

**AMENDMENT NUMBER ONE
TO THE SFY25 EMERGENCY CONTRACTUAL AGREEMENT BETWEEN
THE DIVISION OF MEDICAID
IN THE OFFICE OF THE GOVERNOR
AND
MAGNOLIA HEALTH PLAN, INC.
A CARE COORDINATION ORGANIZATION (CCO)**

(Mississippi Coordinated Access Network (MSCAN) Program)

THIS AMENDMENT NUMBER ONE modifies, revises, and amends the Emergency Contract entered into by and between the **Division of Medicaid in the Office of the Governor**, an administrative agency of the **State of Mississippi** (hereinafter “DOM” or “Division”), and **MAGNOLIA HEALTH PLAN, Inc.** (hereinafter “CCO” or “Contractor”) and collectively hereinafter referenced as the “Parties.”

WHEREAS, through its written determination to the Mississippi Public Procurement Review Board (PPRB) Office of Personal Service Contract Review (OPSCR), DOM identified the continuing need for MSCAN Program Services to Medicaid beneficiaries on an emergency basis with the aforementioned Contractor pursuant to Sections 3-207 and 7-111 of the 2018 PPRB OPSCR Rules and Regulations;

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

WHEREAS, Contractor is an entity eligible to enter into a full risk capitated contract in accordance with Section 1903(m) of the Social Security Act and 42 C.F.R. § 438.6(b) and is engaged in the business of providing prepaid comprehensive health care services as defined in 42 C.F.R. § 438.2. The Contractor is licensed appropriately as defined by the Department of Insurance of the State of Mississippi pursuant to Miss. Code Ann. § 83-41-305 (1972, as amended);

WHEREAS, DOM entered into a full risk capitated contract (herein referenced as “Base MSCAN Contract”) with Contractor on July 1, 2017 for Contractor to provide prepaid comprehensive health care services pursuant to state and federal requirements;

WHEREAS, the original term of the Base MSCAN Contract began on July 1, 2017 and ended on June 30, 2023 with no further options for renewal;

WHEREAS, on December 10, 2021, DOM issued a Request for Qualifications No. 20211210 (RFQ) from qualified offerors to provide services for the statewide administration of DOM’s Coordinated Care Organization Program consisting of the Mississippi Coordinated Access

Network (MSCAN) and the Mississippi Children's Health Insurance Program (CHIP) for continued services to begin July 1, 2023;

WHEREAS, DOM received five (5) responses to the RFQ and on August 10, 2022 issued its Notice of Intent to Award to three (3) offerors;

WHEREAS, on August 17, 2022, DOM received protests of the Notice of Intent to Award from two (2) offerors not selected for award. Since that date, DOM and the five (5) RFQ offerors were involved with Protective Order actions in Hinds County Chancery which are now resolved;

WHEREAS, on March 1, 2023, PPRB approved an exception to PPRB OPSCR Rules and Regulations Section 3-102.02 to stay the expiration of the RFQ until such time that a contract may be awarded pending the outcome of the administrative protest process;

WHEREAS, DOM issued its final protest decision on June 2, 2023;

WHEREAS, the two (2) protesting offerors each timely submitted an appeal of DOM's final protest decision to PPRB on June 9, 2023;

WHEREAS, on April 11, 2024, PPRB held a hearing on the appeal of DOM's final protest decision and issued a ruling denying the protests of each protesting offeror thereby approving the DOM award of the contract under the RFQ;

WHEREAS, the April 11, 2024, PPRB protest appeal ruling denying the protests allowed DOM to proceed with RFQ Coordinated Access contract award and execution pursuant to PPRB rules and regulations to the three (3) awarded entities;

WHEREAS, due to the administrative protest and protest appeal process at the agency and PPRB levels, inclusive of Protective Order actions in Hinds County Chancery Court, entered to enter into Emergency Contracts for MSCAN Program Services with its incumbent vendors for State Fiscal Year (SFY) 2024 (SFY24 MSCAN Emergency Contract) in order to continue delivery of services to protect the health and safety of Mississippi Medicaid beneficiaries;

WHEREAS, the RFQ Coordinated Access awarded contracts began on May 12, 2024 and included an implementation period, at no additional cost to the state, which did not include delivery of Medicaid managed care services during the implementation period but required an anticipated go-live date for service delivery on July 1, 2025;

WHEREAS, considering the implementation period for the newly awarded RFQ Coordinated Access contracts, DOM was positioned where continuation of federally required MSCAN Program Services to Medicaid beneficiaries was through an Emergency Contract to maintain and protect the health and safety of Medicaid beneficiaries beginning July 1, 2024, and ending June 30, 2025 (SFY25);

WHEREAS, DOM entered into an Emergency Contract with Contractor to continue provision of Managed Care services as required herein for SFY25 and Contractor agreed to render said services to DOM in accordance with this Agreement; and

WHEREAS, in order to comply with CMS requirements regarding management of capitation rates paid to its Managed Care contractors, DOM desires to amend the capitation rates within the Emergency Contract pursuant to 42 CFR §438 and to amend other substantive provisions relative to providing MSCAN services.

NOW, THEREFORE, in consideration of the foregoing recitals and of the mutual promises contained herein, DOM and CCO agree the MSCAN SFY25 Emergency Contract is amended as follows to address the following:

1. **ENTIRE AGREEMENT AND INCORPORATION:** This Emergency Contractual Agreement for SFY25 (Emergency Contract) between DOM and Contractor shall consist of: (1) this Emergency Contract, inclusive of any amendments hereto; (2) the SFY24 MSCAN Emergency Contract, inclusive of any amendments thereto; and (3) the Base MSCAN Contract. The Parties hereby agree that the SFY24 MSCAN Emergency Contract (inclusive of any amendments thereto) and the Base MSCAN Contract (inclusive of any amendments thereto) shall be collectively referred to herein as the "Previous Contract." The Parties agree to be bound by all terms and conditions of the Previous Contract which are incorporated herein by reference as Attachment A, unless those terms are specifically modified or overridden through this Emergency Contract.

Any ambiguities, conflicts, disputes, or questions of interpretation of this Emergency Contract shall be resolved pursuant to the following order of priority:

- (1) This Emergency Contract and any amendments thereto; and
- (2) The Previous Contract.

2. Section 4.D., MISSISSIPPICAN ENROLLMENT AND DISENROLLMENT – Member Information Packet, is hereby amended to remove existing language and be replaced with the following:

The Contractor must provide each Member an information packet indicating the Member's first effective date of Enrollment. The Contractor must ensure the information is provided no later than fourteen (14) calendar days after the Contractor receives notice of the Member's enrollment. The Contractor must utilize at least standard mail, in envelopes marked with "Return Services Requested" as the medium for providing the Member identification cards, in addition to electronic notification, if available. The Division must receive a copy of this packet on an annual basis for review and approval, or at any point when changes are made to the packet. At a minimum, the member packet must include:

1. An introductory letter;
2. A MississippiCAN or CHIP identification (as appropriate for the Member);

3. Information about how to obtain a copy of a provider Directory in compliance with 42 C.F.R. §438.10(f)(6)(h) at a minimum; and
4. Information about how to obtain a copy of the Member Handbook. If a Member requests a hard copy of the Member Handbook, the Contractor shall provide a hard copy. Otherwise, the Contractor shall make the Member Handbook available online.

If an individual is re-enrolled within sixty (60) calendar days of Disenrollment, the Contractor is only required to send the Member a new identification card. However, the complete Member Information Packet must be supplied upon Member request.

3. Section 5.F.2., COVERED SERVICES AND BENEFITS – Prescribed Drugs, Physician-Administered Drugs and Implantable Drug System Devices, Requirements Beginning on Effective Date of Live Operations of Division PBA, is hereby amended to add the following language:

Effective January 1, 2025, certain high-cost drugs provided in an inpatient hospital setting will be reimbursed separately from the APR-DRG payment. A separate outpatient hospital claim may be submitted by the hospital to receive reimbursement for certain high-cost drugs during the time of inpatient services. High-cost drugs will be reimbursed using the provider's invoice price. Invoice price must be the actual net price paid by the hospital. The list of high-cost drugs is maintained on the Division of Medicaid's website at <https://medicaid.ms.gov/pharmacy/>.

Providers and coordinated care organizations are prohibited from collecting any manufacturer rebates on items included on the Preferred Diabetic Supply List.

4. Section 6.F.1., MEMBER SERVICES – Communications Standards, is hereby amended to replace sub-section 1 language with the following:
 1. Documents are comprehensive yet written to meet a Flesch-Kincaid, or other Division-approved standard, readability level at or below the sixth (6th) grade level of reading comprehension. Materials must set forth the Flesch-Kincaid, or other approved standard, score and certify compliance with this standard. These requirements shall not apply to language that is mandated by Federal or State laws, regulations, or agencies.

All other language within Section 6.F. shall remain unchanged.

5. Section 13.A.5., FINANCIAL REQUIREMENTS – Capitation Payments – Refund and Recoupment, is hereby amended to remove existing language and be replaced with the following:

The Division may request and obtain a refund of, or it may recoup from subsequent

payments, any payment previously made to the Contractor for a Member who is determined to have been ineligible for Enrollment for any month. Upon notice by the Division of a Member who is ineligible, the Contractor may recoup from any Providers previously paid the amounts for any provided covered services. The Contractor must recoup these amounts within one hundred twenty (120) days of notification that the Member is ineligible.

6. Section 13.A.9., FINANCIAL REQUIREMENTS – Capitation Payments – Capitation Rates, is hereby amended to add the following to update SFY 2024 and SFY 2025 Capitation Rates:

SFY 2024 Capitation Rates (Dec. 20, 2024 Update)

The table below includes Capitation Rates of this Contract, which are the capitation rates per member per month (PMPM) varying by region and Rate Cell. Each Contractor will be paid based on the distribution of Members they have in each Rate Cell. The Non-Newborn SSI/Disabled, MA Adult, MA Children and Quasi-CHIP rate cells will be risk adjusted. These four Rate Cells have a Risk Adjustment factor, calculated on a prospective basis using CDPS+RX, applied to each rate re-calculated based on each Contractor's actual risk scores. The Foster Care Rate Cell will also be risk adjusted on a concurrent basis using a members' eligibility for either state or federal financial assistance to assign a risk score.

The table below establishes the CCO Capitation Rates per member per month (PMPM) for MississippiCAN. These rates are effective for the following Rate Cells: Non-Newborn SSI/Disabled; Foster Care; Breast and Cervical Cancer; SSI/Disabled Newborn; MA Adults; Pregnant Women; and Non-SSI Newborns. Additionally, Capitation Rates are included for MA Children and Quasi-CHIP Children, and Mississippi Youth Programs Around the Clock (MYPAC) rate cells. Capitation rates are for the period of State Fiscal Year 2023 (July 1, 2022 through June 30, 2023) and State Fiscal Year 2024 (July 1, 2023 through June 30, 2024) respectively.

These rates exclude MHAP FSA, QIPP, MAPS, TREAT, HIF, and Physician Directed Payments (as applicable); however, the MHAP FSA will be paid separately monthly as a financial transaction. Rates are prior to the application of a 1.00 percent Quality Withhold. These rates also do not include any additional directed payments related to hospital employed or contracted physician payment arrangements.

Magnolia Health Plan, Inc. MississippiCAN Capitation Rates State Fiscal Year (SFY 24) Capitation Rates PMPM (excluding Risk Scores) Effective July 1, 2023– June 30, 2024			
Rate Cell	North	Central	South
Non- Newborn SSI-Disabled	\$1,201.06	\$1,370.44	\$1,397.66
Breast/Cervical Cancer	\$3,156.19	\$3,601.30	\$3,672.83
MA Adults	\$537.32	\$577.83	\$576.03
Pregnant Women	\$696.80	\$749.34	\$747.01
SSI-Disabled Newborn	\$8,256.42	\$8,599.82	\$8,197.13
Non-SSI Newborns 0-2 Months	\$2,247.59	\$2,341.07	\$2,231.45
Non-SSI Newborns 3-12 Months	\$299.71	\$312.18	\$297.56
Foster Care	\$725.14	\$755.30	\$719.93
MYPAC	\$3,887.92	\$4,049.62	\$3,860.00
MA Children	\$237.12	\$246.98	\$235.42
Quasi-CHIP	\$250.13	\$260.53	\$248.33

*Capitation rate per the December 20, 2024 Actuarial Report attached as Exhibit 1 to this Amendment 1.

Rates are prior to the application of a 1.00% quality withhold.

Rates exclude MHAP FSA, QIPP, MAPS, TREAT, HIF, and Physician Directed Payments.

The Contractor is not allowed to affect the assignment of risk scores through any post-billing claims review process for the assignment of additional diagnosis codes. Diagnosis codes may only be recorded by the provider at the time of the creation of the medical record and may not be retroactively adjusted except to correct errors.

SFY 2025 Capitation Rates (Dec. 4, 2024 Update)

The table below includes Capitation Rates of this Contract, which are the capitation rates per member per month (PMPM) varying by region and Rate Cell. Each Contractor will be paid based on the distribution of Members they have in each Rate Cell. The Non-Newborn SSI/Disabled, MA Adult, MA Children and Quasi-CHIP rate cells will be risk adjusted. These four Rate Cells have a Risk Adjustment factor, calculated on a prospective basis using CDPS+RX, applied to each rate re-calculated based on each Contractor's actual risk scores. The Foster Care Rate Cell will also be risk adjusted on a concurrent basis using a members' eligibility for either state or federal financial assistance to assign a risk score.

The table below establishes the CCO Capitation Rates per member per month (PMPM) for MississippiCAN. These rates are effective for the following Rate Cells: Non-Newborn SSI/Disabled; Foster Care; Breast and Cervical Cancer; SSI/Disabled Newborn; MA Adults; Pregnant Women; and Non-SSI Newborns. Additionally, Capitation Rates are included for MA Children and Quasi-CHIP Children, and Mississippi Youth Programs Around the Clock (MYPAC) rate cells. Capitation rates are for the period of State Fiscal

State Fiscal Year 2025 (July 1, 2024 through June 30, 2025).

These rates exclude MHAP FSA, QIPP, MAPS, TREAT, Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments, and HIF (as applicable, and Physician Directed Payments (as applicable); however, the MHAP FSA, QIPP, MAPS, TREAT, Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments will be paid separately monthly as a financial transaction; while the MOMS payments will be paid separately annually as a financial transaction. Rates are prior to the application of a 1.00 percent Quality Withhold. These rates also do not include any additional directed payments related to hospital employed or contracted physician payment arrangements.

Magnolia Health Plan, Inc. MississippiCAN Capitation Rates State Fiscal Year (SFY 25) Capitation Rates PMPM (excluding Risk Scores) Effective July 1, 2024 – June 30, 2025			
Rate Cell	North	Central	South
Non- Newborn SSI-Disabled	\$756.04	\$896.04	\$943.32
Breast/Cervical Cancer	\$2,763.68	\$3,275.43	\$3,448.27
MA Adults	\$362.51	\$374.04	\$357.31
Pregnant Women	\$621.91	\$641.70	\$613.01
SSI-Disabled Newborn	\$6,799.70	\$7,186.55	\$6,062.19
Non-SSI Newborns 0-2 Months	\$2,372.77	\$2,507.77	\$2,115.42
Non-SSI Newborns 3-12 Months	\$313.50	\$331.34	\$279.50
Foster Care	\$634.72	\$670.83	\$565.87
MYPAC	\$3,440.38	\$3,636.12	\$3,067.23
MA Children	\$209.71	\$221.65	\$186.97
Quasi-CHIP	\$205.82	\$217.53	\$183.50

*Capitation rate per the December 4, 2024 Actuarial Report attached as Exhibit 2 to this Amendment 1. Rates are prior to the application of a 1.00% quality withhold.

Rates exclude MHAP FSA, QIPP, MAPS, TREAT, and Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments.

The Contractor is not allowed to affect the assignment of risk scores through any post-billing claims review process for the assignment of additional diagnosis codes. Diagnosis codes may only be recorded by the provider at the time of the creation of the medical record and may not be retroactively adjusted except to correct errors.

SFY 2025 Capitation Rates (Feb. 6, 2025 Update)

The table below includes Capitation Rates of this Contract, which are the capitation rates per member per month (PMPM) varying by region and Rate Cell. Each Contractor will be paid based on the distribution of Members they have in each Rate Cell. The Non-Newborn SSI/Disabled, MA Adult, MA Children and Quasi-CHIP rate cells will be risk adjusted. These four Rate Cells have a Risk Adjustment factor, calculated on a

prospective basis using CDPS+RX, applied to each rate re-calculated based on each Contractor's actual risk scores. The Foster Care Rate Cell will also be risk adjusted on a concurrent basis using a members' eligibility for either state or federal financial assistance to assign a risk score.

The table below establishes the CCO Capitation Rates per member per month (PMPM) for MississippiCAN. These rates are effective for the following Rate Cells: Non-Newborn SSI/Disabled; Foster Care; Breast and Cervical Cancer; SSI/Disabled Newborn; MA Adults; Pregnant Women; and Non-SSI Newborns. Additionally, Capitation Rates are included for MA Children and Quasi-CHIP Children, and Mississippi Youth Programs Around the Clock (MYPAC) rate cells. Capitation rates are for the period of State Fiscal State Fiscal Year 2025 (July 1, 2024 through June 30, 2025).

These rates exclude MHAP FSA, QIPP, MAPS, TREAT, Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments, and HIF (as applicable, and Physician Directed Payments (as applicable)); however, the MHAP FSA, QIPP, MAPS, TREAT, Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments will be paid separately monthly as a financial transaction; while the MOMS payments will be paid separately annually as a financial transaction. Rates are prior to the application of a 1.00 percent Quality Withhold. These rates also do not include any additional directed payments related to hospital employed or contracted physician payment arrangements.

Magnolia Health Plan, Inc. MississippiCAN Capitation Rates State Fiscal Year (SFY 25) Capitation Rates PMPM (excluding Risk Scores) Effective July 1, 2024 - June 30, 2025			
Rate Cell	North	Central	South
Non- Newborn SSI-Disabled	\$759.18	\$900.54	\$946.20
Breast/Cervical Cancer	\$2,791.13	\$3,310.83	\$3,478.69
MA Adults	\$363.10	\$374.70	\$357.93
Pregnant Women	\$621.98	\$641.85	\$613.11
SSI-Disabled Newborn	\$6,799.51	\$7,185.86	\$6,059.94
Non-SSI Newborns 0-2 Months	\$2,372.70	\$2,507.52	\$2,114.62
Non-SSI Newborns 3-12 Months	\$313.48	\$331.29	\$279.38
Foster Care	\$636.29	\$672.44	\$567.08
MYPAC	\$3,442.53	\$3,638.14	\$3,068.09
MA Children	\$210.41	\$222.37	\$187.53
Quasi-CHIP	\$206.58	\$218.32	\$184.11

*Capitation rate per the February 6, 2025 Actuarial Report attached as Exhibit 3 to this Amendment 1.

Rates are prior to the application of a 1.00% quality withhold.

Rates exclude MHAP FSA, QIPP, MAPS, TREAT, and Rural Hospital Ambulatory Payment Classification (APC) Opt-Out Payments.

The Contractor is not allowed to affect the assignment of risk scores through any post-billing claims review process for the assignment of additional diagnosis codes. Diagnosis codes may only be recorded by the provider at the time of the creation of the medical record and may not be retroactively adjusted except to correct errors.

7. Exhibit 4 to this Amendment No. 1 incorporates for reference the below attachments for previous rating periods pursuant to Article I of the SFY25 Emergency Contract:

- 1) SFY 2022 Q3 to Q4 MSCAN Risk Adjustment and Exhibits; and
- 2) SFY 2023 MSCAN Rate Certification Letter and Exhibits;

All other terms, conditions, and provisions set out in the Original SFY25 Emergency Contract other than those modified and amended herein, remain in full force and effect for the duration of the SFY25 Emergency Contract.

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

Mississippi Division of Medicaid

By: Cindy Bradshaw
Cindy Bradshaw
Executive Director

Date: 7/2/2025 | 10:26:57 AM CDT

Magnolia Health Plan, Inc.

By: Aaron Sisk
Aaron Sisk
President & Chief Executive Officer

Date: 7/1/2025 | 7:41:41 AM PDT



**DOM MSCAN SFY25 EMERGENCY CONTRACT
AMENDMENT 1
Exhibit 1**



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Brookfield, WI 53045
USA
Tel +1 262 784 2250

milliman.com

December 20, 2024

Jennifer Wentworth
Chief of Staff
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Report22 State Fiscal Year 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) has retained Milliman to develop actuarially sound capitation rates for state fiscal year (SFY) 2024 for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for Medicaid beneficiaries.

This report updates the preliminary capitation rates for all populations enrolled in MississippiCAN from the prior iteration dated May 1, 2023.¹ Overall, the SFY 2024 capitation rates in this report are 3.2% higher than the SFY 2023 capitation rates issued on August 22, 2023 (when compositing rates using calendar year (CY) 2021 membership). This report assumes ultimate approval of the preprints submitted to CMS for directed payments and directed fee schedules.

This report updates our preliminary capitation rates; the following changes were made in this report relative to the prior certification:

- Adjustments were made to trends to reflect the fee schedule changes listed below. The impact of these updates are reflected in line 1 of Table 1 below.
 - Orthodontia services effective October 1, 2023: fee schedule changes for orthodontia services are included in the unit charge trends for non-pharmacy costs.
 - Behavioral health services effective October 1, 2023: fee schedule changes, including updates for community mental health center services, are included in unit cost trends.
 - Ambulatory surgical centers (ASC) effective October 1, 2023: fee schedule changes for ASC services are included in the unit cost trends for outpatient services.
 - Mississippi Youth Program Around the Clock (MYPAC) effective November 1, 2023: fee schedule changes for MYPAC services are included in the physician unit cost trends for the MYPAC population.
 - Psychiatric residential treatment facilities (PRTF) effective January 1, 2024: fee schedule changes for PRTF services are included in the inpatient unit cost trends.
- Updated population acuity adjustments for the MA Adult, MA Children, and Quasi CHIP rate cells to reflect membership changes during the unwinding of the continuous coverage requirement during the COVID-19 public health emergency (PHE) declaration, based on actual enrollment changes during the unwinding period. The impact of this change is shown in line 2 below.
- Included an estimate of the impact of extension of postpartum coverage from 60 days to 12 months effective July 2023. The impact of this update is reflected in line 3 below.

¹ "Report11 - SFY 2024 Preliminary MississippiCAN Rate Calculation and Certification.pdf" dated May 1, 2023.



- Inclusion of newly covered costs for medications to treat obesity that were added to the preferred drug list (PDL) effective July 1, 2023. The impact of the additional costs related to these medications is reflected in row 4 below. The impact of medical cost savings is reflected in line 5.
- Inclusion of newly covered costs for gene-therapies for the conditions listed below. The impact of this is reflected in line 6 of Table 1 below.
 - Beta-Thalassemia
 - Duchene Muscular Dystrophy
 - Hemophilia A
 - Hemophilia B
 - Sickle Cell Disease
- Removal of the following MississippiCAN carve-outs in conjunction with introducing the high-cost pharmacy risk corridor in SFY 2024.
 - Individuals diagnosed with Hemophilia or Von Willebrand Disease: effective January 1, 2024 any members utilizing clotting factor medications will remain in MississippiCAN, rather than having their enrollment transferred to FFS. The impact of this change is reflected in lines 6 and 7 below.
 - Zolgensma: effective July 1, 2023 Zolgensma claims will be covered as part of the capitation rate payment and included in the high cost pharmacy risk corridor. The impact of this change is reflected in line 6 below.
- Insulin and inhaler price adjustments related to the removal of the average manufacturer's price (AMP) cap effective January 1, 2024. The impact of this update is shown in row 8 of Table 1 below.
- Table 1 excludes the impact of any changes to state directed payment amounts; however, we updated the SFY 2024 TREAT and MHAP amounts to align with the most recent preprint submissions approved by CMS.
- Several additional minor updates were also made that either had a negligible impact (or no impact) on capitation rates. These updates are listed below.
 - Updated the rate change buildup to use the most recent version of SFY 2023 capitation rates, as described in the report dated August 22, 2023.
 - Added an additional line to the rate change buildup exhibit (shown in Table 2 of the report in total and by population in Exhibit 5) to reflect the removal of the population acuity adjustment included in the August 22, 2023 version of SFY 2023 capitation rates to put those rates on a 1.0 basis. The acuity adjustments included in SFY 2024 capitation rates were developed independent of the acuity adjustments included in SFY 2023 capitation rates.
 - Updated projected SFY 2024 enrollment, using enrollment estimates from our more recent budget projections.
 - Member reassignment between the MYPAC rate cell and other rate cells related to the 'SED' lock-in code during CY 2021.
 - Restatement of the impact of SSI children formerly moved to FFS due to a stay in a PRTF.
 - Estimated per-member-per-month (PMPM) costs for high-cost pharmacy and other applicable costs that will be included in a high-cost pharmacy risk corridor for SFY 2024.
 - Removed the Rural Hospital APC Opt-out Adjustment while DOM determines the most appropriate payment mechanism for this payment.

Table 1 summarizes the overall impact on capitation rates resulting from the changes noted above. The impact in Table 1 is based upon the membership distribution across rate cells in calendar year (CY) 2021. Each of these changes are described in more detail within the capitation report.



Table 1 MississippiCAN Capitation Rates Summary of SFY 2024 Rate Change Components	
Assumption Change	Change from May 1, 2023 Preliminary Rates
1. SFY 2023 to SFY 2024 Unit Cost Trends	1.002
2. Acuity Adjustment: PHE Unwind	1.005
3. Postpartum Coverage Extension	0.982
4. Obesity Drug Coverage	1.004
5. Obesity Drug Coverage Savings	0.997
6. Gene Therapy Drug Coverage	1.029
7. Hemophilia Population Carve-In	1.006
8. Insulin / Inhaler Price Reduction	0.994
9. Updated Admin Costs ¹	1.003
Total SFY 2024 Rate Change	1.021

¹ Administrative costs PMPM remain unchanged. The impact above is due to changing service costs.

Rates will be retroactively adjusted and recertified for the following items:

- Payments for the Mississippi Hospital Access Program (MHAP) Quality Incentive Payment Program (QIPP).
- Actual membership and utilization to determine the final MHAP fee schedule adjustment (FSA) amounts.
- Payments for the Mississippi Medicaid Access to Physician Services (MAPS) program.
- Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program.

This recertification will be done at one time for capitation rates for the entire SFY 2024 period. This recertification is anticipated to happen two quarters following the end of SFY 2024.

As of the time of the initial development of SFY 2024 capitation rates (report dated May 1, 2023), the impact on capitation rates due to the unwinding of the COVID-19 PHE is uncertain for SFY 2024. As such, a risk corridor will be used in SFY 2024 to reflect the uncertainty in the capitation rates due to these impacts. The risk corridor is described in more detail in Section IV. In addition, explicit adjustments for COVID-19 are made in the rate development for the following:

- **Base Period Data:** The SFY 2024 capitation rates use CY 2021 data as the basis for projections. Under normal circumstances, SFY 2024 capitation rates would be based on CY 2021 and CY 2020 experience for smaller rate cells. However, given the large changes in member behavior in CY 2020, we do not find this experience to be a credible basis for SFY 2024 projections. Therefore, we use a single year of experience data for all populations as the basis for our SFY 2024 projections.
- **Acuity Adjustments:** Medicaid enrollment in the base period data (CY 2021) was elevated due to the continuous coverage requirement (CCR) in the Families First Coronavirus Act (FFCRA). Under this requirement DOM could not disenroll members who would normally lose eligibility during the PHE, as declared by the Department of Health and Human Services (HHS). Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from coordinated care organizations (CCOs) into FFS Medicaid.

This transition from the CCOs into FFS Medicaid was concentrated in several populations where members commonly churn in and out of the Medicaid population or transition between rate cells due to age requirements, including the MA Adults, MA Children, and Quasi-CHIP children. These rates cells therefore saw a large drop in membership and consequently a change in acuity over the second half of CY 2021. Therefore, we calculated an acuity adjustment for these rate cells to reflect the average acuity of the population that remained after this transition occurred. The calculation of this acuity adjustment from the shift to FFS enrollment is described in more detail later in the report.



Jennifer Wentworth
Mississippi Office of the Governor, Division of Medicaid
December 20, 2024
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Per the Consolidated Appropriations Act, 2023 (CAA), the continuous coverage requirement, which was previously tied to the federal PHE ended on March 31, 2023. Additional guidance from the Centers for Medicare and Medicaid Services (CMS) indicates that states will have 14 months after this date to complete redeterminations for affected enrollees. Within the options outlined by CMS, DOM began eligibility redeterminations starting in April 2023 and began disenrolling Mississippi Medicaid recipients who are no longer eligible in July 2023 and throughout the following year. An acuity adjustment reflecting this enrollment change was developed using actual SFY 2024 enrollment and is discussed in more detail later in the report.

- **COVID-19 / Influenza / RSV Adjustment:** We developed an adjustment for the estimated difference in costs included in the CY 2021 base period data and projected SFY 2024 costs for testing, vaccination, and treatment for influenza, respiratory syncytial virus (RSV), and COVID-19. These population specific adjustments reflect an expected decrease in COVID-19 costs and an expected increase in influenza and RSV costs from CY 2021 to SFY 2024.



Jennifer, please call us at 262 784 2250 if you have questions. We look forward to discussing this report with you and the CCOs.

Sincerely,

Handwritten signature of Jill A. Bruckert in black ink.

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

JAB/KNL/zk

Attachments

Handwritten signature of Katarina N. Lorenz in black ink.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

MILLIMAN REPORT

State of Mississippi Division of Medicaid

State Fiscal Year 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

December 20, 2024

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I. SUMMARY AND DISCUSSION OF RESULTS

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify to capitation rates for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for targeted Medicaid beneficiaries, effective for state fiscal year (SFY) 2024. This report provides preliminary SFY 2024 capitation rates and documents their development. This report is structured as follows:

- Section I includes a high-level overview of the change in capitation rates relative to the July 1, 2022 to June 30, 2023 (SFY 2023) capitation rates
- Section II provides a short background of the MississippiCAN program
- Section III documents the development of the base data
- Section IV documents the rate setting process for SFY 2024 capitation rates
- Appendices A and B contain additional details on the SFY 2024 rate cell definitions and base period data sources and processing
- Appendix C provides responses to the CMS managed care rate setting guide for all rate cells
- Appendix D contains an Actuarial Certification for all MississippiCAN rate cells
- Appendix E documents our reliance on DOM for data and other assumptions in the development of the capitation rates

SFY 2024 CAPITATION RATES

Table 1 includes per member per month (PMPM) preliminary capitation rates effective for SFY 2024 that will be paid to the Coordinated Care Organizations (CCOs) on a monthly basis (excluding all directed payments) to provide medical and pharmacy services to their enrolled beneficiaries. Each CCO will be paid based on the distribution of members enrolled in each rate cell. In addition, CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions: North, Central, or South, as shown in Appendix A.

Table 1 Mississippi Division of Medicaid MississippiCAN Capitation Rates Per Member Per Month (PMPM) ¹ Effective SFY 2024			
Rate Cell	North	Central	South
Non-Newborn SSI / Disabled	\$1,201.06	\$1,370.44	\$1,397.66
Breast and Cervical Cancer	\$3,156.19	\$3,601.30	\$3,672.83
MA Adult	\$537.32	\$577.83	\$576.03
Pregnant Women	\$696.80	\$749.34	\$747.01
SSI / Disabled Newborn	\$8,256.42	\$8,599.82	\$8,197.13
Non-SSI Newborns 0 to 2 Months	\$2,247.59	\$2,341.07	\$2,231.45
Non-SSI Newborns 3 to 12 Months	\$299.71	\$312.18	\$297.56
Foster Care	\$725.14	\$755.30	\$719.93
MYPAC	\$3,887.92	\$4,049.62	\$3,860.00
MA Children	\$237.12	\$246.98	\$235.42
Quasi-CHIP	\$250.13	\$260.53	\$248.33

¹ Capitation rates in Table 1 exclude MHAP, MAPS, TREAT, and are prior to the application of the quality withhold.

