



February 17, 2021

Via Electronic Mail

Mississippi Division of Medicaid  
Jennifer Wentworth, Deputy Administrator | Administration  
550 High Street, Suite 1000  
Jackson, Mississippi 39201

Re: UnitedHealthcare of Mississippi MSCAN Medical Loss Ratio for the period of July 1, 2018 through June 30, 2019 Examination Report Transmittal

This letter is to inform you that Myers and Stauffer LC has completed the examination of UnitedHealthcare of Mississippi's MSCAN Medical Loss Ratio (MLR) for the period of July 1, 2018 through June 30, 2019. As a courtesy to the Mississippi Division of Medicaid (DOM) and other readers, the UnitedHealthcare of Mississippi management's response letter is included, if provided, in addition to our examination report, as part of this transmittal packet. Myers and Stauffer LC, in no manner, expresses an opinion on the accuracy, truthfulness, or validity of the statements presented within the management's response letter.

Please contact us at the phone number below if you have questions.

Kind Regards,

Myers and Stauffer LC

**UnitedHealthcare Community Plan of Mississippi  
Mississippi Coordinated Access Network  
Report on Adjusted Medical Loss Ratio  
(With Independent Accountant's Report Thereon)**

**State of Mississippi  
Division of Medicaid  
Jackson, Mississippi**

**For the period of  
July 1, 2018  
to June 30, 2019 Paid Through  
December 31, 2019**

**Prepared by:**





## *Table of Contents*

■ Table of Contents .....	1
■ Independent Accountant’s Report.....	2
■ Adjusted Medical Loss Ratio for the State Fiscal Year Ending June 30, 2019 Paid Through December 31, 2019 .....	3
■ Schedule of Adjustments and Comments for the State Fiscal Year Ending June 30, 2019 Paid Through December 31, 2019 .....	4
■ Appendix A: Health Plan Responses .....	5

State of Mississippi  
Division of Medicaid  
Jackson, Mississippi

### Independent Accountant's Report

We have examined the accompanying Adjusted Medical Loss Ratio Rebate Calculation of UnitedHealthcare Community Plan of Mississippi (United) related to the Mississippi Coordinated Access Network for the state fiscal year ending June 30, 2019. United's management is responsible for presenting the Medical Loss Ratio (MLR) Rebate Calculation Report in accordance with the criteria set forth in the contract between the Division of Medicaid and United, Exhibit C: Medical Loss Ratio (MLR) Requirements and Centers for Medicare & Medicaid Services (CMS) federal guidance (criteria). Our responsibility is to express an opinion on the Medical Loss Ratio Rebate Calculation based on our examination.

Our examination was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. Those standards require that we plan and perform the examination to obtain reasonable assurance about whether the Adjusted Medical Loss Ratio is in accordance with the criteria, in all material respects. An examination involves performing procedures to obtain evidence about the Medical Loss Ratio Rebate Calculation. The nature, timing, and extent of the procedures selected depend on our judgment, including an assessment of the risk of material misstatement of the Medical Loss Ratio Calculation, whether due to fraud or error. We believe that the evidence we obtained is sufficient and appropriate to provide a reasonable basis for our opinion.

The Other Non-Claims Costs amount reported on the Adjusted Medical Loss Ratio Rebate Calculation has not been subjected to the procedures applied in the examination, and accordingly, we express no opinion on it.

The accompanying Adjusted Medical Loss Ratio was prepared for the purpose of complying with the criteria, and is not intended to be a complete presentation in conformity with accounting principles generally accepted in the United States of America.

In our opinion, the above referenced accompanying Adjusted Medical Loss Ratio is presented in accordance with the above referenced criteria, in all material respects, and the Adjusted MLR Percentage Achieved exceeds the CMS requirement of eight-five percent (85%) for the state fiscal year ending June 30, 2019.

This report is intended solely for the information and use of the Mississippi Division of Medicaid, Milliman, and United and is not intended to be and should not be used by anyone other than these specified parties.

