,867	9,646,462	10,418	38.76	\$ 33.65	258,758	226,159	9,323,741	10,488	41.23	\$ 36.03
03	Lab and Radiology Services	286,647	13,491	174,787	565	12.96	\$ 0.61	258,758	10,777	137,178	500	12.73	\$ 0.53
05	Physician Services	286,647	296,830	14,997,747	12,426	50.53	\$ 52.32	258,758	265,853	12,830,530	12,329	48.26	\$ 49.59
06	Home and Community Based Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
07	Home Health Agency Services	286,647	970	57,254	41	59.03	\$ 0.20	258,758	454	37,227	21	82.00	\$ 0.14
09	Mental Health Clinic Services	286,647	72	1,364	3	18.94	\$ 0.00	258,758	118	3,045	5	25.80	\$ 0.01
10	Periodic Screening Services (EPDST)	286,647	254,326	6,453,585	10,647	25.38	\$ 22.51	258,758	256,994	5,820,568	11,918	22.65	\$ 22.49
11	Emergency/Non-Emergency Transportation	286,647	20,151	420,390	844	20.86	\$ 1.47	258,758	21,446	445,878	995	20.79	\$ 1.72
12	Dental Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
13	Eyeglass Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
15	Drug Services ¹	286,647	264,609	8,374,356	11,077	31.65	\$ 29.21	258,758	235,756	7,525,952	10,933	31.92	\$ 29.08
16	Dental Screening	286,647	1,317	59,123	55	44.89	\$ 0.21	258,758	1,320	63,647	61	48.22	\$ 0.25
17	Eyeglass Screening	286,647	273	16,854	11	61.74	\$ 0.06	258,758	288	18,585	13	64.53	\$ 0.07
18	Hearing Screening Services	286,647	346	17,370	14	50.20	\$ 0.06	258,758	333	16,891	15	50.72	\$ 0.07
22	Rural Health Clinic Services	286,647	49,917	3,116,987	2,090	62.44	\$ 10.87	258,758	50,530	2,847,042	2,343	56.34	\$ 11.00
23	FQHC (Federally Qualified Health Center)	286,647	32,674	1,743,012	1,368	53.35	\$ 6.08	258,758	26,534	1,461,880	1,231	55.09	\$ 5.65
24	DME (Durable Medical Equipment Services)	286,647	20,097	573,933	841	28.56	\$ 2.00	258,758	20,646	561,588	957	27.20	\$ 2.17
25	Therapy Services, (outside the Home Health Program)	286,647	3,252	95,248	136	29.29	\$ 0.33	258,758	2,653	82,126	123	30.96	\$ 0.32
27	Inpatient Psychiatric Hospital Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
28	Nurse Services	286,647	121,200	1,631,650	5,074	13.46	\$ 5.69	258,758	122,215	1,711,868	5,668	14.01	\$ 6.62
29	Ambulatory Surgical Centers	286,647	693	322,198	29	464.93	\$ 1.12	258,758	759	437,303	35	576.16	\$ 1.69
31	Hospice Services	286,647	28	3,704	1	132.27	\$ 0.01	258,758	56	7,305	3	130.45	\$ 0.03
32	Outpatient Psychiatric Hospital Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	286,647	15	1,284	1	85.58	\$ 0.00	258,758	14	1,266	1	90.46	\$ 0.00
34	Family Planning Drug Services*	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	286,647	0	-	0	0.00	\$ -	258,758	0	-	0	0.00	\$ -
98	Unknown	286,647	0	-	0	0.00	\$ -	258,758	0	344	0	0.00	\$ 0.00
Total		286,647		\$ 65,661,111			\$ 229.07	258,758		\$ 59,962,847			\$ 231.73
Total Excluding Inpatient Hospital Services		286,647		\$ 47,707,308			\$ 166.43	258,758		\$ 43,333,963			\$ 167.47

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Delivery Kick Payment
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	23,341	60,884	\$ 90,433,856	31,301	1,485.35	\$ 3,874.46	20,664	52,982	\$ 79,651,112	30,768	1,503.36	\$ 3,854.58
02	Outpatient Hospital Services	23,341	44,012	960,866	22,627	21.83	\$ 41.17	20,664	34,873	808,757	20,251	23.19	\$ 39.14
03	Lab and Radiology Services	23,341	3,930	203,852	2,020	51.87	\$ 8.73	20,664	3,714	204,891	2,157	55.17	\$ 9.92
05	Physician Services	23,341	125,796	25,019,276	64,674	198.89	\$ 1,071.90	20,664	108,834	22,821,516	63,202	209.69	\$ 1,104.41
06	Home and Community Based Services	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
07	Home Health Agency Services	23,341	1,264	15,223	650	12.04	\$ 0.65	20,664	1,122	11,735	652	10.46	\$ 0.57
09	Mental Health Clinic Services	23,341	550	12,921	283	23.49	\$ 0.55	20,664	419	11,853	243	28.29	\$ 0.57
10	Periodic Screening Services (EPDST)	23,341	44	1,342	23	30.49	\$ 0.06	20,664	155	3,345	90	21.58	\$ 0.16
11	Emergency/Non-Emergency Transportation	23,341	20,492	338,811	10,535	16.53	\$ 14.52	20,664	17,497	293,001	10,161	16.75	\$ 14.18
12	Dental Services	23,341	152	6,708	78	44.13	\$ 0.29	20,664	155	7,318	90	47.21	\$ 0.35
13	Eyeglass Services	23,341	141	7,507	72	53.24	\$ 0.32	20,664	79	4,589	46	58.09	\$ 0.22
15	Drug Services ¹	23,341	60,114	1,044,289	30,906	17.37	\$ 44.74	20,664	52,376	911,934	30,416	17.41	\$ 44.13
16	Dental Screening	23,341	65	3,430	33	52.78	\$ 0.15	20,664	51	2,653	30	52.03	\$ 0.13
17	Eyeglass Screening	23,341	144	5,515	74	38.30	\$ 0.24	20,664	73	2,687	42	36.81	\$ 0.13
18	Hearing Screening Services	23,341	3	83	2	27.65	\$ 0.00	20,664	2	46	1	22.87	\$ 0.00
22	Rural Health Clinic Services	23,341	2,226	183,109	1,144	82.26	\$ 7.84	20,664	1,939	172,470	1,126	88.95	\$ 8.35
23	FQHC (Federally Qualified Health Center)	23,341	1,676	142,848	862	85.23	\$ 6.12	20,664	1,484	127,291	862	85.78	\$ 6.16
24	DME (Durable Medical Equipment Services)	23,341	1,461	14,607	751	10.00	\$ 0.63	20,664	1,000	13,878	581	13.88	\$ 0.67
25	Therapy Services, (outside the Home Health Program)	23,341	1	60	1	59.75	\$ 0.00	20,664	0	-	0	0.00	\$ -
27	Inpatient Psychiatric Hospital Services	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
28	Nurse Services	23,341	64,890	3,634,892	33,361	56.02	\$ 155.73	20,664	62,056	3,253,552	36,037	52.43	\$ 157.45
29	Ambulatory Surgical Centers	23,341	15	3,749	8	249.94	\$ 0.16	20,664	5	1,862	3	372.47	\$ 0.09
31	Hospice Services	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	23,341	10	824	5	82.40	\$ 0.04	20,664	33	2,621	19	79.44	\$ 0.13
34	Family Planning Drug Services*	23,341	1,367	43,075	703	31.51	\$ 1.85	20,664	1,116	35,615	648	31.91	\$ 1.72
35	Freestanding Dialysis Services	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
98	Unknown	23,341	0	-	0	0.00	\$ -	20,664	0	-	0	0.00	\$ -
Total		23,341		\$ 122,076,842			\$ 5,230.15	20,664		\$ 108,342,725			\$ 5,243.07
Total Excluding Inpatient Hospital Services		23,341		\$ 31,642,986			\$ 1,355.68	20,664		\$ 28,691,613			\$ 1,388.48

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Total
 Region: Statewide

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	1,091,126	133,202	\$ 204,849,589	1,465	1,537.89	\$ 187.74	1,005,270	127,572	\$ 194,537,537	1,523	1,524.92	\$ 193.52
02	Outpatient Hospital Services	1,091,126	3,612,760	71,625,252	39,732	19.83	\$ 65.64	1,005,270	2,496,786	68,292,790	29,804	27.35	\$ 67.93
03	Lab and Radiology Services	1,091,126	459,610	9,190,358	5,055	20.00	\$ 8.42	1,005,270	394,355	8,058,739	4,707	20.44	\$ 8.02
05	Physician Services	1,091,126	2,071,039	116,876,324	22,777	56.43	\$ 107.12	1,005,270	1,955,230	107,444,128	23,340	54.95	\$ 106.88
06	Home and Community Based Services	1,091,126	620	2,058	7	3.32	\$ 0.00	1,005,270	0	-	0	0.00	\$ -
07	Home Health Agency Services	1,091,126	16,574	347,121	182	20.94	\$ 0.32	1,005,270	10,210	262,821	122	25.74	\$ 0.26
09	Mental Health Clinic Services	1,091,126	161,416	3,256,115	1,775	20.17	\$ 2.98	1,005,270	124,549	2,855,144	1,487	22.92	\$ 2.84
10	Periodic Screening Services (EPDST)	1,091,126	345,765	9,170,155	3,803	26.52	\$ 8.40	1,005,270	352,147	8,321,668	4,204	23.63	\$ 8.28
11	Emergency/Non-Emergency Transportation	1,091,126	128,000	3,396,194	1,408	26.53	\$ 3.11	1,005,270	119,557	3,259,146	1,427	27.26	\$ 3.24
12	Dental Services	1,091,126	80,387	4,236,181	884	52.70	\$ 3.88	1,005,270	78,940	4,235,571	942	53.66	\$ 4.21
13	Eyeglass Services	1,091,126	50,851	2,202,700	559	43.32	\$ 2.02	1,005,270	47,443	2,097,591	566	44.21	\$ 2.09
15	Drug Services ¹	1,091,126	1,294,659	42,341,723	14,238	32.70	\$ 38.81	1,005,270	1,228,745	42,013,070	14,668	34.19	\$ 41.79
16	Dental Screening	1,091,126	15,383	885,183	169	57.54	\$ 0.81	1,005,270	12,865	751,456	154	58.41	\$ 0.75
17	Eyeglass Screening	1,091,126	8,323	315,351	92	37.89	\$ 0.29	1,005,270	7,145	277,783	85	38.88	\$ 0.28
18	Hearing Screening Services	1,091,126	642	35,322	7	55.02	\$ 0.03	1,005,270	569	29,262	7	51.43	\$ 0.03
22	Rural Health Clinic Services	1,091,126	190,712	12,195,481	2,097	63.95	\$ 11.18	1,005,270	182,428	11,441,784	2,178	62.72	\$ 11.38
23	FQHC (Federally Qualified Health Center)	1,091,126	118,276	7,467,531	1,301	63.14	\$ 6.84	1,005,270	99,583	6,589,069	1,189	66.17	\$ 6.55
24	DME (Durable Medical Equipment Services)	1,091,126	121,454	1,957,847	1,336	16.12	\$ 1.79	1,005,270	113,440	1,822,773	1,354	16.07	\$ 1.81
25	Therapy Services, (outside the Home Health Program)	1,091,126	7,050	186,820	78	26.50	\$ 0.17	1,005,270	9,621	250,137	115	26.00	\$ 0.25
27	Inpatient Psychiatric Hospital Services	1,091,126	63	29,853	1	473.86	\$ 0.03	1,005,270	91	52,878	1	581.08	\$ 0.05
28	Nurse Services	1,091,126	920,602	12,329,901	10,125	13.39	\$ 11.30	1,005,270	929,658	12,143,262	11,097	13.06	\$ 12.08
29	Ambulatory Surgical Centers	1,091,126	3,695	1,284,016	41	347.50	\$ 1.18	1,005,270	4,273	1,903,819	51	445.55	\$ 1.89
31	Hospice Services	1,091,126	397	55,864	4	140.72	\$ 0.05	1,005,270	256	45,038	3	175.93	\$ 0.04
32	Outpatient Psychiatric Hospital Services	1,091,126	0	-	0	0.00	\$ -	1,005,270	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	1,091,126	1,058	89,569	12	84.66	\$ 0.08	1,005,270	1,585	133,101	19	83.98	\$ 0.13
34	Family Planning Drug Services*	1,091,126	53,115	2,151,175	584	40.50	\$ 1.97	1,005,270	47,548	1,905,088	568	40.07	\$ 1.90
35	Freestanding Dialysis Services	1,091,126	14,626	26,531	161	1.81	\$ 0.02	1,005,270	12,537	24,279	150	1.94	\$ 0.02
98	Unknown	1,091,126	0	191	0	0.00	\$ 0.00	1,005,270	0	407	0	0.00	\$ 0.00
Total		1,091,126		\$ 506,504,406			\$ 464.20	1,005,270		\$ 478,748,344			\$ 476.24
Total Excluding Inpatient Hospital Services		1,091,126		\$ 301,624,965			\$ 276.43	1,005,270		\$ 284,157,928			\$ 282.67

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 19-39 Male
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	10,532	408	\$ 580,012	465	1,421.60	\$ 55.07	10,789	333	\$ 518,317	370	1,556.51	\$ 48.04
02	Outpatient Hospital Services	10,532	20,263	529,426	23,087	26.13	\$ 50.27	10,789	19,264	585,762	21,426	30.41	\$ 54.29
03	Lab and Radiology Services	10,532	2,058	33,675	2,345	16.36	\$ 3.20	10,789	1,438	27,865	1,599	19.38	\$ 2.58
05	Physician Services	10,532	13,183	444,355	15,021	33.71	\$ 42.19	10,789	13,166	433,343	14,644	32.91	\$ 40.17
06	Home and Community Based Services	10,532	0	-	0	0.00	\$ -	10,789	0	-	0	0.00	\$ -
07	Home Health Agency Services	10,532	140	2,422	160	17.30	\$ 0.23	10,789	5	537	6	107.40	\$ 0.05
09	Mental Health Clinic Services	10,532	1,450	58,116	1,652	40.08	\$ 5.52	10,789	940	43,857	1,046	46.66	\$ 4.07
10	Periodic Screening Services (EPDST)	10,532	22	596	25	27.09	\$ 0.06	10,789	5	48	6	9.69	\$ 0.00
11	Emergency/Non-Emergency Transportation	10,532	608	23,246	693	38.23	\$ 2.21	10,789	1,565	45,927	1,741	29.35	\$ 4.26
12	Dental Services	10,532	1,836	107,398	2,092	58.50	\$ 10.20	10,789	1,777	100,035	1,976	56.29	\$ 9.27
13	Eyeglass Services	10,532	653	25,751	744	39.44	\$ 2.45	10,789	685	27,654	762	40.37	\$ 2.56
15	Drug Services ¹	10,532	10,974	486,185	12,504	44.30	\$ 46.16	10,789	11,484	444,125	12,773	38.67	\$ 41.16
16	Dental Screening	10,532	138	9,207	157	66.72	\$ 0.87	10,789	89	5,034	99	56.56	\$ 0.47
17	Eyeglass Screening	10,532	26	1,038	30	39.91	\$ 0.10	10,789	16	654	18	40.88	\$ 0.06
18	Hearing Screening Services	10,532	2	46	2	22.87	\$ 0.00	10,789	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	10,532	1,127	46,981	1,284	41.69	\$ 4.46	10,789	1,032	41,379	1,148	40.10	\$ 3.84
23	FQHC (Federally Qualified Health Center)	10,532	341	18,929	389	55.51	\$ 1.80	10,789	359	22,257	399	62.00	\$ 2.06
24	DME (Durable Medical Equipment Services)	10,532	1,181	13,546	1,346	11.47	\$ 1.29	10,789	1,684	14,982	1,873	8.90	\$ 1.39
25	Therapy Services, (outside the Home Health Program)	10,532	169	4,212	193	24.92	\$ 0.40	10,789	186	4,504	207	24.22	\$ 0.42
27	Inpatient Psychiatric Hospital Services	10,532	0	-	0	0.00	\$ -	10,789	0	-	0	0.00	\$ -
28	Nurse Services	10,532	6,980	60,474	7,953	8.66	\$ 5.74	10,789	8,966	89,164	9,972	9.94	\$ 8.26
29	Ambulatory Surgical Centers	10,532	92	24,453	105	265.79	\$ 2.32	10,789	120	35,337	133	294.47	\$ 3.28
31	Hospice Services	10,532	0	-	0	0.00	\$ -	10,789	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	10,532	0	-	0	0.00	\$ -	10,789	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	10,532	8	751	9	93.86	\$ 0.07	10,789	12	1,178	13	98.18	\$ 0.11
34	Family Planning Drug Services*	10,532	0	-	0	0.00	\$ -	10,789	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	10,532	0	-	0	0.00	\$ -	10,789	2,293	3,144	2,550	1.37	\$ 0.29
98	Unknown	10,532	0	-	0	0.00	\$ -	10,789	0	6	0	0.00	\$ 0.00
Total		10,532		\$ 2,470,817			\$ 234.60	10,789		\$ 2,445,111			\$ 226.63
Total Excluding Inpatient Hospital Services		10,532		\$ 1,890,805			\$ 179.53	10,789		\$ 1,926,794			\$ 178.59