In addition, there are multiple directed payments that are paid outside of the monthly capitation rates and excluded from Table 1. The estimated cost for each directed payment is included as a PMPM amount in the preliminary SFY 2024 capitation rates. These PMPM amounts will be retrospectively adjusted on a CCO-specific basis to reflect final payments made for each program.

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

- The Mississippi Hospital Access Program (MHAP) hospital fee schedule adjustment (FSA) are paid outside of the capitation rates on a monthly basis. This amount varies by rate cell on a PMPM basis based on projected utilization of inpatient and outpatient services and actual membership. The MHAP FSA payments are projected to be \$733.8 million in SFY 2024. Please see Section IV of this report for additional details on the MHAP FSA.
- Payments for the MHAP quality incentive payment program (QIPP) are paid outside of the capitation rates on a quarterly basis. The MHAP QIPP payments are projected to be \$788.5 million in SFY 2024. Please see Section IV of this report for additional details on the MHAP QIPP.
- The Mississippi Medicaid Access to Physician Services (MAPS) program in MississippiCAN enhances payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital, or who assigned Mississippi Medicaid payments to a qualifying hospital. The MAPS payments are estimated to be \$39.4 million in SFY 2024. Please see Section IV of this report for additional details on the MAPS program.
- The Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program in MississippiCAN for SFY 2024 enhances payments to eligible emergency ambulance providers. The TREAT payments are estimated to be \$20.6 million in SFY 2024. Please see Section IV of this report for additional details on the TREAT program.

In addition, the capitation rates will be adjusted on a CCO-specific basis for the following rate adjustments:

- **Quality Withhold:** As in SFY 2023 rates, DOM will apply a quality withhold to MississippiCAN payments in SFY 2024 based on metrics reported by the CCOs. The PMPM capitation rates in Table 1 are prior to the application of this quality withhold. Please see Section IV for more information on the quality withhold for SFY 2024.
- **Risk Adjustment:** The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be risk adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO and will be budget-neutral to DOM. The CDPS + Rx demographic and disease category weights are calculated using Mississippi fee-for-service (FFS) and encounter data.

The capitation rates for the Foster Care rate cell will be risk adjusted using a custom risk adjustment model developed for this population. This custom model uses a member's eligibility for either state or federal financial assistance to assign a risk score. The risk adjustment for the Foster Care rate cell will be applied on a concurrent basis.

Please see Section IV for more information on the application of risk adjustment to the applicable rate cells.

- **Risk Corridor:** Similar to SFY 2023, a risk corridor will be applied to recognize the uncertainty in determining rate setting assumptions for the impact of COVID-19 on the SFY 2024 rating period.
- **High-Cost Pharmacy Risk Corridor:** In SFY 2024, a high-cost pharmacy risk corridor will be applied to recognize the uncertainty in determining rate setting assumptions for the impact of current and anticipated high-cost medications.

Please see Section IV for more information on how the risk corridor settlements will be calculated.

Our Actuarial Certification of the SFY 2024 MississippiCAN capitation rates is included as Appendix D. It should be emphasized that capitation rates are a projection of future costs based on a set of starting data and assumptions. Actual costs will be dependent on each contracted CCO's situation, experience, and enrolled population.

SELECTION OF BASE DATA

Under normal circumstances, data from CY 2021 would be used as the primary base data for SFY 2024 capitation rates with data from CY 2020 used to supplement CY 2021 data for rate cells with fewer than 150,000 member months. Due to the emergence of COVID-19 in early 2020, the CY 2020 encounter data shows significantly different utilization and cost patterns than expected for SFY 2024. Therefore, we did not rely upon CY 2020 data and CY 2021 data was used as our sole base data source for all rate cells in development of the SFY 2024 capitation rates, regardless of membership.

While CY 2021 encounter data was the primary data source for SFY 2024 capitation rates, we used emerging data from CY 2022 to inform assumptions used to develop the SFY 2024 capitation rates, including utilization trend assumptions and service mix changes expected to persist post-COVID-19. In addition, we reviewed experience on a monthly basis during CY 2021 and made adjustments, as appropriate, to reflect differences in utilization and / or service mix not captured in the CY 2021 base data.

COVID-19 CONSIDERATIONS IN SFY 2024 RATE DEVELOPMENT

As of the time of the initial development of SFY 2024 capitation rates (report dated May 1, 2023), the impact on SFY 2024 capitation rates due to COVID-19 and the associated CCR unwinding is difficult to predict. As such, a risk corridor will be in effect in SFY 2024 to reflect the uncertainty in the capitation rates due to COVID-19. The risk corridor is described in more detail in Section IV.

In addition, explicit adjustments for COVID-19 are made in the rate development for the following, as described in Section IV:

- Population acuity
- Seasonal virus adjustment

CAPITATION RATE CHANGE SUMMARY

Table 2 summarizes the change in capitation rates from SFY 2023² to SFY 2024. This comparison is shown excluding the impact of directed payments and is composited across all rate cells using CY 2021 membership. Table 2 also summarizes changes excluding the impact of program changes (noted by footnote 2 in Table 2), which increase or decrease total program costs concurrently with revenue for the CCOs and excluding the impact of COVID-19 adjustments (noted by footnote 3 in Table 2).

² "Report19 - SFY 2023 Preliminary MississippiCAN Rate Calculation and Certification.pdf" dated August 22, 2023.

Table 2
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of SFY 2024 Rate Change Components¹

	Aggregated with CY 2021 Membership
SFY 2023 Capitation Rate	\$466.43
Base Period Data Update	0.936
Restate CY 2021 to SFY 2023 Trends	1.014
Restate CY 2021 to CY 2022 PDL Adjustment ²	1.001
Remove SFY 2023 Population Acuity Adjustment ³	0.989
Other Restated Assumptions ²	1.000
Updates Relative to SFY 2023 Assumptions	0.940
SFY 2023 to SFY 2024 Utilization Trends	1.024
SFY 2023 to SFY 2024 Unit Cost Trends ²	1.026
Seasonal Virus Adjustment	0.991
Acuity Adjustment: Shift to FFS ³	1.033
Acuity Adjustment: PHE Unwind ³	1.005
MYPAC Member Identification Change ²	1.000
Postpartum Coverage Extension ²	0.982
PDL CY 2022 to CY 2023 Adjustment ²	1.000
Obesity Drug Coverage ²	1.004
Obesity Drug Coverage Savings ²	0.997
Gene Therapy Drug Coverage ²	1.029
Gene Therapy Drug Coverage Savings ²	1.000
Hemophilia Population Carve-In ²	1.006
Insulin / Inhaler Price Reduction ²	0.994
SFY 2024 Preventative and Diagnostic Dental Reimbursement Change ²	1.001
SFY 2024 Restorative Dental Reimbursement Change ²	1.000
Update Admin	1.004
Preliminary SFY 2024 Rate Change	1.032
SFY 2024 Rate Change - Excluding Program Changes²	0.993
SFY 2024 Rate Change - Excluding COVID-19 Adjustments³	1.004

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.

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

³ COVID-19 adjustments include the acuity change resulting from the member shift to FFS.

The values quoted below are all based on CY 2021 membership composites.

- The development of SFY 2024 capitation rates is a ground-up approach where the base data and each assumption is evaluated separate from the SFY 2023 capitation rates. However, for the purposes of explaining the rate change from SFY 2023 to SFY 2024, we isolate the impact of rebasing the data and assumptions that we updated relative to the data or assumptions used to develop the SFY 2023 values. Overall, this rebasing decreased the projection of SFY 2023 costs by 6.0% from costs projected in the SFY 2023 capitation rates. This change contains the following sub-components:
 - As stated above, SFY 2023 rates used CY 2019 data supplemented with CY 2018 data as the basis for capitation rate development. For SFY 2024, we rely exclusively on CY 2021 encounter data as the basis for rate development. The impact of changing our base data reduced projected costs by 6.4%.
 - Milliman restated CY 2021 to SFY 2023 trend assumptions. This included the recalculation of annual trend assumptions based on reviewing restated data, changes to the lengths of time during which utilization trends were applied from CY 2021 to SFY 2023, and the restatement of CY 2021 to SFY 2023 pharmacy unit cost trends; all topics are discussed in Section IV. Overall, this trend restatement resulted in an overall 1.4% increase to capitation rates.

- Milliman restated the impact of PDL changes effective January 1, 2022. This resulted in an additional 0.1% increase to SFY 2024 rates relative to SFY 2023 rates.
 - The SFY 2023 population acuity adjustment for the MA Adult, MA Children, and Quasi-CHIP rate cells is removed to put those SFY 2023 capitation rates on a 1.0 basis. The impact of removing this adjustment is a decrease to overall capitation rates of 1.1%. Acuity adjustments from CY 2021 to CY 2024 are applied as separate adjustments, as described below.
 - Various other assumptions were restated, most notably the application of the preventative and diagnostic dental reimbursement increases occurring on July 1, 2021 and July 1, 2022. These restated assumptions are approximately net neutral to SFY 2024 capitation rates.
- Composite utilization trend assumptions from SFY 2023 to SFY 2024 increased projected costs 2.4%.
 - Composite unit cost trend assumptions from SFY 2023 to SFY 2024 increased projected costs 2.6%. This is driven by a large unit cost increase for outpatient services as that fee schedule is unfrozen July 1, 2023. In addition, there were other service specific fee schedules that had material changes on a population specific basis (e.g., PRTF increases result in large reimbursement change for Foster Care), as outlined in Section IV.
 - An adjustment to estimate changes in testing, treatment, and vaccination costs for COVID-19, flu, and RSV decrease the overall rate by 0.9%, as shown in the seasonal virus adjustment in Table 2. These population specific adjustments were developed to reflect a reduction in COVID-19 related costs in SFY 2024 relative to CY 2021 but an increase in flu and RSV costs from the dampened experience included in the CY 2021 base data.
 - MississippiCAN membership, primarily in the MA Adult, MA Children, and Quasi-CHIP rate cells, has been shifted to FFS as DOM began performing eligibility redeterminations in 2021 and continuing into 2022. On average, the individuals that were moved from MississippiCAN to FFS were lower than average cost individuals, resulting in an increase in the average acuity of membership remaining in these rate cells relative to the CY 2021 base period data. A population specific acuity adjustment is applied to these rate cells resulting in an overall increase of 3.3% across all rate cells.
 - An adjustment to reflect the impact of the PHE unwind on population acuity for the MA Adult, MA Children, and Quasi-CHIP rate cells was developed based on risk score differences between June 2022 and SFY 2024. Overall, this adjustment increases capitation rates 0.5%.
 - Membership assignment associated with the “SED” lock-in flag was adjusted to correct for an inconsistency in how the lock-in flag was applied to some members from July through December 2021. This primarily affects the Mississippi Youth Program Around the Clock (MYPAC) rate cell as members utilizing MYPAC services were assigned to other children rate cells. This adjustment is overall net neutral as members were reassigned between rate cells.
 - Per SB 2212, postpartum coverage extended from 60 days to 12 months for members who gave birth on or after April 1, 2023 such that the first enrollment month under the coverage extension is July 2023. Previously, members in the Pregnant Women rate cell were transitioned out of the rate cell after their 60 days of postpartum coverage concluded. An adjustment to account for the estimated cost differential between the prior coverage and the additional 10 months of postpartum coverage decreased overall SFY 2024 capitation rates by 1.8% on a PMPM basis across all rate cells. However, due to the additional membership introduced into the program, we estimate total program SFY 2024 costs increased by 0.8% due to the postpartum extension.
 - PDL updates effective January 1, 2023 across all populations are estimated to be neutral to gross pharmacy costs prior to DOM rebate collection.
 - PDL updates for the inclusion of obesity medications effective July 1, 2023 increased capitation rates by 0.4% across all rate cells. Medical cost savings associated with the obesity treatments have a partial offsetting decrease to capitation rates of 0.3%.

- Several high-cost gene therapies are currently available or will become available during SFY 2024. Anticipated medical and pharmacy costs associated with these treatments, as well as the carve-in of Zolgensma from FFS, increased rates by 2.9%. Anticipated medical savings from these therapies are estimated to be neutral across all rate cells. The actual utilization of these high-cost gene therapies is very low and is likely to be greater than or less than the estimates included in the SFY 2024 capitation rates. A high-cost drug risk corridor has been implemented for SFY 2024 to mitigate the uncertainty in the estimation of utilization of these therapies and other high-cost pharmaceuticals.
- Effective January 1, 2024, eligible members with Hemophilia or Von Willebrand disease will transition from FFS into MississippiCAN. Historically this population was carved-out of MississippiCAN due to the relatively high medical costs associated with these conditions, as well as the infrequent and non-uniform distribution of members across the CCOs. The estimated costs of adding this population to MississippiCAN increased capitation rates by 0.6% across all rate cells.
- Insulin and inhaler manufacturer cost adjustments, related to the removal of the average manufacturer's price (AMP) cap effective January 1, 2024, reduced capitation rates by 0.6% across all rate cells.
- Per SB2799, SFY 2024 MississippiCAN preventative and diagnostic dental services will be reimbursed at a rate 5% greater than in SFY 2023. Across all rate cells, this amounts to a 0.1% increase to capitation rates.
- Per HB657, SFY 2024 MississippiCAN restorative dental services will be reimbursed at a rate 5% greater than in SFY 2023. Across all rate cells, this amounts to a slight increase to capitation rates.
- Changes to administrative expenses on a PMPM basis result in an increase to the rate of approximately 0.4%, based upon CCO reported administrative expenses for CY 2021 trended to SFY 2024. A positive rate change in Table 2 indicates that the administrative costs increased as a percentage of the overall rate (i.e., administrative costs trended at a higher percentage than the overall rate). The overall PMPM for administrative expenses increased 5.8% from the SFY 2023 allowance, comprised of a fixed administrative expense increase from \$10.56 PMPM in the SFY 2023 rate to \$11.17 PMPM in the SFY 2024 rate, and a variable administrative expense decrease from 5.13% in the SFY 2023 rate to 5.11% in the SFY 2024 rate.

The total MHAP payment across all MississippiCAN members increases from \$601.2 million in SFY 2023 to \$1.522 billion in SFY 2024. Please see Section IV of this report for more information on changes to the MHAP structure for SFY 2024.

CAPITATION RATE CHANGE BY RATE CELL

Rate changes vary by capitation rate cell as shown in Table 3, which compares SFY 2024 capitation rates to SFY 2023 capitation rates, on a similar basis as Table 2. The level of detail for the rate change included in Table 2 above is shown by rate cell in Exhibit 5.

Table 3
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of Statewide SFY 2024 Rate Change¹

Rate Cell	Overall Rate Change	Excluding Program Changes²	Excluding COVID-19 Adjustments³
Non-Newborn SSI / Disabled	9.3%	0.1%	9.3%
Breast and Cervical Cancer	-10.6%	-12.4%	-10.6%
MA Adult	1.7%	-1.2%	-3.9%
Pregnant Women	-36.6%	-5.4%	-36.6%
SSI / Disabled Newborn	-5.9%	-10.7%	-5.9%
Non-SSI Newborns 0 to 2 Months	11.3%	3.3%	11.3%
Non-SSI Newborns 3 to 12 Months	5.6%	0.6%	5.6%
Foster Care	1.9%	-5.2%	1.9%
MYPAC	-5.2%	-9.9%	-5.2%
MA Children	2.7%	-0.6%	-3.2%
Quasi-CHIP	7.1%	4.5%	0.5%
Total - Aggregated with CY 2021 MMs	3.2%	-0.7%	0.4%

¹ Rate changes exclude MHAP, MAPS, TREAT, and are prior to the application of the quality withhold.

² PDL and dental reimbursement changes have been excluded from this calculation.

³ COVID-19 adjustments include the acuity change resulting from the member shift to FFS.

DATA RELIANCE AND IMPORTANT CAVEATS

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate SFY 2024 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting from January 2021 to August 2022 with runout through August 2022, historical and projected reimbursement information, TPL recoveries, fee schedules, pharmacy and dispensing fee pricing, and other information from DOM, MississippiCAN CCOs, Myers and Stauffer, Change Healthcare, and CMS to calculate the preliminary MississippiCAN capitation rates shown in this report. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2024 capitation rates.

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

Our report is intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2024. The report and the models used to develop the values in this report may not be appropriate for other purposes. We anticipate the report will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

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

II. MISSISSIPPICAN BACKGROUND

MississippiCAN, a Coordinated Care Program for Mississippi Medicaid beneficiaries, was designed to address the following goals:

- Improve access to needed medical services – This goal is accomplished by connecting the targeted beneficiaries with a medical home, increasing access to providers, and improving beneficiaries' use of primary and preventive care services.
- Improve quality of care – This goal is accomplished by providing systems and supportive services, including disease state management and other programs that will allow beneficiaries to take increased responsibility for their health care.
- Improve efficiencies and cost effectiveness – This goal is accomplished by contracting with CCOs on a capitated basis to provide services through an efficient, cost-effective system of care.

TARGET POPULATION

MississippiCAN was implemented in all 82 counties in the State of Mississippi for all eligible beneficiaries beginning January 1, 2011 for targeted, high cost Medicaid beneficiaries defined by these categories of eligibility (COEs):

- COE001 – SSI via SDX
- COE019 – Disabled children at home
- COE025 – Working Disabled
- COE026 – DHS CWS Foster Care
- COE027 – Breast-Cervical

On December 1, 2012 the eligible population of MississippiCAN was expanded to include all Foster Care children, Non-SSI Newborns 0 to 12 months, MA Adults, and Pregnant Women, as defined by the following categories of eligibility and age requirements:

- COE003 – DHS-IV-E-Medicaid
 - COE075 – Parents / Caretakers of minor children
 - COE088 – Pregnant Women, 185% FPL – Ages 8+
 - Non-SSI Newborns – Ages 0 to 12 months
- COE003 – DHS IV-E Medicaid
 - COE026 – DHS Foster Care
 - COE071 – Newborn age 0 to 1 with income at or below 185% FPL
 - COE088 – Pregnant Women, 185% FPL

Effective December 1, 2012, all MississippiCAN populations were mandatory enrolled except SSI children, disabled children at home, Foster Care children, and members of the Mississippi Band of Choctaw Indians.

Between December 2014 and July 2015, the eligible population of MississippiCAN was expanded again to include children as defined by the following categories of eligibility, age, and income requirements:

- COE072 – Children age 1 to 5 with income at or below 133% FPL
- COE073 – Children age 6 to 19 with income at or below 100% FPL
- COE074 – Children age 6 to 19 with income between 100% and 133% FPL who would have qualified for CHIP under pre-Affordable Care Act rules

Effective January 1, 2014, COE074 children previously eligible for CHIP with income eligibility between 100% and 133% FPL became Medicaid eligible rather than CHIP eligible due to income eligibility outlined in the Affordable Care Act. These children were moved into MississippiCAN effective December 1, 2014 and referred to as "Quasi-CHIP" children.

The children covered under the above COEs previously covered in the Medicaid program are called “MA Children.” DOM phased in enrollment from FFS into MississippiCAN by July 2015, with most children transitioned between May 2015 and July 2015.

Effective December 1, 2015, in conjunction with the movement of inpatient services into MississippiCAN, enrollment procedures were changed to enroll newborns in MississippiCAN on the day of their birth. Previously, newborns were not enrolled until, on average, their second month of life due to a delay in assigning a Medicaid identification number and the process to enroll them in a CCO.

Starting October 1, 2018, Severely Emotionally Disturbed (SED) Children were covered by MississippiCAN. These children are identified with the lock-in code of “SED,” which is effective for one year after determination. To receive MYPAC services, a child must have a SED lock-in code. This population was referred to as “SED Children” prior to SFY 2021. Starting in SFY 2021, this population is referred to as the “MYPAC” rate cell.

Effective July 1, 2023, postpartum coverage extends from 60 days to 12 months. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. After July 1, 2023 this redetermination will not occur until the end of the 12 months of postpartum coverage.

Throughout this report, we frequently apply the same adjustments to rate cells with similar demographics. The rate cell groups summarized in Table 4 identify the rate cells contained within each grouping referenced throughout this report.

Table 4 Mississippi Division of Medicaid Rate Cell Groupings	
Rate Cells	Rate Cell Grouping
Non-Newborn SSI / Disabled	SSI
Breast and Cervical Cancer	SSI
MA Adult	Adults
Deliveries - MA Adult	Deliveries
Pregnant Women	Adults
Deliveries - Pregnant Women	Deliveries
SSI / Disabled Newborn	Children
Non-SSI Newborns 0 to 2 Months	Children
Non-SSI Newborns 3 to 12 Months	Children
Foster Care	Children
MYPAC	Children
MA Children	Children
Quasi-CHIP	Children

COVERED SERVICES

When MississippiCAN was first established in January 2011, three key services were initially excluded from the program. Over time, each has been moved from being covered by FFS to MississippiCAN as follows:

- Behavioral health services – Rolled into MississippiCAN effective December 1, 2012
- Non-emergent transportation services – Rolled into MississippiCAN effective July 1, 2014
- Inpatient services – Rolled into MississippiCAN effective December 1, 2015

Effective October 1, 2018, MississippiCAN included costs for psychiatric residential treatment facility (PRTF) stays. Historically, these costs were carved out of MississippiCAN, although members were not dis-enrolled from MississippiCAN.

Starting July 1, 2019, services provided at institutions for mental disease (IMD) are covered as part of the MississippiCAN program.

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

MILLIMAN REPORT

Effective July 1, 2023, Zolgensma will be included as a covered treatment for members with spinal muscular atrophy. Previously this drug was carved out and CCOs were reimbursed for any incurred costs.

Effective July 1, 2023, certain anti-obesity drugs will be covered for members who meet eligibility criteria. These products were previously not covered as part of the Medicaid benefit.

Effective January 1, 2024, members diagnosed with Hemophilia or Von Willebrand disease will be included in the MississippiCAN program. These members were previously carved out to the FFS program.

CCOs historically have not provided services not covered under MississippiCAN “in lieu of” covered services.

ENROLLMENT PERIOD

All beneficiaries have the ability to choose the CCO in which to enroll. Enrolled beneficiaries will have an open enrollment period during the 90 days following their initial enrollment in a CCO, during which they can enroll in a different CCO “without cause” and an open enrollment period from October to December of each year. During this time period, beneficiaries may choose to change their CCO.

Various “for cause” reasons for disenrollment at other times incorporate federal requirements, such as: providers that do not (for religious or moral reasons) offer needed services; not all related services are available in the plan’s network; or the plan lacks providers experienced in dealing with the enrollee’s health care needs.

Eligibility criteria for MississippiCAN are the same as the eligibility criteria for Mississippi Medicaid. To receive enhanced federal funding during the COVID-19 PHE, DOM paused disenrollment of members from the Mississippi Medicaid program who normally would no longer be eligible for Medicaid services. Where readily identifiable (e.g., individuals aging out of the program eligibility requirements or pregnant women reaching 60 days postpartum), individuals who would have lost normal Medicaid eligibility in the MississippiCAN program were transitioned to FFS for the remainder of the CCR. Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from coordinated care organizations (CCOs) into FFS Medicaid. Following the end of the CCR, these members Medicaid eligibility will be redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely. These redeterminations will begin in SFY 2023 and continue through SFY 2024.

The CCOs do not have the ability to directly market to targeted beneficiaries. DOM provides information about choice of CCOs and enrolls the beneficiaries into their chosen CCO. The Medicaid Fiscal Agent provides some specific services of an enrollment broker to accomplish these tasks.

III. BASE DATA DEVELOPMENT

This section of the report describes the development of the base data used for the preliminary SFY 2024 MississippiCAN capitation rates.

METHODOLOGY OVERVIEW

The base data for the SFY 2024 capitation rates was developed by summarizing eligibility, encounter claims, and financial claim data for CY 2021 MississippiCAN enrollees. Exhibit 10 contains databooks summarizing encounter data for CY 2021 for all rate cells. Please note, the total and PMPM costs shown in the 2021 databook include missing data. The total and PMPM costs in the 2021 data books tie to the starting totals on Exhibit 1 if excluding data is removed from the databook.

The remainder of this section is a high-level description of the processing for eligibility, encounter claim data, and financial claim data for CY 2021 MississippiCAN enrollees. In addition, any adjustments made to the raw data are discussed in this section and shown in Exhibit 1. Please refer to Appendices A and B of this report for additional information on the validation and processing of these data sources.

Membership

Member months by rate cell and region in CY 2021 were summarized from the detailed Medicaid eligibility data, excluding populations not covered by MississippiCAN and individuals that opted out of the program (where applicable). These enrollment counts were validated against enrollment information provided by the CCOs. In total, the enrollment in the eligibility files is 0.1% lower than reported by the CCOs.

Row (a) of Exhibit 1 includes the CY 2021 member months included in base data development. Note, the delivery component of the MA Adult and Pregnant Women rate cells use member months for the members in the underlying rate cell rather than delivery counts. The count of deliveries is included for informational purposes as a footnote in Exhibit 1.

Claim Data

DOM and Milliman go through extensive data validation processes to review CCO submitted encounter data. DOM regularly monitors encounter claims compared to cash disbursement journals (CDJs) to ensure the timeliness and completeness of submitted encounters and works with Myers and Stauffer to identify the correct original or final claim to keep in each claim string. Milliman relied on this claim status identification process to remove duplicates and identify denied claims that are anticipated to be resubmitted and accepted, as described in Appendix B.

As part of rate development, Milliman requests financial reporting data from each CCO. This financial reporting data was reconciled to each CCO's 2021 audited NAIC financial statement. After several rounds of questions to clarify, adjust, and confirm understanding of the reported financial information, Milliman compared the encounter data to the financial reporting data, for paid claims and subcapitated claims. This comparison excludes estimates for incurred but not reported (IBNR) claims and adjusts for any claims that were identified as missing from the processed encounter data. To align the financial templates and encounter data on a comparable basis, we performed this reconciliation exercise using CY 2021 data with run-out through April 2022.

In our analysis the following items are noted:

- Overall, the paid amounts in the encounters reconcile reasonably well to the paid amounts shown in the CCO financial reporting for the MississippiCAN populations. As Table 5 shows, encounter data was 0.54% lower than financial data.
- At a category of service and rate cell level, there was a greater variance between encounter data and financial reporting, particularly for non-pharmacy categories of service.

Table 5 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Comparison of Financial and Encounter Data	
Percent by which Financial Data exceeds Encounter spend	
IP / OP / Phys / Dental / Other Services	0.68%
Pharmacy Services	0.07%
All Services	0.54%

Given how closely the encounter data reconciles to the financial data submitted by the CCOs, we are not making a financial to encounter adjustment for CY 2021. As an additional source of verification for the encounter data we reviewed the cash disbursement journal (CDJ) summaries provided by DOM and were able to validate that the encounter data ties very closely (within 0.5%) to the amounts reported by the CCOs in the CDJ summary reports for similar time periods. Since the CDJ summary reports are on a paid basis (rather than an incurred basis) they do not line up exactly with the time periods we use for rate setting, and therefore we reviewed reports from Q4 2020 through Q1 2022.

Encounter data for all three CCOs is combined to summarize CY 2021 claim experience for MississippiCAN enrollees. Row (b) of Exhibit 1 includes the CY 2021 total service costs from the encounter data. Row (c) converts the total service costs to a PMPM basis.

All experience used to develop the base period data for the SFY 2024 capitation rates is on a net basis, excluding any member cost sharing, which is collected by one CCO for pharmacy services beginning January 1, 2020.

The financial reporting expenditures for all CCOs were combined to perform the encounter validation outlined above, as well as to develop the following adjustments to apply to the encounter data:

- Repricing of frozen pharmacy claims starting July 1, 2021
- Removal of costs that would be paid or recouped through a third-party
- Removal of pharmacy rebates collected by the CCOs
- Addition of claims paid by the CCOs that are not yet reflected in the encounter system

Pharmacy Rate Freeze Repricing

SB2799 stipulated that all changes in reimbursement for any service after July 1, 2021 required legislative notification. Consequently, DOM froze the unit cost for pharmacy products at the July 1, 2021 level. After receiving notice that CMS did not approve the state plan amendment (SPA) freezing pharmacy reimbursement, DOM unfroze unit costs for pharmacy claims beginning July 1, 2021. CCOs that had implemented the rate freeze were required to reprocess pharmacy claims at the unfrozen unit cost. We adjusted the CY 2021 encounter data to reflect reprocessing of these claims which occurred after the runout period for our base data. The pharmacy claims reprocessing increased CY 2021 MississippiCAN service costs by approximately 0.1%.

The adjustment to reprice affected pharmacy claims after July 1, 2021 is shown in Exhibit 1 in row (d).

Non-Covered Services

We excluded the value of expanded services exceeding CY 2021 service limits from the base data. These services, which totaled approximately 0.5% of CY 2021 MississippiCAN service costs, were removed from CY 2021 base data at the rate cell level of detail. Service limits do not apply up to age 21, thus, base period costs were not adjusted for these members.

Milliman summarized the costs of services exceeding limits in the encounter data using the definitions provided by DOM, as detailed in Appendix B.

The adjustment to remove non-covered services in CY 2021 is shown in Exhibit 1 in row (e).

Third-Party Liability (TPL) Recoveries

The CCOs provided Milliman with a summary of recoveries for TPL payments related to claims incurred in CY 2021 and recovered through April 2022. Using CY 2018 and CY 2019 data, Milliman calculated the portion of total CY 2018 and CY 2019 recoveries recovered after the end of each year. We used this information to estimate the final claim recoveries for services incurred in CY 2021, but not yet reflected in the CY 2021 base data. DOM assumes these outstanding TPL recoveries will reduce ultimate CY 2021 paid totals.

We removed the total TPL amounts as a percentage of total paid claims across all rate cells and categories of service from the CY 2021 base data. Across all rate cells, these TPL recoveries amounted to a 0.1% reduction to CY 2021 base data. We do not have information to apply this estimate at either a rate cell or category of service level and therefore apply a uniform adjustment for the estimate of TPL recoveries.

This adjustment is shown in Exhibit 1 in row (f).

IMD (Institution for Mental Disease) Stays Beyond 15 Days

Per CMS regulations, services rendered at an IMD beyond 15 days in a given month for individuals aged 21 to 64 cannot be covered by Medicaid. CMS requires all claims (not just IMD claims) incurred by members and the enrollment records for those same months be removed from base data for the month with the IMD stay exceeding 15 days. The enrollment shown in row (a) of Exhibit 1 is after the removal of these 56 member months. An additional adjustment was made to remove all claims for these members in the impacted months, which totaled approximately \$715,000, from the CY 2021 encounter data.

This adjustment is shown in Exhibit 1 in row (g).

IMD Unit Cost Adjustment

Some IMD stays for 15 days or fewer for individuals aged 21 to 64 will be covered under MississippiCAN. We adjusted the unit cost for similar claims in the CY 2021 experience to use DOM's fee schedule for these services. These unit cost adjustments resulted in a cost increase of approximately \$10,000 in total.

This adjustment is shown in Exhibit 1 in row (h).

SSI Children Formerly Moved to FFS Due to PRTF Stay

Beginning in October 2018, DOM moved certain SSI children from COE 001 to COE 005, which is not a MississippiCAN covered population, due to a psychiatric residential treatment facility (PRTF) stay. In SFY 2024, these members will remain in COE 001 during their PRTF stay, and MississippiCAN CCOs will be responsible for expenses incurred during these stays.

DOM provided membership extracts for managed care members assigned to COE 005 during CY 2021 as a result of a PRTF stay. We queried our detailed claims and enrollment data and found 84 members totaling 405 member months that were moved to COE 005. The enrollment shown in row (a) of Exhibit 1 reflects the inclusion of these member months. An additional adjustment was made to add claims for these members in the impacted months to the Non-Newborn SSI / Disabled rate cell, which totaled approximately \$5,300,000, from the CY 2021 FFS data.

This adjustment is shown in Exhibit 1 in row (i).

MYPAC Member Identification Adjustment

Beginning in July 2021, the assignment of the "SED" lock-in flag was applied inconsistently for some members. The lock-in flag is the primary means of identifying members in the MYPAC rate cell, and as such, using our current rate cell methodology, as outlined in Appendix A, some members were not assigned to the MYPAC rate cell and instead assigned to other children rate cells. The CCOs provided membership extracts for members utilizing MYPAC services and we queried our enrollment records to reassign affected members. We reassigned membership and corresponding claims amounts for 141 member months totaling approximately \$340,000 from other children rate cells to the MYPAC rate cell.