Myers and Stauffer LC  
Atlanta, GA  
February 5, 2021



*Adjusted Medical Loss Ratio for the State Fiscal Year Ending June 30, 2019 Paid Through December 31, 2019*

Adjusted Medical Loss Ratio for the State Fiscal Year Ending June 30, 2019 Paid Through December 31, 2019				
Line #	Line Description	Reported Amounts	Adjustment Amounts	Adjusted Amounts
<b>Capitation Revenue and Tax Assessments</b>				
1	<b>Total YTD Capitation Revenue and Maternity Kick Payments</b>	\$ 961,846,619	\$ -	\$ 961,846,619
<b>Tax Components of Reported Revenue</b>				
2	Less: Health Insurer Tax	\$ 10,678,461	\$ -	\$ 10,678,461
3	Less: Allocation for premium taxes	\$ 36,595,121	\$ -	\$ 36,595,121
4	Less: Other taxes and other revenue-based assessments	\$ -	\$ -	\$ -
5	<b>NET Current YTD Adjusted Premium Revenue</b>	\$ 914,573,036	\$ -	\$ 914,573,036 *
<b>MLR Medical and Administrative Expenses</b>				
6	<b>Total Net Medical Expenses from Income Statement</b>	\$ 831,831,703	\$ -	\$ 831,831,703
MLR Expense Adjustments as defined in Exhibit C				
7	Incurred claim adjustment additions	\$ -	\$ -	\$ -
8	Incurred claim adjustment deductions	\$ 522,303	\$ -	\$ 522,303
9	Incurred claim adjustment exclusions	\$ (242)	\$ -	\$ (242)
10	<b>Adjusted Net Medical Expenses</b>	\$ 831,309,642	\$ -	\$ 831,309,642
<b>Health Care Quality Improvement (HCQI) and Health Information Technology (HIT) Meaningful Use Expenses</b>				
11	HCQI and HIT Administrative Expenses from Income Statement	\$ 13,014,342	\$ -	\$ 13,014,342
12	Adjustments or exclusions to HCQI/HIT meaningful use expenses	\$ -	\$ -	\$ -
13	<b>Adjusted HCQI/HIT expenses</b>	\$ 13,014,342	\$ -	\$ 13,014,342
14	<b>Other Non-Claims Costs (For Reporting Purposes Only. Not Included in Numerator)</b>	\$ 59,693,033	\$ -	\$ 59,693,033 **
15	<b>Total Adjusted Current YTD MLR Medical Expenditures</b>	\$ 844,323,984	\$ -	\$ 844,323,984
16	<b>Reporting MLR Percentage</b>	92.3%	0.0%	92.3%
17	<b>MLR percentage requirement for rebate calculation</b>	85.0%		85.0%
18	<b>Percentage below 85% Requirement</b>	0.0%		0.0%
19	<b>Dollar Amount of Rebate Requirement</b>	\$ -	\$ -	\$ -
<b>Credibility Adjustment Applied</b>				
20	MLR Member Months	2,279,281	-	2,279,281
21	<b>MLR Member Months (Annualized)</b>	2,279,281	-	2,279,281
22	<b>Credibility Adjustment</b>	0.0%	0.0%	0.0%
23	<b>Adjusted Reporting MLR Percentage</b>	92.3%	0.0%	92.3%
24	<b>MLR Percentage Requirement for Rebate Calculation</b>	85.0%		85.0%
25	<b>Percentage below 85% Requirement</b>	0.0%		0.0%
26	<b>Dollar Amount of Rebate Required</b>	\$ -	\$ -	\$ -

\*Minor footing variance due to rounding. Reported amounts have been rounded to match the as-filed report.

\*\*The "Other Non-Claims Costs" line reported on the Medical Loss Ratio Rebate Calculation Report has not been subjected to the procedures applied in the examination, and accordingly, we express no opinion on it. However, any adjustments identified during the course of the examination procedures directly affecting the "Other Non-Claims Costs" line, will be properly reflected within the adjustment totals.



*Schedule of Adjustments and Comments for the State  
Fiscal Year Ending June 30, 2019*

We recommend no adjustments during our current year examination. The health plan has accurately reported all costs in accordance with federal and state regulations, in all material respects. In addition, they have incorporated all previous years' adjustments and comments as instructed.



## *Health Plan Responses*

The health plan did not provide responses for the state fiscal year under review.