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 40+ Male
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	3,577	175	\$ 374,665	587	2,140.94	\$ 104.74	3,836	336	\$ 514,209	1,051	1,530.38	\$ 134.05
02	Outpatient Hospital Services	3,577	14,740	413,711	49,449	28.07	\$ 115.66	3,836	11,487	392,560	35,934	34.17	\$ 102.34
03	Lab and Radiology Services	3,577	1,033	15,422	3,465	14.93	\$ 4.31	3,836	916	17,667	2,865	19.29	\$ 4.61
05	Physician Services	3,577	9,859	303,157	33,075	30.75	\$ 84.75	3,836	10,643	302,693	33,294	28.44	\$ 78.91
06	Home and Community Based Services	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
07	Home Health Agency Services	3,577	102	6,195	342	60.74	\$ 1.73	3,836	434	1,834	1,358	4.23	\$ 0.48
09	Mental Health Clinic Services	3,577	2,126	36,098	7,132	16.98	\$ 10.09	3,836	2,734	30,331	8,553	11.09	\$ 7.91
10	Periodic Screening Services (EPDST)	3,577	2	104	7	51.79	\$ 0.03	3,836	4	39	13	9.77	\$ 0.01
11	Emergency/Non-Emergency Transportation	3,577	459	13,868	1,540	30.21	\$ 3.88	3,836	477	16,578	1,492	34.75	\$ 4.32
12	Dental Services	3,577	536	32,090	1,798	59.87	\$ 8.97	3,836	603	37,619	1,886	62.39	\$ 9.81
13	Eyeglass Services	3,577	481	19,675	1,614	40.90	\$ 5.50	3,836	471	18,983	1,473	40.30	\$ 4.95
15	Drug Services ¹	3,577	7,632	407,157	25,604	53.35	\$ 113.83	3,836	7,724	556,691	24,163	72.07	\$ 145.12
16	Dental Screening	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
17	Eyeglass Screening	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
18	Hearing Screening Services	3,577	2	38	7	19.06	\$ 0.01	3,836	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	3,577	605	25,729	2,030	42.53	\$ 7.19	3,836	416	18,119	1,301	43.56	\$ 4.72
23	FQHC (Federally Qualified Health Center)	3,577	293	14,704	983	50.19	\$ 4.11	3,836	150	10,057	469	67.05	\$ 2.62
24	DME (Durable Medical Equipment Services)	3,577	1,647	29,824	5,525	18.11	\$ 8.34	3,836	1,944	25,328	6,081	13.03	\$ 6.60
25	Therapy Services, (outside the Home Health Program)	3,577	212	4,328	711	20.41	\$ 1.21	3,836	166	4,078	519	24.57	\$ 1.06
27	Inpatient Psychiatric Hospital Services	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
28	Nurse Services	3,577	5,046	30,755	16,928	6.09	\$ 8.60	3,836	7,217	45,387	22,577	6.29	\$ 11.83
29	Ambulatory Surgical Centers	3,577	49	13,825	164	282.15	\$ 3.87	3,836	105	28,143	328	268.03	\$ 7.34
31	Hospice Services	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	3,577	3	239	10	79.69	\$ 0.07	3,836	13	1,146	41	88.16	\$ 0.30
34	Family Planning Drug Services*	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	3,577	0	-	0	0.00	\$ -	3,836	2	228	6	113.83	\$ 0.06
98	Unknown	3,577	0	-	0	0.00	\$ -	3,836	0	-	0	0.00	\$ -
Total		3,577		\$ 1,741,584			\$ 486.88	3,836		\$ 2,021,690			\$ 527.03
Total Excluding Inpatient Hospital Services		3,577		\$ 1,366,919			\$ 382.14	3,836		\$ 1,507,482			\$ 392.98

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 19-39 Female
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	154,150	5,215	\$ 7,600,451	406	1,457.42	\$ 49.31	146,368	4,830	\$ 7,304,084	396	1,512.23	\$ 49.90
02	Outpatient Hospital Services	154,150	389,721	9,875,738	30,338	25.34	\$ 64.07	146,368	409,987	10,585,465	33,613	25.82	\$ 72.32
03	Lab and Radiology Services	154,150	64,954	1,502,024	5,056	23.12	\$ 9.74	146,368	56,611	1,317,720	4,641	23.28	\$ 9.00
05	Physician Services	154,150	229,213	8,600,194	17,843	37.52	\$ 55.79	146,368	236,705	8,431,326	19,406	35.62	\$ 57.60
06	Home and Community Based Services	154,150	0	-	0	0.00	\$ -	146,368	0	-	0	0.00	\$ -
07	Home Health Agency Services	154,150	2,089	26,051	163	12.47	\$ 0.17	146,368	1,943	27,508	159	14.16	\$ 0.19
09	Mental Health Clinic Services	154,150	33,884	668,854	2,638	19.74	\$ 4.34	146,368	27,401	611,085	2,246	22.30	\$ 4.17
10	Periodic Screening Services (EPDST)	154,150	316	15,566	25	49.26	\$ 0.10	146,368	252	9,946	21	39.47	\$ 0.07
11	Emergency/Non-Emergency Transportation	154,150	14,359	471,401	1,118	32.83	\$ 3.06	146,368	13,052	502,024	1,070	38.46	\$ 3.43
12	Dental Services	154,150	21,290	1,114,017	1,657	52.33	\$ 7.23	146,368	21,556	1,177,289	1,767	54.62	\$ 8.04
13	Eyeglass Services	154,150	12,397	525,063	965	42.35	\$ 3.41	146,368	12,137	520,641	995	42.90	\$ 3.56
15	Drug Services ¹	154,150	181,396	6,039,452	14,121	33.29	\$ 39.18	146,368	178,339	6,181,359	14,621	34.66	\$ 42.23
16	Dental Screening	154,150	4,387	261,117	342	59.52	\$ 1.69	146,368	3,851	231,582	316	60.14	\$ 1.58
17	Eyeglass Screening	154,150	2,109	74,333	164	35.25	\$ 0.48	146,368	1,937	71,357	159	36.84	\$ 0.49
18	Hearing Screening Services	154,150	8	206	1	25.71	\$ 0.00	146,368	11	256	1	23.29	\$ 0.00
22	Rural Health Clinic Services	154,150	36,573	2,321,762	2,847	63.48	\$ 15.06	146,368	34,138	2,256,873	2,799	66.11	\$ 15.42
23	FQHC (Federally Qualified Health Center)	154,150	8,976	528,782	699	58.91	\$ 3.43	146,368	7,053	458,292	578	64.98	\$ 3.13
24	DME (Durable Medical Equipment Services)	154,150	19,224	223,274	1,497	11.61	\$ 1.45	146,368	14,457	181,522	1,185	12.56	\$ 1.24
25	Therapy Services, (outside the Home Health Program)	154,150	927	22,248	72	24.00	\$ 0.14	146,368	2,438	57,994	200	23.79	\$ 0.40
27	Inpatient Psychiatric Hospital Services	154,150	20	7,982	2	399.08	\$ 0.05	146,368	32	13,578	3	424.31	\$ 0.09
28	Nurse Services	154,150	146,491	1,295,596	11,404	8.84	\$ 8.40	146,368	157,617	1,451,214	12,922	9.21	\$ 9.91
29	Ambulatory Surgical Centers	154,150	553	178,054	43	321.98	\$ 1.16	146,368	677	277,084	56	409.28	\$ 1.89
31	Hospice Services	154,150	0	-	0	0.00	\$ -	146,368	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	154,150	0	-	0	0.00	\$ -	146,368	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	154,150	263	22,277	20	84.70	\$ 0.14	146,368	465	40,164	38	86.37	\$ 0.27
34	Family Planning Drug Services*	154,150	13,734	571,144	1,069	41.59	\$ 3.71	146,368	12,800	532,636	1,049	41.61	\$ 3.64
35	Freestanding Dialysis Services	154,150	2,941	4,304	229	1.46	\$ 0.03	146,368	0	-	0	0.00	\$ -
98	Unknown	154,150	0	12	0	0.00	\$ 0.00	146,368	0	15	0	0.00	\$ 0.00
Total		154,150		\$ 41,949,899			\$ 272.14	146,368		\$ 42,241,015			\$ 288.59
Total Excluding Inpatient Hospital Services		154,150		\$ 34,341,467			\$ 222.78	146,368		\$ 34,923,353			\$ 238.60

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 40+ Female
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	17,364	945	\$ 1,376,605	653	1,456.73	\$ 79.28	16,963	946	\$ 1,519,963	669	1,606.73	\$ 89.60
02	Outpatient Hospital Services	17,364	54,710	1,434,287	37,809	26.22	\$ 82.60	16,963	55,703	1,477,372	39,406	26.52	\$ 87.09
03	Lab and Radiology Services	17,364	6,372	123,727	4,404	19.42	\$ 7.13	16,963	5,229	110,850	3,699	21.20	\$ 6.53
05	Physician Services	17,364	37,217	1,245,438	25,720	33.46	\$ 71.73	16,963	41,213	1,197,865	29,155	29.07	\$ 70.62
06	Home and Community Based Services	17,364	620	2,058	428	3.32	\$ 0.12	16,963	0	-	0	0.00	\$ -
07	Home Health Agency Services	17,364	739	9,363	511	12.67	\$ 0.54	16,963	155	8,766	110	56.55	\$ 0.52
09	Mental Health Clinic Services	17,364	8,541	156,611	5,903	18.34	\$ 9.02	16,963	9,202	154,043	6,510	16.74	\$ 9.08
10	Periodic Screening Services (EPDST)	17,364	25	974	17	38.95	\$ 0.06	16,963	8	141	6	17.65	\$ 0.01
11	Emergency/Non-Emergency Transportation	17,364	1,421	57,217	982	40.27	\$ 3.30	16,963	1,462	63,692	1,034	43.57	\$ 3.75
12	Dental Services	17,364	2,253	122,862	1,557	54.53	\$ 7.08	16,963	2,397	129,725	1,696	54.12	\$ 7.65
13	Eyeglass Services	17,364	2,419	102,814	1,672	42.50	\$ 5.92	16,963	2,398	105,515	1,696	44.00	\$ 6.22
15	Drug Services ¹	17,364	37,183	1,532,249	25,697	41.21	\$ 88.24	16,963	38,067	1,651,272	26,929	43.38	\$ 97.35
16	Dental Screening	17,364	0	-	0	0.00	\$ -	16,963	0	-	0	0.00	\$ -
17	Eyeglass Screening	17,364	0	-	0	0.00	\$ -	16,963	0	-	0	0.00	\$ -
18	Hearing Screening Services	17,364	0	-	0	0.00	\$ -	16,963	16	395	11	24.70	\$ 0.02
22	Rural Health Clinic Services	17,364	3,458	166,532	2,390	48.16	\$ 9.59	16,963	3,431	173,586	2,427	50.59	\$ 10.23
23	FQHC (Federally Qualified Health Center)	17,364	1,311	82,219	906	62.71	\$ 4.74	16,963	1,103	66,321	780	60.13	\$ 3.91
24	DME (Durable Medical Equipment Services)	17,364	6,540	85,143	4,520	13.02	\$ 4.90	16,963	10,152	79,360	7,182	7.82	\$ 4.68
25	Therapy Services, (outside the Home Health Program)	17,364	493	11,673	341	23.68	\$ 0.67	16,963	688	16,152	487	23.48	\$ 0.95
27	Inpatient Psychiatric Hospital Services	17,364	0	-	0	0.00	\$ -	16,963	0	-	0	0.00	\$ -
28	Nurse Services	17,364	19,806	146,072	13,688	7.38	\$ 8.41	16,963	27,036	187,569	19,126	6.94	\$ 11.06
29	Ambulatory Surgical Centers	17,364	162	45,357	112	279.98	\$ 2.61	16,963	258	71,899	183	278.68	\$ 4.24
31	Hospice Services	17,364	121	15,323	84	126.64	\$ 0.88	16,963	31	4,059	22	130.92	\$ 0.24
32	Outpatient Psychiatric Hospital Services	17,364	0	-	0	0.00	\$ -	16,963	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	17,364	30	2,551	21	85.03	\$ 0.15	16,963	56	4,663	40	83.27	\$ 0.27
34	Family Planning Drug Services*	17,364	299	10,539	207	35.25	\$ 0.61	16,963	300	10,637	212	35.46	\$ 0.63
35	Freestanding Dialysis Services	17,364	0	-	0	0.00	\$ -	16,963	0	-	0	0.00	\$ -
98	Unknown	17,364	0	3	0	0.00	\$ 0.00	16,963	0	-	0	0.00	\$ -
Total		17,364		\$ 6,729,620			\$ 387.56	16,963		\$ 7,033,845			\$ 414.66
Total Excluding Inpatient Hospital Services		17,364		\$ 5,353,015			\$ 308.28	16,963		\$ 5,513,881			\$ 325.05