The member months shown in row (a) of Exhibit 1 reflects the reassignment of these member months.

The adjustment to reassign the costs between rate cells is shown in Exhibit 1 in row (j).

Drug Services Rebate Adjustment

An adjustment was made to pharmacy claims to reflect the average rebate collected by the CCOs in CY 2021 and not reflected in the encounter data. Rebate costs were summarized by rate cell from the financial reporting. These rebates were then converted to a percentage of base period pharmacy costs and applied as a reduction to base period encounter pharmacy claims data at the regional level.

This adjustment is shown in Exhibit 1 in row (k).

Missing Data Adjustment

A separate adjustment was made to account for payments made by the CCOs that are not yet submitted to the encounter system or cannot be reasonably applied to a specific claim (e.g., provider bonuses or settlements). These claim amounts are not included in the detailed encounter data after the processing outlined in Appendix B.

Each CCO provided separate financial reporting to support and validate the amounts reported for claims not appearing in encounters. The detailed financial reporting provided by the CCOs included splits by region and rate cell, which were used to allocate missing data on Exhibit 1.

Overall, the base data is increased 1.0% on a PMPM basis for missing data.

The aggregate adjustment for all missing data described above is shown in Exhibit 1 in row (l).

IBNR Adjustment

The adjustment for IBNR claims as of April 30, 2022 uses the best estimate IBNR claims provided by each of the CCOs in their financial reporting. We performed the following high-level reasonability checks to validate these estimates:

- Data, including IBNR estimates, was reported on a quarterly basis by each CCO. We reviewed the reported IBNR by quarter to determine that there was a reasonable pattern throughout the year (i.e., IBNR amounts held for Q1 2021 were significantly lower than Q4 2021).
- IBNR estimates among the CCOs were reviewed to validate that they were approximately the same as a percentage of total claims, where appropriate.
- IBNR estimates by category of service are approximately the same as a percentage of total claims as IBNR adjustments applied to the MississippiCAN data in prior years after accounting for differences in runout period between years.

Overall, the base data increased by 1.2% on a PMPM basis for IBNR claims.

This adjustment is shown in Exhibit 1 in row (m).

Adjusted CY 2021 PMPM Costs

Total 2021 base period PMPM costs by rate cell are shown in the final row of Exhibit 1.

IV. PROJECTED SFY 2024 CAPITATION RATES

Many adjustments must be applied to the base period data to develop SFY 2024 capitation rates. This section describes the adjustments applied to the base period data described in Section III to develop SFY 2024 capitation rates. These adjustments are applied in nine steps:

1. Trend costs from base period to SFY 2024.
2. Apply adjustments for population, program, and reimbursement methodology changes.
3. Combine non-delivery costs and delivery costs for applicable rate cells.
4. Include an allowance for CCO non-service expenses.
5. Adjust rates to reflect differences in geographic area by rate cell.
6. Apply quality withhold.
7. Adjust for CCO specific risk scores (if applicable).
8. Retrospectively adjust for directed payments.
9. Calculate risk corridor settlements.

Step 1: Trend Costs from Base Period to SFY 2024

Starting with the blended base data developed in Section III, we apply trend adjustments to project the base period to SFY 2024. Below, we describe each trend adjustment shown on Exhibit 2A. The adjustments for non-pharmacy and pharmacy services are developed using differing methodologies and therefore described separately in this section.

Non-Pharmacy Trend Overview

Our general approach to trend development for non-pharmacy categories of service is to consider known recent changes in provider reimbursement, along with historical PMPM trend values. We then develop utilization / service mix trends that produce targeted PMPM trends. We utilize this approach because it is frequently difficult to directly measure changes in utilization for services other than inpatient hospital and pharmacy over time due to differences in counting utilization “units.”

Exhibits 7A to 7E include a historical trend summary of PMPM costs from January 2017 through December 2021 for each high-level population type and in total for the MississippiCAN program. This data has been normalized for the following to put it on a consistent basis across time:

- IBNR from the financial templates was added to the encounter data to review PMPM trends on a completed basis.
- Estimates of the impact of the following material program or reimbursement changes were removed for the applicable time periods. These changes are accounted for in separate adjustments in this report, and therefore, should not be included in data analyzed for trends.
 - Removal of Zolgensma claims
 - 5% assessment removal for OPPS services
 - Implementation of 5% assessment on non-OPPS services
 - OPPS reimbursement changes not related to the 5% assessment
 - PAD reimbursement changes
 - PDL changes
 - AAC pharmacy reimbursement changes
 - PRTF services
 - OP dental reimbursement change
 - GME carve out
 - NET reimbursement adjustment
 - Provider settlements
 - Financial to encounter adjustments
 - Emergency ambulance reimbursement increases
 - Pharmacy rate freezes

- PMPMs at a rate cell level were aggregated using December 2021 membership into higher level population groupings and MississippiCAN in total. This removes the impact of membership mix changes across rate cells over time on the aggregate PMPMs.
- No adjustments were made to account for population acuity changes over time.

As shown in Table 6, the annualized PMPM trends on a normalized basis for the MississippiCAN program averaged 3.9% from CY 2017 to CY 2019 prior to the beginning of the COVID-19 pandemic. Exhibits 7A through 7E show additional detail for the MississippiCAN program as a whole and each individual population grouping.

Table 6 Mississippi Division of Medicaid MississippiCAN Capitation Rates MississippiCAN Annualized PMPM Trends January 2017 to December 2019		
Category of Service	CY 2017 to CY 2018	CY 2018 to CY 2019
Inpatient Hospital	4.2%	5.6%
Outpatient Hospital	1.9%	3.3%
Physician	3.8%	7.1%
Dental	-7.1%	-1.2%
Other	3.3%	7.0%
Non-Pharmacy Total	2.6%	5.2%

Tables 7 and 8 below show the utilization and unit cost trends assumed in SFY 2024 capitation rates. For the MYPAC rate cell, utilization and unit cost trends for physician services are dampened relative to the trends shown for other children rate cells to reflect the high proportion of physician services obtained through the MYPAC providers, for which flat utilization and unit cost trends were assumed.

Table 7 Mississippi Division of Medicaid MississippiCAN Capitation Rates CY 2021 to SFY 2024 Unit Cost Trends (Annualized)					
Rate Cell	Category of Service				
	Inpatient Hospital	Outpatient Hospital	Physician	Dental	Other
Non-Newborn SSI / Disabled	-1.8%	1.6%	2.4%	0.5%	2.6%
Breast and Cervical Cancer	-1.8%	1.5%	2.1%	0.0%	2.1%
MA Adult	1.5%	2.1%	2.8%	0.0%	2.3%
Deliveries - MA Adult	1.5%	2.1%	2.8%	0.0%	2.3%
Pregnant Women	1.5%	2.1%	2.8%	0.0%	2.3%
Deliveries - Pregnant Women	1.5%	2.1%	2.8%	0.0%	2.3%
SSI / Disabled Newborn	3.3%	2.7%	1.0%	0.0%	3.1%
Non-SSI Newborns 0 to 2 Months	3.3%	2.6%	0.8%	0.0%	1.9%
Non-SSI Newborns 3 to 12 Months	-1.0%	2.5%	2.9%	0.0%	1.8%
Foster Care	5.4%	2.7%	2.7%	0.8%	2.5%
MYPAC	1.2%	2.6%	2.0%	1.0%	1.3%
MA Children	1.3%	2.6%	2.8%	0.8%	1.4%
Quasi-CHIP	1.1%	2.6%	2.8%	1.1%	1.3%

Table 8
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
CY 2021 to SFY 2024 Utilization Trends (Annualized)

Rate Cell	Category of Service				
	Inpatient Hospital	Outpatient Hospital	Physician	Dental	Other
Non-Newborn SSI / Disabled	3.0%	4.0%	5.0%	0.0%	5.0%
Breast and Cervical Cancer	3.0%	4.0%	5.0%	0.0%	5.0%
MA Adult	3.0%	3.0%	3.0%	0.0%	3.0%
Deliveries - MA Adult	3.0%	3.0%	3.0%	0.0%	3.0%
Pregnant Women	5.0%	5.0%	6.0%	0.0%	6.0%
Deliveries - Pregnant Women	3.0%	3.0%	3.0%	0.0%	3.0%
SSI / Disabled Newborn	0.0%	3.0%	4.0%	0.0%	4.0%
Non-SSI Newborns 0 to 2 Months	0.0%	3.0%	4.0%	0.0%	4.0%
Non-SSI Newborns 3 to 12 Months	0.0%	3.0%	4.0%	0.0%	4.0%
Foster Care	3.0%	3.0%	4.0%	0.0%	4.0%
MYPAC	3.0%	3.0%	0.2%	0.0%	4.0%
MA Children	3.0%	3.0%	4.0%	0.0%	4.0%
Quasi-CHIP	3.0%	3.0%	4.0%	0.0%	4.0%

The development of the trend assumptions in Tables 7 and 8 is described below.

Utilization Trend for Non-Pharmacy Costs

Utilization trend reflects expected changes in:

- Demand for medical services
- Intensity or mix of medical services
- Provider practice patterns
- Provider coding changes

The following data sources were used to develop the utilization trend assumptions:

- Historical pre-pandemic MississippiCAN specific trends as shown above in Table 6 and in Exhibits 7A through 7E.
- Emerging Q1 and Q2 2022 experience as reported by the CCOs to understand recent claim trend pattern by population. We adjusted the emerging experience for the following:
 - Acuity changes between Q1 and Q2 2022 and the final acuity observed in June 2022 (and ultimately projected for SFY 2024) for the MA Adult, MA Children, and Quasi-CHIP rate cells.
 - Reimbursement changes effective July 1, 2022 and projected reimbursement changes effective July 1, 2023 were applied to put reimbursement on a SFY 2024 basis.
- Experience from similar programs in other states.

Table 9 below shows the adjusted Q1 and Q2 2022 PMPM for the largest population groups, as reported by the CCOs in their emerging 2022 financial template data. As described above, this data was adjusted to reflect the expected acuity of the population currently enrolled (as of June 2022) and adjusted to be on a SFY 2024 reimbursement basis. To help assess the reasonability of the trend assumptions selected above we compared the adjusted Q1 and Q2 2022 PMPM costs for the largest populations to the projected service costs in SFY 2024. The results are summarized below in Table 9.

Table 9 Mississippi Division of Medicaid CY 2022 Emerging Experience					
Rate Cell	Q1 2022 PMPM¹	Q2 2022 PMPM¹	SFY 2024 PMPM²	Implied Trend From Q1 2022	Implied Trend From Q2 2022
Non-Newborn SSI / Disabled	\$1,012.95	\$1,045.32	\$1,101.63	4.6%	3.3%
MA Adult	\$460.99	\$486.02	\$503.69	4.8%	2.2%
MA Children / Quasi-CHIP	\$191.27	\$184.54	\$200.82	2.6%	5.3%

¹ Adjusted for acuity, reimbursement, and program changes.

² Adjusted to remove high-cost gene therapy cost and the PHE unwind acuity impact.

The adjustment resulting from these utilization trends is shown in Exhibit 2A in row (b).

Unit Charge Trends for Non-Pharmacy Costs

The hospital inpatient, hospital outpatient, physician, and dental Medicaid FFS fee schedules are updated each year consistent with the following sources. DOM does not mandate provider reimbursement levels other than to require that reimbursement be at least as great as FFS for network providers. We assume that CCO reimbursement levels will move in tandem with changes to FFS reimbursement. Pursuant to SB2799 that was passed into Mississippi law on April 19, 2021, changes in reimbursement after July 1, 2021 will require legislative notification. HB657 was subsequently signed into law on April 19, 2022, allowing for changes in reimbursement rates as long as the payment methodology remains consistent. Based on direction from DOM we are modeling fee schedule changes for each service category as noted below. Coverage for new codes and prohibition for billing on discontinued codes is allowed. We assumed the net impact of these latter two issues will be budget neutral but will reevaluate once data is available and adjust capitation rates if needed. Unless otherwise noted, the fee schedule changes for prior years remained unchanged.

- **Inpatient:** DOM reimburses hospital inpatient claims using an APR-DRG methodology based upon the 3M grouper, which was updated on July 1, 2023. Conduent simulated reimbursement using the SFY 2024 reimbursement rates and CY 2021 inpatient experience data for the MississippiCAN program. As in prior years, we rely on these simulations to estimate unit charge trends for inpatient services.

The impacts of the July 1, 2023 reimbursement changes for inpatient services varied materially by rate cell. Table 10 shows the assumed annualized inpatient charge trends from CY 2021 to SFY 2024 by rate cell grouping. While we typically use similar assumptions for the newborn and other children's populations, we use separate inpatient unit cost trends for this release due to the large material differences shown in Conduent's simulations. This is driven by larger changes in the policy adjustors for normal newborn and neonatal services between the base period year (CY 2021) and SFY 2024.

Table 10 Mississippi Division of Medicaid Inpatient Unit Cost Trends for CY 2021 to SFY 2024	
Population	Inpatient
SSI	-1.83%
Adult	1.54%
Newborn ¹	3.34%
Children ²	-1.04%

¹ Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

² Children include all other children rate cells.

PRTFs are not paid using the APR-DRG methodology and instead rely on a separate fee schedule with per diem payment rates for each facility. To calculate the impact of payment rate changes between the base period and SFY 2024 we applied the increased payment rates for each facility to the applicable time periods. Please see Exhibit 14 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

- **Outpatient:** DOM reimburses hospital outpatient claims using the Medicare APC methodology updated on July 1 of each year. For these services, consistent with SB2799, DOM implemented no changes to reimbursement rates on July 1, 2021 or July 1, 2022. However, fees are being updated for July 1, 2023. Conduent performed a simulation of the OPPTS payment changes effective July 1, 2023, which we relied on for the impact to capitation rates for the SFY 2024 time period. Not all services included in our outpatient service category are billed using the OPPTS payment methodology and therefore we dampened the impact of the OPPTS reimbursement changes to apply to applicable services only.

Fee schedule changes for home health, behavioral health, and some ambulatory surgical center (ASC) services are also included in the outpatient service category. Table 11 shows the assumed annualized outpatient charge trends from CY 2021 to SFY 2024 by rate cell grouping. Similar to the process described above for PRTF, fee schedule changes for these services are reflected as a charge trend calculated by comparing the fee schedules in place during the base period and projection periods, weighted by the applicable procedure codes. Please see Exhibit 14 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

Table 11 Mississippi Division of Medicaid Outpatient Unit Cost Trends for CY 2021 to SFY 2024	
Population	Outpatient
SSI	1.38%
Adult	2.04%
Newborn ¹	2.54%
Children ²	2.54%

¹ Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

² Children include all other children rate cells.

- **Physician:** DOM generally reimburses physician services as a percentage of Mississippi Medicare fee schedules and updates the FFS fee schedules on July 1 of each year for the Medicare fee schedule changes from January 1 of the given year. For these services, consistent with SB2799, DOM implemented no change to reimbursement rates on July 1, 2021, but unfroze these fee schedules effective July 1, 2022.

Conduent performed a simulation of the impact of changes in the payment methodologies effective July 1, 2022 and July 1, 2023. Based on this analysis comparing projected SFY 2024 costs to CY 2021 costs, we included unit cost trends ranging from approximately 0.8% to 2.8% by rate cell to physician services for the applicable services included in Conduent's simulation. The majority of these increases are associated with evaluation and management codes, which received a large increase in the 2021 Medicare fee schedule. It is our understanding that Conduent's simulations included laboratory, physician (medical and surgical), radiology, and vaccine services, and excluded any services not listed above and those that were not anticipated to have a fee change between CY 2021 and SFY 2024.

The per-encounter FQHC and RHC reimbursement is included in the MississippiCAN capitation rates to provide a steadier cash flow to the RHCs and FQHCs that serve the MississippiCAN population. The CCOs are expected to reimburse FQHCs and RHCs at DOM's per-encounter rates. DOM will monitor the utilization of services at FQHCs and RHCs under MississippiCAN to ensure services are not diverted from FQHCs and RHCs to other providers. Approximately 12% of costs in the high-level physician category of service are for FQHCs and RHCs. A 2.1% and 3.8% rate increase was implemented on FQHC and RHC per-encounter rates effective January 1, 2022 and January 1, 2023, respectively. We assumed the per-encounter rates effective January 1, 2024 will be 2.9%, based on the average increase from the prior two years.

We assumed that reimbursement for all other services remains flat from CY 2021 to SFY 2024.

Table 12 below shows the combined physician unit cost trends incorporating the Conduent simulated changes, flat unit cost trends for services with no anticipated changes, and the appropriate trends for FQHC and RHC services.

Table 12 Mississippi Division of Medicaid Physician Unit Cost Trends for CY 2021 to SFY 2024	
Population	Physician
SSI	2.05%
Adult	2.83%
Newborn ¹	0.78%
Children ²	2.90%

¹Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

²Children include all other children rate cells.

In addition to the physician unit costs trends included in Table 12, fee schedule changes for autism spectrum disorder (ASD), prescribed pediatric extended care (PPEC), MYPAC, behavioral health, and some ASC services are also included in the physician service category. These charge trends were calculated by comparing the CY 2021 payment rates with those currently expected to be in place during SFY 2024, composited based on the mix of services during CY 2021. See Exhibit 14 for additional details regarding the base period costs and applied trend.

- **Dental:** Dental reimbursement changes due to SB2799 and HB657 are incorporated as a separate adjustment to rates. Additionally, fee schedule increases for orthodontia services are included in the dental service category. These fee schedule changes include a 10% increase effective October 1, 2023 for certain orthodontia services.
- **Other:** Some fee schedules remain frozen, and thus no changes were implemented to the fee schedules between CY 2021 and SFY 2024 except for the services noted below:
 - Durable Medical Equipment (DME) / Medical Supplies
 - Ambulance
 - Private Duty Nursing (PDN)
 - PPEC
 - Behavioral health services

Conduent performed a simulation of the impact of changes in the fee schedules effective July 1, 2022 and July 1, 2023. Based on this analysis comparing projected SFY 2024 costs to CY 2021 costs, we included unit cost trends ranging from approximately 1.2% to 2.3% by rate cell to other services for the applicable services included in Conduent's simulation. Conduent's simulation included DME, medical supplies, and ambulance services, and excluded any services that were not anticipated to have a fee change between CY 2021 and SFY 2024.

To calculate the impact of the PDN, PPEC, and behavioral health fee schedule changes we calculated the average change for each service type based on the Medicaid FFS payment rates and applied that to the total CCO payments, assuming that CCO payments increase by a proportional amount.

Row (c) in Exhibit 2A includes the aggregate unit cost adjustment factors from CY 2021 to SFY 2024.

Prescription Drug Trends

We developed pharmacy trends using the following sources:

- **MississippiCAN-Specific Data** – We analyzed January 2021 to December 2021 pharmacy experience for the eligible population and developed utilization and cost summaries by specialty and traditional (i.e., non-specialty) drug types, for the 22 top specialty therapeutic classes and 26 top traditional therapeutic classes. We developed cost projections to SFY 2024 from CY 2021 experience.

Considerations were made when reviewing prescription drug experience for the estimated impacts of changes in annual updates to the state's uniform PDL.

- **Industry Research** – We reviewed recent drug trend reports from PBMs to benchmark the prospective list price and utilization trends used in our detailed modeling of MississippiCAN-specific data. Additionally, we conducted industry research to adjust trends for anticipated market events, including but not limited to, novel pipeline drug launches, patent loss / major generic launches, expanded treatable population for approved drugs (e.g., new indication or age expansion), changes in standard of care (e.g., major clinical guideline updates), drug mix in MississippiCAN pharmacy experience, and the state's uniform PDL status and anticipated updates.
- **FDA Drug Approvals** – When developing prospective drug trends, we consider the FDA approval of various new therapies. Some of the therapies we expect to have higher frequency and / or cost include:
 - Adbry™
 - Apretude®
 - Auvelity®
 - Briumvi™
 - Cabenuva®
 - Cibinqo™
 - Dupixent® (label expansion)
 - Jaypirca®
 - Krazati®
 - Mounjaro®
 - Olumiant® (label expansion)
 - Orserdu®
 - Rinvoq® (label expansion)
 - Skyrizi® (label expansion)
 - Sotyktu®
 - Tezspire®
 - Tzield™
 - Vtama®

However, building explicit additional trend into capitation rates for these products is difficult due to a lack of information on expected pricing and uptake among the various populations. Therefore, we build in modest additional trend to reflect the expansion of new approvals for each population. We note, the historical experience reviewed in trend development also reflects the impact of FDA approvals that were new during those periods. For select high-cost pharmaceuticals we build explicit adjustments into the capitation rates, as outlined in Step 2, rather than incorporating into the pharmacy trend assumption.

Based on our analyses, we estimate annualized utilization and unit cost trends from CY 2021 to SFY 2024 shown in Table 13. Difference in aggregate trends by population in Table 13 are due to each population's mix of brand and generic products. The utilization trends shown in Table 15 include the indirect impact of the change in mix of products due to pure utilization trends.

Table 13 Mississippi Division of Medicaid Pharmacy Trends for CY 2021 to SFY 2024				
	SSI	Adult	Children	Delivery
Annualized Unit Cost Trends	4.00%	4.00%	2.50%	4.00%
Annualized Utilization Trends	1.00%	1.00%	1.00%	1.00%

Additional information on the development of utilization and unit cost trends are summarized below. Exhibits 8A through 8B show the CY 2021 experience and prospective utilization and unit cost trends applied by therapeutic class at a traditional and specialty level.

Unit Cost Trends

The cost per script trends are based on an analysis of historical MississippiCAN data from January 2021 through December 2021 and Milliman Industry Research, as noted above.

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Table 14 Mississippi Division of Medicaid Annualized Prospective Unit Cost Pharmacy Trends				
	SSI	Adult	Children	Delivery
Traditional	3.50%	3.12%	-0.64%	3.12%
Specialty	2.98%	3.36%	4.04%	3.36%

Utilization Trends

Similar to the unit cost trends, are based on an analysis of historical MississippiCAN data from January 2021 through December 2021 and Milliman Industry Research, as noted above.

Table 15 Mississippi Division of Medicaid Annualized Prospective Utilization Pharmacy Trends				
Generic	SSI	Adult	Children	Delivery
Traditional	0.95%	1.01%	1.01%	1.00%
Specialty	2.81%	2.56%	5.32%	1.00%

Seasonal Virus Trend Adjustment

As the COVID-19 global pandemic evolves, we continue to monitor COVID-19 costs associated with testing, treatment, and vaccinations. In addition, we monitor costs associated with other seasonal viruses, including influenza and respiratory syncytial virus (RSV). We queried historic MississippiCAN costs associated with COVID-19, influenza, and RSV and compared them to expectations about seasonal viral loads in SFY 2024. The expected SFY 2024 influenza and RSV costs were projected using historical costs observed in CY 2018 and CY 2019 for each population. The expected SFY 2024 COVID-19 costs were projected based on CY 2021 observed costs by population removing any large spikes corresponding with emerging COVID-19 variants to approximate costs in a “steady-state” COVID-19 environment. The adjustments calculated and applied by population as shown below in Table 16 and scaled across category of service based on the historical cost distribution. See Exhibit 15 for further information on the development of the seasonal virus trend adjustment.

Table 16 Mississippi Division of Medicaid Seasonal Virus Trend Adjustment				
	SSI	Newborns	Children	Adults
CY 2021 Cost	\$30.39	\$41.85	\$8.85	\$21.02
SFY 2024 Cost	\$18.87	\$40.07	\$9.25	\$12.72
Adjustment	-\$11.52	-\$1.78	\$0.40	-\$8.30

Row (d) in Exhibit 2A shows the adjustment for seasonal viruses.

Step 2: Apply Adjustments for Population, Program, and Reimbursement Methodology Changes

The following adjustments are applied to reflect changes in expected costs due to changes between the base period and rating period.

- Population Changes: Change in the mix of individuals already enrolled in MississippiCAN
- Program Changes: Changes to populations and / or services included in MississippiCAN
- Reimbursement Methodology Changes: Updates to Medicaid FFS reimbursement methodologies (assumes a parallel impact on MississippiCAN reimbursement), or changes in CCO reimbursement

Exhibit 12 summarizes the program, population, and reimbursement changes discussed in this section, the impacted rate cells for each change, and where the change is reflected in the rate development.

Shift to FFS Population Acuity Adjustment

Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from CCOs into FFS Medicaid. We categorized all members enrolled in MississippiCAN during CY 2021 into one of two groups depending on their enrollment status as of June 2022:

1. Members that transitioned into FFS Medicaid and did not return to MississippiCAN.
2. All other members enrolled in MississippiCAN.

To develop an acuity adjustment for CY 2021, we compared the CY 2021 PMPM medical costs for this second group of members to the CY 2021 PMPM medical costs for the actual population present in MississippiCAN during the CY 2021 base period. We developed acuity factors by category of service for the rate cell groupings listed below:

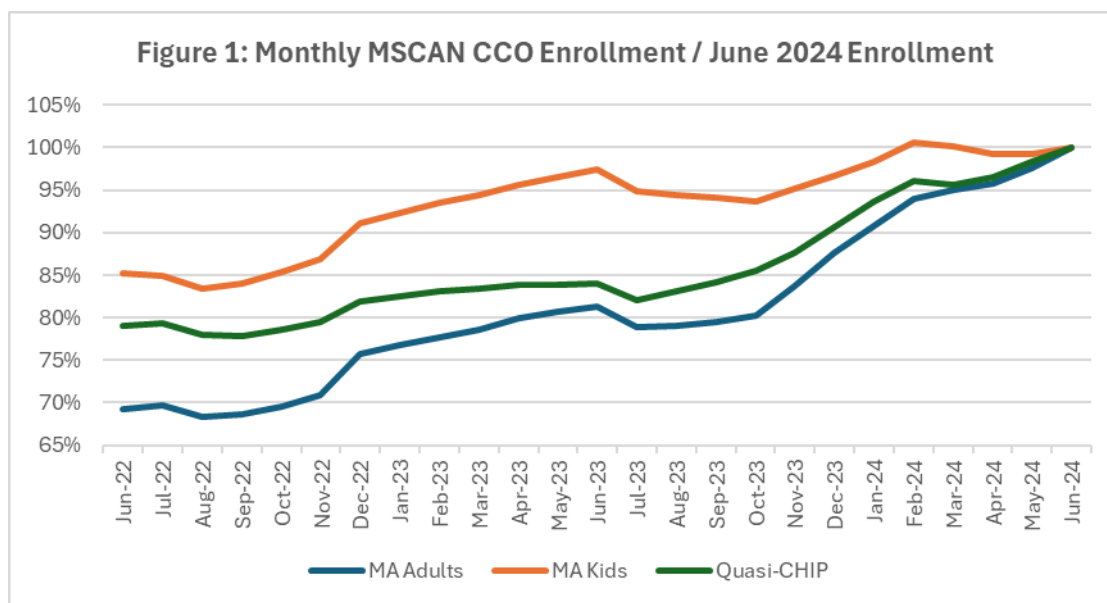
- MA Adults (including delivery and non-delivery costs).
- MA Children and Quasi-CHIP.

Row (e) in Exhibit 2A shows the adjustment for the population acuity adjustment.

PHE Unwind Population Acuity Adjustment

As mentioned above, the CAA states that the CCR, which was previously tied to the federal public health emergency (PHE), will end on March 31, 2023. DOM began disenrolling Mississippi Medicaid recipients who are no longer eligible in July 2023.

During the redetermination process, beneficiaries that had initially been moved from the CCOs into FFS and maintained Medicaid eligibility were moved back into MississippiCAN, resulting in steady CCO enrollment increases throughout CY 2023 and into CY 2024. Figure 1 shows this change in monthly enrollment compared to the enrollment in June 2024 for each rate cell (e.g., a ratio of 90% indicates that month's enrollment is 10% lower than the June 2024 enrollment).



To estimate the change in acuity due to population changes between June 2022 and SFY 2024, we performed a risk score-based acuity analysis. We calculated risk scores for two distinct time frames:

1. June 2022 (CY 2021 diagnoses and June 2022 enrollment).
2. SFY 2024 (CY 2023 diagnoses and SFY 2024 actual enrollment).

Due to population and programmatic changes occurring in MississippiCAN since we last calculated Mississippi-specific risk scores, we did not use the custom Mississippi risk weights that have been used for risk adjustment in prior capitation rate periods. Instead, we relied on standard CDPS weights from the CDPS + Rx risk score model. We excluded pharmacy claims from the risk score model, due to issues with the pharmacy encounter data during CY 2023. Given the large changes in membership between June 2022 and SFY 2024, we only looked at members that were able to be “scored,” meaning they had at least six months of enrollment during the diagnosis period.

To calculate the acuity adjustments, we compared the average risk scores for SFY 2024 enrollment compared to the average risk score in June 2022 for each population. To enhance credibility for the Quasi-CHIP population the results were combined for MA Children and Quasi-CHIP. The final acuity adjustments applied are a downward adjustment of 1.3% for MA Adults and an upward adjustment of 2.3% for MA Children and Quasi-CHIP, as shown in Table 17.

Table 17 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Population Acuity Adjustment						
Cap Cell	June 2022 - Scored Members		SFY 2024 - Scored Members		Risk Score Change	Final Acuity Adjustment
	Member Months	Average Risk Score	Member Months	Average Risk Score		
MA Adult	32,496	1.058	540,489	1.044	0.987	0.987
Children	222,276	0.968	3,108,891	0.991	1.023	1.023

Additional information about the risk scores for members enrolled in MississippiCAN during June 2022 and SFY 2024, including additional splits for various time periods are shown in Tables 18 (MA Adult) and 19 (MississippiCAN children) below.

For SFY 2024 MississippiCAN scored members, we reviewed the risk scores separately by quarter to assess the impact on risk scores of ongoing member eligibility redeterminations during SFY 2024 related to the unwinding of the PHE.

Table 18 Mississippi Division of Medicaid Acuity Adjustment - MA Adult					
Risk Scores in June 2022 Compared to SFY 2024					
	June 2022	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024
Scored Member Months	32,496	123,625	129,655	141,487	145,722
Average Monthly Enrollment	32,496	41,208	43,218	47,162	48,574
Risk Score	1.058	1.058	1.057	1.040	1.024

Table 19 Mississippi Division of Medicaid Acuity Adjustment - MA Children and Quasi-CHIP					
Risk Scores in June 2022 Compared to SFY 2024					
	June 2022	Jul-Sep 2023	Oct-Dec 2023	Jan-Mar 2024	Apr-Jun 2024
Scored Member Months	222,276	758,999	764,745	796,345	788,802
Average Monthly Enrollment	222,276	253,000	254,915	265,448	262,934
Risk Score	0.968	0.988	0.990	0.991	0.993

Row (f) in Exhibit 2A shows this adjustment.

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Postpartum Coverage Extension

Per SB 2212, postpartum coverage extends from 60 days to 12 months effective July 1, 2023. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. Going forward this redetermination will not occur until the end of the 12 months of postpartum coverage. While this program change has the largest impact on the Pregnant Women rate cell, other rate cells are also expected to have minor increases in enrollment due to extending the time until eligibility redetermination to 12 months postpartum (i.e., if someone would have been disenrolled during their annual redetermination they now will remain for the additional months until 12 months postpartum). We reviewed the impact of the coverage extension on all rate cells in the MississippiCAN program and believe the PMPM impact is minimal and did not include an adjustment for any rate cell except for the Pregnant Women rate cell, given its unique eligibility requirements and historical enrollment patterns. The projected membership in Exhibit 3 includes the impact of extending postpartum coverage for all rate cells.

While this program change will add membership and service costs to the Pregnant Women rate cell, these additional months of coverage are expected to be lower on a PMPM basis than the costs included in the CY 2021 base data. We developed separate adjustments to apply to the non-delivery costs and delivery costs included in Exhibit 2A.

- **Non-Delivery Costs:** The estimated PMPM for months 3 through 12 postpartum was developed by reviewing the relativity of the PMPMs for postpartum months 1 and 2 compared to months 3 through 12 for individuals that had a delivery while in the MA Adult rate cell in the CY 2021 base data. We then applied this relativity to the PMPM cost for postpartum months 1 and 2 for the Pregnant Women rate cell in the CY 2021 base data.
- **Delivery Costs:** Additional delivery costs will not be incurred for the additional months of membership added to the Pregnant Women rate cell. Therefore, we dampen the delivery cost PMPM to spread across the increased membership basis.

Both the non-delivery and delivery costs are blended based on the expected proportion of existing covered months (prenatal through 60 days postpartum) and new costs (3 to 12 months postpartum). These percentages are based on enrollment ramp up projections given the timing of the coverage extension. Table 20 below demonstrates the development of the population change factors.

Table 20 Mississippi Division of Medicaid SFY 2024 Capitation Rate Development Pregnant Women Rate Cell Postpartum Extension Adjustment			
		Non-Delivery Costs	Delivery Costs
Prior Eligibility: Prenatal through 60 Days Postpartum			
(A)	Enrollment Percentage	51.7%	51.7%
(B)	CY 2021 Allowed PMPM	\$367.87	\$577.08
New Eligibility: 3 through 12 Months Postpartum			
(C)	Enrollment Percentage	48.3%	48.3%
(D)	Allowed PMPM	\$203.05	\$0.00
Total Population			
(E) = (A) * (B) +			
(C) * (D)	Allowed PMPM	\$288.26	\$298.33
(F) = (E) / (B)	Postpartum Population Change Factor	0.784	0.517

Row (g) in Exhibit 2A shows this adjustment.

[Hemophilia Population Carve-In](#)

Effective January 1, 2024, eligible members diagnosed with Hemophilia and Von Willebrand's disease will transition from FFS to MississippiCAN. Historically this population has been carved-out of MississippiCAN due to the relatively high-cost associated with treatment and the infrequent and non-uniform distribution across the CCOs. We utilized a DOM provided list of members who were moved to MississippiCAN as part of this change. We assigned eligible members to rate cells based on eligibility metrics, such as category of eligibility, age, dual-eligible status, and long-term care status. We then identified CY 2021 claims and enrollment for these members to calculate the PMPM adjustment for the population expansion.

Row (h) in Exhibit 2A shows this adjustment.

[Preferred Drug List \(PDL\) Revisions](#)

Updates are made to the state PDL annually and take effect on January 1 of each year. We estimated the impact of these changes using detailed modeling provided by Change Healthcare, who is contracted by DOM to regularly update and maintain the state PDL. In our reliance on the PDL modeling performed by Change Healthcare, we reviewed the output of the models for reasonableness, but did not audit their analyses.

The modeling provided by Change Healthcare included drug-level analyses of expected utilization shifts and resulting changes to pharmacy expenditures on a gross of rebate basis. This modeling uses data from both FFS and MississippiCAN populations, so we cannot directly use the output for rate development. Therefore, we applied the change in gross costs on a percentage basis by therapeutic class to MississippiCAN encounter data to develop program-specific impacts of PDL revisions. Separate PDL adjustments were developed for each population to account for the different mix of drugs used for each group.

Table 21 shows the estimated impact of PDL revisions. The full adjustment applied is a combination of the PDL changes from CY 2021 to SFY 2024.

Table 21 Mississippi Division of Medicaid PDL Adjustment		
Rate Cell Grouping	2021 to 2022	2022 to 2023
SSI	0.997	1.000
Adults	0.997	0.999
Children	0.979	0.995
Deliveries	1.000	0.999

PDL changes effective January 1, 2023, were minor and only impacted seven therapeutic classes. Table 22 displays all impacted classes and outlines the shifting assumptions modeled by Change Healthcare for each class.

Table 22
Mississippi Division of Medicaid
January 2023 PDL Adjustments

Therapeutic Class	Utilization Shifts To	Utilization Shifts From	Modeled Shift	Estimated Increase (Decrease) in Gross Costs	% of Total PDL Change
Antidiabetics-Insulin	Toujeo	Tresiba	25%	(0.4%)	10.3%
Contraceptives-Vaginal	Phexxi P	Phexxi NP	300%	200.0%	-0.7%
Growth Hormone Agents	Genotropin	Norditropin Nutropin	10% 10%	1.3%	-9.7%
Miscellaneous-Carbaglu	Carglumic Acid	Carbaglu	100%	(17.5%)	3.1%
Resp-Beta Agonist Inhalers	Proventil HFA Ventolin HFA	Proair HFA	100%	(7.9%)	31.2%
Resp-Steroid Inhalers	Fluticasone Salmeterol	Advair Diskus	50%	(6.7%)	81.5%
Urinary Antispasmodic Agents	Myrbetriq	Oxybutynin Chloride Solifenacin Succinate Darifenacin Gemtesa	5% 25% 50% 30%	73.7%	-15.8%

The shifting assumptions developed by Change Healthcare are meant to reflect the best estimate for how utilization will shift as certain products change preferred status effective January 1, 2023, recognizing that a full shift will not happen immediately. The estimated change in gross cost assumes the ultimate modeled shift shown in Table 22 is achieved two quarters after the PDL changes take effect, and therefore, the January 2023 PDL updates are applicable to all of SFY 2024.

The adjustment for PDL revisions is shown in row (i) of Exhibit 2A.

Obesity Drug Coverage

In SFY 2024, certain medications for the treatment of obesity are included in the PDL along with prior authorization requirements and monitoring for individuals that utilize these drugs. DOM's PDL vendor estimated an annual cost of about \$20 million across both FFS and MississippiCAN populations. After discussions with DOM, we allocated the estimated pharmacy cost across Medicaid programs and within MississippiCAN by rate cell using the distribution of CY 2021 enrollment. Pregnant members and those under the age of 12 were excluded based on the prescribing guidelines for these medications. Based on the membership allocation \$8.0 million was assigned to MississippiCAN. Row (j) in Exhibit 2A shows this adjustment.

Obesity Drug Coverage Savings

The medical savings impact of obesity treatments is difficult to predict and depends on factors, such as uptake prevalence, adherence, and pre-existing medical conditions. After discussions with DOM, we assumed 75% of the obesity medication cost will be offset by medical savings and allocated \$6.0 million in medical savings across all categories of service.

Row (k) in Exhibit 2A shows this adjustment.

Gene Therapy Coverage

There are several high-cost gene therapies that are currently available or will become available during SFY 2024. We worked closely with our clinical team and the clinical team at DOM to identify eligible members, potential treatment uptake percentages, and total costs for treatment for each gene therapy and each rate cell. Table 23 below details the assumptions and estimated SFY 2024 impact for each treatment. Additionally, please see Exhibits 17C and 17D for the full development of these amounts by rate cell.

Table 23
Mississippi Division of Medicaid
SFY 2024 Capitation Rate Development
Gene Therapy Estimates

Condition	Therapy	Number of Treatments	Pharmacy Cost per Treatment	Inpatient Cost per Treatment	Total Anticipated Treatment Cost
Beta-Thalassemia	Zynteglo	1	\$2,800,000	\$200,000	\$3,000,000
Duchene Muscular Dystrophy	Elevydis	1	\$3,200,000	\$0	\$3,200,000
Hemophilia A	Roctavian	3	\$2,500,000	\$0	\$7,500,000
Hemophilia B	Hemgenix	2	\$3,500,000	\$0	\$7,000,000
Sickle Cell Disease	Lovo-cel and Exa-cel	20	\$2,000,000	\$200,000	\$44,000,000
Spinal Muscular Atrophy	Zolgensma	3	\$2,254,412	\$0	\$6,763,236
Total		30	\$2,242,108	\$140,000	\$71,463,236

Row (l) in Exhibit 2A shows this adjustment.

Gene Therapy Coverage Savings

The gene therapies listed above are assumed to significantly reduce or eliminate symptoms of the underlying condition. We queried CY 2021 claims data for potential utilizers meeting the clinical profile for each gene therapy. We worked closely with our clinical team to determine which costs associated with the underlying condition are likely to be alleviated by the gene therapies listed in Table 23. Based on the number of potential utilizers, we were able to calculate assumed annual savings amounts for potential utilizers of these new treatments aimed to treat Hemophilia A, Hemophilia B, and sickle cell disease. We assumed a uniform distribution of uptake throughout SFY 2024, accounting for launch dates after July 1, 2023 when applicable, and applied the relevant portion of the annual savings in the adjustment. Table 24 below displays the assumed savings amounts.

Table 24
Mississippi Division of Medicaid
SFY 2024 Capitation Rate Development
Gene Therapy Savings Estimates

Condition	Therapy	Number of Treatments	Total Savings per Member	Total Anticipated Savings
Hemophilia A	Roctavian	3	\$207,033	\$621,099
Hemophilia B	Hemgenix	2	\$52,846	\$105,692
Sickle Cell Disease	Lovo-cel and Exa-cel	20	\$13,037	\$260,732
Total		25	\$39,501	\$987,522

Row (m) in Exhibit 2A shows this adjustment.

Insulin / Inhaler Price Reduction

Starting on January 1, 2024 the American Rescue Plan Act of 2021 removes the limit, or “cap,” on Medicaid drug rebates which are currently capped at the average manufacturer price (AMP). Several insulin and inhaler manufacturers have implemented price decreases related to the removal starting as early as Q3 2023, with most prices decreasing January 1, 2024. We pulled CY 2021 claims at the NDC level and repriced these claims at the announced new price accounting for the timing of each price reduction throughout SFY 2024. Please see Exhibit 19 for a list of impacted products and their price reduction.

Row (n) in Exhibit 2A shows this adjustment.

Removal of 5% Assessment

Per SB2799 that was passed into law on April 19, 2021, the 5% rate reduction previously established in Miss. Code Ann. § 43-13-117 (B) was removed from all providers. This exemption, effective July 1, 2021, results in an increase from a 95% payment rate to a 100% payment rate for those services previously eligible for the 5% assessment.

Exhibit 11 lists all services previously eligible for the 5% assessment. For each of these services not performed at a UMMC-affiliated provider (which had already been exempt from the 5% assessment), we re-priced the second half CY 2021 experience from the 95% payment rate to the 100% payment rate. The overall adjustments by category of service are shown in Table 25.

An adjustment of 1.000 in Table 25 indicates that no change in provider reimbursement between the base period data and rating period is expected as a result of implementing the removal of the 5% provider assessment, whereas an adjustment of 1.053 ($=1.000 / 0.950$) would indicate the removal of the 5% provider assessment is applicable to all services within the category of service.

Table 25 Mississippi Division of Medicaid 5% Assessment Removal Adjustment by Category of Service	
Category of Service	5% Assessment Adjustment
Inpatient Hospital Services	1.000
Outpatient Hospital Services	1.001
Physician Services	1.010
Drug Services	1.000
Dental Services	1.026
Other Services	1.021
Total	1.005

Community Mental Health Centers (CMHC) were originally subject to the 5% assessment, but ultimately were declared ineligible for the assessment. In our analysis, we repriced CMHC claims when necessary to the 100% payment rate based on the dates the 5% assessment was in effect provided by each CCO.

Additionally, the July 1, 2021 reimbursement increase for certain preventative and diagnostic dental services was capped at 5% of the prior payment rate, as described in the "Dental Reimbursement Change" section below. For these services, reimbursement was increased by 5% over the prior 95% payment rate to a new payment rate of 99.75% to comply with that requirement. Non-preventative and non-diagnostic dental services, along with all non-dental services, were increased from 95% to 100%.

The adjustment was calculated separately by rate cell, reflecting the mix of services and the applicability of the 5% provider assessment specific to the given population.

The removal of the 5% assessment is shown in row (o) in Exhibit 2A.

Preventative and Diagnostic Dental Reimbursement Change

Per SB2799 signed into law on April 19, 2021, DOM will increase the payment rate for preventative and diagnostic dental services by 5% effective July 1, 2021 and by an additional 5% effective on both July 1, 2022 and July 1, 2023.

- **July 1, 2021 Dental Reimbursement Increase** – For dental services identified as preventative or diagnostic (defined as procedure codes D0100 through D1999) to which the 5% assessment were also applicable, the adjustment was already applied in the "Removal of 5% Assessment" section above. DOM provided guidance around how these two initiatives would be implemented.

For those preventative or diagnostic dental services not impacted by the 5% assessment, we determined the percentage of the first half of CY 2021 dental spend identified as diagnostic or preventative within each rate cell. We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the preventative and diagnostic services with a 0% reimbursement adjustment on other dental services.

- **July 1, 2022 and July 1, 2023 Dental Reimbursement Increases** – We determined the proportion of CY 2021 dental claims identified as preventative or diagnostic (defined as procedure codes D0100 through D1999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on preventative and diagnostic dental services with a 0% reimbursement adjustment on other dental services.

The cumulative preventive and diagnostic dental reimbursement change is shown in row (p) in Exhibit 2A.

Restorative Dental Reimbursement Change

Per HB657 signed into law on April 19, 2022, DOM will increase the payment rate for restorative dental services by 5% effective July 1, 2022 and an additional 5% on July 1, 2023. We determined the proportion of CY 2021 dental claims identified as restorative (defined as procedure codes D2000 through D2999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the restorative services with a 0% reimbursement adjustment on other dental services, after adjusting for the preventative and diagnostic reimbursement changes discussed above.

The cumulative restorative dental reimbursement change is shown in row (q) in Exhibit 2A.

Immaterial Program, Population, and Reimbursement Methodology Changes

There are several program, population, and reimbursement changes between the base period experience and SFY 2023 that we did not build an explicit adjustment into rates for, given the projected budget neutral or immaterial impact. These changes are described below.

- ICORT Reimbursement changes – per Medicaid State Plan Amendment (SPA) 20-0022 for Community Mental Health Services, DOM is revising the service definition and reimbursement for Intensive Community Outreach and Recovery Teams (ICORT) services effective April 1, 2021. We reviewed the fiscal estimates of this change and determined that the impact on capitation rates is projected to be immaterial.
- MYPAC reimbursement changes – DOM historically reimbursed providers for children receiving MYPAC services as a single combined payment on a per diem basis. Per guidance from CMS, the wraparound services and other ancillary therapeutic mental health services must be reimbursed separately.

Effective July 1, 2021, the wraparound services were reimbursed through a single monthly payment to the MYPAC providers. The ancillary therapeutic mental health services were reimbursed through a separate per diem rate. Following discussions with the MYPAC providers, the Mississippi Department of Mental Health, and DOM, revised rates were developed and are anticipated to be effective November 1, 2023. The revised rates restructure the reimbursement of the ancillary therapeutic health services to be an hourly rate with a separate rate for additional time beyond the first hour. The wraparound services will still be provided as a single monthly payment.

Milliman estimates that these reimbursement changes will be budget neutral, and thus, are not including an adjustment for these reimbursement changes in capitation rates.

- Tobacco Cessation – effective July 1, 2023, coverage for smoking cessation counseling services was expanded to cover up to 12 sessions per year. It is estimated that the impact to capitation rates for this change is negligible, so no adjustment was applied.

Step 3: Incorporate Delivery Costs into MA Adult and Pregnant Women Rate Cells

Effective July 1, 2020, MississippiCAN no longer paid maternity deliveries using a kick payment methodology and instead included these costs in the MA Adult and Pregnant Women rate cells. To provide more transparency on this transition, we projected the costs historically covered by the delivery kick payment separately on Exhibits 1 and 2A. These costs are also shown separately for the MA Adult and Pregnant Women rate cells. Exhibit 2B combines the costs for these deliveries into the MA Adult or Pregnant Women rate cell, as appropriate.

Step 4: Non-Service Expense Allowance

Administrative Expenses, Premium Tax, and Targeted Margin

The administrative allowance included in the capitation rate is intended to cover administrative costs, including the following:

- Case management
- Utilization management
- Claim processing and other IT functions
- Customer service
- Provider contracting and credentialing
- TPL and program integrity
- Member grievances and appeals
- Financial and other program reporting
- Local overhead costs
- Corporate overhead and business functions (e.g., legal, executive, human resources)

Exhibit 3 shows the build-up of the non-service expenses, comprised of the following components for SFY 2024:

- \$11.17 PMPM for fixed administrative costs
- 5.11% of revenue less directed payments for variable administrative costs
- 1.80% of revenue less directed payments for target underwriting margin and cost of capital
- 3.00% for the Mississippi premium tax

Table 26 displays the non-service expense allowance included in the SFY 2024 rates. All percentages of revenue are shown excluding MHAP, MAPS, and TREAT revenue, which are ultimately not at risk to the CCOs.

Table 26 Mississippi Division of Medicaid SFY 2024 MississippiCAN Non-Benefit Expenses		
	% of Revenue	PMPM
Fixed Costs ¹	2.19%	\$11.17
Variable Costs ²	5.11%	\$26.07
Premium Tax ²	3.00%	\$15.30
Margin ²	1.80%	\$9.18
Total	12.10%	\$61.73

¹ Included in the rate as a PMPM, equivalent % of revenue shown.

² Included in the rate as a % of Revenue, equivalent PMPM is shown.

The administrative expense allowance for SFY 2024 was developed by trending the fixed and variable allowances from CY 2021 financial data provided by the CCOs, adjusted for the results of administrative expense audits by Myers and Stauffer. Administrative expenses were trended by an average 3.8% increase per year. The 3.8% annual trend is a blend of actual employment cost index (ECI) data from CY 2021 through CY 2022 and an assumed 3.0% annual trend from CY 2022 to SFY 2024. The future 3.0% trend assumption is consistent with the average ECI annual change from CY 2018 through CY 2021. The ECI data reflects expected changes in wages and other services that comprise a majority of administrative costs.

Step 5: Adjust for Geographic Area

CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions (as defined in Appendix A): North, Central, or South. Table 27 shows the geographic area factor adjustments that are applied based on a beneficiary's region.

Table 27 Mississippi Division of Medicaid Area Factors			
Region	Area Factors		
	SSI	Adults and Deliveries	Children
North	0.910	0.951	0.988
Central	1.038	1.023	1.029
South	1.059	1.020	0.980

We developed the geographic area factors on a budget-neutral basis by blending projected claims PMPM across rate cell groupings weighted upon the statewide rate cell distribution for each region and reviewing the relative difference in PMPM cost for each region. We created three different rate cell groups (as shown in Table 4) to aggregate experience for similar rate cells, so that we could adequately reflect area factor differences among rate cells and still maintain credibility.

Exhibit 4 includes the resulting capitation rates for each region using these area factors.

Step 6: Adjust for Quality Withhold

Continuing in SFY 2024, a 1.0% quality withhold will be placed on capitation rates for the MississippiCAN program. The terms of the withhold arrangement are outlined in the contract with the CCOs. To earn back the withhold the CCOs must achieve HEDIS scores for the following conditions that are greater than or equal to 2.0% above the baseline HEDIS scores, with a percentage of the withhold assigned to each category. The benchmarks for SFY 2024 will be set based on the average of all CCO reported scores from calendar years 2020 and 2021 (prorated based on member months).

Each of the following HEDIS measures will be used to earn back one twelfth (approximately 8.33%) of the quality withhold, for approximately 83.33% total across all HEDIS measures:

- Well-Child First 30 months (W15 metrics impact the quality withhold; W30 is reporting only for SFY 2024):
 - Six or more visits for children 15 months of age
 - Two or more visits for children 30 months of age
- Immunization for Adolescents (IMA):
 - Combination 2: Meningococcal, Tdap, and HPV
- Anti-Depressant Management-Acute (AMM-AD):
 - Effective Acute Phase Treatment
- Follow-Up After Hospitalization for Mental Illness:
 - 30 Days – Ages 6 to 17
- Prenatal and Postpartum Care (PPC-AD):
 - Timeliness of Prenatal Care
- Comprehensive Diabetes Care:
 - HbA1c Testing
 - Blood Pressure Control
 - Eye Exams
- Adult and Children Asthma Control – Ages 5 to 64
- Adults Pharmacotherapy Management of COPD Exacerbation: Systemic Corticosteroid

DOM will be monitoring readmission rates reported as part of the QIPP in SFY 2024. For SFY 2024, this will be included as a scored metric for the quality withhold. DOM is requiring CCOs to improve their actual-to-expected potentially preventable hospital return (PPHR) rates by 2% compared to the baseline metrics from CY 2020 and CY 2021. This PPHR measure will be used to earn back 8.33% of the quality withhold.

New for SFY 2024, DOM will also be monitoring the cesarean section (C-section) rates among all births paid for by a CCO during the baseline period (CY 2021). To earn back the final 8.33% of the withhold a CCO must improve their individual C-section rate by 2% compared to the baseline period.

If a CCO does not have sufficient data to consider its HEDIS scores credible, DOM will not hold the CCO liable for not meeting the measurement. In this case, the portion of the incentive withheld related to that measurement will be returned to the CCO. After discussions with DOM about the metric development and expectations, we believe that a return of 100% of the withhold is reasonably achievable by the CCOs.

Exhibit 4 includes the resulting capitation rates for each region net of the quality withhold.

Step 7: Adjust For CCO-Specific Risk Score (if Applicable)

Risk Adjustment for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP Rate Cells

The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be further adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). Costs for the Breast and Cervical Cancer, Foster Care, and Pregnant Women populations are less variable, since they tend to utilize similar services across each population. In addition, some of the population sizes are too small from which to develop custom weights specific to the covered services and MississippiCAN reimbursement levels. Therefore, we do not risk adjust these populations. Since the risk adjustment is prospective, there is no historical diagnosis information from which to develop a risk score for newborns.

The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

To establish these risk scores, the CDPS + Rx risk adjuster will be run with risk weights consistent with services covered in MississippiCAN for the given time period. These risk weights are calculated using Mississippi FFS and encounter data for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP populations. In addition, a beneficiary must have at least six months of eligibility in the data year to be scored. If a beneficiary does not have enough data, they will receive a score based on demographic information, such as age and gender. We will monitor the percentage of CCO enrollees who are not scored and adjust the methodology if necessary.

Risk adjustment for SFY 2024 capitation payments will be based on CY 2022 or May 2022 to April 2023 FFS and encounter diagnosis data. Each CCO's adjusted risk factor will be retrospectively calculated based on actual enrollment data due to data issues that prevented these risk scores from being set prospectively. For the July 1, 2023 to December 31, 2023 risk adjustment period, the factor will be determined using actual enrollment from July 2023 to December 2023. Similarly, for the January 1, 2024 to June 30, 2024 risk adjustment period, the factor will be based on actual enrollment from January 2024 to June 2024. The planned schedule for risk score data sources and calculations is shown in Table 28.

Table 28 Mississippi Division of Medicaid CCO Capitation Rate Risk Adjustment Schedule SFY 2024 Capitation Payments			
Rate Cell	Capitation Payments	Diagnosis Source Data	Enrollment Source
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	July 2023 to December 2023	January 2022 to December 2022	July 2023 to December 2023
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	January 2024 to June 2024	May 2022 to April 2023	January 2024 to June 2024

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Risk Adjustment for the Foster Care Rate Cell

Starting in SFY 2021, the Foster Care rate cell is concurrently risk adjusted after the risk adjustment period ends. The Foster Care rate cell will be risk adjusted using a custom risk adjustment model that does not depend on the CDPS + Rx risk adjuster. After testing the predictive ability of several potential models, we determined the member's eligibility for either state or federal financial assistance was the most accurate indicator of the member's risk score. This status is captured by the money code field on DOM's enrollment records. Risk factors associated with a member's money code will be updated prior to risk adjustment for SFY 2024.

Unlike the other risk-adjusted populations, risk adjustment for the Foster Care rate cell will be applied concurrently after the risk adjustment period ends. Starting in early 2020, we noticed material changes in the composition of each CCO's membership by eligibility group, reflecting changes to how members are assigned to CCOs by DOM. The change in member mix has persisted, and will be exacerbated by the broader enrollment shifts expected through the end of SFY 2024. Given these impacts, as well as the data issues described above, foster care risk scores for SFY 2024 will be calculated and applied retrospectively, once final enrollment data is available and validated in the second half of 2024.

Application of Risk Scores

A CCO's capitation rate will be determined based upon the following formula:

CCO Capitation Rate = Base Capitation Rate x CCO Normalized Risk Factor

The base capitation rates are found in Exhibit 4.

The CCO normalized risk factor will equal the average risk factor across all beneficiaries that a CCO enrolls divided by the average risk factor for the rate cell's population. Regional risk scores will be normalized to ensure the risk adjustment process is revenue neutral across all CCOs.

Step 8: Directed Payments

DOM will process the capitation rate adjustments for multiple directed payments outside of the monthly capitation rate payment system in the form of payments to the CCOs for the actual amount paid to providers and the associated premium tax impact related to these payments. We will calculate and certify adjusted CCO-specific capitation rates at the conclusion of SFY 2024. This recertification is expected to be completed by June 2025.

MHAP Overview

Concurrent with the inclusion of inpatient hospital services in MississippiCAN capitation rates effective December 1, 2015, MHAP was established. This program helps to ensure sufficient access to inpatient and outpatient hospital services for the Medicaid population by including enhanced hospital reimbursement in the capitation rates.

MHAP is funded through a broad-based hospital assessment for facilities in Mississippi, state general revenues, and an intergovernmental transfer (IGT) for a facility in Memphis (located within a county contiguous to Mississippi). This provider assessment is outlined in Miss. Code Ann §43-13-145.

Per CMS's approval on January 12, 2018, beginning in SFY 2018 MHAP began to transition to directed payments according to the specifications and requirements of 42 CFR 438.6 et seq. Table 29 displays the two components of MHAP (FSA and QIPP) and the total dollars in each component from SFY 2022 to SFY 2024.

Table 29 MississippiCAN Capitation Rates MHAP Distribution by SFY			
SFY	MHAP FSA	MHAP-QIPP	Total MHAP
2022	\$285,603,168	\$247,507,788	\$533,110,956
2023	\$313,053,124	\$288,100,478	\$601,153,602
2024	\$733,764,648	\$788,549,237	\$1,522,313,885

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MHAP FSA

For SFY 2024, a payment of \$733.8 million is included as a directed FSA on inpatient and outpatient claims that will be paid monthly outside the capitation rates.

The preliminary FSA amounts are shown in column (c) of Exhibit 16, consistent with the program design that 65% of the \$733.8 million will be paid for inpatient hospital services, and 35% will be paid for outpatient hospital services using projected SFY 2024 membership. These calculations were performed across all MississippiCAN rate cells with each of the inpatient and outpatient FSA percentage impacts applied uniformly. This results in a larger proportion of the FSA funding included in rate cells with higher inpatient and outpatient utilization.

The estimated FSA is based on projected SFY 2024 membership and estimated inpatient and outpatient claim utilization. Due to actual vs. projected MississippiCAN membership and claim utilization, this estimated capitation adjustment may result in an overpayment or underpayment of the FSA in SFY 2024 if no adjustments are made. If membership and / or utilization is higher than expected, payments will be capped at the \$733.8 million funding amount. If membership and / or utilization is lower than expected, the final payments will be grossed up proportionally to meet the \$733.8 million funding amount. This reconciliation will be done on a PMPM basis at the end of SFY 2024, and the appropriate documentation will be provided to CMS.

The adjustments to capitation rates are consistent with the preprint that was filed with CMS for SFY 2024 on September 21, 2023. The control name for this preprint is MS_Fee_IPH.OPH_Amend_20230701-20240630.

The MHAP FSA additive adjustment is shown in column (c) in Exhibit 16. An additional allowance for premium tax on the MHAP FSA is included in column (d) in Exhibit 16.

MHAP QIPP

Beginning in SFY 2020, a quality incentive payment program (QIPP) will be a component of MHAP. Consistent with the preprint submitted to CMS, the QIPP will be paid as a uniform payment arrangement for SFY 2024. The goal of the QIPP is to utilize state and federal investments to improve the quality of care and health status of the Mississippi Medicaid population. The QIPP is envisioned to be a multi-year process with an increasing percentage of the payments linked to performance improvements achieved and maintained by the hospital industry.

For SFY 2024, the QIPP will consist of approximately \$788.5 million, which will be paid outside of the capitation rates on a quarterly basis. DOM will determine the payments made to facilities based on agreed upon performance measures. Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2024 to include a QIPP PMPM for each CCO, which will include a provision for premium tax.

The adjustments to capitation rates are consistent with the preprint that was filed with CMS for SFY 2024 on September 21, 2023. The control name for this preprint is MS_Fee_IPH.OPH_Amend_20230701-20240630.

The MHAP QIPP additive adjustment is shown in column (e) in Exhibit 16. An additional allowance for premium tax on the MHAP QIPP is included in column (f) in Exhibit 16.

TREAT Program

Beginning July 1, 2022, emergency ambulance reimbursement are proposed to be increased consistent with a \$438.6(c) directed payment for eligible providers. Subject to CMS approval, payments for the TREAT program are estimated to be \$20.6 million for SFY 2024 and will be paid outside the capitation rate as a uniform payment arrangement.

Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2024 to include a TREAT PMPM for each CCO, which will include a provision for premium tax. The adjustments to capitation rates are consistent with the preprint that was filed with CMS for SFY 2024 on October 31, 2023. The control name for this preprint is MS_Fee_Oth_Renewal_20230701-20240630.

The TREAT additive adjustment is shown in column (g) in Exhibit 16. An additional allowance for premium tax on the TREAT payments is included in column (h) in Exhibit 16.

Mississippi MAPS Program

Beginning in SFY 2020, the Mississippi Medicaid Access to Physician Services (MAPS) program will enhance payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The term “qualifying hospital” means a Mississippi state-owned academic health science center with a Level 1 trauma center, Level 4 neonatal intensive care nursery, an organ transplant program, and more than a four hundred (400) physician multispecialty practice group.

DOM will require that CCOs provide the same supplemental percentage increase, equal to 58.63% of Medicare rates, to all qualifying providers. Payments in SFY 2024 are expected to be \$39,420,290. Similar to MHAP, capitation rates will be retroactively adjusted for SFY 2024 to include a MAPS PMPM including a provision for premium tax for each CCO and rate cell based on actual membership and utilization. The appropriate documentation will be submitted to CMS at the time of this retroactive adjustment.

This program is being made under a \$438.6(c) payment arrangement consistent with the preprint that was approved by CMS for SFY 2024 on August 18, 2023. The control name for this preprint is MS_Fee.VBP_AMC_Renewal_20230701-20240630.

The MAPS additive adjustment is shown in column (i) in Exhibit 16. An additional allowance for premium tax on the MAPS is included in column (j) in Exhibit 16.

Table 30 below shows a summary of the MHAP, MAPS, and TREAT payments for SFY 2023 and SFY 2024.

Table 30 Mississippi Division of Medicaid Summary of Directed Payments by SFY		
	SFY 2023	SFY 2024
Total MHAP	\$601,153,602	\$1,522,313,885
MHAP FSA ¹	\$313,053,124	\$733,764,648
MHAP QIPP ¹	\$288,100,478	\$788,549,237
MAPS	\$38,018,361	\$39,420,290
TREAT ¹	\$14,740,472	\$20,616,966
Total Directed Payments	\$653,912,435	\$1,582,351,141

¹ Preprints for the SFY 2024 MHAP FSA, MHAP QIPP, and TREAT are pending CMS approval.

Step 9: Calculate Risk Corridor Settlements

Subject to CMS approval, DOM will implement two symmetrical risk corridors to address the uncertainty of medical costs given the unwinding of the COVID-19 PHE during SFY 2024 and the uncertainty of several current and anticipated high-cost medications.

High-Cost Pharmacy Risk Corridor

Some Medicaid members have conditions requiring very expensive drug treatments. These members are infrequent and not evenly distributed among the CCOs. To help mitigate the CCO’s risk, the state is introducing a high-cost pharmacy risk corridor for SFY 2024, subject to CMS approval. The risk corridor is applicable to total drug spend and related costs due to administration and monitoring for specified products of \$500,000 or more per year at a member level. Table 31 below, as well as Exhibit 17A, include a PMPM estimate of the costs that will be covered in the high-cost pharmacy risk corridor specific to each rate cell. Please see Exhibits 17C and 17D for the detailed calculations of the high-cost pharmacy targets below. The actual costs from the CCOs will be compared to these estimated costs for the settlement calculations.