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Pregnant Women
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	57,650	2,629	\$ 4,049,459	547	1,540.30	\$ 70.24	52,501	2,422	\$ 3,342,043	554	1,379.87	\$ 63.66
02	Outpatient Hospital Services	57,650	1,248,371	5,063,638	259,852	4.06	\$ 87.83	52,501	210,571	4,447,428	48,130	21.12	\$ 84.71
03	Lab and Radiology Services	57,650	67,226	1,325,196	13,993	19.71	\$ 22.99	52,501	54,934	1,084,862	12,556	19.75	\$ 20.66
05	Physician Services	57,650	134,396	8,214,571	27,975	61.12	\$ 142.49	52,501	126,448	7,625,080	28,902	60.30	\$ 145.24
06	Home and Community Based Services	57,650	0	-	0	0.00	\$ -	52,501	0	-	0	0.00	\$ -
07	Home Health Agency Services	57,650	430	14,573	90	33.89	\$ 0.25	52,501	620	19,380	142	31.26	\$ 0.37
09	Mental Health Clinic Services	57,650	3,825	63,815	796	16.68	\$ 1.11	52,501	953	39,995	218	41.97	\$ 0.76
10	Periodic Screening Services (EPDST)	57,650	62	1,727	13	27.86	\$ 0.03	52,501	97	2,564	22	26.43	\$ 0.05
11	Emergency/Non-Emergency Transportation	57,650	9,432	196,683	1,963	20.85	\$ 3.41	52,501	7,130	159,308	1,630	22.34	\$ 3.03
12	Dental Services	57,650	11	774	2	70.34	\$ 0.01	52,501	13	353	3	27.12	\$ 0.01
13	Eyeglass Services	57,650	429	27,446	89	63.98	\$ 0.48	52,501	365	23,795	83	65.19	\$ 0.45
15	Drug Services ¹	57,650	54,510	1,527,045	11,346	28.01	\$ 26.49	52,501	49,800	1,377,648	11,383	27.66	\$ 26.24
16	Dental Screening	57,650	209	12,020	44	57.51	\$ 0.21	52,501	133	7,026	30	52.83	\$ 0.13
17	Eyeglass Screening	57,650	557	21,663	116	38.89	\$ 0.38	52,501	529	21,326	121	40.31	\$ 0.41
18	Hearing Screening Services	57,650	2	109	0	54.57	\$ 0.00	52,501	7	154	2	22.07	\$ 0.00
22	Rural Health Clinic Services	57,650	17,478	1,704,710	3,638	97.53	\$ 29.57	52,501	15,704	1,628,909	3,589	103.73	\$ 31.03
23	FQHC (Federally Qualified Health Center)	57,650	2,883	170,314	600	59.08	\$ 2.95	52,501	2,395	164,639	547	68.74	\$ 3.14
24	DME (Durable Medical Equipment Services)	57,650	5,835	73,614	1,215	12.62	\$ 1.28	52,501	4,819	78,038	1,101	16.19	\$ 1.49
25	Therapy Services, (outside the Home Health Program)	57,650	49	1,281	10	26.13	\$ 0.02	52,501	42	1,248	10	29.72	\$ 0.02
27	Inpatient Psychiatric Hospital Services	57,650	9	3,592	2	399.08	\$ 0.06	52,501	22	11,601	5	527.32	\$ 0.22
28	Nurse Services	57,650	59,708	1,033,412	12,428	17.31	\$ 17.93	52,501	45,760	828,334	10,459	18.10	\$ 15.78
29	Ambulatory Surgical Centers	57,650	48	16,445	10	342.59	\$ 0.29	52,501	47	31,942	11	679.62	\$ 0.61
31	Hospice Services	57,650	0	-	0	0.00	\$ -	52,501	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	57,650	0	-	0	0.00	\$ -	52,501	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	57,650	85	6,921	18	81.42	\$ 0.12	52,501	94	7,676	21	81.66	\$ 0.15
34	Family Planning Drug Services*	57,650	3,777	150,284	786	39.79	\$ 2.61	52,501	3,272	123,492	748	37.74	\$ 2.35
35	Freestanding Dialysis Services	57,650	0	-	0	0.00	\$ -	52,501	6	691	1	115.18	\$ 0.01
98	Unknown	57,650	0	-	0	0.00	\$ -	52,501	0	-	0	0.00	\$ -
Total		57,650		\$ 23,679,291			\$ 410.74	52,501		\$ 21,027,534			\$ 400.52
Total Excluding Inpatient Hospital Services		57,650		\$ 19,626,240			\$ 340.44	52,501		\$ 17,673,890			\$ 336.64

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Newborns 0-2 Months
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	21,440	10,162	\$ 16,590,662	5,688	1,632.62	\$ 773.82	18,676	10,866	\$ 16,266,794	6,982	1,497.04	\$ 871.00
02	Outpatient Hospital Services	21,440	20,688	607,195	11,579	29.35	\$ 28.32	18,676	17,612	567,645	11,316	32.23	\$ 30.39
03	Lab and Radiology Services	21,440	171	2,343	96	13.70	\$ 0.11	18,676	227	2,606	146	11.48	\$ 0.14
05	Physician Services	21,440	59,064	4,215,551	33,058	71.37	\$ 196.62	18,676	57,608	3,955,929	37,015	68.67	\$ 211.82
06	Home and Community Based Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
07	Home Health Agency Services	21,440	709	16,251	397	22.92	\$ 0.76	18,676	34	3,741	22	110.04	\$ 0.20
09	Mental Health Clinic Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
10	Periodic Screening Services (EPDST)	21,440	32,370	955,974	18,118	29.53	\$ 44.59	18,676	35,424	867,633	22,761	24.49	\$ 46.46
11	Emergency/Non-Emergency Transportation	21,440	10,651	236,510	5,961	22.21	\$ 11.03	18,676	8,326	178,342	5,350	21.42	\$ 9.55
12	Dental Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
13	Eyeglass Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
15	Drug Services ¹	21,440	11,339	367,653	6,346	32.42	\$ 17.15	18,676	10,166	346,853	6,532	34.12	\$ 18.57
16	Dental Screening	21,440	5	220	3	43.94	\$ 0.01	18,676	7	236	4	33.77	\$ 0.01
17	Eyeglass Screening	21,440	4	258	2	64.59	\$ 0.01	18,676	6	461	4	76.78	\$ 0.02
18	Hearing Screening Services	21,440	75	4,451	42	59.34	\$ 0.21	18,676	70	3,962	45	56.61	\$ 0.21
22	Rural Health Clinic Services	21,440	3,456	244,764	1,934	70.82	\$ 11.42	18,676	3,216	226,449	2,066	70.41	\$ 12.13
23	FQHC (Federally Qualified Health Center)	21,440	1,264	88,847	707	70.29	\$ 4.14	18,676	1,322	74,974	849	56.71	\$ 4.01
24	DME (Durable Medical Equipment Services)	21,440	920	47,613	515	51.75	\$ 2.22	18,676	943	31,486	606	33.39	\$ 1.69
25	Therapy Services, (outside the Home Health Program)	21,440	19	784	11	41.24	\$ 0.04	18,676	9	337	6	37.41	\$ 0.02
27	Inpatient Psychiatric Hospital Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
28	Nurse Services	21,440	11,348	109,968	6,351	9.69	\$ 5.13	18,676	15,546	131,648	9,989	8.47	\$ 7.05
29	Ambulatory Surgical Centers	21,440	0	-	0	0.00	\$ -	18,676	1	755	1	755.18	\$ 0.04
31	Hospice Services	21,440	0	-	0	0.00	\$ -	18,676	16	2,087	10	130.45	\$ 0.11
32	Outpatient Psychiatric Hospital Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
34	Family Planning Drug Services*	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
98	Unknown	21,440	0	-	0	0.00	\$ -	18,676	0	-	0	0.00	\$ -
Total		21,440		\$ 23,489,044			\$ 1,095.57	18,676		\$ 22,661,939			\$ 1,213.43
Total Excluding Inpatient Hospital Services		21,440		\$ 6,898,382			\$ 321.75	18,676		\$ 6,395,145			\$ 342.43

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Newborns 3-12 Months
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	90,015	3,660	\$ 6,085,298	488	1,662.65	\$ 67.60	82,545	3,592	\$ 5,481,658	522	1,526.07	\$ 66.41
02	Outpatient Hospital Services	90,015	87,118	2,761,120	11,614	31.69	\$ 30.67	82,545	77,770	2,547,028	11,306	32.75	\$ 30.86
03	Lab and Radiology Services	90,015	3,014	42,917	402	14.24	\$ 0.48	82,545	2,858	39,466	415	13.81	\$ 0.48
05	Physician Services	90,015	98,487	5,170,849	13,129	52.50	\$ 57.44	82,545	90,746	4,388,705	13,192	48.36	\$ 53.17
06	Home and Community Based Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
07	Home Health Agency Services	90,015	587	25,298	78	43.10	\$ 0.28	82,545	244	16,746	35	68.63	\$ 0.20
09	Mental Health Clinic Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
10	Periodic Screening Services (EPDST)	90,015	93,301	2,344,184	12,438	25.12	\$ 26.04	82,545	100,840	2,129,966	14,660	21.12	\$ 25.80
11	Emergency/Non-Emergency Transportation	90,015	9,181	195,025	1,224	21.24	\$ 2.17	82,545	8,322	157,555	1,210	18.93	\$ 1.91
12	Dental Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
13	Eyeglass Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
15	Drug Services ¹	90,015	82,748	2,354,607	11,031	28.46	\$ 26.16	82,545	74,918	2,150,267	10,891	28.70	\$ 26.05
16	Dental Screening	90,015	224	6,978	30	31.15	\$ 0.08	82,545	278	8,948	40	32.19	\$ 0.11
17	Eyeglass Screening	90,015	76	6,054	10	79.66	\$ 0.07	82,545	97	7,151	14	73.72	\$ 0.09
18	Hearing Screening Services	90,015	185	8,776	25	47.44	\$ 0.10	82,545	145	5,875	21	40.52	\$ 0.07
22	Rural Health Clinic Services	90,015	14,087	860,112	1,878	61.06	\$ 9.56	82,545	14,131	838,574	2,054	59.34	\$ 10.16
23	FQHC (Federally Qualified Health Center)	90,015	4,421	275,490	589	62.31	\$ 3.06	82,545	4,938	241,132	718	48.83	\$ 2.92
24	DME (Durable Medical Equipment Services)	90,015	4,897	130,094	653	26.57	\$ 1.45	82,545	7,055	143,491	1,026	20.34	\$ 1.74
25	Therapy Services, (outside the Home Health Program)	90,015	792	26,886	106	33.95	\$ 0.30	82,545	626	23,311	91	37.24	\$ 0.28
27	Inpatient Psychiatric Hospital Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
28	Nurse Services	90,015	43,303	561,463	5,773	12.97	\$ 6.24	82,545	43,537	601,047	6,329	13.81	\$ 7.28
29	Ambulatory Surgical Centers	90,015	248	121,006	33	487.93	\$ 1.34	82,545	296	152,813	43	516.26	\$ 1.85
31	Hospice Services	90,015	0	-	0	0.00	\$ -	82,545	49	6,392	7	130.45	\$ 0.08
32	Outpatient Psychiatric Hospital Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
34	Family Planning Drug Services*	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
98	Unknown	90,015	0	-	0	0.00	\$ -	82,545	0	-	0	0.00	\$ -
Total		90,015		\$ 20,976,155			\$ 233.03	82,545		\$ 18,940,125			\$ 229.45
Total Excluding Inpatient Hospital Services		90,015		\$ 14,890,857			\$ 165.43	82,545		\$ 13,458,467			\$ 163.04

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Delivery Kick Payment
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	7,338	19,673	\$ 28,744,766	32,172	1,461.13	\$ 3,917.25	6,416	16,904	\$ 25,385,593	31,616	1,501.75	\$ 3,956.61
02	Outpatient Hospital Services	7,338	13,012	258,413	21,279	19.86	\$ 35.22	6,416	9,918	219,049	18,550	22.09	\$ 34.14
03	Lab and Radiology Services	7,338	1,626	100,119	2,659	61.57	\$ 13.64	6,416	1,249	87,013	2,336	69.67	\$ 13.56
05	Physician Services	7,338	34,825	7,329,710	56,950	210.47	\$ 998.87	6,416	32,119	6,679,179	60,073	207.95	\$ 1,041.02
06	Home and Community Based Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
07	Home Health Agency Services	7,338	704	5,432	1,151	7.72	\$ 0.74	6,416	926	3,490	1,732	3.77	\$ 0.54
09	Mental Health Clinic Services	7,338	212	4,919	347	23.20	\$ 0.67	6,416	113	2,912	211	25.77	\$ 0.45
10	Periodic Screening Services (EPDST)	7,338	22	653	36	29.69	\$ 0.09	6,416	77	1,535	144	19.93	\$ 0.24
11	Emergency/Non-Emergency Transportation	7,338	9,152	144,451	14,966	15.78	\$ 19.69	6,416	7,854	123,309	14,690	15.70	\$ 19.22
12	Dental Services	7,338	60	3,115	98	51.91	\$ 0.42	6,416	53	3,139	99	59.22	\$ 0.49
13	Eyeglass Services	7,338	62	3,095	101	49.92	\$ 0.42	6,416	17	1,225	32	72.08	\$ 0.19
15	Drug Services ¹	7,338	18,655	328,059	30,507	17.59	\$ 44.71	6,416	16,049	276,097	30,017	17.20	\$ 43.03
16	Dental Screening	7,338	25	1,352	41	54.08	\$ 0.18	6,416	26	852	49	32.79	\$ 0.13
17	Eyeglass Screening	7,338	39	1,332	64	34.15	\$ 0.18	6,416	31	990	58	31.95	\$ 0.15
18	Hearing Screening Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	7,338	1,187	107,581	1,941	90.63	\$ 14.66	6,416	1,103	112,352	2,063	101.86	\$ 17.51
23	FQHC (Federally Qualified Health Center)	7,338	318	25,541	520	80.32	\$ 3.48	6,416	288	25,959	539	90.14	\$ 4.05
24	DME (Durable Medical Equipment Services)	7,338	179	3,784	293	21.14	\$ 0.52	6,416	294	3,652	550	12.42	\$ 0.57
25	Therapy Services, (outside the Home Health Program)	7,338	1	60	2	59.75	\$ 0.01	6,416	0	-	0	0.00	\$ -
27	Inpatient Psychiatric Hospital Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
28	Nurse Services	7,338	21,103	1,547,440	34,510	73.33	\$ 210.88	6,416	25,712	1,329,805	48,090	51.72	\$ 207.26
29	Ambulatory Surgical Centers	7,338	0	-	0	0.00	\$ -	6,416	1	1,409	2	1,408.79	\$ 0.22
31	Hospice Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	7,338	6	503	10	83.91	\$ 0.07	6,416	3	296	6	98.55	\$ 0.05
34	Family Planning Drug Services*	7,338	519	17,721	849	34.14	\$ 2.41	6,416	423	14,382	791	34.00	\$ 2.24
35	Freestanding Dialysis Services	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
98	Unknown	7,338	0	-	0	0.00	\$ -	6,416	0	-	0	0.00	\$ -
Total		7,338		\$ 38,628,043			\$ 5,264.11	6,416		\$ 34,272,237			\$ 5,341.68
Total Excluding Inpatient Hospital Services		7,338		\$ 9,883,278			\$ 1,346.86	6,416		\$ 8,886,645			\$ 1,385.08

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Total
 Region: North

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	354,728	42,867	\$ 65,401,919	1,450	1,525.69	\$ 184.37	331,678	40,229	\$ 60,332,661	1,455	1,499.73	\$ 181.90
02	Outpatient Hospital Services	354,728	1,848,623	20,943,528	62,537	11.33	\$ 59.04	331,678	812,312	20,822,309	29,389	25.63	\$ 62.78
03	Lab and Radiology Services	354,728	146,454	3,145,424	4,954	21.48	\$ 8.87	331,678	123,462	2,688,049	4,467	21.77	\$ 8.10
05	Physician Services	354,728	616,244	35,523,825	20,847	57.65	\$ 100.14	331,678	608,648	33,014,121	22,021	54.24	\$ 99.54
06	Home and Community Based Services	354,728	620	2,058	21	3.32	\$ 0.01	331,678	0	-	0	0.00	\$ -
07	Home Health Agency Services	354,728	5,500	105,584	186	19.20	\$ 0.30	331,678	4,361	82,001	158	18.80	\$ 0.25
09	Mental Health Clinic Services	354,728	50,038	988,412	1,693	19.75	\$ 2.79	331,678	41,343	882,223	1,496	21.34	\$ 2.66
10	Periodic Screening Services (EPDST)	354,728	126,120	3,319,777	4,266	26.32	\$ 9.36	331,678	136,707	3,011,871	4,946	22.03	\$ 9.08
11	Emergency/Non-Emergency Transportation	354,728	55,263	1,338,399	1,869	24.22	\$ 3.77	331,678	48,188	1,246,735	1,743	25.87	\$ 3.76
12	Dental Services	354,728	25,986	1,380,256	879	53.12	\$ 3.89	331,678	26,399	1,448,159	955	54.86	\$ 4.37
13	Eyeglass Services	354,728	16,441	703,845	556	42.81	\$ 1.98	331,678	16,073	697,814	582	43.42	\$ 2.10
15	Drug Services ¹	354,728	404,437	13,042,407	13,682	32.25	\$ 36.77	331,678	386,547	12,984,311	13,985	33.59	\$ 39.15
16	Dental Screening	354,728	4,988	290,894	169	58.32	\$ 0.82	331,678	4,384	253,680	159	57.86	\$ 0.76
17	Eyeglass Screening	354,728	2,811	104,678	95	37.24	\$ 0.30	331,678	2,616	101,939	95	38.97	\$ 0.31
18	Hearing Screening Services	354,728	274	13,625	9	49.73	\$ 0.04	331,678	249	10,643	9	42.74	\$ 0.03
22	Rural Health Clinic Services	354,728	77,971	5,478,170	2,638	70.26	\$ 15.44	331,678	73,171	5,296,242	2,647	72.38	\$ 15.97
23	FQHC (Federally Qualified Health Center)	354,728	19,807	1,204,826	670	60.83	\$ 3.40	331,678	17,608	1,063,631	637	60.41	\$ 3.21
24	DME (Durable Medical Equipment Services)	354,728	40,423	606,891	1,367	15.01	\$ 1.71	331,678	41,348	557,859	1,496	13.49	\$ 1.68
25	Therapy Services, (outside the Home Health Program)	354,728	2,662	71,471	90	26.85	\$ 0.20	331,678	4,155	107,625	150	25.90	\$ 0.32
27	Inpatient Psychiatric Hospital Services	354,728	29	11,573	1	399.08	\$ 0.03	331,678	54	25,179	2	466.28	\$ 0.08
28	Nurse Services	354,728	313,785	4,785,180	10,615	15.25	\$ 13.49	331,678	331,391	4,664,168	11,990	14.07	\$ 14.06
29	Ambulatory Surgical Centers	354,728	1,152	399,140	39	346.48	\$ 1.13	331,678	1,505	599,382	54	398.26	\$ 1.81
31	Hospice Services	354,728	121	15,323	4	126.64	\$ 0.04	331,678	96	12,538	3	130.60	\$ 0.04
32	Outpatient Psychiatric Hospital Services	354,728	0	-	0	0.00	\$ -	331,678	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	354,728	395	33,241	13	84.16	\$ 0.09	331,678	643	55,124	23	85.73	\$ 0.17
34	Family Planning Drug Services*	354,728	18,329	749,687	620	40.90	\$ 2.11	331,678	16,795	681,148	608	40.56	\$ 2.05
35	Freestanding Dialysis Services	354,728	2,941	4,304	99	1.46	\$ 0.01	331,678	2,301	4,063	83	1.77	\$ 0.01
98	Unknown	354,728	0	15	0	0.00	\$ 0.00	331,678	0	21	0	0.00	\$ 0.00
Total		354,728		\$ 159,664,454			\$ 450.10	331,678		\$ 150,643,497			\$ 454.19
Total Excluding Inpatient Hospital Services		354,728		\$ 94,250,962			\$ 265.70	331,678		\$ 90,285,657			\$ 272.21

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 19-39 Male
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	10,211	573	\$ 740,106	673	1,291.63	\$ 72.48	9,716	432	\$ 626,486	534	1,450.20	\$ 64.48
02	Outpatient Hospital Services	10,211	18,033	634,792	21,192	35.20	\$ 62.17	9,716	17,398	649,470	21,488	37.33	\$ 66.85
03	Lab and Radiology Services	10,211	1,907	32,382	2,241	16.98	\$ 3.17	9,716	1,169	22,673	1,444	19.40	\$ 2.33
05	Physician Services	10,211	15,887	461,960	18,670	29.08	\$ 45.24	9,716	14,422	419,231	17,812	29.07	\$ 43.15
06	Home and Community Based Services	10,211	0	-	0	0.00	\$ -	9,716	0	-	0	0.00	\$ -
07	Home Health Agency Services	10,211	85	3,029	100	35.63	\$ 0.30	9,716	14	1,467	17	104.78	\$ 0.15
09	Mental Health Clinic Services	10,211	1,029	41,813	1,209	40.63	\$ 4.09	9,716	872	32,462	1,077	37.23	\$ 3.34
10	Periodic Screening Services (EPDST)	10,211	6	119	7	19.84	\$ 0.01	9,716	15	336	19	22.42	\$ 0.03
11	Emergency/Non-Emergency Transportation	10,211	541	26,836	636	49.61	\$ 2.63	9,716	946	33,058	1,168	34.95	\$ 3.40
12	Dental Services	10,211	1,562	85,314	1,836	54.62	\$ 8.36	9,716	1,547	85,888	1,911	55.52	\$ 8.84
13	Eyeglass Services	10,211	768	31,773	903	41.37	\$ 3.11	9,716	705	29,141	871	41.33	\$ 3.00
15	Drug Services ¹	10,211	11,486	408,493	13,498	35.56	\$ 40.01	9,716	11,463	455,039	14,158	39.70	\$ 46.83
16	Dental Screening	10,211	73	3,881	86	53.17	\$ 0.38	9,716	43	3,693	53	85.88	\$ 0.38
17	Eyeglass Screening	10,211	22	906	26	41.16	\$ 0.09	9,716	29	1,119	36	38.58	\$ 0.12
18	Hearing Screening Services	10,211	0	-	0	0.00	\$ -	9,716	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	10,211	1,169	58,059	1,374	49.67	\$ 5.69	9,716	1,063	62,296	1,313	58.60	\$ 6.41
23	FQHC (Federally Qualified Health Center)	10,211	235	18,687	276	79.52	\$ 1.83	9,716	239	15,745	295	65.88	\$ 1.62
24	DME (Durable Medical Equipment Services)	10,211	860	15,207	1,011	17.68	\$ 1.49	9,716	1,055	21,503	1,303	20.38	\$ 2.21
25	Therapy Services, (outside the Home Health Program)	10,211	97	2,410	114	24.84	\$ 0.24	9,716	109	3,096	135	28.41	\$ 0.32
27	Inpatient Psychiatric Hospital Services	10,211	0	-	0	0.00	\$ -	9,716	0	-	0	0.00	\$ -
28	Nurse Services	10,211	7,889	44,846	9,271	5.68	\$ 4.39	9,716	8,269	52,886	10,213	6.40	\$ 5.44
29	Ambulatory Surgical Centers	10,211	52	15,458	61	297.27	\$ 1.51	9,716	51	14,006	63	274.62	\$ 1.44
31	Hospice Services	10,211	0	-	0	0.00	\$ -	9,716	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	10,211	0	-	0	0.00	\$ -	9,716	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	10,211	4	320	5	80.03	\$ 0.03	9,716	21	1,657	26	78.93	\$ 0.17
34	Family Planning Drug Services*	10,211	0	-	0	0.00	\$ -	9,716	2	201	2	100.28	\$ 0.02
35	Freestanding Dialysis Services	10,211	1,081	4,155	1,270	3.84	\$ 0.41	9,716	0	-	0	0.00	\$ -
98	Unknown	10,211	0	-	0	0.00	\$ -	9,716	0	3	0	0.00	\$ 0.00
Total		10,211		\$ 2,630,546			\$ 257.62	9,716		\$ 2,531,455			\$ 260.54
Total Excluding Inpatient Hospital Services		10,211		\$ 1,890,440			\$ 185.14	9,716		\$ 1,904,969			\$ 196.07

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 40+ Male
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	4,036	272	\$ 390,689	809	1,436.36	\$ 96.80	4,061	250	\$ 375,135	739	1,500.54	\$ 92.37
02	Outpatient Hospital Services	4,036	13,073	450,147	38,869	34.43	\$ 111.53	4,061	16,965	465,989	50,131	27.47	\$ 114.75
03	Lab and Radiology Services	4,036	1,007	17,624	2,994	17.50	\$ 4.37	4,061	939	18,042	2,775	19.21	\$ 4.44
05	Physician Services	4,036	8,718	284,499	25,921	32.63	\$ 70.49	4,061	12,300	313,783	36,346	25.51	\$ 77.27
06	Home and Community Based Services	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
07	Home Health Agency Services	4,036	660	6,264	1,962	9.49	\$ 1.55	4,061	105	7,996	310	76.15	\$ 1.97
09	Mental Health Clinic Services	4,036	919	30,673	2,732	33.38	\$ 7.60	4,061	851	23,930	2,515	28.12	\$ 5.89
10	Periodic Screening Services (EPDST)	4,036	4	24	12	6.03	\$ 0.01	4,061	3	33	9	10.95	\$ 0.01
11	Emergency/Non-Emergency Transportation	4,036	318	8,069	945	25.37	\$ 2.00	4,061	312	9,762	922	31.29	\$ 2.40
12	Dental Services	4,036	617	29,438	1,834	47.71	\$ 7.29	4,061	523	27,372	1,545	52.34	\$ 6.74
13	Eyeglass Services	4,036	559	23,478	1,662	42.00	\$ 5.82	4,061	515	23,031	1,522	44.72	\$ 5.67
15	Drug Services ¹	4,036	7,935	341,489	23,593	43.04	\$ 84.61	4,061	8,553	385,644	25,274	45.09	\$ 94.96
16	Dental Screening	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
17	Eyeglass Screening	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
18	Hearing Screening Services	4,036	4	93	12	23.19	\$ 0.02	4,061	7	198	21	28.22	\$ 0.05
22	Rural Health Clinic Services	4,036	507	32,082	1,507	63.28	\$ 7.95	4,061	601	36,404	1,776	60.57	\$ 8.96
23	FQHC (Federally Qualified Health Center)	4,036	324	17,994	963	55.54	\$ 4.46	4,061	215	15,769	635	73.35	\$ 3.88
24	DME (Durable Medical Equipment Services)	4,036	1,642	24,143	4,882	14.70	\$ 5.98	4,061	3,193	22,103	9,435	6.92	\$ 5.44
25	Therapy Services, (outside the Home Health Program)	4,036	41	964	122	23.52	\$ 0.24	4,061	78	2,111	230	27.06	\$ 0.52
27	Inpatient Psychiatric Hospital Services	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
28	Nurse Services	4,036	3,483	19,943	10,356	5.73	\$ 4.94	4,061	4,878	30,433	14,414	6.24	\$ 7.49
29	Ambulatory Surgical Centers	4,036	36	9,686	107	269.04	\$ 2.40	4,061	32	9,287	95	290.21	\$ 2.29
31	Hospice Services	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	4,036	0	-	0	0.00	\$ -	4,061	2	142	6	71.16	\$ 0.04
34	Family Planning Drug Services*	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
98	Unknown	4,036	0	-	0	0.00	\$ -	4,061	0	-	0	0.00	\$ -
Total		4,036		\$ 1,687,299			\$ 418.06	4,061		\$ 1,767,162			\$ 435.15
Total Excluding Inpatient Hospital Services		4,036		\$ 1,296,610			\$ 321.26	4,061		\$ 1,392,027			\$ 342.78

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 19-39 Female
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	174,253	6,111	\$ 9,382,089	421	1,535.28	\$ 53.84	154,637	5,972	\$ 8,699,309	463	1,456.68	\$ 56.26
02	Outpatient Hospital Services	174,253	474,236	13,671,228	32,658	28.83	\$ 78.46	154,637	424,925	12,103,085	32,975	28.48	\$ 78.27
03	Lab and Radiology Services	174,253	71,465	1,607,105	4,921	22.49	\$ 9.22	154,637	59,894	1,367,720	4,648	22.84	\$ 8.84
05	Physician Services	174,253	315,690	10,799,037	21,740	34.21	\$ 61.97	154,637	277,970	9,537,134	21,571	34.31	\$ 61.67
06	Home and Community Based Services	174,253	0	-	0	0.00	\$ -	154,637	0	-	0	0.00	\$ -
07	Home Health Agency Services	174,253	4,021	56,597	277	14.08	\$ 0.32	154,637	836	27,138	65	32.46	\$ 0.18
09	Mental Health Clinic Services	174,253	54,283	1,073,273	3,738	19.77	\$ 6.16	154,637	41,130	881,550	3,192	21.43	\$ 5.70
10	Periodic Screening Services (EPDST)	174,253	807	29,300	56	36.31	\$ 0.17	154,637	713	23,538	55	33.01	\$ 0.15
11	Emergency/Non-Emergency Transportation	174,253	12,784	489,807	880	38.31	\$ 2.81	154,637	10,385	434,913	806	41.88	\$ 2.81
12	Dental Services	174,253	25,145	1,251,163	1,732	49.76	\$ 7.18	154,637	23,539	1,195,413	1,827	50.78	\$ 7.73
13	Eyeglass Services	174,253	15,591	689,616	1,074	44.23	\$ 3.96	154,637	13,586	615,475	1,054	45.30	\$ 3.98
15	Drug Services ¹	174,253	214,596	7,036,333	14,778	32.79	\$ 40.38	154,637	205,045	7,009,647	15,912	34.19	\$ 45.33
16	Dental Screening	174,253	5,058	287,607	348	56.86	\$ 1.65	154,637	4,042	238,909	314	59.11	\$ 1.54
17	Eyeglass Screening	174,253	2,327	89,035	160	38.26	\$ 0.51	154,637	2,019	76,796	157	38.04	\$ 0.50
18	Hearing Screening Services	174,253	22	563	2	25.59	\$ 0.00	154,637	24	541	2	22.54	\$ 0.00
22	Rural Health Clinic Services	174,253	20,864	1,119,685	1,437	53.67	\$ 6.43	154,637	20,278	1,073,080	1,574	52.92	\$ 6.94
23	FQHC (Federally Qualified Health Center)	174,253	19,103	1,363,162	1,316	71.36	\$ 7.82	154,637	15,693	1,144,542	1,218	72.93	\$ 7.40
24	DME (Durable Medical Equipment Services)	174,253	20,452	210,355	1,408	10.29	\$ 1.21	154,637	15,420	181,982	1,197	11.80	\$ 1.18
25	Therapy Services, (outside the Home Health Program)	174,253	448	11,231	31	25.07	\$ 0.06	154,637	954	23,094	74	24.21	\$ 0.15
27	Inpatient Psychiatric Hospital Services	174,253	13	6,989	1	537.64	\$ 0.04	154,637	26	19,385	2	745.58	\$ 0.13
28	Nurse Services	174,253	160,477	1,239,144	11,051	7.72	\$ 7.11	154,637	150,689	1,236,565	11,694	8.21	\$ 8.00
29	Ambulatory Surgical Centers	174,253	654	227,379	45	347.67	\$ 1.30	154,637	681	316,156	53	464.25	\$ 2.04
31	Hospice Services	174,253	31	3,926	2	126.64	\$ 0.02	154,637	15	2,051	1	136.70	\$ 0.01
32	Outpatient Psychiatric Hospital Services	174,253	0	-	0	0.00	\$ -	154,637	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	174,253	92	7,520	6	81.73	\$ 0.04	154,637	224	19,469	17	86.92	\$ 0.13
34	Family Planning Drug Services*	174,253	15,049	641,301	1,036	42.61	\$ 3.68	154,637	13,225	557,458	1,026	42.15	\$ 3.60
35	Freestanding Dialysis Services	174,253	7,410	13,318	510	1.80	\$ 0.08	154,637	2,314	4,077	180	1.76	\$ 0.03
98	Unknown	174,253	0	15	0	0.00	\$ 0.00	154,637	0	15	0	0.00	\$ 0.00
Total		174,253		\$ 51,306,776			\$ 294.44	154,637		\$ 46,789,041			\$ 302.57
Total Excluding Inpatient Hospital Services		174,253		\$ 41,917,697			\$ 240.56	154,637		\$ 38,070,347			\$ 246.19