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Table 31 Mississippi Division of Medicaid SFY 2024 High-Cost Pharmacy Risk Corridor SFY 2024 High-Cost Pharmacy Target PMPM	
Rate Cell	
Non-Newborn SSI / Disabled	\$65.99
Breast and Cervical Cancer	\$0.00
MA Adult	\$1.26
Pregnant Women	\$0.00
SSI / Disabled Newborn	\$0.00
Non-SSI Newborns 0 to 2 Months	\$24.96
Non-SSI Newborns 3 to 12 Months	\$7.36
Foster Care	\$9.58
MYPAC	\$15.71
MA Children	\$2.08
Quasi-CHIP	\$0.00
Total	\$11.63

Table 32 summarizes the share of gains and losses relative to the estimated high-cost pharmacy costs for each party.

Table 32 Mississippi Division of Medicaid Proposed High-Cost Pharmacy Risk Corridor Parameters		
CCO Gain / Loss	CCO Share of Gain / Loss in Corridor	DOM Share of Gain / Loss in Corridor
Less than -6.0%	0%	100%
-6.0% to -3.0%	50%	50%
-3.0% to +3.0%	100%	0%
+3.0% to +6.0%	50%	50%
Greater than +6.0%	0%	100%

The high-cost pharmacy risk corridor will be implemented using the following provisions:

- Estimated high-cost pharmacy costs are calculated separately for each rate cell based on the expected mix of high-cost products.
- Each rate cell's actual high-cost pharmacy costs will include payments made for the following:
 - All pharmacy claims with an NDC code billed through a retail or specialty pharmacy, regardless of where these claims are administered.
 - All drugs billed as medical claims with a HCPCS code that starts with the letter "J."
 - Inpatient stays for the administration and monitoring for select gene therapies and other select products. The estimated pharmacy costs included in the high-cost risk corridor include the following; however, DOM will monitor and revise the list of approved products if additional products are covered by DOM for use during SFY 2024.
 - lovotibeglogene autotemcel (lovo-cel)
 - exagamglogene autotemcel (exa-cel)
 - Zynteglo
 - Applicable script limits will be applied and the costs for those services will not be counted toward total member spend during that time period.

- The timing of the risk corridor settlements will occur during the initial and final settlements for the program-wide risk corridor. The high-costs pharmacy risk corridor will be calculated independent of the larger program-wide risk corridor.
 - The initial settlement will occur after the contract year is closed, using six months of runoff.
 - The final settlement will occur once the MLR audit has been completed. MLR audits are usually completed 12 to 18 months after the close of the SFY.
- The 87.5% minimum MLR provision (Federal MLR definition) in the CCO contract will apply after the risk corridor settlement calculation.

Program-Wide Risk Corridor

The capitation rates in this report reflect a target medical loss ratio (MLR), which measures the projected medical service costs as a percentage of the total capitation rates paid to the CCOs less the cost eligible for the high-cost pharmacy risk corridor. The risk corridor would limit CCO gains and losses if the actual MLR is different than the target MLR. Table 33 summarizes the share of gains and losses relative to the target MLR for each party.

Table 33 Mississippi Division of Medicaid Proposed Program-wide Risk Corridor Parameters		
MLR Claims Corridor	CCO Share of Gain / Loss in Corridor	DOM Share of Gain / Loss in Corridor
Less than Target MLR -2.0%	0%	100%
Target MLR -2.0% to Target MLR +2.0%	100%	0%
Greater than Target MLR +2.0%	0%	100%

For the purposes of the SFY 2024 program-wide risk corridor, a different definition of MLR will be used than the Federal MLR definition.

Exhibit 17B illustrates the calculation of the target MLR for each CCO. The final target MLR will vary for each CCO and will depend on several currently unknown factors, including the final risk scores for each risk-adjusted rate cell and the results of the final settlements for MHAP and MAPS. To ensure continued quality incentives, we assume that 100% of the quality withhold will be returned for the calculation of the target MLR. **Exhibit 17B does not reflect the actual target MLR to be used for any CCO, but is shown for illustrative purposes.** Moreover, Exhibit 17B does not reflect regional variations in capitation rates and risk scores (for applicable rate cells), which will be considered in the final risk corridor calculation. More detailed templates will be provided to the CCOs demonstrating the actual calculation to be used when developing risk corridor settlements.

The program-wide risk corridor will be implemented using the following provisions:

- Actual and target MLRs will be calculated separately for each CCO based on their actual enrollment mix.
- The numerator of each CCO's actual MLR will include state plan covered services incurred during the period of SFY 2024 with payments made to providers as defined in Exhibit C of the CCO Contract, including FFS payments, subcapitation payments, and settlement payments. Non-covered services will be removed from the numerator.
- The high-costs pharmacy risk corridor will be calculated independent of the larger program-wide risk corridor.
- Payments and revenue related to MHAP and MAPS will be included in the numerator and denominator of each CCO's actual MLR.
- Adjustments to revenue and claims resulting from the MLR audit will be incorporated into the calculation of each CCO's actual MLR.

The program-wide risk corridor settlement will occur after the contract year is closed, using six months of runout. An initial calculation will occur, but the final calculation will occur once the MLR audit has been completed. MLR audits are usually completed 12 to 18 months after the close of the SFY.

Other Program Considerations

The program includes a minimum federal MLR requirement of 87.5% of revenue. The sum of medical expenses and HCQI expenses must meet or exceed 87.5% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 87.5% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism will be calculated after the application of the risk corridor. Due to the implementation of a 2.0% risk corridor for SFY 2024, the minimum MLR will be greater than 87.5% and will not trigger any additional payments as of a result of this provision.

EXHIBITS 1 THROUGH 19

(Provided in Excel Format Only)

State of Mississippi Division of Medicaid
SFY 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 20, 2024

APPENDIX A

SFY 2024 Rate Cell Definitions

APPENDIX A

SFY 2024 RATE CELL DEFINITIONS

This section of our report outlines the rate cell definitions to be used for SFY 2024 for the populations addressed in this report. These definitions are summarized in Table 1 below. Capitation rate cells for SFY 2024 were kept consistent with the SFY 2023 capitation rate cells.

Table 1 Mississippi Division of Medicaid Rate Cell Definitions			
Rate Cell Grouping for Assumption Development	Rate Cell	Age Requirement	Category of Eligibility (COE)
Children	SSI / Disabled Newborns	Ages 0 to 12 months (13-month duration)	001, 019
Children	Non-SSI Newborns – age 0 to 2 months	Ages 0 to 2 months (3-month duration)	003, 026, 071, 088
Children	Non-SSI Newborns – age 3 to 12 months	Ages 3 to 12 months (10-month duration)	003, 026, 071, 088
Children	MA Children	Ages 1 to 19	072, 073
Children	Quasi-CHIP	Ages 1 to 19	074
Children	MYPAC	Ages 1 to 20	N/A, Lckn_cd = SED
Children	Foster Care	Ages 1+	003, 026
Adult	Pregnant Women	Ages 8 to 64	088
Adult	MA Adult	Ages 19+	075
SSI	Non-Newborn SSI / Disabled	Ages 1+	001, 019, 025
SSI	Breast and Cervical Cancer	N/A	027

All rate cell eligibility excludes the following individuals not enrolled in MississippiCAN:

- Retroactive membership
- Dual eligible members
- Institutionalized beneficiaries in a long-term care facility
- Individuals in the following waiver programs: WAL, WED, WMR, or WTB

GEOGRAPHIC REGIONS

DOM uses regional payments to better reflect enrollment for CCOs that enroll a disproportionate number of members from higher-cost or lower-cost regions of the state. DOM uses the three regions of North, Central, and South based on the county where a beneficiary lives. Table 2 displays the counties included in each region.

APPENDIX A

SFY 2024 RATE CELL DEFINITIONS

Table 2 Mississippi Division of Medicaid Geographic Regions by County		
North Region	Central Region	South Region
Alcorn	Calhoun	Adams
Attala	Chickasaw	Amite
Benton	Choctaw	Covington
Bolivar	Claiborne	Forrest
Carroll	Clarke	Franklin
Coahoma	Clay	George
DeSoto	Copiah	Greene
Grenada	Hinds	Hancock
Holmes	Issaquena	Harrison
Humphreys	Jasper	Jackson
Itawamba	Kemper	Jefferson
Lafayette	Lauderdale	Jefferson Davis
Lee	Leake	Jones
LeFlore	Lowndes	Lamar
Marshall	Madison	Lawrence
Montgomery	Monroe	Lincoln
Panola	Neshoba	Marion
Pontotoc	Newton	Pearl River
Prentiss	Noxubee	Perry
Quitman	Okitbbeh	Pike
Sunflower	Rankin	Stone
Tallahatchie	Scott	Walthall
Tate	Sharkey	Wayne
Tippah	Simpson	Wilkinson
Tishomingo	Smith	
Tunica	Warren	
Union	Webster	
Washington	Winston	
Yalobusha	Yazoo	

To determine a beneficiary's county, we used the following approach:

- County code included on a beneficiary's enrollment record in a given month.
- Absent (a), we mapped zip codes in the enrollment file to counties. In cases where a zip code is present in more than one county, we assumed that a zip code maps to a given county if:
 - The zip code shows up most frequently for a given county in the enrollment file (assuming a minimum of five occurrences).
 - Census information indicating the portion of a zip code's population that resides in each county. County is assigned to a zip code based on the county that includes the largest portion of a zip code's population.

If a beneficiary could not be assigned to a region, we excluded their eligibility and claim experience from the base data. This accounts for less than 0.1% of all current MississippiCAN eligible members in CY 2021.

APPENDIX B

Data Sources and Processing

APPENDIX B

DATA SOURCES AND PROCESSING

A number of data sources are used to develop the base data for the SFY 2024 MississippiCAN capitation rates.

- Medicaid eligibility data
- FFS claim data
- CCO encounter data
- CCO financial data

CY 2021 experience forms the primary base data for the SFY 2024 capitation rates.

This section of the report outlines each data source and steps to process the data.

MEDICAID ELIGIBILITY

DOM's MMIS vendor provided detailed Medicaid eligibility data for CY 2021. Before analyzing claims, we pared down the eligibility data to groups that are eligible to enroll in MississippiCAN, as defined in Appendix A of our report. In order to isolate data only for this group, we applied various filters as described in the rest of this appendix.

We relied upon the 'CAN' lock-in code for each eligibility span to include individuals enrolled in MississippiCAN in the base period. This assumes that MMIS-calculated enrollment criteria in the base period is consistent with SFY 2024. In addition, this removes opt-outs from voluntary populations (SSI children and Mississippi Band of Choctaw Indians) from the base data used to develop capitation rates. The opt-out rates for these populations have been stable in recent experience.

In addition, adjustments were made for the removal of retroactive eligibility periods and records not able to map to a geographic area.

Removal of Retroactive Eligibility Periods

Beneficiary enrollment in the FFS program can occur retroactively. When some individuals apply and qualify for Medicaid coverage, DOM reimburses claims, which occurred during the retroactive qualification period prior to their application. DOM backdates the eligibility of the individual to accommodate the retroactive coverage.

There is also a lag between the first date of eligibility and the date of enrollment in a CCO because Medicaid eligibility begins on the first day of the month in which the application was received. Once a Medicaid beneficiary signs up for a CCO, they will be enrolled on the first day of the subsequent month. The retroactive enrollment period is not covered by the CCO, so we removed retroactive eligibility included in the data provided to us using the following criteria:

- Eligibility months prior to the date that a beneficiary was added to the Medicaid enrollment file were removed. For example, if a beneficiary is active January 15, 2021, but they were added to the enrollment file February 1, 2021, we only included data on or after February 1, 2021 to exclude any retroactivity that may have occurred.

As of December 2015, newborns are enrolled in MississippiCAN at the time of their birth. Therefore, the retroactive eligibility exclusion is not applicable to these populations.

Geographic Area

If a beneficiary could not be assigned to a region, we excluded them from the base data. This accounts for less than 0.1% of all current MississippiCAN eligible member months in CY 2021. See Appendix A for additional information on the assignment of a geographic region.

FFS DATA

FFS claims are provided by DOM's MMIS vendor. These claims include any populations and / or services not included in MississippiCAN. We reviewed the FFS data for reasonability for several considerations, including the following, and verified it was consistent with monthly DOM cost reporting:

- Monthly claim counts per member
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Monthly units and payments by rate cell

APPENDIX B

DATA SOURCES AND PROCESSING

ENCOUNTER DATA

Encounter claims are included in the data provided by DOM's MMIS vendor. This data represents the actual amounts paid to the provider, so no repricing was done as part of the development of capitation rates. A claim processed by a CCO and submitted to DOM can be identified in the data using the following definition. Please note, the field names may vary from those provided in the encounter data submission from the CCOs.

- The 6th character of claim_id is '5' and cl_type is 'R,' or
- The 6th character of claim_id is '0' and cl_type is not 'R'

For all service categories we used CY 2021 encounter data with runout through April 2022.

Only encounter claims for members flagged as a MississippiCAN enrollee in the eligibility data were included in the base data. Encounter claims which failed to be mapped to a MississippiCAN CCO enrollee were removed.

CCO encounters are rigorously vetted by Myers and Stauffer as part of their reconciliation of encounters against CCOs' cash disbursement journals (CDJs). As part of this reconciliation, Myers and Stauffer identifies encounter claims that are duplicates, voids, or replacements for other encounter claims. Myers and Stauffer shares these findings with CCOs at a claim level to ensure they are accurately determining the final, non-duplicated version of each paid claim. As a result of their analysis, Myers and Stauffer are able to reconcile closely to the CCOs' CDJs (historically within 0.5% on a paid basis). We use summaries provided by Myers and Stauffer to identify final, non-duplicative claims consistent with their CDJ reconciliation.

Lastly, the encounter data is run through Milliman's *Health Cost Guidelines*[™] (HCGs) grouper to map the encounter data into detailed categories of service. These categories of service are then rolled up into six high level categories of service: inpatient, outpatient, physician, pharmacy, dental, and other. This mapping from detailed category of service to broad category of service is included as Exhibit 2.

After processing the data, we review the encounter data for several considerations, including:

- Monthly encounter counts per member (including and excluding \$0 payments)
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Quarterly units and payments relative to financials by COS
- Frequency of diagnosis completion by COS

FINANCIAL REPORTING DATA

For base data development, each CCO submitted a financial report reconciled to their organization's audited CY 2021 financial statements for Mississippi. Reports were submitted for CY 2021 including earned premium, claim experience with run out through April 2022 for CY 2021 data, best estimate IBNR claim amounts, subcapitated arrangements, non-service expenses, and membership. The reported membership was close in total to the MMIS enrollment, so we utilized the MMIS enrollment for rate development.

We worked with each CCO to validate that their reports were filled out consistently with the category of service and non-medical definitions used in the capitation rate development. Adjustments were made to the original submissions to help align these definitions.

CLAIMS ABOVE STATE-PLAN COVERED SERVICE LIMITS

When processing encounter data, we identify claims above Mississippi's state-plan covered service limits. These services are provided by some CCOs as an expanded benefit. However, as they are not state-plan-covered, these services are excluded from the base data when setting capitation rates. We identified three types of benefits offered by CCOs that are above state-plan covered service limits, described below. Children receiving EPSDT services, identified as individuals under the age of 21, are exempt from the service limits described below.

- **Physician Visits** – Members are limited to 16 physician visits within a state fiscal year. This limit is applied separately for psychiatric and non-psychiatric visits.

APPENDIX B

DATA SOURCES AND PROCESSING

To identify physician visits, claims are required to have a claim type of “C” (Clinics), “E” (Vision / Hearing), “K” (Services), or “P” (Practitioner / Physician). Additionally, the claim must have one of a list of specific procedure codes. Exhibits 3A and 3B show the required procedure codes for non-psychiatric and psychiatric physician visits, respectively.

- **Pharmacy Scripts** – The Mississippi state plan covers up to six prescription drugs per month. Scripts beyond the limit are identified by counting claims for the pharmacy category of service by member by month. Some scripts do not apply to the coverage limit, including:
 - Vaccinations
 - Clinician Administered Drugs and Implantable Drug System Devices (CADDs)
 - Insect Repellants
 - Insulin testing and other supplies
 - Tablet splitters
 - Sodium chloride for inhalation
 - Omnipod Dash 5 pack

Additionally, all monthly fills of Clozapine after the first fill do not apply to the script limit. Only the first script within each GCN category applies for Clozapine.

Exhibit 3C includes a list of all NDCs for the exclusions listed above.

- **Home Health Visits** – Up to 36 home health visits per state fiscal year are covered under Mississippi’s state plan. Home health visits are identified as claims with a claim type of “V” (Home Health) and a revenue code of 421, 441, 551, 571, or 589.

APPENDIX C

CMS Managed Care Rate Setting Guide Response

State of Mississippi Division of Medicaid

SFY 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 20, 2024

APPENDIX C

Responses to 2023-2024 CMS Managed Care Rate Development Guide

I. RESPONSES TO 2023-2024 CMS MANAGED CARE RATE DEVELOPMENT GUIDE

SECTION I. MEDICAID MANAGED CARE RATES

1. General Information

- Rate period – This report documents and certifies capitation rates in effect from July 1, 2023 to June 30, 2024 (SFY 2024).
- Actuarial rate certification – See Appendix D.
- Final capitation rates – See Exhibit 4.
- Program descriptions – Please refer to the following sections:
 - Section II – MississippiCAN program background
 - Appendix A – Rate cell definitions
 - Section IV: Step 6 – Background on the quality withhold applied in SFY 2024
- Medical Loss Ratio (MLR) – The program includes a minimum MLR requirement of 87.5% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses must meet or exceed 87.5% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 87.5% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices.
- Federal Medical Assistance Percentage (FMAP) – DOM receives an enhanced FMAP for COVID-19 vaccination administration fees, family planning services, breast and cervical cancer services, Indian health services, home health services, rehabilitation services, private duty nursing services, and Quasi-CHIP members that prior to the Affordable Care Act were covered under the CHIP program. Any differences in capitation rates according to covered populations are based on valid rate development standards and not based on the FMAP associated with the covered populations.
- Cross-subsidies – Rate cells do not cross-subsidize other rate cells.
- Rate change from SFY 2023 capitation rates – See Section I.
- Known rate amendments – The capitation rates included in this report will require recertification to account for the following:
 - CCO specific MHAP, MAPS, and TREAT payments made to providers. This initial certification includes a PMPM estimate of these amounts across all CCOs.
 - As noted in Section IV: Step 2, no acuity adjustment is included in the preliminary rates for acuity changes between June 2022 and SFY 2024 (an adjustment is applied to reflect changes resulting from the shift from MississippiCAN to FFS during CY 2021 as of June 2022). We will monitor enrollment and may consider making an adjustment if enrollment and population acuity differ materially from the base period data.
 - We anticipate that these adjustments will be made at the same time and an amendment will be submitted by February 2025.
- Impact of COVID-19 – See Section I.

2. Data

- Service data sources – See Appendix B.
- Validation and quality adjustments – See Section III for encounter data and financial reporting validation.

APPENDIX C

Responses to 2023-2024 CMS Managed Care Rate Development Guide

- Changes in data sources – SFY 2024 capitation rates use CY 2021 CCO encounter and financial data as the base period data sources. SFY 2023 capitation rates used a CY 2019 base data period, supplemented by CY 2018 data for smaller rate cells.
- Potential Future Data improvements – We anticipate no major enhancements to data collection in the future.
- Other data adjustments – None.
- Data reliance – See Appendix E.

3. Projected Benefit Costs and Trends

- Assumptions used to project benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Projected benefit cost trends:
 - Annual trend assumptions – Section IV: Step 1 outlines the trend assumptions from CY 2021 to the rating period. Please refer to Exhibits 7A to 7E for more information. Negative unit cost trends for CY 2021 to the rating period for inpatient hospital services shown in Table 10 are due to decreases in fee schedules over time.
 - Reimbursement changes – Section IV: Step 2 describes the reimbursement changes between the base period and rating period.
- In-lieu-of services – CCOs do not provide any material amounts of in-lieu-of services.
- Mental Health Parity and Addiction Equity Act – No additional services were necessary to add to the program to achieve compliance with the act.
- Retrospective eligibility periods – No consideration for retroactive eligibility periods is included in the base data or rate development, because such services are covered under FFS.
- Overpayments to providers – Section III, Step 1 summarizes recoveries for overpayments to providers by CCOs and how these recoveries are accounted for when summarizing the base data used to develop SFY 2024 capitation rates.
- Changes in covered services and benefits: There are three benefit changes between the base period and the rate year:
 - Expansion of postpartum coverage for pregnant women from 60 days to 12 months.
 - Members diagnosed with Hemophilia or Von Willebrand disease are now covered as part of the MississippiCAN program.
 - Zolgensma is now included as a covered therapy for SFY 2024 (was previously carved out).
- Other adjustments:
 - A population change adjustment was applied to reflect that some children in the Non-Newborn SSI / Disabled rate cell were historically moved into FFS after a PRTF stay. Starting in SFY 2022, these individuals will remain in the MississippiCAN program. This adjustment was applied in Section III: Step 1.
 - Area relativity factors – Please see Section IV: Step 3 for a discussion of the area factor development for the North, Central, and South regions.
- Final projected benefit costs – See Exhibit 4.
- Conditions of any litigation to which the state is subjected – Not applicable; no impact on rates.

APPENDIX C

Responses to 2023-2024 CMS Managed Care Rate Development Guide

4. Special Contract Provisions Related to Payment

- Incentive Arrangements – Not applicable.
- Withhold Arrangements – A quality withhold will be implemented for the SFY 2024 capitation rates. Please see Section IV: Step 4 for a description of the quality withhold.
- Risk sharing.
 - The program includes a minimum MLR requirement of 87.5% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses, must meet or exceed 87.5% of revenue. Revenue for premium taxes and HIF are excluded from the MLR calculation. If the 87.5% threshold is not met, MCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices.
 - For SFY 2024 the program is subject to a high-cost pharmacy risk corridor and a program-wide risk corridor. Please see Section IV: Step 9 for details of the implementation of these risk corridors.
 - Any risk-sharing arrangements are consistent with pricing assumptions and no remittance / payment is calculated using pricing assumptions.
- Delivery System and Provider Payment Initiatives – Not applicable.
- State Directed Payments.

The SFY 2024 capitation rates included in this certification reflect three directed payment arrangements that will be in effect for SFY 2024. The necessary information for the three state directed payment arrangements included in these preliminary capitation rates is summarized below.

Summary of All State Directed Payments			
Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?
MS_Fee_IPH.OPH_Amend_20230701-20240630	Uniform dollar or percentage increase	Enhanced hospital reimbursement for inpatient and outpatient hospital services for qualifying facilities	Separate payment term
MS_Fee.VBP_AMC_Renewal_20230701-20240630	Uniform dollar or percentage increase	Enhanced payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital	Separate payment term
MS_Fee_Oth_Renewal_20230701-20240630	Uniform dollar or percentage increase	Enhanced reimbursement for ambulance providers	Separate payment term

APPENDIX C

Responses to 2023-2024 CMS Managed Care Rate Development Guide

Summary of State Directed Payments Included as a Separate Payment Term					
Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	The Magnitude on a PMPM Basis	Confirmation the Rate Development is Consistent with the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period
See Exhibit 16					
MS_Fee_IPH.OPH_Amen d_20230701-20240630	FSA component of MHAP: \$733.8 million QIPP component of MHAP: \$788.5 million	Confirmed the actuarial certification covers this separate payment term	FSA component of MHAP: allocated across rate cells based on projected IP / OP spend. 65% is allocated based on projected IP spend and 35% is allocated based on projected OP spend. Ranges from \$37.29 to \$5,625.75 PMPM. QIPP component of MHAP: allocated as a fixed PMPM of \$157.86 across all rate cells.	Confirmed	Confirmed
MS_Fee.VBP_AMC_Ren ewal_20230701- 20240630	\$39.4 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 16 Allocated as a fixed PMPM of \$7.89 across all rate cells	Confirmed	Confirmed
MS_Fee_Oth_Renewal_ 20230701-20240630	\$20.6 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 16 Allocated as a fixed PMPM of \$4.13 across all rate cells	Confirmed	Confirmed

All services covered under the MississippiCAN program are subject to a minimum fee schedule of the FFS rate. This minimum fee schedule is set in accordance with the provisions of §438.6(c). It is our understanding that this type of minimum fee schedule does not necessitate prior approval from CMS and no preprint is required.

DOM has confirmed that there are no additional directed payments in the program that are not addressed in the certification.

DOM has also confirmed that there are no requirements regarding the reimbursement rates the managed care plans must pay to any providers unless specifically specified in the certification as a state directed payment or authorized under applicable law, regulation, or waiver.

- Pass Through Payments – Not applicable.

APPENDIX C

Responses to 2023-2024 CMS Managed Care Rate Development Guide

5. Projected Non-Benefit Costs

- Assumptions used to project non-benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Administrative cost data, projected costs, premium tax and margin – See Section IV: Step 4.
- Health Insurer Fee (HIF) treatment – Not applicable for SFY 2024.

6. Risk Adjustment and Acuity Adjustments

- Risk adjustment – See Section IV: Step 7. During the development of the custom Mississippi risk adjustment model, we measured an R-squared value of 11% for MA Children and Quasi-CHIP, 17% for MA Adults, and 26% for Non-Newborn SSI / Disabled. These weights were used in the most recent risk adjustment results (effective for January 2023 to June 2023) which resulted in risk scores that ranged from 0.94 to 1.04 depending on CCO, region and rate cell.

A custom risk adjustment model was developed for the Foster Care rate cell using information from members' enrollment information. This model was used in the most recent risk adjustment results (effective for January 2023 to June 2023) which resulted in risk scores that ranged from 0.91 to 1.28 depending on CCO and region.

- Acuity Adjustments – See Section IV: Step 2 for a description of the acuity adjustment applied to reflect changes in member acuity as a result of the member transition that occurred starting in June 2021.

SECTION II. MEDICAID MANAGED CARE RATES WITH LONG-TERM SERVICES

This section does not apply as MississippiCAN is not a long-term care service program.

SECTION III. NEW ADULT POPULATION CAPITATION RATES

This section does not apply as the state of Mississippi has not expanded coverage as a result of the Affordable Care Act.

APPENDIX D

Actuarial Certification of SFY 2024 MississippiCAN Capitation Rates

State of Mississippi Division of Medicaid
SFY 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 20, 2024



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

jill.bruckert@milliman.com

December 20, 2024

**Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2024 MississippiCAN Capitation Rates - Updated**

I, Jill A. Bruckert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the Mississippi Division of Medicaid (DOM) to perform an actuarial certification of the Mississippi Coordinated Access Network (MississippiCAN) coordinated care capitation rates for July 1, 2023 to June 30, 2024 (SFY 2024) for filing with the Centers for Medicare and Medicaid Services (CMS). I reviewed the capitation rate development and am familiar with the following regulation and guidance:

- The requirements of 42 CFR §438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7
- CMS "Appendix A, PAHP, PIHP, and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting dated November 10, 2014"
- 2023 to 2024 Medicaid Managed Care Rate Development Guide
- Actuarial Standard of Practice 49 and other applicable standards of practice

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2024 dated December 20, 2024 and accompanying this certification.

To the best of my information, knowledge, and belief, for the SFY 2024 period, the capitation rates offered by DOM are in compliance with the relevant requirements of 42 CFR 438.4. The attached actuarial report describes the capitation rate setting methodology. Please note, as outlined in the cover letter of the report, there are a number of outstanding program changes that will be incorporated into an update to SFY 2024 capitation rates.

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

In making my opinion, I relied upon the accuracy of the underlying claim and eligibility data records and other information prepared by DOM and participating CCOs. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary. The reliance letter from DOM is included in Appendix E of the rate report issued on December 20, 2024.

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

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



Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2024 MississippiCAN Capitation Rates
December 20, 2024
Page 2 of 2

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

A handwritten signature in black ink, reading 'Jill A. Bruckert', positioned above a horizontal line.

Jill A. Bruckert
Member, American Academy of Actuaries
Principal and Consulting Actuary
December 20, 2024

APPENDIX E

Data Reliance Letter

State of Mississippi Division of Medicaid
SFY 2024 MississippiCAN Preliminary Rate Calculation and Certification - Updated

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2024 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 20, 2024

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201



October 11, 2024

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

Re: Data Reliance for Actuarial Certification of SFY 2024 MississippiCAN Capitation Rates

Dear Jill:

I, Jennifer Wentworth, Deputy Administrator for Finance for the Mississippi Division of Medicaid (DOM), hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying MississippiCAN capitation rates was prepared under my direction and, to the best of my knowledge and belief, is accurate, complete, and consistent with the data used to develop the capitation rates. Capitation rates are effective July 1, 2023 to June 30, 2024.

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

1. Data from DOM's Medicaid Management Information Systems (MMIS) prior vendor (Conduent):
 - a. Encounter claims through August 2022.
 - b. Medicaid eligibility through August 2022.
2. Data from DOM's vendor Myers and Stauffer:
 - a. Detailed encounter claim status reports, including identification of duplicative or voided claims through September 5, 2022.
3. Data from DOM's vendor Change Healthcare:
 - a. PDL change analysis files and supporting exhibits for January 1, 2022 provided January 23, 2022 and January 31, 2022.
 - b. PDL change analysis files and supporting exhibits for January 1, 2023 provided January 4, 2023, January 9, 2023, January 31, 2023, and February 7, 2023.
 - c. Estimates of the impact of medications used to treat obesity.
4. Supporting documentation provided by DOM:
 - a. Data identification logic:

- i. Logic for identifying members eligible for the MYPAC rate cell.
 - ii. Logic for identifying members with hemophilia.
 - iii. Logic for identifying Institution for Mental Disease (IMD) facilities.
 - iv. Logic for identifying claims above state plan covered service limits.
 - v. Detailed mapping of services and providers previously eligible for the 5% assessment.
- b. Reimbursement and / or program changes:
- i. SB 2799 passed April 19, 2021.
 1. Removal of 5% provider assessment effective July 1, 2021.
 2. Preventative and diagnostic dental reimbursement increases of 5% effective July 1, 2021, July 1, 2022, and July 1, 2023, achieved through the removal of the 5% provider assessment.
 3. Fee schedules frozen effective July 1, 2021.
 - ii. HB 657 signed into law on April 19, 2022.
 1. Restorative dental reimbursement increases of 5% effective July 1, 2021, July 1, 2022, July 1, 2023, and July 1, 2024.
 2. Ability to change fee schedules with legislative notification. DOM will update reimbursement for the following provider types.
 - a. Pharmacy reimbursement effective July 1, 2021.
 - b. Physician fee schedules effective July 1, 2022.
 - c. Inpatient and outpatient fee schedules effective July 1, 2023.
 - iii. SB 2212 signed into law on March 16, 2023.
 1. Postpartum coverage for eligible members extended from 60 days to 12 months.
 - iv. Professional fee re-pricing impacts for July 2022 prepared by Conduent.
 - v. Inpatient DRG, outpatient APC, and professional fee re-pricing impacts for July 2023 prepared by Conduent.
 - vi. Estimates of uptake rates of certain gene therapies used to treat Hemophilia A, Hemophilia B, Sickle Cell Disease, Beta-Thalassemia, and Duchene Muscular Dystrophy.
 - vii. Confirmation that Zolgensma will be carved into the capitation rate for SFY 2024.
 - viii. Fee schedule updates for the following categories of service:
 1. Psychiatric Residential Treatment Facilities (PRTF) – January 2023 and January 2024
 2. Home Health Agency (HHA) – October 2022
 3. Prescribed Pediatric Extended Care (PPEC) – October 2022
 4. Private Duty Nursing (PDN) – October 2022
 5. Ambulatory Surgical Center (ASC) – January 2023 and October 2023

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6. Autism Spectrum Disorder (ASD) – January 2023
7. Federally Qualified Health Centers (FQHC) – January 2023
8. Rural Health Clinics (RHC) – January 2023
9. Orthodontia Services – October 2023
10. Behavioral Health Services (BHS) – October 2023
11. MYPAC Services – November 2023

vii. 2021 fee schedules for the following categories of service:

1. Psychiatric Residential Treatment Facilities (PRTF)
2. Home Health Agency (HHA)
3. Prescribed Pediatric Extended Care (PPEC)
4. Private Duty Nursing (PDN)
5. Ambulatory Surgical Center (ASC)
6. Autism Spectrum Disorder (ASD)
7. Federally Qualified Health Centers (FQHC)
8. Rural Health Clinics (RHC)
9. Behavioral Health Services (BHS)
10. MYPAC Services

c. Directed payments:

- i. SFY 2024 Mississippi Hospital Access Program (MHAP) total funding amount of \$1,522,313,885 along with splits for a quality incentive payment pool (QIPP) amount of \$788,549,237, the inpatient fee schedule adjustment (FSA) amount of \$488,253,899, and the outpatient FSA amount of \$245,510,749 to be used in capitation rate development.
- ii. SFY 2024 Mississippi Medicaid Access to Physician Services (MAPS) funding amount of \$39,420,290.
- iii. SFY 2024 Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) funding amount of \$20,616,966.

d. Historical data:

- i. Files summarizing individuals in the Non-Newborn SSI / Disabled rate cell moved to FFS due to a PRTF stay in CY 2021.
- ii. MLR reports through December 2022.
- iii. Capitation reports showing monthly membership through June 2024.

e. Other data:

- i. Quality withhold parameters for SFY 2024.
- ii. Program risk corridor parameters for SFY 2024.
- iii. High-cost drug risk corridor parameters for SFY 2024.
- iv. Other computer files and clarifying correspondence.

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Milliman, Inc.
October 11, 2024
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Milliman relied on DOM and their prior MMIS vendor for the collection and processing of the CCO encounter data. Milliman relied on Myers and Stauffer’s review of encounter data for duplicative or voided claims. Milliman relied on the CCOs to provide accurate CY 2021 financial data as certified by each CCO. Milliman did not audit the CCO financial data, or the encounter data, but did assess the data for reasonableness as documented in the capitation rate report.

Jennifer Westworth

Name
Deputy Administrator for Finance
Title
October 11, 2024
Date
10/11/2024 4:07:52 PM CDT

For more information about Milliman,
please visit us at:

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Milliman is among the world's largest providers of actuarial and related products and services. The firm has consulting practices in life insurance and financial services, property & casualty insurance, healthcare, and employee benefits. Founded in 1947, Milliman is an independent firm with offices in major cities around the globe.

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Caveats and Limitations
Mississippi Division of Medicaid
READ BEFORE PROCEEDING

Milliman has developed certain models to estimate the values included in these exhibits and appendices. The intent of the models was to estimate SFY 2024 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial exhibits and appendices from January 2021 to December 2021 with runout through April 2022, historical and projected reimbursement information, TPL recoveries, fee schedules, pharmacy and dispensing fee pricing, and other information from DOM, MississippiCAN CCOs, Myers and Stauffer, Change Healthcare, and CMS to calculate the preliminary MississippiCAN capitation rates shown in these exhibits and appendices. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2024 capitation rates.

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

Our exhibits and appendices are intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2024. The exhibits and appendices and the models used to develop the values in these exhibits and appendices may not be appropriate for other purposes. We anticipate the exhibits and appendices will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

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

Exhibit 1
Mississippi Division of Medicaid
All Regions SFY 2024 MississippiCAN Capitation Rate Development
CY 2021 Encounter Data

Non-Newborn SSI / Disabled Rate Cell								
Calculation Step		CY 2021 PMPM Cost Development		Category of Service				
				Inpatient Hospital	Outpatient Hospital	Physician	Drug	Total
a		CY 2021 Member Months		745,652	745,652	745,652	745,652	745,652
b		Total Allowed Dollars		\$125,809,685	\$141,651,417	\$149,503,672	\$244,050,225	\$716,471,465
c = b / a		CY 2021 PMPM Costs		\$168.72	\$189.97	\$200.50	\$327.30	\$960.87
d		Pharmacy Rate Freeze Repricing		1.000	1.000	1.000	1.003	1.001
e		Non-Covered Services		1.000	1.000	0.987	0.979	0.990
f		TPL Adjustment		0.999	0.999	0.999	0.999	0.999
g		IMD Removal		0.995	1.000	1.000	1.000	0.999
h		IMD Additions		1.000	1.000	1.000	1.000	1.000
i		SSI Children - COE Change		1.040	1.000	1.001	1.000	1.007
j		MYPAC Member Identification Change		1.000	1.000	1.000	1.000	1.000
k		Drug Services Rebate Adjustment		1.000	1.000	1.000	0.996	0.999
l		Missing Data		1.002	1.003	1.002	1.003	1.010
m		IBNR Adjustment		1.042	1.003	1.002	1.000	1.009
Product of c through m		Adjusted CY 2021 PMPM Costs		\$182.29	\$190.93	\$198.47	\$320.92	\$974.31

Breast and Cervical Cancer Rate Cell								
Calculation Step		CY 2021 PMPM Cost Development		Category of Service				
				Inpatient Hospital	Outpatient Hospital	Physician	Drug	Total
a		CY 2021 Member Months		1,708	1,708	1,708	1,708	1,708
b		Total Allowed Dollars		\$272,903	\$1,768,769	\$1,484,984	\$937,031	\$4,615,477
c = b / a		CY 2021 PMPM Costs		\$159.78	\$1,035.58	\$869.43	\$548.61	\$2,702.27
d		Pharmacy Rate Freeze Repricing		1.000	1.000	1.000	1.003	1.001
e		Non-Covered Services		1.000	1.000	0.994	0.986	0.995
f		TPL Adjustment		0.999	0.999	0.999	0.999	0.999
g		IMD Removal		1.000	1.000	1.000	1.000	1.000
h		IMD Additions		1.000	1.000	1.000	1.000	1.000
i		SSI Children - COE Change		1.000	1.000	1.000	1.000	1.000
j		MYPAC Member Identification Change		1.000	1.000	1.000	1.000	1.000
k		Drug Services Rebate Adjustment		1.000	1.000	1.000	0.996	0.999
l		Missing Data		1.002	1.002	1.002	1.003	1.004
m		IBNR Adjustment		1.057	1.003	1.003	1.000	1.006
Product of c through m		Adjusted CY 2021 PMPM Costs		\$169.16	\$1,039.77	\$867.59	\$541.45	\$2,712.67

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MA Adult Rate Cell - Non-Deliveries								
Calculation Step		CY 2021 PMPM Cost Development	Category of Service					
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
a		CY 2021 Member Months	570,832	570,832	570,832	570,832	570,832	570,832
b		Total Allowed Dollars	\$23,924,109	\$53,122,375	\$63,394,718	\$64,635,824	\$2,908,628	\$6,781,206
c = b / a		CY 2021 PMPM Costs	\$41.91	\$93.06	\$111.06	\$113.23	\$5.10	\$11.88
d		Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.003	1.000	1.000
e		Non-Covered Services	1.000	1.000	0.985	0.984	1.000	1.000
f		TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999
g		IMD Removal	0.999	1.000	1.000	1.000	1.000	1.000
h		IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000
i		SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000
j		MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000
k		Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000
l		Missing Data	1.003	1.003	1.002	1.003	1.003	1.141
m		IBNR Adjustment	1.050	1.003	1.002	1.000	1.001	1.002
Product of c through m		Adjusted CY 2021 PMPM Costs	\$44.01	\$93.56	\$109.71	\$111.53	\$5.11	\$13.56
								\$377.48

MA Adult Rate Cell - Deliveries								
Calculation Step		CY 2021 PMPM Cost Development	Category of Service					
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
a		CY 2021 Member Months	570,832	570,832	570,832	570,832	570,832	570,832
b		Total Allowed Dollars	\$15,299,062	\$45,698	\$4,164,062	\$88,015	\$110	\$94,154
c = b / a		CY 2021 PMPM Costs	\$26.80	\$0.08	\$7.29	\$0.15	\$0.00	\$0.16
d		Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.002	1.000	1.000
e		Non-Covered Services	1.000	1.000	0.985	0.984	1.000	1.000
f		TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999
g		IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000
h		IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000
i		SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000
j		MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000
k		Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000
l		Missing Data	1.003	1.004	1.002	1.003	1.000	1.109
m		IBNR Adjustment	1.052	1.003	1.002	1.000	1.003	1.002
Product of c through m		Adjusted CY 2021 PMPM Costs	\$28.23	\$0.08	\$7.21	\$0.15	\$0.00	\$0.18
								\$35.85

PMPM costs are calculated using allowed amounts for 3,308 MA Adult deliveries and total MA Adult rate cell membership.

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Pregnant Women Rate Cell - Non-Deliveries								
Calculation Step		Category of Service						
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2021 Member Months	117,512	117,512	117,512	117,512	117,512	117,512	117,512
b	Total Allowed Dollars	\$3,243,075	\$11,816,037	\$21,602,905	\$4,651,709	\$424,147	\$1,053,858	\$42,791,731
c = b / a	CY 2021 PMPM Costs	\$27.60	\$100.55	\$183.84	\$39.58	\$3.61	\$8.97	\$364.15
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.002	1.000	1.000	1.000
e	Non-Covered Services	1.000	1.000	0.999	0.999	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	1.000
l	Missing Data	1.002	1.003	1.002	1.003	1.003	1.126	1.006
m	IBNR Adjustment	1.053	1.003	1.003	1.000	1.001	1.002	1.006
Product of c through m Adjusted CY 2021 PMPM Costs		\$29.09	\$101.08	\$184.47	\$39.51	\$3.62	\$10.11	\$367.87

Pregnant Women Rate Cell - Deliveries								
Calculation Step		Category of Service						
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2021 Member Months	117,512	117,512	117,512	117,512	117,512	117,512	117,512
b	Total Allowed Dollars	\$50,872,673	\$115,480	\$13,684,426	\$241,212	\$109	\$181,826	\$65,095,726
c = b / a	CY 2021 PMPM Costs ¹	\$432.91	\$0.98	\$116.45	\$2.05	\$0.00	\$1.55	\$553.95
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.002	1.000	1.000	1.000
e	Non-Covered Services	1.000	1.000	0.999	0.999	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	1.000
l	Missing Data	1.003	1.003	1.003	1.003	1.004	1.120	1.003
m	IBNR Adjustment	1.050	1.003	1.003	1.000	1.001	1.002	1.040
Product of c through m Adjusted CY 2021 PMPM Costs		\$455.44	\$0.99	\$116.86	\$2.05	\$0.00	\$1.73	\$577.08

PMPM costs are calculated using allowed amounts for 12,884 Pregnant Women deliveries and total Pregnant Women rate cell membership.

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CY 2021 Encounter Data

SSI / Disabled Newborn Rate Cell									
Calculation Step		CY 2021 PMPM Cost Development	Category of Service						
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a		CY 2021 Member Months	5,146	5,146	5,146	5,146	5,146	5,146	5,146
b		Total Allowed Dollars	\$20,232,119	\$1,108,219	\$8,274,569	\$3,083,084	\$3,972	\$1,274,692	\$33,976,655
c = b / a		CY 2021 PMPM Costs	\$3,931.62	\$215.36	\$1,607.96	\$599.12	\$0.77	\$247.71	\$6,602.54
d		Pharmacy Rate Freeze Repricing	1,000	1,000	1,000	1,003	1,000	1,000	1,000
e		Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000
f		TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g		IMD Removal	1,000	1,000	1,000	1,000	1,000	1,000	1,000
h		IMD Additions	1,000	1,000	1,000	1,000	1,000	1,000	1,000
i		SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000
j		MYPAC Member Identification Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000
k		Drug Services Rebate Adjustment	1,000	1,000	1,000	0.996	1,000	1,000	1,000
l		Missing Data	1,003	1,003	1,002	1,002	1,001	1,021	1,003
m		IBNR Adjustment	1,052	1,004	1,003	1,000	1,001	1,002	1,032
Product of c through m		Adjusted CY 2021 PMPM Costs	\$4,143.17	\$216.57	\$1,614.00	\$598.78	\$0.77	\$253.28	\$6,826.57

Non-SSI Newborns 0 to 2 Months Rate Cell									
Calculation Step		CY 2021 PMPM Cost Development	Category of Service						
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a		CY 2021 Member Months	70,289	70,289	70,289	70,289	70,289	70,289	70,289
b		Total Allowed Dollars	\$92,607,914	\$3,570,419	\$25,757,273	\$797,579	\$41,723	\$912,987	\$123,687,896
c = b / a		CY 2021 PMPM Costs¹	\$1,317.53	\$50.80	\$366.45	\$11.35	\$0.59	\$12.99	\$1,759.70
d		Pharmacy Rate Freeze Repricing	1,000	1,000	1,000	1,002	1,000	1,000	1,000
e		Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000
f		TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g		IMD Removal	1,000	1,000	1,000	1,000	1,000	1,000	1,000
h		IMD Additions	1,000	1,000	1,000	1,000	1,000	1,000	1,000
i		SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000
j		MYPAC Member Identification Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000
k		Drug Services Rebate Adjustment	1,000	1,000	1,000	0.996	1,000	1,000	1,000
l		Missing Data	1,003	1,004	1,003	1,003	1,001	1,109	1,003
m		IBNR Adjustment	1,049	1,004	1,003	1,000	1,001	1,002	1,038
Product of c through m		Adjusted CY 2021 PMPM Costs	\$1,384.51	\$51.10	\$368.23	\$11.35	\$0.59	\$14.41	\$1,830.20

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Non-SSI Newborns 3 to 12 Months Rate Cell								
Calculation Step		Category of Service						
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2021 Member Months	238,386	238,386	238,386	238,386	238,386	238,386	238,386
b	Total Allowed Dollars	\$6,486,737	\$12,060,904	\$26,365,532	\$5,639,218	\$259,455	\$1,414,688	\$52,226,533
c = b / a	CY 2021 PMPM Costs	\$27.21	\$50.59	\$110.60	\$23.66	\$1.09	\$5.93	\$219.08
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.002	1.000	1.000	1.000
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	1.000
l	Missing Data	1.003	1.003	1.002	1.003	1.000	1.245	1.009
m	IBNR Adjustment	1.054	1.004	1.003	1.000	1.001	1.002	1.009
Product of c through m Adjusted CY 2021 PMPM Costs		\$28.72	\$50.87	\$111.04	\$23.66	\$1.09	\$7.40	\$222.78

Foster Care Rate Cell								
Calculation Step		Category of Service						
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2021 Member Months	79,772	79,772	79,772	79,772	79,772	79,772	79,772
b	Total Allowed Dollars	\$18,414,424	\$3,409,670	\$10,286,764	\$7,135,304	\$1,987,397	\$1,292,884	\$42,526,442
c = b / a	CY 2021 PMPM Costs	\$230.84	\$42.74	\$128.95	\$89.45	\$24.91	\$16.21	\$533.10
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.004	1.000	1.000	1.001
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	0.999	1.000	0.995	0.999	0.999	1.000	0.998
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	0.999
l	Missing Data	1.000	1.002	1.001	1.002	1.002	1.448	1.015
m	IBNR Adjustment	1.024	1.004	1.003	1.000	1.001	1.006	1.012
Product of c through m Adjusted CY 2021 PMPM Costs		\$235.89	\$42.95	\$128.59	\$89.51	\$24.93	\$23.58	\$545.45

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MYPAC Rate Cell								
Calculation Step	CY 2021 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2021 Member Months	9,969	9,969	9,969	9,969	9,969	9,969	9,969
b	Total Allowed Dollars	\$4,084,800	\$609,340	\$23,898,251	\$1,777,312	\$300,649	\$217,533	\$30,887,885
c = b / a	CY 2021 PMPM Costs	\$409.75	\$61.12	\$2,397.26	\$178.28	\$30.16	\$21.82	\$3,098.39
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.004	1.000	1.000	1.000
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	1.025	1.020	1.008	1.009	1.007	1.009	1.011
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	1.000
l	Missing Data	1.000	1.006	1.000	1.002	1.001	1.130	1.001
m	IBNR Adjustment	1.236	1.013	1.002	1.000	1.000	1.002	1.033
Product of c through m Adjusted CY 2021 PMPM Costs		\$518.77	\$63.45	\$2,418.41	\$180.04	\$30.37	\$24.91	\$3,235.96

MA Children Rate Cell								
Calculation Step	CY 2021 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2021 Member Months	3,350,545	3,350,545	3,350,545	3,350,545	3,350,545	3,350,545	3,350,545
b	Total Allowed Dollars	\$53,925,025	\$98,194,951	\$194,577,732	\$96,386,398	\$71,343,280	\$16,180,279	\$530,607,667
c = b / a	CY 2021 PMPM Costs	\$16.09	\$29.31	\$58.07	\$28.77	\$21.29	\$4.83	\$158.36
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.003	1.000	1.000	1.000
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	0.999	1.000	1.000	1.000	1.000	1.000	1.000
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	0.999
l	Missing Data	1.002	1.004	1.002	1.003	1.003	1.392	1.015
m	IBNR Adjustment	1.035	1.003	1.002	1.000	1.001	1.001	1.005
Product of c through m Adjusted CY 2021 PMPM Costs		\$16.65	\$29.49	\$58.23	\$28.80	\$21.35	\$6.72	\$161.23

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Quasi-CHIP Rate Cell								
Calculation Step	CY 2021 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2021 Member Months	348,610	348,610	348,610	348,610	348,610	348,610	348,610
b	Total Allowed Dollars	\$5,834,116	\$8,502,417	\$19,428,586	\$13,445,110	\$9,790,370	\$2,064,579	\$59,065,178
c = b / a	CY 2021 PMPM Costs	\$16.74	\$24.39	\$55.73	\$38.57	\$28.08	\$5.92	\$169.43
d	Pharmacy Rate Freeze Repricing	1.000	1.000	1.000	1.003	1.000	1.000	1.001
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
g	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	MYPAC Member Identification Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	0.999
l	Missing Data	1.002	1.005	1.002	1.003	1.004	1.308	1.014
m	IBNR Adjustment	1.039	1.003	1.002	1.000	1.001	1.001	1.005
Product of c through m Adjusted CY 2021 PMPM Costs		\$17.40	\$24.55	\$55.88	\$38.61	\$28.18	\$7.74	\$172.36

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions									
Non-Newborn SSI / Disabled Rate Cell									
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total	
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental		Other
a	Base Period Summaries	CY 2021 PMPM Costs	\$182.29	\$190.93	\$198.47	\$320.92	\$8.36	\$73.33	\$974.31
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.103	1.130	1.025	1.000	1.130	1.079
c		Charge Trend Factors CY 2021 to SFY 2024	0.957	1.039	1.062	1.103	1.012	1.065	1.051
d		Seasonal Virus Adjustment	0.964	0.991	0.992	0.998	1.000	0.997	0.990
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.040	1.000	1.002	1.013
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	0.999
j		Obesity Drug Coverage	1.000	1.000	1.000	1.007	1.000	1.000	1.002
k		Obesity Drug Coverage Savings	0.998	0.998	0.998	0.998	0.998	0.998	0.998
l		Gene Therapy Drug Coverage	1.031	1.000	1.000	1.204	1.000	1.000	1.074
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	0.998	1.000	1.000	0.999
n		Insulin Price Reduction	1.000	1.000	1.000	0.968	1.000	1.000	0.988
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.003	1.008	1.000	1.024	1.019	1.004
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.037	1.000	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000	1.000
Product of a through q			\$186.40	\$217.14	\$237.86	\$438.09	\$9.14	\$89.68	\$1,178.31
Breast and Cervical Cancer Rate Cell									
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total	
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental		Other
a	Base Period Summaries	CY 2021 PMPM Costs	\$169.16	\$1,039.77	\$867.59	\$541.45	\$3.57	\$91.13	\$2,712.67
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.103	1.130	1.025	1.000	1.130	1.095
c		Charge Trend Factors CY 2021 to SFY 2024	0.955	1.039	1.054	1.103	1.000	1.054	1.051
d		Seasonal Virus Adjustment	0.979	0.998	0.998	0.999	1.000	0.999	0.997
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.996	1.000	1.000	0.999
j		Obesity Drug Coverage	1.000	1.000	1.000	1.009	1.000	1.000	1.002
k		Obesity Drug Coverage Savings	0.999	0.999	0.999	0.999	0.999	0.999	0.999
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	0.995	1.000	1.000	0.999
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.002	1.000	1.024	1.013	1.001
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.049	1.000	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through q			\$169.99	\$1,188.20	\$1,031.74	\$611.17	\$3.83	\$109.67	\$3,114.60

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions								
MA Adult Rate Cell - Non-Deliveries								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries							
	CY 2021 PMPM Costs		\$44.01	\$93.56	\$109.71	\$111.53	\$5.11	\$13.56
\$377.48								
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.077	1.025	1.000	1.077
1.060								
c	Charge Trend Factors CY 2021 to SFY 2024		1.039	1.053	1.073	1.103	1.000	1.057
1.071								
d	Seasonal Virus Adjustment		0.925	0.981	0.983	0.998	1.000	0.994
0.981								
e	Population Changes	Acuity Adjustment: Shift to FFS	1.092	1.084	1.086	1.138	1.059	1.067
1.101								
f	Acuity Adjustment: PHE Unwind		0.987	0.987	0.987	0.987	0.987	0.987
0.987								
g	Postpartum Coverage Extension		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
h	Hemophilia Population Carve-In		1.001	1.001	1.001	1.004	1.000	1.000
1.002								
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.996	1.000	1.000
0.999								
j	Obesity Drug Coverage		1.000	1.000	1.000	1.022	1.000	1.000
1.007								
k	Obesity Drug Coverage Savings		0.995	0.995	0.995	0.995	0.995	0.995
0.995								
l	Gene Therapy Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
m	Gene Therapy Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
n	Insulin Price Reduction		1.000	1.000	1.000	0.982	1.000	1.000
0.994								
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.009	1.000	1.028	1.023
1.004								
p	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.035	1.000
1.000								
q	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.001	1.000
1.000								
Product of a through q	Projected SFY 2024 PMPM Costs		\$48.86	\$110.78	\$134.02	\$141.03	\$5.66	\$16.45
\$456.80								

MA Adult Rate Cell - Deliveries								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries							
	CY 2021 PMPM Costs		\$28.23	\$0.08	\$7.21	\$0.15	\$0.00	\$0.18
\$35.85								
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.077	1.025	1.000	1.077
1.076								
c	Charge Trend Factors CY 2021 to SFY 2024		1.039	1.053	1.073	1.103	1.000	1.057
1.046								
d	Seasonal Virus Adjustment		0.925	0.981	0.983	0.998	1.000	0.994
0.938								
e	Population Changes	Acuity Adjustment: Shift to FFS	1.092	1.084	1.086	1.138	1.059	1.067
1.091								
f	Acuity Adjustment: PHE Unwind		0.987	0.987	0.987	0.987	0.987	0.987
0.987								
g	Postpartum Coverage Extension		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
h	Hemophilia Population Carve-In		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.999	1.000	1.000
1.000								
j	Obesity Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
k	Obesity Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
l	Gene Therapy Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
m	Gene Therapy Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
1.000								
n	Insulin Price Reduction		1.000	1.000	1.000	0.982	1.000	1.000
1.000								
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.004	1.000	1.000	1.024
1.001								
p	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.030	1.000
1.000								
q	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.001	1.000
1.000								
Product of a through q	Projected SFY 2024 PMPM Costs		\$31.47	\$0.10	\$8.80	\$0.19	\$0.00	\$0.22
\$40.77								

PMPM costs are calculated using allowed amounts for 3,308 MA Adult deliveries and total MA Adult rate cell membership in 2021.

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions								
Pregnant Women Rate Cell - Non-Deliveries								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries							
	CY 2021 PMPM Costs		\$29.09	\$101.08	\$184.47	\$39.51	\$3.62	\$10.11
b	Trends							
	Utilization Trend Factors CY 2021 to SFY 2024		1.130	1.130	1.157	1.025	1.000	1.157
c	Charge Trend Factors CY 2021 to SFY 2024		1.039	1.052	1.073	1.103	1.001	1.057
d	Seasonal Virus Adjustment		0.892	0.983	0.990	0.993	1.000	0.993
	Population Changes							
e	Acuity Adjustment: Shift to FFS		1.000	1.000	1.000	1.000	1.000	1.000
f	Acuity Adjustment: PHE Unwind		1.000	1.000	1.000	1.000	1.000	1.000
g	Postpartum Coverage Extension		0.784	0.784	0.784	0.784	0.784	0.784
h	Hemophilia Population Carve-In		1.001	1.000	1.000	1.000	1.000	1.000
	Program Changes							
i	PDL Adjustment		1.000	1.000	1.000	0.996	1.000	1.000
j	Obesity Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
k	Obesity Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
l	Gene Therapy Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
m	Gene Therapy Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
n	Insulin Price Reduction		1.000	1.000	1.000	0.978	1.000	0.998
	Reimbursement Changes							
o	5% Assessment Removal Adjustment		1.000	1.000	1.005	1.000	1.027	1.020
p	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.042	1.000
q	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.010	1.000
Product of a through q			\$23.88	\$92.56	\$178.45	\$33.83	\$3.07	\$9.81
Pregnant Women Rate Cell - Deliveries								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries							
	CY 2021 PMPM Costs		\$455.44	\$0.99	\$116.86	\$2.05	\$0.00	\$1.73
b	Trends							
	Utilization Trend Factors CY 2021 to SFY 2024		1.077	1.077	1.077	1.025	1.000	1.077
c	Charge Trend Factors CY 2021 to SFY 2024		1.039	1.052	1.073	1.103	1.001	1.057
d	Seasonal Virus Adjustment		0.892	0.983	0.990	0.993	1.000	0.993
	Population Changes							
e	Acuity Adjustment: Shift to FFS		1.000	1.000	1.000	1.000	1.000	1.000
f	Acuity Adjustment: PHE Unwind		1.000	1.000	1.000	1.000	1.000	1.000
g	Postpartum Coverage Extension		0.517	0.517	0.517	0.517	0.517	0.517
h	Hemophilia Population Carve-In		1.000	1.000	1.000	1.000	1.000	1.000
	Program Changes							
i	PDL Adjustment		1.000	1.000	1.000	0.999	1.000	1.000
j	Obesity Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
k	Obesity Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
l	Gene Therapy Drug Coverage		1.000	1.000	1.000	1.000	1.000	1.000
m	Gene Therapy Drug Coverage Savings		1.000	1.000	1.000	1.000	1.000	1.000
n	Insulin Price Reduction		1.000	1.000	1.000	0.978	1.000	1.000
	Reimbursement Changes							
o	5% Assessment Removal Adjustment		1.000	1.000	1.004	1.000	1.025	1.029
p	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.044	1.000
q	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.009	1.000
Product of a through q			\$234.85	\$0.57	\$69.35	\$1.16	\$0.00	\$1.04

PMPM costs are calculated using allowed amounts for 12,884 Pregnant Women deliveries and total Pregnant Women rate cell membership in 2021.

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions								
SSI / Disabled Newborn Rate Cell								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries	CY 2021 PMPM Costs	\$4,143.17	\$216.57	\$1,614.00	\$598.78	\$0.77	\$6,826.57
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.000	1.077	1.103	1.025	1.000	1.033
c		Charge Trend Factors CY 2021 to SFY 2024	1.086	1.069	1.024	1.064	1.000	1.067
d		Seasonal Virus Adjustment	1.000	0.998	1.000	0.999	1.000	1.000
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	0.998
j		Obesity Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000
k		Obesity Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	1.000	1.000	1.000
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.002	1.000	1.014	1.002
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.107	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through q		Projected SFY 2024 PMPM Costs	\$4,497.63	\$248.94	\$1,827.53	\$635.82	\$0.87	\$7,520.28

Non-SSI Newborns 0 to 2 Months Rate Cell								
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	
a	Base Period Summaries	CY 2021 PMPM Costs	\$1,384.51	\$51.10	\$368.23	\$11.35	\$0.59	\$1,830.20
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.000	1.077	1.103	1.025	1.000	1.024
c		Charge Trend Factors CY 2021 to SFY 2024	1.086	1.065	1.020	1.064	1.000	1.070
d		Seasonal Virus Adjustment	1.000	0.992	0.999	0.966	1.000	0.999
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000
j		Obesity Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000
k		Obesity Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	3.846	1.000	1.017
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	1.000	1.000	1.000
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.005	1.000	1.008	1.001
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.095	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through q		Projected SFY 2024 PMPM Costs	\$1,502.66	\$58.12	\$415.80	\$44.83	\$0.66	\$2,039.06

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions									
Non-SSI Newborns 3 to 12 Months Rate Cell									
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service					Total	
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental		Other
a	Base Period Summaries	CY 2021 PMPM Costs	\$28.72	\$50.87	\$111.04	\$23.66	\$1.09	\$7.40	\$222.78
	Trends								
b		Utilization Trend Factors CY 2021 to SFY 2024	1.000	1.077	1.103	1.025	1.000	1.103	1.075
c		Charge Trend Factors CY 2021 to SFY 2024	0.974	1.065	1.074	1.064	1.000	1.046	1.058
d		Seasonal Virus Adjustment	0.984	0.992	0.997	0.984	1.000	0.999	0.993
	Population Changes								
e		Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Program Changes								
i		PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000	0.997
j		Obesity Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k		Obesity Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	1.389	1.000	1.000	1.038
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Reimbursement Changes								
o		5% Assessment Removal Adjustment	1.000	1.000	1.010	1.000	1.018	1.025	1.006
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.108	1.000	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through q		Projected SFY 2024 PMPM Costs	\$27.53	\$57.84	\$132.52	\$34.36	\$1.23	\$8.73	\$262.22

			Foster Care Rate Cell							
			Category of Service							
Calculation Step		SFY 2024 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total	
a	Base Period Summaries	CY 2021 PMPM Costs	\$235.89	\$42.95	\$128.59	\$89.51	\$24.93	\$23.58	\$545.45	
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.103	1.025	1.000	1.103	1.072	
c		Charge Trend Factors CY 2021 to SFY 2024	1.142	1.068	1.070	1.064	1.021	1.064	1.098	
d		Seasonal Virus Adjustment	1.000	1.003	1.001	1.000	1.000	1.000	1.001	
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
h		Hemophilia Population Carve-In	0.999	1.000	1.000	1.065	1.000	0.999	1.009	
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000	0.996	
j		Obesity Drug Coverage	1.000	1.000	1.000	1.010	1.000	1.000	1.002	
k		Obesity Drug Coverage Savings	0.999	0.999	0.999	0.999	0.999	0.999	0.999	
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000	
n		Insulin Price Reduction	1.000	1.000	1.000	0.992	1.000	1.000	0.999	
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.001	1.015	1.000	1.025	1.024	1.006	
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.043	1.000	1.002	
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.025	1.000	1.001	
Product of a through q			Projected SFY 2024 PMPM Costs	\$289.31	\$49.53	\$153.95	\$101.34	\$27.87	\$28.29	\$650.29

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions									
MYPAC Rate Cell									
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	Base Period Summaries	CY 2021 PMPM Costs	\$518.77	\$63.45	\$2,418.41	\$180.04	\$30.37	\$24.91	\$3,235.96
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.006	1.025	1.000	1.103	1.020
c		Charge Trend Factors CY 2021 to SFY 2024	1.030	1.066	1.051	1.064	1.024	1.032	1.048
d		Seasonal Virus Adjustment	1.000	1.002	1.000	1.000	1.000	1.000	1.000
e	Population Changes	Acuity Adjustment: Shift to FFS	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f		Acuity Adjustment: PHE Unwind	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000	0.999
j		Obesity Drug Coverage	1.000	1.000	1.000	1.008	1.000	1.000	1.000
k		Obesity Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l		Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	0.996	1.000	1.000	1.000
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.000	1.029	1.000	1.027	1.021	1.022
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.037	1.000	1.000
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.025	1.000	1.000
Product of a through q			\$575.37	\$72.92	\$2,632.17	\$192.01	\$33.94	\$28.95	\$3,535.36

MA Children Rate Cell									
MA Children Rate Cell									
Calculation Step		SFY 2024 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	Base Period Summaries	CY 2021 PMPM Costs	\$16.65	\$29.49	\$58.23	\$28.80	\$21.35	\$6.72	\$161.23
b	Trends	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.103	1.025	1.000	1.103	1.068
c		Charge Trend Factors CY 2021 to SFY 2024	1.032	1.066	1.072	1.064	1.020	1.036	1.057
d		Seasonal Virus Adjustment	1.002	1.004	1.003	1.001	1.000	1.000	1.002
e	Population Changes	Acuity Adjustment: Shift to FFS	1.125	1.028	1.061	1.129	1.088	1.060	1.076
f		Acuity Adjustment: PHE Unwind	1.023	1.023	1.023	1.023	1.023	1.023	1.023
g		Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h		Hemophilia Population Carve-In	1.000	1.001	1.000	1.017	1.000	1.000	1.003
i	Program Changes	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000	0.995
j		Obesity Drug Coverage	1.000	1.000	1.000	1.036	1.000	1.000	1.006
k		Obesity Drug Coverage Savings	0.995	0.995	0.995	0.995	0.995	0.995	0.995
l		Gene Therapy Drug Coverage	1.003	1.000	1.000	1.043	1.000	1.000	1.008
m		Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	0.998	1.000	1.000	1.000
n		Insulin Price Reduction	1.000	1.000	1.000	0.981	1.000	1.000	0.996
o	Reimbursement Changes	5% Assessment Removal Adjustment	1.000	1.001	1.011	1.000	1.026	1.023	1.008
p		Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.039	1.000	1.005
q		Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.029	1.000	1.004
Product of a through q			\$21.30	\$35.60	\$75.43	\$37.88	\$26.44	\$8.48	\$205.13

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2024 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions								
Quasi-CHIP Rate Cell								
		Category of Service						
Calculation Step	SFY 2024 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
	Base Period Summaries							
a	CY 2021 PMPM Costs	\$17.40	\$24.55	\$55.88	\$38.61	\$28.18	\$7.74	\$172.36
	Trends							
b	Utilization Trend Factors CY 2021 to SFY 2024	1.077	1.077	1.103	1.025	1.000	1.103	1.062
c	Charge Trend Factors CY 2021 to SFY 2024	1.028	1.066	1.072	1.064	1.029	1.033	1.056
d	Seasonal Virus Adjustment	1.002	1.005	1.003	1.001	1.000	1.000	1.002
	Population Changes							
e	Acuity Adjustment: Shift to FFS	1.125	1.028	1.061	1.129	1.088	1.060	1.081
f	Acuity Adjustment: PHE Unwind	1.023	1.023	1.023	1.023	1.023	1.023	1.023
g	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Hemophilia Population Carve-In	1.000	1.000	1.000	1.014	1.000	1.000	1.003
	Program Changes							
i	PDL Adjustment	1.000	1.000	1.000	0.974	1.000	1.000	0.994
j	Obesity Drug Coverage	1.000	1.000	1.000	1.040	1.000	1.000	1.009
k	Obesity Drug Coverage Savings	0.993	0.993	0.993	0.993	0.993	0.993	0.993
l	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	Gene Therapy Drug Coverage Savings	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Insulin Price Reduction	1.000	1.000	1.000	0.977	1.000	1.000	0.995
	Reimbursement Changes							
o	5% Assessment Removal Adjustment	1.000	1.000	1.011	1.000	1.026	1.025	1.009
p	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.038	1.000	1.006
q	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.020	1.000	1.003
Product of a through q	Projected SFY 2024 PMPM Costs	\$22.05	\$29.57	\$72.26	\$48.53	\$34.83	\$9.74	\$216.99

Exhibit 2B
Mississippi Division of Medicaid
All Regions SFY 2024 MississippiCAN Capitation Rate Development
MA Adult and Pregnant Women Aggregate Service PMPMs

MA Adult Rate Cell							
Projected SFY 2024 PMPM Cost Development	Category of Service						
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
Projected SFY 2024 PMPM Costs Net of Deliveries	\$48.86	\$110.78	\$134.02	\$141.03	\$5.66	\$16.45	\$456.80
Projected Delivery Costs PMPM	\$31.47	\$0.10	\$8.80	\$0.19	\$0.00	\$0.22	\$40.77
Projected SFY 2024 PMPM Costs Including Deliveries	\$80.32	\$110.88	\$142.82	\$141.22	\$5.66	\$16.67	\$497.58

¹ PMPM costs are calculated using allowed amounts for 3,308 MA Adult deliveries in 2021.