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 40+ Female
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	23,053	1,179	\$ 1,691,406	614	1,434.61	\$ 73.37	21,210	1,195	\$ 1,815,193	676	1,518.99	\$ 85.58
02	Outpatient Hospital Services	23,053	82,488	2,441,720	42,938	29.60	\$ 105.92	21,210	68,642	2,159,070	38,836	31.45	\$ 101.79
03	Lab and Radiology Services	23,053	6,615	134,467	3,443	20.33	\$ 5.83	21,210	6,128	135,598	3,467	22.13	\$ 6.39
05	Physician Services	23,053	49,834	1,556,907	25,941	31.24	\$ 67.54	21,210	50,389	1,495,142	28,509	29.67	\$ 70.49
06	Home and Community Based Services	23,053	0	-	0	0.00	\$ -	21,210	0	-	0	0.00	\$ -
07	Home Health Agency Services	23,053	1,187	30,179	618	25.42	\$ 1.31	21,210	485	21,767	274	44.88	\$ 1.03
09	Mental Health Clinic Services	23,053	10,862	230,125	5,654	21.19	\$ 9.98	21,210	10,398	228,933	5,883	22.02	\$ 10.79
10	Periodic Screening Services (EPDST)	23,053	108	2,688	56	24.89	\$ 0.12	21,210	135	3,323	76	24.62	\$ 0.16
11	Emergency/Non-Emergency Transportation	23,053	1,273	67,007	663	52.64	\$ 2.91	21,210	1,099	56,116	622	51.06	\$ 2.65
12	Dental Services	23,053	2,887	147,672	1,503	51.15	\$ 6.41	21,210	2,534	131,355	1,434	51.84	\$ 6.19
13	Eyeglass Services	23,053	3,189	140,866	1,660	44.17	\$ 6.11	21,210	2,918	131,473	1,651	45.06	\$ 6.20
15	Drug Services ¹	23,053	51,126	1,952,679	26,613	38.19	\$ 84.70	21,210	49,238	2,063,486	27,857	41.91	\$ 97.29
16	Dental Screening	23,053	0	-	0	0.00	\$ -	21,210	0	-	0	0.00	\$ -
17	Eyeglass Screening	23,053	0	-	0	0.00	\$ -	21,210	0	-	0	0.00	\$ -
18	Hearing Screening Services	23,053	4	91	2	22.87	\$ 0.00	21,210	6	137	3	22.87	\$ 0.01
22	Rural Health Clinic Services	23,053	3,492	184,761	1,818	52.91	\$ 8.01	21,210	3,710	193,852	2,099	52.25	\$ 9.14
23	FQHC (Federally Qualified Health Center)	23,053	2,412	184,273	1,256	76.40	\$ 7.99	21,210	2,051	156,560	1,160	76.33	\$ 7.38
24	DME (Durable Medical Equipment Services)	23,053	7,588	99,141	3,950	13.07	\$ 4.30	21,210	7,004	88,283	3,963	12.60	\$ 4.16
25	Therapy Services, (outside the Home Health Program)	23,053	218	5,026	113	23.06	\$ 0.22	21,210	333	8,084	188	24.28	\$ 0.38
27	Inpatient Psychiatric Hospital Services	23,053	0	-	0	0.00	\$ -	21,210	0	-	0	0.00	\$ -
28	Nurse Services	23,053	25,249	175,710	13,143	6.96	\$ 7.62	21,210	27,954	172,211	15,816	6.16	\$ 8.12
29	Ambulatory Surgical Centers	23,053	197	60,410	103	306.65	\$ 2.62	21,210	253	83,072	143	328.35	\$ 3.92
31	Hospice Services	23,053	0	-	0	0.00	\$ -	21,210	94	20,511	53	218.21	\$ 0.97
32	Outpatient Psychiatric Hospital Services	23,053	0	-	0	0.00	\$ -	21,210	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	23,053	14	1,178	7	84.16	\$ 0.05	21,210	33	2,842	19	86.11	\$ 0.13
34	Family Planning Drug Services*	23,053	479	16,455	249	34.35	\$ 0.71	21,210	356	11,216	201	31.51	\$ 0.53
35	Freestanding Dialysis Services	23,053	0	-	0	0.00	\$ -	21,210	2,855	4,899	1,615	1.72	\$ 0.23
98	Unknown	23,053	0	-	0	0.00	\$ -	21,210	0	6	0	0.00	\$ 0.00
Total		23,053		\$ 9,122,763			\$ 395.73	21,210		\$ 8,983,130			\$ 423.53
Total Excluding Inpatient Hospital Services		23,053		\$ 7,431,357			\$ 322.36	21,210		\$ 7,167,937			\$ 337.95

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Pregnant Women
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	69,080	3,025	\$ 4,425,010	525	1,462.81	\$ 64.06	63,456	3,284	\$ 4,603,269	621	1,401.73	\$ 72.54
02	Outpatient Hospital Services	69,080	248,865	6,913,858	43,231	27.78	\$ 100.08	63,456	236,903	6,421,817	44,800	27.11	\$ 101.20
03	Lab and Radiology Services	69,080	77,059	1,395,205	13,386	18.11	\$ 20.20	63,456	69,991	1,269,255	13,236	18.13	\$ 20.00
05	Physician Services	69,080	174,366	10,414,203	30,289	59.73	\$ 150.76	63,456	164,653	9,530,734	31,137	57.88	\$ 150.19
06	Home and Community Based Services	69,080	0	-	0	0.00	\$ -	63,456	0	-	0	0.00	\$ -
07	Home Health Agency Services	69,080	461	21,219	80	46.03	\$ 0.31	63,456	552	22,218	104	40.25	\$ 0.35
09	Mental Health Clinic Services	69,080	2,520	61,954	438	24.59	\$ 0.90	63,456	1,219	48,258	231	39.59	\$ 0.76
10	Periodic Screening Services (EPDST)	69,080	110	4,378	19	39.80	\$ 0.06	63,456	110	3,340	21	30.37	\$ 0.05
11	Emergency/Non-Emergency Transportation	69,080	6,985	189,853	1,213	27.18	\$ 2.75	63,456	5,899	160,669	1,116	27.24	\$ 2.53
12	Dental Services	69,080	12	1,239	2	103.23	\$ 0.02	63,456	28	1,008	5	36.01	\$ 0.02
13	Eyeglass Services	69,080	605	38,824	105	64.17	\$ 0.56	63,456	659	44,614	125	67.70	\$ 0.70
15	Drug Services ¹	69,080	66,522	1,794,715	11,556	26.98	\$ 25.98	63,456	60,004	1,696,980	11,347	28.28	\$ 26.74
16	Dental Screening	69,080	374	17,062	65	45.62	\$ 0.25	63,456	240	10,994	45	45.81	\$ 0.17
17	Eyeglass Screening	69,080	813	32,118	141	39.51	\$ 0.46	63,456	631	24,523	119	38.86	\$ 0.39
18	Hearing Screening Services	69,080	2	47	0	23.52	\$ 0.00	63,456	2	46	0	22.87	\$ 0.00
22	Rural Health Clinic Services	69,080	4,479	329,194	778	73.50	\$ 4.77	63,456	4,077	295,058	771	72.37	\$ 4.65
23	FQHC (Federally Qualified Health Center)	69,080	14,483	1,141,369	2,516	78.81	\$ 16.52	63,456	14,632	1,186,153	2,767	81.07	\$ 18.69
24	DME (Durable Medical Equipment Services)	69,080	6,414	91,800	1,114	14.31	\$ 1.33	63,456	5,831	89,982	1,103	15.43	\$ 1.42
25	Therapy Services, (outside the Home Health Program)	69,080	8	321	1	40.11	\$ 0.00	63,456	27	826	5	30.60	\$ 0.01
27	Inpatient Psychiatric Hospital Services	69,080	14	7,527	2	537.64	\$ 0.11	63,456	0	-	0	0.00	\$ -
28	Nurse Services	69,080	40,628	567,495	7,058	13.97	\$ 8.22	63,456	39,659	568,113	7,500	14.32	\$ 8.95
29	Ambulatory Surgical Centers	69,080	26	9,377	5	360.66	\$ 0.14	63,456	33	25,623	6	776.46	\$ 0.40
31	Hospice Services	69,080	0	-	0	0.00	\$ -	63,456	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	69,080	0	-	0	0.00	\$ -	63,456	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	69,080	17	1,263	3	74.27	\$ 0.02	63,456	113	7,850	21	69.47	\$ 0.12
34	Family Planning Drug Services*	69,080	4,204	145,620	730	34.64	\$ 2.11	63,456	3,736	128,156	707	34.30	\$ 2.02
35	Freestanding Dialysis Services	69,080	0	-	0	0.00	\$ -	63,456	0	-	0	0.00	\$ -
98	Unknown	69,080	0	-	0	0.00	\$ -	63,456	0	-	0	0.00	\$ -
Total		69,080		\$ 27,603,649			\$ 399.59	63,456		\$ 26,139,486			\$ 411.93
Total Excluding Inpatient Hospital Services		69,080		\$ 23,171,112			\$ 335.42	63,456		\$ 21,536,218			\$ 339.39

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Newborns 0-2 Months
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	24,573	11,938	\$ 21,126,163	5,830	1,769.66	\$ 859.73	21,006	12,761	\$ 20,913,166	7,290	1,638.83	\$ 995.58
02	Outpatient Hospital Services	24,573	22,751	1,025,016	11,110	45.05	\$ 41.71	21,006	18,508	939,820	10,573	50.78	\$ 44.74
03	Lab and Radiology Services	24,573	406	4,512	198	11.11	\$ 0.18	21,006	327	3,762	187	11.50	\$ 0.18
05	Physician Services	24,573	71,512	4,515,220	34,922	63.14	\$ 183.75	21,006	62,041	4,052,219	35,442	65.32	\$ 192.91
06	Home and Community Based Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
07	Home Health Agency Services	24,573	81	7,492	40	92.49	\$ 0.30	21,006	30	3,000	17	100.00	\$ 0.14
09	Mental Health Clinic Services	24,573	2	58	1	28.76	\$ 0.00	21,006	1	88	1	88.35	\$ 0.00
10	Periodic Screening Services (EPDST)	24,573	28,916	900,721	14,121	31.15	\$ 36.65	21,006	30,931	858,433	17,670	27.75	\$ 40.87
11	Emergency/Non-Emergency Transportation	24,573	7,612	181,691	3,717	23.87	\$ 7.39	21,006	6,255	147,710	3,573	23.61	\$ 7.03
12	Dental Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
13	Eyeglass Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
15	Drug Services ¹	24,573	13,492	488,426	6,589	36.20	\$ 19.88	21,006	11,796	406,868	6,739	34.49	\$ 19.37
16	Dental Screening	24,573	5	739	2	147.75	\$ 0.03	21,006	13	2,519	7	193.80	\$ 0.12
17	Eyeglass Screening	24,573	3	203	1	67.55	\$ 0.01	21,006	4	269	2	67.17	\$ 0.01
18	Hearing Screening Services	24,573	110	9,772	54	88.83	\$ 0.40	21,006	55	4,745	31	86.27	\$ 0.23
22	Rural Health Clinic Services	24,573	7,193	480,172	3,513	66.76	\$ 19.54	21,006	6,417	426,365	3,666	66.44	\$ 20.30
23	FQHC (Federally Qualified Health Center)	24,573	8,022	394,577	3,917	49.19	\$ 16.06	21,006	4,607	272,924	2,632	59.24	\$ 12.99
24	DME (Durable Medical Equipment Services)	24,573	1,162	78,239	567	67.33	\$ 3.18	21,006	1,141	74,205	652	65.04	\$ 3.53
25	Therapy Services, (outside the Home Health Program)	24,573	0	-	0	0.00	\$ -	21,006	3	252	2	83.87	\$ 0.01
27	Inpatient Psychiatric Hospital Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
28	Nurse Services	24,573	18,724	243,090	9,144	12.98	\$ 9.89	21,006	17,259	213,465	9,859	12.37	\$ 10.16
29	Ambulatory Surgical Centers	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
31	Hospice Services	24,573	12	1,597	6	133.05	\$ 0.06	21,006	7	4,199	4	599.81	\$ 0.20
32	Outpatient Psychiatric Hospital Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
34	Family Planning Drug Services*	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	24,573	0	-	0	0.00	\$ -	21,006	69	2,374	39	34.40	\$ 0.11
98	Unknown	24,573	0	-	0	0.00	\$ -	21,006	0	-	0	0.00	\$ -
Total		24,573		\$ 29,457,686			\$ 1,198.78	21,006		\$ 28,326,383			\$ 1,348.49
Total Excluding Inpatient Hospital Services		24,573		\$ 8,331,523			\$ 339.05	21,006		\$ 7,413,217			\$ 352.91

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Newborns 3-12 Months
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	106,377	3,887	\$ 6,191,897	438	1,592.98	\$ 58.21	94,753	3,201	\$ 5,603,545	405	1,750.56	\$ 59.14
02	Outpatient Hospital Services	106,377	89,535	4,444,870	10,100	49.64	\$ 41.78	94,753	79,595	4,325,307	10,080	54.34	\$ 45.65
03	Lab and Radiology Services	106,377	5,851	76,768	660	13.12	\$ 0.72	94,753	4,560	58,699	578	12.87	\$ 0.62
05	Physician Services	106,377	104,908	4,905,589	11,834	46.76	\$ 46.12	94,753	89,044	4,088,374	11,277	45.91	\$ 43.15
06	Home and Community Based Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
07	Home Health Agency Services	106,377	194	15,728	22	81.07	\$ 0.15	94,753	151	13,922	19	92.20	\$ 0.15
09	Mental Health Clinic Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
10	Periodic Screening Services (EPDST)	106,377	80,124	2,246,186	9,038	28.03	\$ 21.12	94,753	81,309	2,032,212	10,297	24.99	\$ 21.45
11	Emergency/Non-Emergency Transportation	106,377	6,364	141,985	718	22.31	\$ 1.33	94,753	7,359	168,799	932	22.94	\$ 1.78
12	Dental Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
13	Eyeglass Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
15	Drug Services ¹	106,377	99,322	3,057,997	11,204	30.79	\$ 28.75	94,753	88,431	2,821,909	11,199	31.91	\$ 29.78
16	Dental Screening	106,377	436	34,300	49	78.67	\$ 0.32	94,753	469	39,004	59	83.16	\$ 0.41
17	Eyeglass Screening	106,377	110	5,927	12	53.89	\$ 0.06	94,753	119	7,470	15	62.78	\$ 0.08
18	Hearing Screening Services	106,377	78	4,714	9	60.44	\$ 0.04	94,753	85	5,458	11	64.21	\$ 0.06
22	Rural Health Clinic Services	106,377	22,984	1,340,092	2,593	58.31	\$ 12.60	94,753	20,494	1,144,708	2,595	55.86	\$ 12.08
23	FQHC (Federally Qualified Health Center)	106,377	22,385	986,450	2,525	44.07	\$ 9.27	94,753	16,566	832,956	2,098	50.28	\$ 8.79
24	DME (Durable Medical Equipment Services)	106,377	5,553	208,154	626	37.48	\$ 1.96	94,753	6,159	217,325	780	35.29	\$ 2.29
25	Therapy Services, (outside the Home Health Program)	106,377	593	17,260	67	29.11	\$ 0.16	94,753	793	23,055	100	29.07	\$ 0.24
27	Inpatient Psychiatric Hospital Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
28	Nurse Services	106,377	47,121	673,462	5,316	14.29	\$ 6.33	94,753	44,905	665,137	5,687	14.81	\$ 7.02
29	Ambulatory Surgical Centers	106,377	156	67,406	18	432.09	\$ 0.63	94,753	176	100,305	22	569.91	\$ 1.06
31	Hospice Services	106,377	28	3,704	3	132.27	\$ 0.03	94,753	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	106,377	3	260	0	86.52	\$ 0.00	94,753	12	1,079	2	89.90	\$ 0.01
34	Family Planning Drug Services*	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
98	Unknown	106,377	0	-	0	0.00	\$ -	94,753	0	-	0	0.00	\$ -
Total		106,377		\$ 24,422,749			\$ 229.59	94,753		\$ 22,149,264			\$ 233.76
Total Excluding Inpatient Hospital Services		106,377		\$ 18,230,853			\$ 171.38	94,753		\$ 16,545,720			\$ 174.62