Exhibit 2B
Mississippi Division of Medicaid
All Regions SFY 2024 MississippiCAN Capitation Rate Development
MA Adult and Pregnant Women Aggregate Service PMPMs

Pregnant Women Rate Cell							
Projected SFY 2024 PMPM Cost Development	Category of Service						
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
Projected SFY 2024 PMPM Costs Net of Deliveries	\$23.88	\$92.56	\$178.45	\$33.83	\$3.07	\$9.81	\$341.61
Projected Delivery Costs PMPM	\$234.85	\$0.57	\$69.35	\$1.16	\$0.00	\$1.04	\$306.98
Projected SFY 2024 PMPM Costs Including Deliveries	\$258.73	\$93.13	\$247.80	\$34.99	\$3.07	\$10.85	\$648.58

¹ PMPM costs are calculated using allowed amounts for 12,884 Pregnant Women deliveries in 2021.

Exhibit 3 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Statewide Non-Service Expense Allocation Development										
	a	b	c	d	e = d × j	f	g = f × j	h	i = h × j	j = (b + c) / (1 - d - f - h)
Rate Cell	Projected SFY 2024 Membership	SFY 2024 PMPM Cost	Fixed Non-Service Expense Load	Non-Service Percentage	Non-Service PMPM	Margin Percentage	Margin PMPM	Premium Tax Percentage	Premium Tax PMPM	Total
Non-Newborn SSI / Disabled	713,375	\$1,178.31	\$11.17	5.11%	\$67.51	1.80%	\$23.77	3.00%	\$39.61	\$1,320.36
Breast and Cervical Cancer	947	\$3,114.60	\$11.17	5.11%	\$177.40	1.80%	\$62.45	3.00%	\$104.09	\$3,469.71
MA Adult	551,911	\$497.58	\$11.17	5.11%	\$28.87	1.80%	\$10.17	3.00%	\$16.94	\$564.73
Pregnant Women	175,053	\$648.58	\$11.17	5.11%	\$37.44	1.80%	\$13.18	3.00%	\$21.97	\$732.35
SSI / Disabled Newborn	7,065	\$7,520.28	\$11.17	5.11%	\$427.43	1.80%	\$150.48	3.00%	\$250.81	\$8,360.17
Non-SSI Newborns 0 to 2 Months	67,950	\$2,039.06	\$11.17	5.11%	\$116.36	1.80%	\$40.96	3.00%	\$68.27	\$2,275.83
Non-SSI Newborns 3 to 12 Months	234,084	\$262.22	\$11.17	5.11%	\$15.52	1.80%	\$5.46	3.00%	\$9.10	\$303.48
Foster Care	90,993	\$650.29	\$11.17	5.11%	\$37.54	1.80%	\$13.22	3.00%	\$22.03	\$734.25
MYPAC	13,368	\$3,535.36	\$11.17	5.11%	\$201.27	1.80%	\$70.86	3.00%	\$118.10	\$3,936.78
MA Children	2,821,371	\$205.13	\$11.17	5.11%	\$12.28	1.80%	\$4.32	3.00%	\$7.20	\$240.10
Quasi-CHIP	319,128	\$216.99	\$11.17	5.11%	\$12.95	1.80%	\$4.56	3.00%	\$7.60	\$253.27
Total	4,995,247	\$448.26	\$11.17	5.11%	\$26.07	1.80%	\$9.18	3.00%	\$15.30	\$509.99
		87.90%								

Exhibit 4 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Final SFY 2024 Capitation Rates						
Rate Cell	a SFY 2024 Statewide Capitation Rates	b Area Adjustments	c = a × b SFY 2024 Regional Capitation Rates	d = c × -1.00% Quality Withhold	e = c + d Total Rate at 1.0 Risk Score after Withhold	f Projected SFY 2024 Member Months
Non-Newborn SSI / Disabled	\$1,320.36					
North Region		0.910	\$1,201.06	(\$13.20)	\$1,307.16	713,375
Central Region		1.038	1,370.44	(\$12.01)	\$1,189.05	244,896
South Region		1.059	1,397.66	(\$13.70)	\$1,356.73	259,644
				(\$13.98)	\$1,383.68	208,835
Breast and Cervical Cancer	\$3,469.71					
North Region		0.910	\$3,156.19	(\$34.70)	\$3,435.02	947
Central Region		1.038	3,601.30	(\$31.56)	\$3,124.63	179
South Region		1.059	3,672.83	(\$36.01)	\$3,565.29	365
				(\$36.73)	\$3,636.10	404
MA Adult	\$564.73					
North Region		0.951	\$537.32	(\$5.65)	\$559.08	551,911
Central Region		1.023	577.83	(\$5.37)	\$531.94	166,853
South Region		1.020	576.03	(\$5.78)	\$572.05	185,364
				(\$5.76)	\$570.27	199,694
Pregnant Women	\$732.35					
North Region		0.951	\$696.80	(\$7.32)	\$725.03	175,053
Central Region		1.023	749.34	(\$6.97)	\$689.84	56,212
South Region		1.020	747.01	(\$7.49)	\$741.85	62,792
				(\$7.47)	\$739.54	56,049
SSI / Disabled Newborn	\$8,360.17					
North Region		0.988	\$8,256.42	(\$83.60)	\$8,276.57	7,065
Central Region		1.029	8,599.82	(\$82.56)	\$8,173.86	2,080
South Region		0.980	8,197.13	(\$86.00)	\$8,513.82	3,084
				(\$81.97)	\$8,115.15	1,902
Non-SSI Newborns 0 to 2 Months	\$2,275.83					
North Region		0.988	\$2,247.59	(\$22.76)	\$2,253.07	67,950
Central Region		1.029	2,341.07	(\$22.48)	\$2,225.11	21,286
South Region		0.980	2,231.45	(\$23.41)	\$2,317.66	24,738
				(\$22.31)	\$2,209.13	21,926
Non-SSI Newborns 3 to 12 Months	\$303.48					
North Region		0.988	\$299.71	(\$3.03)	\$300.44	234,084
Central Region		1.029	312.18	(\$3.00)	\$296.71	73,573
South Region		0.980	297.56	(\$3.12)	\$309.05	85,736
				(\$2.98)	\$294.58	74,775
Foster Care	\$734.25					
North Region		0.988	\$725.14	(\$7.34)	\$726.91	90,993
Central Region		1.029	755.30	(\$7.25)	\$717.89	26,774
South Region		0.980	719.93	(\$7.55)	\$747.74	27,117
				(\$7.20)	\$712.73	37,102
MYPAC	\$3,936.78					
North Region		0.988	\$3,887.92	(\$39.37)	\$3,897.41	13,368
Central Region		1.029	4,049.62	(\$38.88)	\$3,849.04	4,563
South Region		0.980	3,860.00	(\$40.50)	\$4,009.13	4,046
				(\$38.60)	\$3,821.40	4,759
MA Children	\$240.10					
North Region		0.988	\$237.12	(\$2.40)	\$237.70	2,821,371
Central Region		1.029	246.98	(\$2.37)	\$234.75	876,676
South Region		0.980	235.42	(\$2.47)	\$244.51	1,014,288
				(\$2.35)	\$233.06	930,407
Quasi-CHIP	\$253.27					
North Region		0.988	\$250.13	(\$2.53)	\$250.74	319,128
Central Region		1.029	260.53	(\$2.50)	\$247.62	103,227
South Region		0.980	248.33	(\$2.61)	\$257.92	117,778
				(\$2.48)	\$245.85	98,124
Total Capitation Dollars						
Statewide Capitation Rates			\$2,547,508,341			
Regional Capitation Rates			\$2,547,508,341			

Exhibit 5 Mississippi Division of Medicaid SFY 2023 to SFY 2024 Rate Change ¹													
	Non- Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi- CHIP	Total - Aggregated with Actual CY 2021 MMs	Total - Aggregated with Projected SFY 2024 MMs
Membership													
Actual CY 2021 MMs	745,652	1,708	570,832	117,512	5,146	70,289	238,386	79,772	9,969	3,350,545	348,610	5,538,421	N/A
Projected SFY 2024 MMs	713,375	947	551,911	175,053	7,065	67,950	234,084	90,993	13,368	2,821,371	319,128	N/A	4,995,247
SFY 2023 Capitation Rate	\$1,208.34	\$3,879.26	\$555.24	\$1,155.43	\$8,881.39	\$2,045.26	\$287.41	\$720.51	\$4,153.40	\$233.88	\$236.44	\$466.43	\$500.43
Base Period Data Update	0.968	0.838	0.912	0.936	0.899	1.039	0.957	0.955	0.895	0.892	0.935	0.936	0.937
Restate CY 2021 to SFY 2023 Trends	1.011	1.019	1.023	1.064	0.983	0.979	1.023	0.965	1.001	1.020	1.018	1.014	1.015
Restate CY 2021 to CY 2022 PDL Adjustment ²	1.001	1.001	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.001
Remove SFY 2023 Population Acuity Adjustment ³	1.000	1.000	0.981	1.000	1.000	1.000	1.000	1.000	1.000	0.973	0.973	0.989	0.990
Other Restated Assumptions ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.001	1.001	1.000	1.000
Updates Relative to SFY 2023 Assumptions	0.980	0.854	0.916	0.996	0.884	1.017	0.979	0.922	0.896	0.886	0.927	0.940	0.943
SFY 2023 to SFY 2024 Utilization Trends	1.027	1.034	1.019	1.035	1.013	1.010	1.028	1.026	1.007	1.024	1.021	1.024	1.024
SFY 2023 to SFY 2024 Unit Cost Trends ²	1.019	1.021	1.031	1.027	1.054	1.060	1.015	1.068	1.041	1.021	1.022	1.026	1.027
Seasonal Virus Adjustment	0.990	0.998	0.979	0.944	1.000	0.999	0.994	1.001	1.000	1.002	1.002	0.991	0.989
Acuity Adjustment: Shift to FFS ¹	1.000	1.000	1.092	1.000	1.000	1.000	1.000	1.000	1.000	1.068	1.072	1.033	1.030
Acuity Adjustment: PHE Unwind ³	1.000	1.000	0.988	1.000	1.000	1.000	1.000	1.000	1.000	1.021	1.021	1.005	1.005
MYPAC Member Identification Change ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.998	1.011	1.000	1.000	1.000	1.000
Postpartum Coverage Extension ²	1.000	1.000	1.000	0.653	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.982	0.972
PDL CY 2022 to CY 2023 Adjustment ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.999	1.000	0.999	0.999	1.000	1.000
Obesity Drug Coverage ²	1.002	1.002	1.006	1.000	1.000	1.000	1.000	1.001	1.000	1.006	1.008	1.004	1.003
Obesity Drug Coverage Savings ²	0.998	0.999	0.996	1.000	1.000	1.000	1.000	0.999	1.000	0.996	0.994	0.997	0.997
Gene Therapy Drug Coverage ²	1.071	1.000	1.000	1.000	1.000	1.016	1.035	1.000	1.000	1.007	1.000	1.029	1.029
Gene Therapy Drug Coverage Savings ²	0.999	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Hemophilia Population Carve-In ²	1.012	1.000	1.001	1.000	1.000	1.000	1.000	1.008	1.000	1.003	1.003	1.006	1.006
Insulin / Inhaler Price Reduction ²	0.988	0.999	0.995	0.999	1.000	1.000	1.000	0.999	1.000	0.997	0.995	0.994	0.994
SFY 2024 Preventative and Diagnostic Dental Reimbursement Change ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.002	1.001	1.001
SFY 2024 Restorative Dental Reimbursement Change ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.001	1.000	1.000
Update Admin	1.006	0.995	1.003	0.972	0.998	1.007	1.006	1.003	0.998	1.005	1.007	1.004	1.003
Preliminary SFY 2024 Rate Change	1.093	0.894	1.017	0.634	0.941	1.113	1.056	1.019	0.948	1.027	1.071	1.032	1.019
SFY 2024 Rate Change - Excluding Program Changes ²	1.001	0.876	0.988	0.946	0.893	1.033	1.006	0.948	0.901	0.994	1.045	0.993	0.991
SFY 2024 Rate Change - Excluding COVID-19 Adjustments ³	1.093	0.894	0.961	0.634	0.941	1.113	1.056	1.019	0.948	0.968	1.005	1.004	0.995

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.
² Program change that increases or decreases total program costs outside of the control of the CCOs.
³ COVID-19 adjustments include the acuity change resulting from the member shift to FFS.

Exhibit 6
Mississippi Division of Medicaid
SFY 2024 MississippiCAN Capitation Rate Development
Service Category to Milliman HCGs Grouper Category Mapping

Broad Category of Service			Broad Category of Service		
MR Line	of Service	Description	MR Line	of Service	Description
I11a	Inpatient Hospital	Medical	P40a	Physician	Preventive Other - General
I11b	Inpatient Hospital	Rehabilitation	P40b	Physician	Preventive Other - Colonoscopy
I12	Inpatient Hospital	Surgical	P40c	Physician	Preventive Other - Mammography
I13a	Inpatient Hospital	Psychiatric - Hospital	P40d	Physician	Preventive Other - Lab
I13b	Inpatient Hospital	Psychiatric - Residential	P41	Physician	Preventive Immunizations
I14a	Inpatient Hospital	Substance Use Disorders - Hospital	P42	Physician	Preventive Well Baby Exams
I14b	Inpatient Hospital	Substance Use Disorders - Residential	P43	Physician	Preventive Physical Exams
I21a	Inpatient Hospital	Mat Norm Delivery	P44	Physician	Vision Exams
I21b	Inpatient Hospital	Mat Norm Delivery - Mom/Baby Cmbnd	P45	Physician	Hearing and Speech Exams
I22a	Inpatient Hospital	Mat Csect Delivery	P51a	Physician	ED Visits and Observation Care - Observation Care
I22b	Inpatient Hospital	Mat Csect Delivery - Mom/Baby Cmbnd	P51b	Physician	ED Visits and Observation Care - ED Visits
I23a	Inpatient Hospital	Well Newborn - Normal Delivery	P53	Physician	Physical Therapy
I23b	Inpatient Hospital	Well Newborn - Csect Delivery	P54	Physician	Cardiovascular
I23c	Inpatient Hospital	Well Newborn - Unknown Delivery	P55b	Physician	Radiology IP - CT Scan
I24	Inpatient Hospital	Other Newborn	P55c	Physician	Radiology IP - MRI
I25	Inpatient Hospital	Maternity Non-Delivery	P55d	Physician	Radiology IP - PET
I31	Inpatient Hospital	SNF	P55e	Physician	Radiology IP - General - Therapeutic
O10a	Outpatient Hospital	Observation - Without ED	P55f	Physician	Radiology IP - General - Diagnostic
O10b	Outpatient Hospital	Observation - With ED	P56a	Physician	Radiology OP - General - Therapeutic
O11	Outpatient Hospital	Emergency Department	P56b	Physician	Radiology OP - General - Diagnostic
O12a	Outpatient Hospital	Surgery - Hospital Outpatient	P57a	Physician	Radiology OP - CT/MRI/PET - CT Scan
O12b	Outpatient Hospital	Surgery - Ambulatory Surgery Center	P57b	Physician	Radiology OP - CT/MRI/PET - MRI
O13a	Outpatient Hospital	Radiology General - Therapeutic	P57c	Physician	Radiology OP - CT/MRI/PET - PET
O13b	Outpatient Hospital	Radiology General - Diagnostic	P58c	Physician	Radiology Office - General - Therapeutic
O14a	Outpatient Hospital	Radiology - CT/MRI/PET - CT Scan	P58d	Physician	Radiology Office - General - Diagnostic
O14b	Outpatient Hospital	Radiology - CT/MRI/PET - MRI	P58e	Physician	Radiology Office - General - Radiology Center - Therapeutic
O14c	Outpatient Hospital	Radiology - CT/MRI/PET - PET	P58f	Physician	Radiology Office - General - Radiology Center - Diagnostic
O15	Outpatient Hospital	Pathology/Lab	P59a	Physician	Radiology Office - CT/MRI/PET - CT Scan
O16a	Outpatient Hospital	Pharmacy - General	P59b	Physician	Radiology Office - CT/MRI/PET - MRI
O16b	Outpatient Hospital	Pharmacy - Chemotherapy	P59c	Physician	Radiology Office - CT/MRI/PET - PET
O17	Outpatient Hospital	Cardiovascular	P59d	Physician	Radiology Office - CT/MRI/PET - CT Scan - Radiology Center
O18	Outpatient Hospital	PT/OT/ST	P59e	Physician	Radiology Office - CT/MRI/PET - MRI - Radiology Center
O31a	Outpatient Hospital	Psychiatric - Partial Hospitalization	P59f	Physician	Radiology Office - CT/MRI/PET - PET - Radiology Center
O31b	Outpatient Hospital	Psychiatric - Intensive Outpatient	P61a	Physician	Pathology/Lab - Inpatient & Outpatient - Inpatient
O32a	Outpatient Hospital	Substance Use Disorders - Partial Hospitalization	P61b	Physician	Pathology/Lab - Inpatient & Outpatient - Outpatient
O32b	Outpatient Hospital	Substance Use Disorders - Intensive Outpatient	P63a	Physician	Pathology/Lab - Office - General
O41a	Outpatient Hospital	Other - General	P63b	Physician	Pathology/Lab - Office - Venipuncture
O41b	Outpatient Hospital	Other - Blood	P63c	Physician	Pathology/Lab - Office - Independent Lab
O41d	Outpatient Hospital	Other - Clinic	P65	Physician	Chiropractor
O41e	Outpatient Hospital	Other - Diagnostic	P66	Physician	Outpatient Psychiatric
O41f	Outpatient Hospital	Other - Dialysis	P67	Physician	Outpatient Substance Use Disorders
O41g	Outpatient Hospital	Other - DME/Supplies	P82c	Other	Home Health Care - Home Health (Medicare Covered)
O41h	Outpatient Hospital	Other - Trtmt/Spclty Svcs	P82d	Other	Home Health Care - Hospice - Home Based
O41j	Outpatient Hospital	Other - Pulmonary	P82e	Other	Home Health Care - Hospice - Facility Based
O41l	Outpatient Hospital	Other - Urgent Care	P82f	Other	Home Health Care - Home Health (Not Medicare Covered)
O51a	Outpatient Hospital	Preventive - General	P82g	Other	Home Health Care - Personal/Custodial Care
O51b	Outpatient Hospital	Preventive - Colonoscopy	P82h	Other	Home Health Care - Adult Day Health Care
O51c	Outpatient Hospital	Preventive - Mammography	P82i	Other	Home Health Care - Home Respite Care
O51d	Outpatient Hospital	Preventive - Lab	P82j	Other	Home Health Care - Personal Emergency Response System (PER)
P11	Physician	Inpatient Surgery	P82k	Other	Home Health Care - Home Modification
P13	Physician	Inpatient Anesthesia	P82l	Other	Home Health Care - Home Delivered Meals
P14	Physician	Outpatient Surgery	P82m	Other	Home Health Care - Assisted Living Facility
P15	Physician	Office Surgery	P82n	Other	Home Health Care - Ancillary Services Provided in the Home
P16	Physician	Outpatient Anesthesia	P83	Other	Ambulance
P21a	Physician	Maternity - Normal Deliveries	P84	Other	DME and Supplies
P21b	Physician	Maternity - Cesarean Deliveries	P85	Other	Prosthetics
P21c	Physician	Maternity - Non-Deliveries	P89	Other	Benefits Glasses/Contacts
P21d	Physician	Maternity - Ancillary	P99a	Other	Benefits Other - General
P21e	Physician	Maternity - Anesthesia	P99b	Other	Benefits Other - Hearing Aids
P31d	Physician	Inpatient Visits - Medical	P99c	Dental	Benefits Other - Dental
P31e	Physician	Inpatient Visits - Psychiatric	P99d	Other	Benefits Other - Acupuncture
P31f	Physician	Inpatient Visits - Substance Use Disorders	P99e	Physician	Benefits Other - Reproductive Medicine
P32c	Physician	Office/Home Visits - PCP	P99f	Physician	Benefits Other - Temporary Codes
P32d	Physician	Office/Home Visits - Specialist	P99g	Physician	Benefits Other - Documentation
P33	Physician	Urgent Care Visits	P99h	Other	Benefits Other - Non-Emergency Transportation
P34a	Physician	Office Administered Drugs - General	P99z	Physician	Benefits Other - Unclassified
P34b	Physician	Office Administered Drugs - Chemotherapy	R73a	Drug	Prescription Drugs - Preferred Generic
P35	Physician	Allergy Testing	R73b	Drug	Prescription Drugs - Non-Preferred Generic
P36	Physician	Allergy Immunotherapy	R74a	Drug	Prescription Drugs - Preferred Brand
P37a	Physician	Miscellaneous Medical - General	R74b	Drug	Prescription Drugs - Non-Preferred Brand
P37b	Physician	Miscellaneous Medical - Gastroenterology	R75	Drug	Prescription Drugs - Specialty
P37c	Physician	Miscellaneous Medical - Ophthalmology	R76	Drug	Prescription Drugs - Preventive
P37d	Physician	Miscellaneous Medical - Otorhinolaryngology	P81a	Drug	Prescription Drugs - Non-Specialty Generic
P37e	Physician	Miscellaneous Medical - Vestibular Function Tests	P81b	Drug	Prescription Drugs - Non-Specialty Multi Source Brand
P37f	Physician	Miscellaneous Medical - Non-Invas. Vasc. Diag. Studies	P81c	Drug	Prescription Drugs - Non-Specialty Single Source Brand
P37g	Physician	Miscellaneous Medical - Pulmonology	P81e	Drug	Prescription Drugs - OTC
P37h	Physician	Miscellaneous Medical - Neurology	P81g	Drug	Prescription Drugs - Specialty
P37i	Physician	Miscellaneous Medical - Central Nervous System Tests	P82a	Other	Home Health Care - HH
P37j	Physician	Miscellaneous Medical - Dermatology	P82b	Other	Home Health Care - Hospice
P37k	Physician	Miscellaneous Medical - Dialysis			

Exhibit 7A
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
All Populations
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	437,026	\$86.50	\$77.48	\$115.53	\$21.65	\$15.69	\$316.85
February 2019	435,583	\$80.85	\$74.80	\$111.39	\$18.89	\$14.65	\$300.58
March 2019	434,251	\$85.53	\$69.87	\$104.45	\$19.29	\$15.27	\$294.41
April 2019	434,281	\$87.54	\$73.29	\$109.31	\$20.35	\$15.92	\$306.41
May 2019	435,675	\$90.09	\$72.36	\$104.12	\$17.36	\$15.46	\$299.38
June 2019	436,565	\$82.44	\$71.11	\$92.65	\$18.07	\$14.58	\$278.86
July 2019	435,173	\$88.21	\$72.69	\$102.80	\$22.24	\$16.44	\$302.37
August 2019	432,187	\$85.54	\$69.69	\$111.63	\$21.36	\$17.29	\$305.52
September 2019	431,636	\$87.42	\$68.97	\$108.18	\$19.90	\$16.41	\$300.88
October 2019	432,302	\$95.85	\$74.88	\$117.81	\$22.84	\$16.64	\$328.01
November 2019	433,427	\$82.01	\$67.43	\$105.33	\$18.22	\$15.89	\$288.87
December 2019	435,721	\$89.91	\$70.10	\$104.46	\$16.26	\$15.73	\$296.46
CY 2019³	434,486	\$86.82	\$71.89	\$107.30	\$19.70	\$15.83	\$301.55
January 2020	434,689	\$86.00	\$75.31	\$118.23	\$20.51	\$17.12	\$317.17
February 2020	431,725	\$77.26	\$70.14	\$110.33	\$18.85	\$15.62	\$292.19
March 2020	429,908	\$79.49	\$57.36	\$93.29	\$12.09	\$15.60	\$257.83
April 2020	430,080	\$70.80	\$36.87	\$69.21	\$1.36	\$12.26	\$190.49
May 2020	434,572	\$78.98	\$50.27	\$79.66	\$10.07	\$13.44	\$232.43
June 2020	443,044	\$84.24	\$59.23	\$94.56	\$16.20	\$14.67	\$268.91
July 2020	450,515	\$84.53	\$59.66	\$95.01	\$17.26	\$14.09	\$270.55
August 2020	456,517	\$81.78	\$57.40	\$95.31	\$17.07	\$14.81	\$266.38
September 2020	460,496	\$77.45	\$59.33	\$97.21	\$17.20	\$14.71	\$265.90
October 2020	464,815	\$78.72	\$61.03	\$101.08	\$17.71	\$15.39	\$273.93
November 2020	470,075	\$72.65	\$57.46	\$91.18	\$15.39	\$14.46	\$251.13
December 2020	474,757	\$81.17	\$56.97	\$91.42	\$15.23	\$14.79	\$259.59
CY 2020³	448,433	\$79.42	\$58.42	\$94.71	\$14.91	\$14.75	\$262.21
January 2021	478,618	\$83.96	\$56.01	\$93.41	\$15.95	\$15.35	\$264.68
February 2021	481,326	\$78.01	\$49.65	\$83.17	\$13.85	\$13.16	\$237.84
March 2021	483,763	\$88.81	\$64.61	\$102.79	\$18.93	\$16.31	\$291.44
April 2021	483,831	\$82.62	\$65.10	\$102.72	\$17.01	\$15.58	\$283.03
May 2021	486,505	\$89.83	\$65.74	\$97.09	\$14.58	\$15.55	\$282.79
June 2021	488,764	\$90.47	\$71.21	\$100.28	\$16.40	\$16.31	\$294.67
July 2021	473,300	\$92.69	\$69.44	\$100.66	\$16.80	\$16.28	\$295.88
August 2021	452,472	\$95.29	\$66.44	\$118.76	\$16.48	\$16.48	\$313.44
September 2021	439,660	\$86.53	\$65.13	\$110.61	\$17.76	\$15.76	\$295.78
October 2021	428,718	\$82.31	\$65.92	\$105.75	\$17.29	\$16.28	\$287.54
November 2021	419,121	\$79.04	\$63.87	\$105.00	\$17.93	\$14.92	\$280.76
December 2021	412,166	\$77.60	\$64.48	\$99.74	\$15.63	\$14.64	\$272.08
CY 2021³	460,687	\$85.60	\$63.97	\$101.66	\$16.55	\$15.55	\$283.33
Annual PMPM Trends							
CY 2017 to CY 2018		4.2%	1.9%	3.8%	-7.1%	3.3%	2.6%
CY 2018 to CY 2019		5.6%	3.3%	7.1%	-1.2%	7.0%	5.2%
CY 2019 to CY 2020		-8.5%	-18.7%	-11.7%	-24.3%	-6.8%	-13.0%
CY 2020 to CY 2021		7.8%	9.5%	7.3%	11.0%	5.5%	8.1%
CY 2019 to CY 2021 (Annualized)		-0.7%	-5.7%	-2.7%	-8.3%	-0.9%	-3.1%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPPS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2021 to be directly comparable by month.

² CY 2019, and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021 IBNR as reported by CCOs in financial templates.