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Delivery Kick Payment
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	8,622	23,302	\$ 35,865,993	32,431	1,539.18	\$ 4,159.82	7,627	20,026	\$ 30,677,292	31,508	1,531.87	\$ 4,022.20
02	Outpatient Hospital Services	8,622	17,769	437,256	24,731	24.61	\$ 50.71	7,627	13,994	367,077	22,018	26.23	\$ 48.13
03	Lab and Radiology Services	8,622	1,440	74,305	2,004	51.60	\$ 8.62	7,627	1,715	85,711	2,698	49.98	\$ 11.24
05	Physician Services	8,622	51,431	9,827,484	71,581	191.08	\$ 1,139.81	7,627	42,543	8,855,081	66,935	208.14	\$ 1,161.02
06	Home and Community Based Services	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
07	Home Health Agency Services	8,622	520	6,563	724	12.62	\$ 0.76	7,627	73	5,266	115	72.13	\$ 0.69
09	Mental Health Clinic Services	8,622	219	5,125	305	23.40	\$ 0.59	7,627	175	4,446	275	25.41	\$ 0.58
10	Periodic Screening Services (EPDST)	8,622	17	281	24	16.55	\$ 0.03	7,627	59	1,416	93	24.00	\$ 0.19
11	Emergency/Non-Emergency Transportation	8,622	6,653	124,015	9,260	18.64	\$ 14.38	7,627	5,128	99,558	8,068	19.41	\$ 13.05
12	Dental Services	8,622	51	1,856	71	36.38	\$ 0.22	7,627	53	2,228	83	42.04	\$ 0.29
13	Eyeglass Services	8,622	39	2,276	54	58.35	\$ 0.26	7,627	42	2,264	66	53.91	\$ 0.30
15	Drug Services ¹	8,622	23,062	403,869	32,097	17.51	\$ 46.84	7,627	20,513	372,114	32,274	18.14	\$ 48.79
16	Dental Screening	8,622	30	1,544	42	51.48	\$ 0.18	7,627	7	862	11	123.16	\$ 0.11
17	Eyeglass Screening	8,622	66	2,733	92	41.40	\$ 0.32	7,627	16	807	25	50.45	\$ 0.11
18	Hearing Screening Services	8,622	0	-	0	0.00	\$ -	7,627	2	46	3	22.87	\$ 0.01
22	Rural Health Clinic Services	8,622	399	29,766	555	74.60	\$ 3.45	7,627	299	22,475	470	75.17	\$ 2.95
23	FQHC (Federally Qualified Health Center)	8,622	981	89,154	1,365	90.88	\$ 10.34	7,627	863	78,098	1,358	90.50	\$ 10.24
24	DME (Durable Medical Equipment Services)	8,622	1,078	6,611	1,500	6.13	\$ 0.77	7,627	562	7,428	884	13.22	\$ 0.97
25	Therapy Services, (outside the Home Health Program)	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
27	Inpatient Psychiatric Hospital Services	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
28	Nurse Services	8,622	19,536	899,988	27,190	46.07	\$ 104.38	7,627	15,334	919,662	24,126	59.98	\$ 120.58
29	Ambulatory Surgical Centers	8,622	4	1,338	6	334.44	\$ 0.16	7,627	0	-	0	0.00	\$ -
31	Hospice Services	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	8,622	0	-	0	0.00	\$ -	7,627	23	1,828	36	79.47	\$ 0.24
34	Family Planning Drug Services*	8,622	561	16,270	781	29.00	\$ 1.89	7,627	482	14,438	758	29.95	\$ 1.89
35	Freestanding Dialysis Services	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
98	Unknown	8,622	0	-	0	0.00	\$ -	7,627	0	-	0	0.00	\$ -
Total		8,622		\$ 47,796,426			\$ 5,543.54	7,627		\$ 41,518,095			\$ 5,443.57
Total Excluding Inpatient Hospital Services		8,622		\$ 11,930,433			\$ 1,383.72	7,627		\$ 10,840,803			\$ 1,421.37

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Total
 Region: Central

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	411,583	50,287	\$ 79,813,353	1,466	1,587.16	\$ 193.92	368,839	47,121	\$ 73,313,393	1,533	1,555.85	\$ 198.77
02	Outpatient Hospital Services	411,583	966,750	30,018,888	28,186	31.05	\$ 72.94	368,839	876,930	27,431,634	28,530	31.28	\$ 74.37
03	Lab and Radiology Services	411,583	165,750	3,342,366	4,833	20.17	\$ 8.12	368,839	144,723	2,961,461	4,708	20.46	\$ 8.03
05	Physician Services	411,583	792,346	42,764,898	23,101	53.97	\$ 103.90	368,839	713,362	38,291,698	23,209	53.68	\$ 103.82
06	Home and Community Based Services	411,583	0	-	0	0.00	\$ -	368,839	0	-	0	0.00	\$ -
07	Home Health Agency Services	411,583	7,209	147,069	210	20.40	\$ 0.36	368,839	2,246	102,773	73	45.76	\$ 0.28
09	Mental Health Clinic Services	411,583	69,834	1,443,022	2,036	20.66	\$ 3.51	368,839	54,646	1,219,667	1,778	22.32	\$ 3.31
10	Periodic Screening Services (EPDST)	411,583	110,092	3,183,697	3,210	28.92	\$ 7.74	368,839	113,275	2,922,631	3,685	25.80	\$ 7.92
11	Emergency/Non-Emergency Transportation	411,583	42,530	1,229,263	1,240	28.90	\$ 2.99	368,839	37,383	1,110,584	1,216	29.71	\$ 3.01
12	Dental Services	411,583	30,274	1,516,682	883	50.10	\$ 3.68	368,839	28,224	1,443,264	918	51.14	\$ 3.91
13	Eyeglass Services	411,583	20,751	926,832	605	44.66	\$ 2.25	368,839	18,425	845,998	599	45.92	\$ 2.29
15	Drug Services ¹	411,583	487,541	15,484,000	14,215	31.76	\$ 37.62	368,839	455,043	15,211,687	14,805	33.43	\$ 41.24
16	Dental Screening	411,583	5,976	345,133	174	57.75	\$ 0.84	368,839	4,814	295,981	157	61.48	\$ 0.80
17	Eyeglass Screening	411,583	3,341	130,921	97	39.19	\$ 0.32	368,839	2,818	110,985	92	39.38	\$ 0.30
18	Hearing Screening Services	411,583	220	15,280	6	69.46	\$ 0.04	368,839	181	11,170	6	61.71	\$ 0.03
22	Rural Health Clinic Services	411,583	61,087	3,573,812	1,781	58.50	\$ 8.68	368,839	56,939	3,254,237	1,852	57.15	\$ 8.82
23	FQHC (Federally Qualified Health Center)	411,583	67,945	4,195,668	1,981	61.75	\$ 10.19	368,839	54,866	3,702,747	1,785	67.49	\$ 10.04
24	DME (Durable Medical Equipment Services)	411,583	44,749	733,651	1,305	16.39	\$ 1.78	368,839	40,365	702,811	1,313	17.41	\$ 1.91
25	Therapy Services, (outside the Home Health Program)	411,583	1,405	37,212	41	26.49	\$ 0.09	368,839	2,297	60,519	75	26.35	\$ 0.16
27	Inpatient Psychiatric Hospital Services	411,583	27	14,516	1	537.64	\$ 0.04	368,839	26	19,385	1	745.58	\$ 0.05
28	Nurse Services	411,583	323,107	3,863,678	9,420	11.96	\$ 9.39	368,839	308,947	3,858,472	10,051	12.49	\$ 10.46
29	Ambulatory Surgical Centers	411,583	1,125	391,054	33	347.60	\$ 0.95	368,839	1,226	548,449	40	447.35	\$ 1.49
31	Hospice Services	411,583	71	9,226	2	129.94	\$ 0.02	368,839	116	26,761	4	230.69	\$ 0.07
32	Outpatient Psychiatric Hospital Services	411,583	0	-	0	0.00	\$ -	368,839	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	411,583	130	10,540	4	81.08	\$ 0.03	368,839	428	34,867	14	81.46	\$ 0.09
34	Family Planning Drug Services*	411,583	20,293	819,645	592	40.39	\$ 1.99	368,839	17,801	711,468	579	39.97	\$ 1.93
35	Freestanding Dialysis Services	411,583	8,491	17,473	248	2.06	\$ 0.04	368,839	5,238	11,350	170	2.17	\$ 0.03
98	Unknown	411,583	0	15	0	0.00	\$ 0.00	368,839	0	24	0	0.00	\$ 0.00
Total		411,583		\$ 194,027,895			\$ 471.42	368,839		\$ 178,204,016			\$ 483.15
Total Excluding Inpatient Hospital Services		411,583		\$ 114,200,026			\$ 277.47	368,839		\$ 104,871,237			\$ 284.33

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 19-39 Male
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	10,346	457	\$ 661,236	530	1,446.91	\$ 63.91	10,710	448	\$ 719,333	502	1,605.65	\$ 67.16
02	Outpatient Hospital Services	10,346	22,276	651,023	25,837	29.23	\$ 62.93	10,710	25,468	747,493	28,536	29.35	\$ 69.79
03	Lab and Radiology Services	10,346	3,269	51,992	3,792	15.90	\$ 5.03	10,710	2,003	33,180	2,244	16.57	\$ 3.10
05	Physician Services	10,346	17,211	580,073	19,962	33.70	\$ 56.07	10,710	18,604	599,639	20,845	32.23	\$ 55.99
06	Home and Community Based Services	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
07	Home Health Agency Services	10,346	348	3,191	404	9.17	\$ 0.31	10,710	409	4,989	458	12.20	\$ 0.47
09	Mental Health Clinic Services	10,346	1,054	33,546	1,223	31.83	\$ 3.24	10,710	816	43,686	914	53.54	\$ 4.08
10	Periodic Screening Services (EPDST)	10,346	0	-	0	0.00	\$ -	10,710	2	192	2	96.09	\$ 0.02
11	Emergency/Non-Emergency Transportation	10,346	918	27,877	1,065	30.37	\$ 2.69	10,710	821	26,608	920	32.41	\$ 2.48
12	Dental Services	10,346	2,065	124,048	2,395	60.07	\$ 11.99	10,710	1,884	110,591	2,111	58.70	\$ 10.33
13	Eyeglass Services	10,346	725	29,935	841	41.29	\$ 2.89	10,710	793	32,628	889	41.14	\$ 3.05
15	Drug Services ¹	10,346	12,876	506,977	14,934	39.37	\$ 49.00	10,710	14,393	639,160	16,127	44.41	\$ 59.68
16	Dental Screening	10,346	99	5,661	115	57.18	\$ 0.55	10,710	48	2,662	54	55.47	\$ 0.25
17	Eyeglass Screening	10,346	22	746	26	33.93	\$ 0.07	10,710	53	2,219	59	41.87	\$ 0.21
18	Hearing Screening Services	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	10,346	1,211	61,707	1,405	50.96	\$ 5.96	10,710	1,000	55,881	1,120	55.88	\$ 5.22
23	FQHC (Federally Qualified Health Center)	10,346	398	27,780	462	69.80	\$ 2.69	10,710	339	24,577	380	72.50	\$ 2.29
24	DME (Durable Medical Equipment Services)	10,346	793	16,927	920	21.35	\$ 1.64	10,710	1,952	18,510	2,187	9.48	\$ 1.73
25	Therapy Services, (outside the Home Health Program)	10,346	22	690	26	31.38	\$ 0.07	10,710	151	3,375	169	22.35	\$ 0.32
27	Inpatient Psychiatric Hospital Services	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
28	Nurse Services	10,346	9,021	60,494	10,463	6.71	\$ 5.85	10,710	10,824	81,321	12,128	7.51	\$ 7.59
29	Ambulatory Surgical Centers	10,346	72	21,036	84	292.17	\$ 2.03	10,710	92	28,271	103	307.30	\$ 2.64
31	Hospice Services	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	10,346	16	1,495	19	93.44	\$ 0.14	10,710	22	1,977	25	89.85	\$ 0.18
34	Family Planning Drug Services*	10,346	0	-	0	0.00	\$ -	10,710	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	10,346	3	333	3	111.15	\$ 0.03	10,710	4,892	8,155	5,481	1.67	\$ 0.76
98	Unknown	10,346	0	-	0	0.00	\$ 0.00	10,710	0	-	0	0.00	\$ 0.00
	Total	10,346		\$ 2,866,771			\$ 277.09	10,710		\$ 3,184,453			\$ 297.33
	Total Excluding Inpatient Hospital Services	10,346		\$ 2,205,535			\$ 213.18	10,710		\$ 2,465,121			\$ 230.17

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: MA 40+ Male
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	4,092	269	\$ 403,722	789	1,500.83	\$ 98.66	4,391	261	\$ 464,935	713	1,781.36	\$ 105.88
02	Outpatient Hospital Services	4,092	16,574	376,914	48,604	22.74	\$ 92.11	4,391	14,275	417,609	39,012	29.25	\$ 95.11
03	Lab and Radiology Services	4,092	1,192	19,938	3,496	16.73	\$ 4.87	4,391	835	12,977	2,282	15.54	\$ 2.96
05	Physician Services	4,092	9,949	380,545	29,176	38.25	\$ 93.00	4,391	10,488	388,956	28,662	37.09	\$ 88.58
06	Home and Community Based Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
07	Home Health Agency Services	4,092	150	5,443	440	36.28	\$ 1.33	4,391	47	3,776	128	80.34	\$ 0.86
09	Mental Health Clinic Services	4,092	152	8,296	446	54.58	\$ 2.03	4,391	222	13,757	607	61.97	\$ 3.13
10	Periodic Screening Services (EPDST)	4,092	2	20	6	10.15	\$ 0.00	4,391	0	-	0	0.00	\$ -
11	Emergency/Non-Emergency Transportation	4,092	274	11,233	804	41.00	\$ 2.75	4,391	380	14,016	1,038	36.89	\$ 3.19
12	Dental Services	4,092	802	52,832	2,352	65.88	\$ 12.91	4,391	776	50,906	2,121	65.60	\$ 11.59
13	Eyeglass Services	4,092	490	19,323	1,437	39.43	\$ 4.72	4,391	512	21,344	1,399	41.69	\$ 4.86
15	Drug Services ¹	4,092	7,670	370,852	22,493	48.35	\$ 90.63	4,391	8,748	485,559	23,907	55.51	\$ 110.58
16	Dental Screening	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
17	Eyeglass Screening	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
18	Hearing Screening Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	4,092	557	28,842	1,633	51.78	\$ 7.05	4,391	628	30,341	1,716	48.31	\$ 6.91
23	FQHC (Federally Qualified Health Center)	4,092	361	22,810	1,059	63.18	\$ 5.57	4,391	262	18,733	716	71.50	\$ 4.27
24	DME (Durable Medical Equipment Services)	4,092	1,720	17,350	5,044	10.09	\$ 4.24	4,391	3,192	18,143	8,723	5.68	\$ 4.13
25	Therapy Services, (outside the Home Health Program)	4,092	111	2,433	326	21.92	\$ 0.59	4,391	90	2,183	246	24.25	\$ 0.50
27	Inpatient Psychiatric Hospital Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
28	Nurse Services	4,092	5,997	28,197	17,587	4.70	\$ 6.89	4,391	6,456	40,963	17,643	6.35	\$ 9.33
29	Ambulatory Surgical Centers	4,092	63	20,004	185	317.52	\$ 4.89	4,391	77	29,752	210	386.39	\$ 6.78
31	Hospice Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	4,092	1	131	3	130.64	\$ 0.03	4,391	1	123	3	123.49	\$ 0.03
34	Family Planning Drug Services*	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
98	Unknown	4,092	0	-	0	0.00	\$ -	4,391	0	-	0	0.00	\$ -
Total		4,092		\$ 1,768,885			\$ 432.28	4,391		\$ 2,014,074			\$ 458.68
Total Excluding Inpatient Hospital Services		4,092		\$ 1,365,163			\$ 333.62	4,391		\$ 1,549,139			\$ 352.80

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 19-39 Female
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	118,182	4,791	\$ 6,971,956	486	1,455.22	\$ 58.99	114,847	4,719	\$ 7,150,810	493	1,515.32	\$ 62.26
02	Outpatient Hospital Services	118,182	374,384	9,235,281	38,014	24.67	\$ 78.14	114,847	400,740	9,166,726	41,872	22.87	\$ 79.82
03	Lab and Radiology Services	118,182	57,229	1,145,502	5,811	20.02	\$ 9.69	114,847	46,654	1,000,602	4,875	21.45	\$ 8.71
05	Physician Services	118,182	241,853	8,999,063	24,557	37.21	\$ 76.15	114,847	238,225	8,733,717	24,891	36.66	\$ 76.05
06	Home and Community Based Services	118,182	0	-	0	0.00	\$ -	114,847	0	-	0	0.00	\$ -
07	Home Health Agency Services	118,182	1,091	25,777	111	23.63	\$ 0.22	114,847	1,291	25,624	135	19.85	\$ 0.22
09	Mental Health Clinic Services	118,182	32,178	598,482	3,267	18.60	\$ 5.06	114,847	20,770	517,168	2,170	24.90	\$ 4.50
10	Periodic Screening Services (EPDST)	118,182	138	10,915	14	79.09	\$ 0.09	114,847	99	5,784	10	58.43	\$ 0.05
11	Emergency/Non-Emergency Transportation	118,182	7,460	305,304	757	40.93	\$ 2.58	114,847	9,254	348,035	967	37.61	\$ 3.03
12	Dental Services	118,182	19,113	1,044,787	1,941	54.66	\$ 8.84	114,847	19,163	1,042,066	2,002	54.38	\$ 9.07
13	Eyeglass Services	118,182	9,829	402,806	998	40.98	\$ 3.41	114,847	9,032	381,513	944	42.24	\$ 3.32
15	Drug Services ¹	118,182	169,520	5,777,621	17,213	34.08	\$ 48.89	114,847	172,734	6,399,107	18,048	37.05	\$ 55.72
16	Dental Screening	118,182	3,458	214,441	351	62.01	\$ 1.81	114,847	2,836	172,079	296	60.68	\$ 1.50
17	Eyeglass Screening	118,182	1,437	50,417	146	35.08	\$ 0.43	114,847	1,094	39,596	114	36.19	\$ 0.34
18	Hearing Screening Services	118,182	26	454	3	17.47	\$ 0.00	114,847	3	80	0	26.66	\$ 0.00
22	Rural Health Clinic Services	118,182	17,571	958,327	1,784	54.54	\$ 8.11	114,847	16,514	870,319	1,725	52.70	\$ 7.58
23	FQHC (Federally Qualified Health Center)	118,182	12,445	800,825	1,264	64.35	\$ 6.78	114,847	11,470	745,230	1,198	64.97	\$ 6.49
24	DME (Durable Medical Equipment Services)	118,182	10,374	119,360	1,053	11.51	\$ 1.01	114,847	9,066	122,057	947	13.46	\$ 1.06
25	Therapy Services, (outside the Home Health Program)	118,182	636	15,370	65	24.17	\$ 0.13	114,847	1,075	26,034	112	24.22	\$ 0.23
27	Inpatient Psychiatric Hospital Services	118,182	7	3,763	1	537.64	\$ 0.03	114,847	4	2,191	0	547.86	\$ 0.02
28	Nurse Services	118,182	128,605	933,723	13,058	7.26	\$ 7.90	114,847	133,548	1,101,623	13,954	8.25	\$ 9.59
29	Ambulatory Surgical Centers	118,182	686	223,565	70	325.90	\$ 1.89	114,847	744	377,569	78	507.49	\$ 3.29
31	Hospice Services	118,182	52	6,819	5	131.14	\$ 0.06	114,847	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	118,182	0	-	0	0.00	\$ -	114,847	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	118,182	321	27,779	33	86.54	\$ 0.24	114,847	378	31,540	39	83.44	\$ 0.27
34	Family Planning Drug Services*	118,182	10,394	433,249	1,055	41.68	\$ 3.67	114,847	9,236	379,121	965	41.05	\$ 3.30
35	Freestanding Dialysis Services	118,182	3,191	4,420	324	1.39	\$ 0.04	114,847	0	-	0	0.00	\$ -
98	Unknown	118,182	0	-	0	0.00	\$ -	114,847	0	12	0	0.00	\$ 0.00
Total		118,182		\$ 38,310,009			\$ 324.16	114,847		\$ 38,638,603			\$ 336.44
Total Excluding Inpatient Hospital Services		118,182		\$ 31,334,289			\$ 265.14	114,847		\$ 31,485,601			\$ 274.15

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: MA 40+ Female
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	16,926	1,147	\$ 1,670,445	813	1,456.36	\$ 98.69	16,812	1,018	\$ 1,609,344	727	1,580.89	\$ 95.73
02	Outpatient Hospital Services	16,926	67,982	1,913,860	48,197	28.15	\$ 113.07	16,812	72,984	1,925,133	52,094	26.38	\$ 114.51
03	Lab and Radiology Services	16,926	6,786	122,109	4,811	17.99	\$ 7.21	16,812	5,785	107,125	4,129	18.52	\$ 6.37
05	Physician Services	16,926	49,951	1,594,791	35,414	31.93	\$ 94.22	16,812	50,764	1,674,924	36,234	32.99	\$ 99.63
06	Home and Community Based Services	16,926	0	-	0	0.00	\$ -	16,812	0	-	0	0.00	\$ -
07	Home Health Agency Services	16,926	1,291	16,317	915	12.64	\$ 0.96	16,812	528	14,797	377	28.03	\$ 0.88
09	Mental Health Clinic Services	16,926	6,566	132,823	4,655	20.23	\$ 7.85	16,812	5,252	138,780	3,749	26.42	\$ 8.25
10	Periodic Screening Services (EPDST)	16,926	5	264	4	52.86	\$ 0.02	16,812	3	62	2	20.70	\$ 0.00
11	Emergency/Non-Emergency Transportation	16,926	1,402	48,611	994	34.67	\$ 2.87	16,812	1,407	56,934	1,004	40.46	\$ 3.39
12	Dental Services	16,926	2,081	114,484	1,475	55.01	\$ 6.76	16,812	2,420	137,194	1,727	56.69	\$ 8.16
13	Eyeglass Services	16,926	2,167	91,653	1,536	42.29	\$ 5.41	16,812	2,276	96,162	1,625	42.25	\$ 5.72
15	Drug Services ¹	16,926	41,487	1,784,375	29,413	43.01	\$ 105.42	16,812	43,585	1,831,755	31,110	42.03	\$ 108.96
16	Dental Screening	16,926	0	-	0	0.00	\$ -	16,812	0	-	0	0.00	\$ -
17	Eyeglass Screening	16,926	0	-	0	0.00	\$ -	16,812	0	-	0	0.00	\$ -
18	Hearing Screening Services	16,926	3	80	2	26.58	\$ 0.00	16,812	2	48	1	23.98	\$ 0.00
22	Rural Health Clinic Services	16,926	3,363	152,318	2,384	45.29	\$ 9.00	16,812	3,074	145,078	2,194	47.20	\$ 8.63
23	FQHC (Federally Qualified Health Center)	16,926	1,813	122,510	1,285	67.57	\$ 7.24	16,812	1,941	128,166	1,385	66.03	\$ 7.62
24	DME (Durable Medical Equipment Services)	16,926	5,186	67,271	3,677	12.97	\$ 3.97	16,812	4,272	56,578	3,049	13.24	\$ 3.37
25	Therapy Services, (outside the Home Health Program)	16,926	312	7,049	221	22.59	\$ 0.42	16,812	551	12,840	393	23.30	\$ 0.76
27	Inpatient Psychiatric Hospital Services	16,926	0	-	0	0.00	\$ -	16,812	0	-	0	0.00	\$ -
28	Nurse Services	16,926	28,354	136,720	20,102	4.82	\$ 8.08	16,812	33,850	198,335	24,161	5.86	\$ 11.80
29	Ambulatory Surgical Centers	16,926	220	67,165	156	305.30	\$ 3.97	16,812	284	90,763	203	319.59	\$ 5.40
31	Hospice Services	16,926	143	18,467	101	129.14	\$ 1.09	16,812	37	4,827	26	130.45	\$ 0.29
32	Outpatient Psychiatric Hospital Services	16,926	0	-	0	0.00	\$ -	16,812	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	16,926	91	7,302	65	80.24	\$ 0.43	16,812	41	3,543	29	86.42	\$ 0.21
34	Family Planning Drug Services*	16,926	221	9,922	157	44.89	\$ 0.59	16,812	276	12,493	197	45.26	\$ 0.74
35	Freestanding Dialysis Services	16,926	0	-	0	0.00	\$ -	16,812	106	711	76	6.70	\$ 0.04
98	Unknown	16,926	0	3	0	0.00	\$ 0.00	16,812	0	-	0	0.00	\$ -
Total		16,926		\$ 8,078,538			\$ 477.29	16,812		\$ 8,245,592			\$ 490.46
Total Excluding Inpatient Hospital Services		16,926		\$ 6,408,093			\$ 378.59	16,812		\$ 6,636,247			\$ 394.73

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Pregnant Women
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	64,113	2,584	\$ 3,601,939	484	1,393.94	\$ 56.18	58,457	2,902	\$ 4,054,737	596	1,397.22	\$ 69.36
02	Outpatient Hospital Services	64,113	210,548	5,167,669	39,408	24.54	\$ 80.60	58,457	197,674	4,552,664	40,578	23.03	\$ 77.88
03	Lab and Radiology Services	64,113	73,107	1,271,885	13,683	17.40	\$ 19.84	58,457	66,528	1,178,997	13,657	17.72	\$ 20.17
05	Physician Services	64,113	149,861	10,159,939	28,049	67.80	\$ 158.47	58,457	140,641	9,152,743	28,871	65.08	\$ 156.57
06	Home and Community Based Services	64,113	0	-	0	0.00	\$ -	58,457	0	-	0	0.00	\$ -
07	Home Health Agency Services	64,113	669	14,770	125	22.08	\$ 0.23	58,457	814	12,202	167	14.99	\$ 0.21
09	Mental Health Clinic Services	64,113	1,172	42,500	219	36.26	\$ 0.66	58,457	1,179	30,631	242	25.98	\$ 0.52
10	Periodic Screening Services (EPDST)	64,113	47	2,065	9	43.93	\$ 0.03	58,457	46	1,728	9	37.57	\$ 0.03
11	Emergency/Non-Emergency Transportation	64,113	5,884	151,702	1,101	25.78	\$ 2.37	58,457	6,394	149,377	1,313	23.36	\$ 2.56
12	Dental Services	64,113	25	1,354	5	54.15	\$ 0.02	58,457	25	1,439	5	57.57	\$ 0.02
13	Eyeglass Services	64,113	408	26,170	76	64.14	\$ 0.41	58,457	312	21,032	64	67.41	\$ 0.36
15	Drug Services ¹	64,113	58,574	1,622,654	10,963	27.70	\$ 25.31	58,457	49,377	1,263,478	10,136	25.59	\$ 21.61
16	Dental Screening	64,113	172	9,827	32	57.13	\$ 0.15	58,457	190	10,347	39	54.46	\$ 0.18
17	Eyeglass Screening	64,113	575	21,664	108	37.68	\$ 0.34	58,457	459	17,672	94	38.50	\$ 0.30
18	Hearing Screening Services	64,113	7	223	1	31.90	\$ 0.00	58,457	2	48	0	23.98	\$ 0.00
22	Rural Health Clinic Services	64,113	11,476	666,161	2,148	58.05	\$ 10.39	58,457	9,411	579,285	1,932	61.55	\$ 9.91
23	FQHC (Federally Qualified Health Center)	64,113	7,672	436,325	1,436	56.87	\$ 6.81	58,457	6,359	371,705	1,305	58.45	\$ 6.36
24	DME (Durable Medical Equipment Services)	64,113	7,492	83,298	1,402	11.12	\$ 1.30	58,457	4,344	74,578	892	17.17	\$ 1.28
25	Therapy Services, (outside the Home Health Program)	64,113	7	241	1	34.48	\$ 0.00	58,457	66	1,598	14	24.21	\$ 0.03
27	Inpatient Psychiatric Hospital Services	64,113	0	-	0	0.00	\$ -	58,457	7	6,122	1	874.63	\$ 0.10
28	Nurse Services	64,113	45,025	841,023	8,427	18.68	\$ 13.12	58,457	37,667	641,137	7,732	17.02	\$ 10.97
29	Ambulatory Surgical Centers	64,113	76	25,616	14	337.05	\$ 0.40	58,457	54	44,994	11	833.23	\$ 0.77
31	Hospice Services	64,113	10	6,028	2	602.84	\$ 0.09	58,457	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	64,113	0	-	0	0.00	\$ -	58,457	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	64,113	87	7,632	16	87.73	\$ 0.12	58,457	62	5,114	13	82.49	\$ 0.09
34	Family Planning Drug Services*	64,113	3,591	129,589	672	36.09	\$ 2.02	58,457	3,229	114,063	663	35.32	\$ 1.95
35	Freestanding Dialysis Services	64,113	0	-	0	0.00	\$ -	58,457	0	-	0	0.00	\$ -
98	Unknown	64,113	0	-	0	0.00	\$ -	58,457	0	-	0	0.00	\$ -
	Total	64,113		\$ 24,290,273			\$ 378.87	58,457		\$ 22,285,694			\$ 381.23
	Total Excluding Inpatient Hospital Services	64,113		\$ 20,688,334			\$ 322.69	58,457		\$ 18,224,834			\$ 311.76

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Newborns 0-2 Months
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	20,901	9,366	\$ 14,825,313	5,377	1,582.89	\$ 709.31	18,076	11,335	\$ 17,760,415	7,525	1,566.87	\$ 982.54
02	Outpatient Hospital Services	20,901	20,178	612,420	11,585	30.35	\$ 29.30	18,076	16,648	555,185	11,052	33.35	\$ 30.71
03	Lab and Radiology Services	20,901	333	6,611	191	19.85	\$ 0.32	18,076	256	5,167	170	20.18	\$ 0.29
05	Physician Services	20,901	60,649	4,089,798	34,821	67.43	\$ 195.67	18,076	54,263	3,947,624	36,023	72.75	\$ 218.39
06	Home and Community Based Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
07	Home Health Agency Services	20,901	87	9,513	50	109.34	\$ 0.46	18,076	332	7,120	220	21.45	\$ 0.39
09	Mental Health Clinic Services	20,901	231	4,792	133	20.75	\$ 0.23	18,076	72	1,692	48	23.50	\$ 0.09
10	Periodic Screening Services (EPDST)	20,901	28,455	789,795	16,337	27.76	\$ 37.79	18,076	27,151	720,615	18,025	26.54	\$ 39.87
11	Emergency/Non-Emergency Transportation	20,901	4,976	130,078	2,857	26.14	\$ 6.22	18,076	5,450	117,199	3,618	21.50	\$ 6.48
12	Dental Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
13	Eyeglass Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
15	Drug Services ¹	20,901	11,618	478,725	6,670	41.21	\$ 22.90	18,076	10,097	380,513	6,703	37.69	\$ 21.05
16	Dental Screening	20,901	23	849	13	36.92	\$ 0.04	18,076	2	74	1	36.81	\$ 0.00
17	Eyeglass Screening	20,901	11	602	6	54.70	\$ 0.03	18,076	7	519	5	74.14	\$ 0.03
18	Hearing Screening Services	20,901	26	1,696	15	65.24	\$ 0.08	18,076	29	1,715	19	59.13	\$ 0.09
22	Rural Health Clinic Services	20,901	3,990	313,599	2,291	78.60	\$ 15.00	18,076	5,249	308,999	3,485	58.87	\$ 17.09
23	FQHC (Federally Qualified Health Center)	20,901	1,590	147,561	913	92.81	\$ 7.06	18,076	1,375	123,255	913	89.64	\$ 6.82
24	DME (Durable Medical Equipment Services)	20,901	866	73,202	497	84.53	\$ 3.50	18,076	1,325	68,667	880	51.82	\$ 3.80
25	Therapy Services, (outside the Home Health Program)	20,901	28	1,253	16	44.75	\$ 0.06	18,076	2	205	1	102.48	\$ 0.01
27	Inpatient Psychiatric Hospital Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
28	Nurse Services	20,901	11,681	96,697	6,706	8.28	\$ 4.63	18,076	12,192	107,474	8,094	8.82	\$ 5.95
29	Ambulatory Surgical Centers	20,901	1	239	1	239.11	\$ 0.01	18,076	0	-	0	0.00	\$ -
31	Hospice Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	20,901	1	105	1	104.50	\$ 0.00	18,076	1	128	1	127.56	\$ 0.01
34	Family Planning Drug Services*	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	20,901	0	-	0	0.00	\$ -	18,076	0	-	0	0.00	\$ -
98	Unknown	20,901	0	155	0	0.00	\$ 0.01	18,076	0	-	0	0.00	\$ -
Total		20,901		\$ 21,583,003			\$ 1,032.63	18,076		\$ 24,106,565			\$ 1,333.62
Total Excluding Inpatient Hospital Services		20,901		\$ 6,757,690			\$ 323.32	18,076		\$ 6,346,150			\$ 351.08

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Newborns 3-12 Months
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	90,255	3,525	\$ 5,676,609	469	1,610.39	\$ 62.90	81,460	3,487	\$ 5,543,681	514	1,589.81	\$ 68.05
02	Outpatient Hospital Services	90,255	72,214	2,440,472	9,601	33.79	\$ 27.04	81,460	68,794	2,451,406	10,134	35.63	\$ 30.09
03	Lab and Radiology Services	90,255	4,626	55,102	615	11.91	\$ 0.61	81,460	3,359	39,013	495	11.61	\$ 0.48
05	Physician Services	90,255	93,435	4,921,309	12,423	52.67	\$ 54.53	81,460	86,063	4,353,450	12,678	50.58	\$ 53.44
06	Home and Community Based Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
07	Home Health Agency Services	90,255	189	16,229	25	85.87	\$ 0.18	81,460	59	6,559	9	111.18	\$ 0.08
09	Mental Health Clinic Services	90,255	72	1,364	10	18.94	\$ 0.02	81,460	118	3,045	17	25.80	\$ 0.04
10	Periodic Screening Services (EPDST)	90,255	80,901	1,863,214	10,756	23.03	\$ 20.64	81,460	74,845	1,658,391	11,026	22.16	\$ 20.36
11	Emergency/Non-Emergency Transportation	90,255	4,606	83,381	612	18.10	\$ 0.92	81,460	5,765	119,523	849	20.73	\$ 1.47
12	Dental Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
13	Eyeglass Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
15	Drug Services ¹	90,255	82,539	2,961,752	10,974	35.88	\$ 32.82	81,460	72,407	2,553,776	10,666	35.27	\$ 31.35
16	Dental Screening	90,255	657	17,845	87	27.16	\$ 0.20	81,460	573	15,695	84	27.39	\$ 0.19
17	Eyeglass Screening	90,255	87	4,873	12	56.01	\$ 0.05	81,460	72	3,964	11	55.06	\$ 0.05
18	Hearing Screening Services	90,255	83	3,880	11	46.74	\$ 0.04	81,460	103	5,558	15	53.96	\$ 0.07
22	Rural Health Clinic Services	90,255	12,846	916,783	1,708	71.37	\$ 10.16	81,460	15,905	863,760	2,343	54.31	\$ 10.60
23	FQHC (Federally Qualified Health Center)	90,255	5,868	481,072	780	81.98	\$ 5.33	81,460	5,030	387,792	741	77.10	\$ 4.76
24	DME (Durable Medical Equipment Services)	90,255	9,647	235,685	1,283	24.43	\$ 2.61	81,460	7,432	200,771	1,095	27.01	\$ 2.46
25	Therapy Services, (outside the Home Health Program)	90,255	1,867	51,102	248	27.37	\$ 0.57	81,460	1,234	35,760	182	28.98	\$ 0.44
27	Inpatient Psychiatric Hospital Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
28	Nurse Services	90,255	30,776	396,724	4,092	12.89	\$ 4.40	81,460	33,773	445,683	4,975	13.20	\$ 5.47
29	Ambulatory Surgical Centers	90,255	289	133,786	38	462.93	\$ 1.48	81,460	287	184,185	42	641.76	\$ 2.26
31	Hospice Services	90,255	0	-	0	0.00	\$ -	81,460	7	913	1	130.45	\$ 0.01
32	Outpatient Psychiatric Hospital Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	90,255	12	1,024	2	85.35	\$ 0.01	81,460	2	188	0	93.81	\$ 0.00
34	Family Planning Drug Services*	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
35	Freestanding Dialysis Services	90,255	0	-	0	0.00	\$ -	81,460	0	-	0	0.00	\$ -
98	Unknown	90,255	0	-	0	0.00	\$ -	81,460	0	344	0	0.00	\$ 0.00
Total		90,255		\$ 20,262,206			\$ 224.50	81,460		\$ 18,873,458			\$ 231.69
Total Excluding Inpatient Hospital Services		90,255		\$ 14,585,597			\$ 161.60	81,460		\$ 13,329,776			\$ 163.64

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011	January 2012 - November 2012
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COE: Delivery Kick Payment
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	7,381	17,909	\$ 25,823,096	29,116	1,441.91	\$ 3,498.59	6,621	16,052	\$ 23,588,227	29,093	1,469.49	\$ 3,562.64
02	Outpatient Hospital Services	7,381	13,231	265,197	21,511	20.04	\$ 35.93	6,621	10,961	222,631	19,866	20.31	\$ 33.62
03	Lab and Radiology Services	7,381	864	29,428	1,405	34.06	\$ 3.99	6,621	750	32,167	1,359	42.89	\$ 4.86
05	Physician Services	7,381	39,540	7,862,083	64,284	198.84	\$ 1,065.18	6,621	34,172	7,287,256	61,934	213.25	\$ 1,100.63
06	Home and Community Based Services	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
07	Home Health Agency Services	7,381	40	3,229	65	80.73	\$ 0.44	6,621	123	2,979	223	24.22	\$ 0.45
09	Mental Health Clinic Services	7,381	119	2,876	193	24.17	\$ 0.39	6,621	131	4,496	237	34.32	\$ 0.68
10	Periodic Screening Services (EPDST)	7,381	5	407	8	81.40	\$ 0.06	6,621	19	394	34	20.75	\$ 0.06
11	Emergency/Non-Emergency Transportation	7,381	4,687	70,346	7,620	15.01	\$ 9.53	6,621	4,515	70,134	8,183	15.53	\$ 10.59
12	Dental Services	7,381	41	1,738	67	42.40	\$ 0.24	6,621	49	1,952	89	39.83	\$ 0.29
13	Eyeglass Services	7,381	40	2,136	65	53.40	\$ 0.29	6,621	20	1,099	36	54.96	\$ 0.17
15	Drug Services ¹	7,381	18,397	312,361	29,910	16.98	\$ 42.32	6,621	15,814	263,723	28,662	16.68	\$ 39.83
16	Dental Screening	7,381	10	534	16	53.41	\$ 0.07	6,621	18	939	33	52.16	\$ 0.14
17	Eyeglass Screening	7,381	39	1,450	63	37.19	\$ 0.20	6,621	26	889	47	34.21	\$ 0.13
18	Hearing Screening Services	7,381	3	83	5	27.65	\$ 0.01	6,621	0	-	0	0.00	\$ -
22	Rural Health Clinic Services	7,381	640	45,762	1,041	71.50	\$ 6.20	6,621	537	37,643	973	70.10	\$ 5.69
23	FQHC (Federally Qualified Health Center)	7,381	377	28,153	613	74.68	\$ 3.81	6,621	333	23,233	604	69.77	\$ 3.51
24	DME (Durable Medical Equipment Services)	7,381	204	4,211	332	20.64	\$ 0.57	6,621	144	2,798	261	19.43	\$ 0.42
25	Therapy Services, (outside the Home Health Program)	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
27	Inpatient Psychiatric Hospital Services	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
28	Nurse Services	7,381	24,251	1,187,465	39,427	48.97	\$ 160.88	6,621	21,010	1,004,085	38,079	47.79	\$ 151.65
29	Ambulatory Surgical Centers	7,381	11	2,411	18	219.22	\$ 0.33	6,621	4	454	7	113.39	\$ 0.07
31	Hospice Services	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
32	Outpatient Psychiatric Hospital Services	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	7,381	4	321	7	80.13	\$ 0.04	6,621	7	498	13	71.16	\$ 0.08
34	Family Planning Drug Services*	7,381	287	9,084	467	31.65	\$ 1.23	6,621	211	6,795	382	32.20	\$ 1.03
35	Freestanding Dialysis Services	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
98	Unknown	7,381	0	-	0	0.00	\$ -	6,621	0	-	0	0.00	\$ -
Total		7,381		\$ 35,652,372			\$ 4,830.29	6,621		\$ 32,552,393			\$ 4,916.54
Total Excluding Inpatient Hospital Services		7,381		\$ 9,829,276			\$ 1,331.70	6,621		\$ 8,964,165			\$ 1,353.90

¹ Drug services are not adjusted for rebates

Appendix C
 State of Mississippi Division of Medicaid
 Incurred Claims and Per Member Per Month (PMPM) Cost Summaries
 CY 2011 and CY 2012 FFS Experience
 Expansion Rate Cells

January 2011 - December 2011

January 2012 - November 2012

COE: Total
 Region: South

cos_cd	Service Category	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM	Member Months	Services	Amount Allowed	Annual Utilization per 1,000	Average Unit Cost	Allowed \$ PMPM
01	Inpatient Hospital Services	324,815	40,048	\$ 59,634,317	1,480	1,489.07	\$ 183.59	304,753	40,222	\$ 60,891,483	1,584	1,513.89	\$ 199.81
02	Outpatient Hospital Services	324,815	797,387	20,662,836	29,459	25.91	\$ 63.61	304,753	807,544	20,038,847	31,798	24.81	\$ 65.75
03	Lab and Radiology Services	324,815	147,406	2,702,568	5,446	18.33	\$ 8.32	304,753	126,170	2,409,228	4,968	19.10	\$ 7.91
05	Physician Services	324,815	662,449	38,587,600	24,474	58.25	\$ 118.80	304,753	633,220	36,138,309	24,934	57.07	\$ 118.58
06	Home and Community Based Services	324,815	0	-	0	0.00	\$ -	304,753	0	-	0	0.00	\$ -
07	Home Health Agency Services	324,815	3,865	94,468	143	24.44	\$ 0.29	304,753	3,603	78,047	142	21.66	\$ 0.26
09	Mental Health Clinic Services	324,815	41,544	824,681	1,535	19.85	\$ 2.54	304,753	28,560	753,254	1,125	26.37	\$ 2.47
10	Periodic Screening Services (EPDST)	324,815	109,553	2,666,681	4,047	24.34	\$ 8.21	304,753	102,165	2,387,166	4,023	23.37	\$ 7.83
11	Emergency/Non-Emergency Transportation	324,815	30,207	828,532	1,116	27.43	\$ 2.55	304,753	33,986	901,827	1,338	26.54	\$ 2.96
12	Dental Services	324,815	24,127	1,339,243	891	55.51	\$ 4.12	304,753	24,317	1,344,148	958	55.28	\$ 4.41
13	Eyeglass Services	324,815	13,659	572,023	505	41.88	\$ 1.76	304,753	12,945	553,779	510	42.78	\$ 1.82
15	Drug Services ¹	324,815	402,681	13,815,316	14,877	34.31	\$ 42.53	304,753	387,155	13,817,072	15,245	35.69	\$ 45.34
16	Dental Screening	324,815	4,419	249,156	163	56.38	\$ 0.77	304,753	3,667	201,795	144	55.03	\$ 0.66
17	Eyeglass Screening	324,815	2,171	79,752	80	36.74	\$ 0.25	304,753	1,711	64,860	67	37.91	\$ 0.21
18	Hearing Screening Services	324,815	148	6,416	5	43.35	\$ 0.02	304,753	139	7,449	5	53.59	\$ 0.02
22	Rural Health Clinic Services	324,815	51,654	3,143,500	1,908	60.86	\$ 9.68	304,753	52,318	2,891,305	2,060	55.26	\$ 9.49
23	FQHC (Federally Qualified Health Center)	324,815	30,524	2,067,037	1,128	67.72	\$ 6.36	304,753	27,109	1,822,691	1,067	67.24	\$ 5.98
24	DME (Durable Medical Equipment Services)	324,815	36,282	617,305	1,340	17.01	\$ 1.90	304,753	31,727	562,103	1,249	17.72	\$ 1.84
25	Therapy Services, (outside the Home Health Program)	324,815	2,983	78,138	110	26.19	\$ 0.24	304,753	3,169	81,994	125	25.87	\$ 0.27
27	Inpatient Psychiatric Hospital Services	324,815	7	3,763	0	537.64	\$ 0.01	304,753	11	8,314	0	755.81	\$ 0.03
28	Nurse Services	324,815	283,710	3,681,043	10,481	12.97	\$ 11.33	304,753	289,320	3,620,622	11,392	12.51	\$ 11.88
29	Ambulatory Surgical Centers	324,815	1,418	493,823	52	348.25	\$ 1.52	304,753	1,542	755,989	61	490.27	\$ 2.48
31	Hospice Services	324,815	205	31,314	8	152.75	\$ 0.10	304,753	44	5,740	2	130.45	\$ 0.02
32	Outpatient Psychiatric Hospital Services	324,815	0	-	0	0.00	\$ -	304,753	0	-	0	0.00	\$ -
33	Private Mental Health Centers Services	324,815	533	45,788	20	85.91	\$ 0.14	304,753	514	43,111	20	83.87	\$ 0.14
34	Family Planning Drug Services*	324,815	14,493	581,844	535	40.15	\$ 1.79	304,753	12,952	512,472	510	39.57	\$ 1.68
35	Freestanding Dialysis Services	324,815	3,194	4,753	118	1.49	\$ 0.01	304,753	4,998	8,865	197	1.77	\$ 0.03
98	Unknown	324,815	0	161	0	0.00	\$ 0.00	304,753	0	362	0	0.00	\$ 0.00
Total		324,815		\$ 152,812,057			\$ 470.46	304,753		\$ 149,900,831			\$ 491.88
Total Excluding Inpatient Hospital Services		324,815		\$ 93,173,977			\$ 286.85	304,753		\$ 89,001,034			\$ 292.04

¹ Drug services are not adjusted for rebates