Exhibit 7B
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
SSI+ Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	63,961	\$198.49	\$227.72	\$234.68	\$10.35	\$63.22	\$734.48
February 2019	63,934	\$174.55	\$213.66	\$215.75	\$8.92	\$61.05	\$673.94
March 2019	63,712	\$178.25	\$206.58	\$219.74	\$9.05	\$63.21	\$676.83
April 2019	63,901	\$183.67	\$216.12	\$228.05	\$9.79	\$64.70	\$702.34
May 2019	63,768	\$192.93	\$218.66	\$225.59	\$8.69	\$65.24	\$711.12
June 2019	63,938	\$161.30	\$210.08	\$207.72	\$7.82	\$61.95	\$648.87
July 2019	64,036	\$182.68	\$210.90	\$221.09	\$10.18	\$65.35	\$690.21
August 2019	63,876	\$174.75	\$208.22	\$231.43	\$10.27	\$68.17	\$692.83
September 2019	63,899	\$197.16	\$202.17	\$220.41	\$9.59	\$66.36	\$695.70
October 2019	63,899	\$212.62	\$217.25	\$239.40	\$10.98	\$67.57	\$747.81
November 2019	63,924	\$183.14	\$184.61	\$202.28	\$8.38	\$66.06	\$644.48
December 2019	64,030	\$188.47	\$194.57	\$205.18	\$7.61	\$64.27	\$660.09
CY 2019³	63,907	\$185.67	\$209.21	\$220.94	\$9.30	\$64.76	\$689.89
January 2020	63,847	\$188.69	\$227.31	\$235.15	\$10.35	\$69.68	\$731.17
February 2020	63,841	\$166.78	\$206.59	\$215.75	\$9.39	\$63.40	\$661.91
March 2020	63,589	\$177.91	\$178.94	\$196.06	\$5.45	\$67.59	\$625.95
April 2020	63,509	\$136.51	\$139.65	\$147.97	\$1.42	\$56.28	\$481.84
May 2020	63,644	\$168.38	\$170.86	\$170.42	\$4.78	\$58.83	\$573.27
June 2020	63,879	\$188.02	\$192.57	\$205.46	\$7.49	\$63.46	\$657.01
July 2020	63,809	\$176.37	\$190.92	\$198.00	\$7.89	\$58.04	\$631.22
August 2020	63,777	\$168.74	\$180.23	\$198.29	\$8.43	\$60.01	\$615.70
September 2020	63,769	\$164.87	\$190.15	\$204.42	\$8.48	\$61.31	\$629.23
October 2020	63,695	\$173.79	\$192.96	\$208.70	\$8.84	\$65.02	\$649.30
November 2020	63,697	\$153.24	\$180.18	\$185.71	\$7.20	\$61.32	\$587.66
December 2020	63,532	\$168.63	\$183.01	\$186.59	\$7.42	\$64.28	\$609.93
CY 2020³	63,716	\$169.33	\$186.11	\$196.04	\$7.26	\$62.43	\$621.18
January 2021	63,329	\$164.04	\$175.72	\$193.00	\$7.92	\$67.64	\$608.32
February 2021	63,319	\$164.52	\$160.45	\$172.52	\$6.83	\$57.26	\$561.58
March 2021	62,918	\$191.50	\$201.95	\$224.12	\$9.05	\$69.76	\$696.38
April 2021	62,480	\$167.44	\$200.97	\$211.08	\$8.53	\$67.08	\$655.09
May 2021	62,352	\$190.37	\$202.93	\$203.42	\$8.55	\$66.37	\$671.65
June 2021	62,201	\$175.93	\$219.60	\$214.45	\$8.69	\$69.37	\$688.05
July 2021	62,317	\$211.08	\$208.91	\$203.42	\$7.72	\$68.87	\$700.01
August 2021	62,105	\$200.79	\$189.03	\$212.11	\$8.56	\$70.09	\$680.58
September 2021	61,811	\$185.05	\$196.20	\$213.21	\$9.21	\$67.49	\$671.16
October 2021	61,544	\$163.32	\$196.58	\$210.11	\$8.68	\$69.10	\$647.78
November 2021	61,417	\$164.31	\$192.55	\$200.52	\$8.73	\$63.19	\$629.29
December 2021	61,244	\$156.75	\$186.37	\$188.01	\$7.32	\$61.65	\$600.10
CY 2021³	62,253	\$177.93	\$194.27	\$203.83	\$8.32	\$66.49	\$650.83
Annual PMPM Trends							
CY 2017 to CY 2018		1.5%	2.8%	5.9%	-9.1%	2.5%	3.2%
CY 2018 to CY 2019		5.5%	4.2%	6.1%	-7.0%	7.1%	5.2%
CY 2019 to CY 2020		-8.8%	-11.0%	-11.3%	-21.9%	-3.6%	-10.0%
CY 2020 to CY 2021		5.1%	4.4%	4.0%	14.5%	6.5%	4.8%
CY 2019 to CY 2021 (Annualized)		-2.1%	-3.6%	-4.0%	-5.5%	1.3%	-2.9%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPPS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2021 to be directly comparable by month.

² CY 2019, and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021 IBNR as reported by CCOs in financial templates.

Exhibit 7C
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Adults Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	52,746	\$35.19	\$122.19	\$148.00	\$8.16	\$13.39	\$326.93
February 2019	52,322	\$34.35	\$109.07	\$132.17	\$6.83	\$12.22	\$294.64
March 2019	52,133	\$38.90	\$109.80	\$131.68	\$6.78	\$11.63	\$298.78
April 2019	52,042	\$43.33	\$115.77	\$139.16	\$8.18	\$12.41	\$318.85
May 2019	52,603	\$47.01	\$113.80	\$141.06	\$6.80	\$13.08	\$321.76
June 2019	52,901	\$39.49	\$110.21	\$129.08	\$5.90	\$12.31	\$297.00
July 2019	53,101	\$41.79	\$122.26	\$140.13	\$6.16	\$13.15	\$323.50
August 2019	52,700	\$39.94	\$113.94	\$143.42	\$6.94	\$14.34	\$318.58
September 2019	52,760	\$40.08	\$107.63	\$135.36	\$5.97	\$13.46	\$302.50
October 2019	52,643	\$43.55	\$118.05	\$148.56	\$6.95	\$14.38	\$331.49
November 2019	52,387	\$37.49	\$101.11	\$126.50	\$5.09	\$13.30	\$283.49
December 2019	52,385	\$35.02	\$106.72	\$129.86	\$5.03	\$12.96	\$289.60
CY 2019³	52,560	\$39.68	\$112.55	\$137.08	\$6.57	\$13.05	\$308.93
January 2020	51,740	\$47.01	\$115.91	\$151.37	\$6.45	\$14.50	\$335.23
February 2020	51,070	\$39.72	\$104.73	\$136.29	\$6.13	\$13.03	\$299.89
March 2020	50,820	\$32.10	\$89.82	\$124.16	\$5.60	\$12.13	\$263.82
April 2020	50,697	\$23.90	\$59.10	\$100.82	\$2.82	\$9.86	\$196.49
May 2020	51,903	\$38.45	\$83.27	\$118.67	\$4.70	\$11.84	\$256.94
June 2020	53,590	\$39.78	\$99.56	\$137.25	\$7.08	\$12.05	\$295.72
July 2020	55,460	\$45.56	\$102.92	\$136.26	\$6.52	\$12.38	\$303.63
August 2020	56,368	\$52.63	\$99.06	\$129.72	\$6.01	\$12.32	\$299.74
September 2020	57,006	\$35.69	\$93.39	\$131.10	\$6.19	\$12.16	\$278.53
October 2020	57,418	\$33.33	\$96.68	\$132.78	\$5.91	\$12.76	\$281.47
November 2020	58,070	\$33.87	\$94.78	\$119.53	\$5.02	\$11.71	\$264.91
December 2020	58,626	\$35.48	\$92.22	\$126.45	\$5.05	\$11.49	\$270.69
CY 2020³	54,397	\$38.13	\$94.29	\$128.70	\$5.62	\$12.19	\$278.92
January 2021	59,089	\$39.84	\$90.80	\$121.41	\$5.19	\$12.05	\$269.28
February 2021	59,414	\$28.31	\$79.03	\$104.49	\$4.63	\$9.52	\$225.97
March 2021	59,864	\$35.90	\$101.24	\$130.34	\$5.66	\$11.77	\$284.91
April 2021	60,010	\$32.59	\$99.73	\$127.33	\$6.30	\$10.74	\$276.69
May 2021	60,641	\$38.33	\$97.19	\$119.76	\$4.84	\$11.06	\$271.18
June 2021	61,139	\$41.28	\$103.00	\$130.16	\$5.18	\$11.45	\$291.07
July 2021	59,248	\$47.82	\$97.38	\$123.79	\$4.15	\$11.35	\$284.49
August 2021	56,422	\$67.01	\$98.19	\$139.10	\$4.58	\$12.62	\$321.51
September 2021	55,101	\$49.25	\$97.16	\$133.62	\$4.71	\$11.77	\$296.51
October 2021	53,607	\$39.49	\$97.95	\$123.31	\$4.31	\$11.66	\$276.72
November 2021	52,343	\$44.99	\$89.25	\$123.24	\$4.42	\$11.37	\$273.27
December 2021	51,472	\$40.21	\$97.08	\$122.43	\$4.01	\$11.75	\$275.48
CY 2021³	57,363	\$42.09	\$95.67	\$124.92	\$4.83	\$11.43	\$278.92
Annual PMPM Trends							
CY 2017 to CY 2018		-6.2%	5.7%	1.3%	-14.4%	4.5%	1.4%
CY 2018 to CY 2019		-5.8%	-1.3%	2.4%	-14.4%	5.1%	-0.4%
CY 2019 to CY 2020		-3.9%	-16.2%	-6.1%	-14.4%	-6.6%	-9.7%
CY 2020 to CY 2021		10.4%	1.5%	-2.9%	-14.1%	-6.2%	0.0%
CY 2019 to CY 2021 (Annualized)		3.0%	-7.8%	-4.5%	-14.2%	-6.4%	-5.0%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2021 to be directly comparable by month.

² CY 2019, and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021 IBNR as reported by CCOs in financial templates.

Exhibit 7D
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Children Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	320,319	\$55.67	\$39.04	\$80.84	\$26.28	\$6.29	\$208.12
February 2019	319,327	\$53.10	\$40.46	\$81.85	\$23.00	\$5.50	\$203.91
March 2019	318,406	\$57.85	\$35.01	\$71.62	\$23.53	\$6.01	\$194.02
April 2019	318,338	\$59.07	\$36.74	\$75.32	\$24.60	\$6.44	\$202.17
May 2019	319,304	\$59.21	\$35.26	\$68.20	\$20.94	\$5.60	\$189.21
June 2019	319,726	\$57.16	\$35.91	\$58.33	\$22.26	\$5.20	\$178.85
July 2019	318,036	\$60.63	\$35.85	\$67.68	\$27.46	\$6.93	\$198.55
August 2019	315,611	\$58.67	\$33.71	\$76.99	\$26.11	\$7.30	\$202.77
September 2019	314,977	\$56.41	\$35.03	\$75.83	\$24.40	\$6.63	\$198.30
October 2019	315,760	\$63.81	\$38.29	\$82.71	\$27.99	\$6.51	\$219.31
November 2019	317,116	\$52.44	\$37.62	\$76.98	\$22.49	\$5.96	\$195.49
December 2019	319,306	\$62.10	\$38.31	\$74.61	\$19.96	\$6.19	\$201.17
CY 2019²	318,019	\$58.01	\$36.77	\$74.25	\$24.09	\$6.21	\$199.32
January 2020	319,102	\$54.88	\$37.18	\$83.80	\$25.00	\$6.75	\$207.61
February 2020	316,814	\$48.69	\$36.25	\$79.49	\$22.97	\$6.18	\$193.58
March 2020	315,499	\$50.72	\$26.87	\$62.25	\$14.56	\$5.48	\$159.88
April 2020	315,874	\$48.82	\$11.98	\$42.94	\$1.09	\$3.59	\$108.42
May 2020	319,025	\$50.78	\$19.86	\$49.51	\$12.08	\$4.35	\$136.59
June 2020	325,575	\$54.01	\$24.97	\$59.74	\$19.55	\$5.07	\$163.33
July 2020	331,246	\$55.71	\$25.32	\$61.95	\$21.02	\$5.33	\$169.33
August 2020	336,372	\$51.62	\$25.07	\$63.33	\$20.74	\$5.92	\$166.68
September 2020	339,721	\$50.13	\$26.69	\$64.73	\$20.88	\$5.56	\$167.98
October 2020	343,702	\$50.76	\$27.87	\$68.64	\$21.55	\$5.61	\$174.43
November 2020	348,308	\$46.67	\$25.89	\$62.27	\$18.85	\$5.25	\$158.92
December 2020	352,599	\$55.21	\$25.10	\$61.11	\$18.58	\$5.17	\$165.16
CY 2020³	330,320	\$51.50	\$26.09	\$63.31	\$18.07	\$5.36	\$164.33
January 2021	356,200	\$57.23	\$25.49	\$63.40	\$19.45	\$5.15	\$170.71
February 2021	358,593	\$50.63	\$21.90	\$56.58	\$16.87	\$4.71	\$150.69
March 2021	360,981	\$59.18	\$30.18	\$68.64	\$23.23	\$6.07	\$187.30
April 2021	361,341	\$55.59	\$31.31	\$71.55	\$20.58	\$5.82	\$184.85
May 2021	363,512	\$60.41	\$32.23	\$66.82	\$17.49	\$5.85	\$182.79
June 2021	365,424	\$63.46	\$35.35	\$67.15	\$19.90	\$6.20	\$192.05
July 2021	351,735	\$57.70	\$36.07	\$70.98	\$20.83	\$6.32	\$191.90
August 2021	333,945	\$59.35	\$35.86	\$91.49	\$20.14	\$6.10	\$212.94
September 2021	322,748	\$54.14	\$32.79	\$80.85	\$21.74	\$5.81	\$195.33
October 2021	313,567	\$54.84	\$33.66	\$76.76	\$21.28	\$6.23	\$192.77
November 2021	305,361	\$49.26	\$33.14	\$77.69	\$22.14	\$5.58	\$187.82
December 2021	299,450	\$49.62	\$33.90	\$73.19	\$19.33	\$5.45	\$181.48
CY 2021³	341,071	\$55.95	\$31.82	\$72.09	\$20.25	\$5.77	\$185.89
Annual PMPM Trends							
CY 2017 to CY 2018		8.7%	-1.0%	3.8%	-6.5%	3.6%	2.7%
CY 2018 to CY 2019		8.9%	4.9%	10.1%	0.0%	8.5%	7.4%
CY 2019 to CY 2020		-11.2%	-29.1%	-14.7%	-25.0%	-13.8%	-17.6%
CY 2020 to CY 2021		8.6%	22.0%	13.9%	12.0%	7.8%	13.1%
CY 2019 to CY 2021 (Annualized)		-1.8%	-7.0%	-1.5%	-8.3%	-3.6%	-3.4%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2021 to be directly comparable by month.

² CY 2019, and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021 IBNR as reported by CCOs in financial templates.

Exhibit 7E
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Deliveries

Per-Delivery Costs by Month¹

Month	Deliveries	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	1,695	\$3,986.61	\$6.36	\$1,127.91	\$0.05	\$19.20	\$5,140.14
February 2019	1,415	\$3,944.71	\$12.76	\$1,101.04	\$0.04	\$17.57	\$5,076.12
March 2019	1,508	\$3,983.59	\$8.37	\$1,088.77	\$0.00	\$19.28	\$5,100.02
April 2019	1,468	\$3,904.85	\$9.85	\$1,086.34	\$0.08	\$26.65	\$5,027.76
May 2019	1,493	\$4,103.76	\$14.23	\$1,123.88	\$0.00	\$21.75	\$5,263.62
June 2019	1,449	\$3,936.77	\$15.86	\$1,076.32	\$0.00	\$21.09	\$5,050.04
July 2019	1,797	\$3,864.92	\$12.67	\$1,074.26	\$0.00	\$15.48	\$4,967.34
August 2019	1,721	\$3,920.93	\$10.89	\$1,113.94	\$0.03	\$20.65	\$5,066.44
September 2019	1,717	\$3,975.27	\$12.86	\$1,123.17	\$0.17	\$17.94	\$5,129.40
October 2019	1,732	\$4,080.55	\$13.20	\$1,178.12	\$0.00	\$22.64	\$5,294.51
November 2019	1,522	\$3,936.21	\$13.54	\$1,162.09	\$0.00	\$25.46	\$5,137.30
December 2019	1,741	\$4,067.36	\$8.60	\$1,161.10	\$0.00	\$21.76	\$5,258.81
CY 2019³	1,605	\$3,975.46	\$11.60	\$1,118.08	\$0.03	\$20.79	\$5,125.96
January 2020	1,684	\$4,005.61	\$15.08	\$1,148.37	\$0.07	\$16.84	\$5,185.97
February 2020	1,417	\$3,978.15	\$11.18	\$1,144.31	\$0.00	\$26.62	\$5,160.27
March 2020	1,479	\$3,996.25	\$11.88	\$1,122.11	\$0.00	\$20.04	\$5,150.28
April 2020	1,405	\$3,950.93	\$10.50	\$1,125.32	\$0.21	\$19.14	\$5,106.09
May 2020	1,449	\$4,018.44	\$16.20	\$1,162.58	\$0.00	\$19.58	\$5,216.80
June 2020	1,557	\$3,964.22	\$13.32	\$1,141.01	\$0.00	\$19.67	\$5,138.21
July 2020	1,668	\$3,983.33	\$13.39	\$1,168.78	\$0.00	\$14.82	\$5,180.31
August 2020	1,708	\$4,139.11	\$11.13	\$1,193.06	\$0.00	\$17.68	\$5,360.99
September 2020	1,698	\$3,954.77	\$6.72	\$1,125.55	\$0.07	\$15.07	\$5,102.18
October 2020	1,553	\$3,884.76	\$11.65	\$1,184.50	\$0.00	\$18.76	\$5,099.68
November 2020	1,535	\$3,846.04	\$12.77	\$1,120.32	\$0.00	\$22.37	\$5,001.49
December 2020	1,491	\$3,792.28	\$9.23	\$1,147.52	\$0.00	\$17.87	\$4,966.90
CY 2020³	1,554	\$3,959.49	\$11.92	\$1,148.62	\$0.03	\$19.04	\$5,139.10
January 2021	1,407	\$4,269.88	\$12.37	\$1,149.08	\$0.00	\$17.68	\$5,449.00
February 2021	1,314	\$4,338.51	\$7.37	\$1,105.84	\$0.04	\$15.96	\$5,467.73
March 2021	1,459	\$4,219.80	\$9.95	\$1,093.70	\$0.00	\$19.23	\$5,342.69
April 2021	1,218	\$4,353.13	\$10.97	\$1,139.38	\$0.00	\$15.08	\$5,518.56
May 2021	1,331	\$4,216.00	\$10.05	\$1,101.03	\$0.00	\$19.13	\$5,346.21
June 2021	1,424	\$4,281.00	\$12.71	\$1,107.79	\$0.00	\$23.12	\$5,424.63
July 2021	1,356	\$4,403.17	\$9.99	\$1,115.62	\$0.00	\$13.70	\$5,542.48
August 2021	1,480	\$4,574.54	\$11.38	\$1,112.47	\$0.00	\$20.46	\$5,718.86
September 2021	1,398	\$4,436.80	\$7.97	\$1,147.27	\$0.00	\$13.67	\$5,605.71
October 2021	1,354	\$4,347.47	\$6.05	\$1,100.21	\$0.08	\$11.60	\$5,465.42
November 2021	1,193	\$4,330.23	\$11.26	\$1,102.57	\$0.04	\$17.15	\$5,461.26
December 2021	1,258	\$4,335.88	\$11.09	\$1,093.18	\$0.00	\$17.63	\$5,457.78
CY 2021³	1,349	\$4,342.20	\$10.10	\$1,114.01	\$0.01	\$17.04	\$5,483.36
Annual PMPM Trends							
CY 2017 to CY 2018		1.7%	6.1%	-2.4%	145.9%	46.1%	1.0%
CY 2018 to CY 2019		0.4%	48.7%	-2.4%	12.8%	-35.8%	-0.3%
CY 2019 to CY 2020		-0.4%	2.8%	2.7%	-3.4%	-8.4%	0.3%
CY 2020 to CY 2021		9.7%	-15.3%	-3.0%	-52.4%	-10.5%	6.7%
CY 2019 to CY 2021 (Annualized)		4.5%	-6.7%	-0.2%	-32.2%	-9.5%	3.4%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPPS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2021 to be directly comparable by month.

² CY 2019, and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021 IBNR as reported by CCOs in financial templates.

Exhibit 8A Mississippi Division of Medicaid MississippiCAN Program Traditional Rx Trends by Therapeutic Class									
Drug Class	SSI Population			Adult Population			Children Population		
	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend
Antiasthmatic and COPD Agents	\$16.17	\$16.62	1.1%	\$3.84	\$4.17	3.3%	\$2.63	\$2.79	2.4%
Anticoagulants	\$6.18	\$6.98	5.0%	\$1.56	\$1.85	7.1%	\$0.02	\$0.02	8.2%
Anticonvulsants	\$12.45	\$11.35	-3.6%	\$1.56	\$1.59	0.9%	\$0.48	\$0.50	2.3%
Antidepressants	\$4.84	\$5.36	4.1%	\$3.32	\$3.79	5.4%	\$0.23	\$0.27	5.7%
Antihistamines and Respiratory Agents	\$1.48	\$1.49	0.2%	\$0.89	\$0.89	0.2%	\$1.28	\$1.29	0.2%
Anti-Infective Agents	\$4.45	\$4.16	-2.7%	\$3.07	\$2.87	-2.7%	\$1.89	\$1.77	-2.7%
Antipsychotic	\$47.07	\$55.30	6.7%	\$4.85	\$5.70	6.7%	\$0.50	\$0.57	4.8%
Cardiovascular	\$11.12	\$11.74	2.2%	\$3.05	\$3.22	2.2%	\$0.39	\$0.41	2.1%
Contraceptives	\$0.87	\$0.88	0.7%	\$2.79	\$2.84	0.7%	\$0.64	\$0.65	0.7%
Dermatological	\$1.24	\$1.10	-4.7%	\$0.66	\$0.59	-4.7%	\$1.31	\$1.35	1.0%
Diabetes	\$44.72	\$54.12	7.9%	\$15.39	\$18.63	7.9%	\$0.99	\$1.20	7.9%
Diabetic Supplies	\$1.05	\$1.16	4.0%	\$0.40	\$0.45	4.0%	\$0.06	\$0.06	4.0%
Endocrine and Metabolic Agents	\$1.32	\$1.41	2.5%	\$0.76	\$0.81	2.5%	\$0.33	\$0.35	1.7%
Gastrointestinal Agents	\$7.67	\$7.72	0.2%	\$2.53	\$2.68	2.3%	\$1.24	\$1.27	1.1%
Hematological Agents	\$1.58	\$1.71	3.2%	\$0.26	\$0.29	3.2%	\$0.02	\$0.02	3.2%
HIV	\$27.66	\$33.46	7.9%	\$6.76	\$7.45	3.9%	\$0.11	\$0.12	3.9%
Neurological Agents	\$3.37	\$3.08	-3.5%	\$1.04	\$0.95	-3.5%	\$0.02	\$0.02	-3.5%
Ophthalmic Agents	\$1.75	\$1.92	3.7%	\$0.48	\$0.53	3.7%	\$0.15	\$0.17	3.7%
Other	\$3.24	\$4.13	10.3%	\$1.43	\$1.82	10.3%	\$0.91	\$0.97	2.5%
Pain	\$3.45	\$3.48	0.3%	\$2.18	\$2.20	0.3%	\$0.24	\$0.25	0.6%
Pain - Migraine	\$1.28	\$1.70	11.8%	\$1.26	\$1.66	11.8%	\$0.03	\$0.03	7.8%
Stimulants and Attention Disorders	\$8.99	\$8.50	-2.2%	\$1.41	\$1.33	-2.2%	\$7.48	\$7.16	-1.7%
Substance Abuse	\$2.30	\$2.53	3.9%	\$4.07	\$4.48	3.9%	\$0.01	\$0.01	2.3%
Transplant Agents	\$1.15	\$1.20	1.7%	\$0.17	\$0.17	1.7%	\$0.02	\$0.03	1.7%
Vaccines	\$1.13	\$0.83	-11.4%	\$0.82	\$0.60	-11.4%	\$0.34	\$0.25	-11.4%
Vitamins and Nutritionals	\$3.92	\$4.09	1.7%	\$0.79	\$0.83	1.7%	\$0.22	\$0.23	1.7%
Total Traditional	\$220.44	\$246.01	4.5%	\$65.35	\$72.37	4.2%	\$21.56	\$21.76	0.4%

Exhibit 8A
Mississippi Division of Medicaid
MississippiCAN Program
Specialty Rx Trends by Therapeutic Class

Drug Class	SSI Population			Adult Population			Children Population		
	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend	CY 2021 PMPM	Projected SFY 2024 PMPM	Annualized CY 2021 to SFY 2024 PMPM Trend
Antiasthmatic and COPD Agents	\$0.74	\$0.96	10.6%	\$0.34	\$0.41	8.2%	\$0.14	\$0.17	8.2%
Anticonvulsants	\$4.00	\$5.23	11.3%	\$0.01	\$0.01	11.3%	\$0.13	\$0.17	11.3%
Anti-Inflammatory	\$32.00	\$35.30	4.0%	\$17.83	\$22.22	9.2%	\$2.55	\$3.03	7.1%
Atopic Dermatitis - Monoclonal Antibodies	\$2.27	\$3.18	14.4%	\$1.35	\$1.54	5.5%	\$1.10	\$1.72	19.6%
Cancer - Chemotherapy	\$0.39	\$0.47	8.1%	\$0.10	\$0.13	8.1%	\$0.03	\$0.04	8.1%
Cancer - Non-chemotherapy	\$16.99	\$19.21	5.0%	\$1.85	\$2.09	5.0%	\$0.18	\$0.20	5.0%
Cancer - Others	\$0.09	\$0.10	1.7%	\$0.00	\$0.00	1.7%	\$0.00	\$0.00	1.7%
Cardiovascular	\$5.29	\$6.17	6.3%	\$0.01	\$0.02	6.3%	\$0.05	\$0.06	6.3%
Chelating Agents	\$4.21	\$4.20	0.0%	\$0.00	\$0.00	0.0%	\$0.05	\$0.05	0.0%
Contraceptives	\$0.00	\$0.00	4.0%	\$0.12	\$0.13	4.0%	\$0.00	\$0.00	4.0%
Cystic Fibrosis Agents	\$9.86	\$11.76	7.3%	\$0.16	\$0.19	7.3%	\$1.43	\$1.71	7.3%
Endocrine and Metabolic Agents	\$4.65	\$6.09	11.4%	\$2.71	\$3.55	11.4%	\$1.89	\$2.48	11.4%
Gastrointestinal Agents	\$1.53	\$2.05	12.5%	\$0.00	\$0.00	0.0%	\$0.01	\$0.01	12.5%
Growth Hormones	\$2.03	\$2.41	7.1%	\$0.01	\$0.01	4.0%	\$0.73	\$0.87	7.1%
Hematological Agents	\$2.45	\$2.73	4.4%	\$0.41	\$0.46	4.4%	\$0.07	\$0.08	4.4%
Hemophilia	\$0.00	\$0.00	0.0%	\$0.00	\$0.00	0.0%	\$0.02	\$0.02	8.7%
Hepatitis	\$2.82	\$2.83	0.1%	\$1.23	\$1.28	1.8%	\$0.06	\$0.07	2.0%
Hereditary Angioedema Agents	\$1.01	\$1.20	7.1%	\$0.00	\$0.00	0.0%	\$0.26	\$0.31	7.1%
Immune Serums	\$3.23	\$3.72	5.9%	\$2.15	\$2.47	5.9%	\$0.07	\$0.08	5.9%
Multiple Sclerosis	\$4.53	\$4.82	2.5%	\$2.33	\$2.48	2.5%	\$0.05	\$0.06	2.5%
Neurological Agents	\$5.08	\$6.21	8.4%	\$0.34	\$0.38	5.3%	\$0.00	\$0.00	5.3%
Other	\$4.69	\$5.78	8.7%	\$4.55	\$3.69	-8.0%	\$0.80	\$0.98	8.7%
Total Specialty	\$107.88	\$124.43	5.9%	\$35.50	\$41.08	6.0%	\$9.64	\$12.11	9.6%

Exhibit 9 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Enhanced Match Services								
	Medical Portion of Capitation Rate	COVID-19 Vaccine Administration	Family Planning (Non-waiver)	Breast and Cervical Cancer	Indian Health Services	Home Health Services	Rehab Services	Private Duty Nursing
Non-Newborn SSI / Disabled	\$1,178.31	\$1.51	\$0.86	\$0.39	\$0.52	\$2.89	\$22.96	\$9.70
North Region	1,071.84	1.37	0.78	0.36	0.47	2.63	20.89	8.82
Central Region	1,222.99	1.56	0.89	0.41	0.54	3.00	23.83	10.06
South Region	1,247.29	1.59	0.91	0.41	0.55	3.06	24.31	10.26
Breast and Cervical Cancer	\$3,114.60	\$1.63	\$0.06	\$3,112.91	\$0.00	\$0.00	\$0.00	\$0.00
North Region	2,833.17	1.48	0.06	2,831.63	0.00	0.00	0.00	0.00
Central Region	3,232.72	1.69	0.07	3,230.97	0.00	0.00	0.00	0.00
South Region	3,296.93	1.72	0.07	3,295.14	0.00	0.00	0.00	0.00
MA Adult	\$497.58	\$1.09	\$4.71	\$0.00	\$0.18	\$0.35	\$1.12	\$0.00
North Region	473.42	1.03	4.48	0.00	0.17	0.34	1.07	0.00
Central Region	509.12	1.11	4.82	0.00	0.19	0.36	1.15	0.00
South Region	507.53	1.11	4.80	0.00	0.18	0.36	1.14	0.00
Pregnant Women	\$648.58	\$0.50	\$11.18	\$0.00	\$0.01	\$0.17	\$0.30	\$0.00
North Region	617.10	0.48	10.63	0.00	0.01	0.16	0.28	0.00
Central Region	663.63	0.51	11.44	0.00	0.01	0.17	0.30	0.00
South Region	661.56	0.51	11.40	0.00	0.01	0.17	0.30	0.00
SSI / Disabled Newborn	\$7,520.28	\$0.00	\$0.00	\$0.00	\$0.00	\$4.79	\$0.00	\$92.34
North Region	7,426.95	0.00	0.00	0.00	0.00	4.73	0.00	91.19
Central Region	7,735.85	0.00	0.00	0.00	0.00	4.92	0.00	94.99
South Region	7,373.62	0.00	0.00	0.00	0.00	4.69	0.00	90.54
Non-SSI Newborns 0 to 2 Months	\$2,039.06	\$0.00	\$0.00	\$0.00	\$0.96	\$0.07	\$0.00	\$0.03
North Region	2,013.75	0.00	0.00	0.00	0.95	0.07	0.00	0.03
Central Region	2,097.51	0.00	0.00	0.00	0.99	0.07	0.00	0.03
South Region	1,999.29	0.00	0.00	0.00	0.94	0.06	0.00	0.03
Non-SSI Newborns 3 to 12 Months	\$262.22	\$0.00	\$0.00	\$0.00	\$0.69	\$0.05	\$0.00	\$1.13
North Region	258.97	0.00	0.00	0.00	0.68	0.05	0.00	1.12
Central Region	269.74	0.00	0.00	0.00	0.71	0.05	0.00	1.16
South Region	257.11	0.00	0.00	0.00	0.67	0.05	0.00	1.11
Foster Care	\$650.29	\$0.79	\$0.98	\$0.00	\$0.02	\$0.00	\$22.22	\$7.16
North Region	642.22	0.78	0.97	0.00	0.02	0.00	21.95	7.07
Central Region	668.93	0.81	1.01	0.00	0.02	0.00	22.86	7.36
South Region	637.61	0.77	0.96	0.00	0.02	0.00	21.79	7.02
MYPAC	\$3,535.36	\$1.07	\$2.28	\$0.00	\$0.05	\$0.00	\$11.92	\$0.00
North Region	3,491.49	1.06	2.26	0.00	0.05	0.00	11.77	0.00
Central Region	3,636.70	1.10	2.35	0.00	0.06	0.00	12.26	0.00
South Region	3,466.41	1.05	2.24	0.00	0.05	0.00	11.69	0.00
MA Children	\$205.13	\$0.57	\$1.06	\$0.00	\$0.40	\$0.01	\$5.78	\$0.25
North Region	202.58	0.56	1.05	0.00	0.40	0.01	5.71	0.25
Central Region	211.01	0.58	1.09	0.00	0.41	0.02	5.94	0.26
South Region	201.12	0.55	1.04	0.00	0.40	0.01	5.67	0.24
Quasi-CHIP	\$216.99	\$1.10	\$1.98	\$0.00	\$0.30	\$0.01	\$4.05	\$0.00
North Region	214.30	1.09	1.96	0.00	0.30	0.01	4.00	0.00
Central Region	223.21	1.13	2.04	0.00	0.31	0.01	4.17	0.00
South Region	212.76	1.08	1.94	0.00	0.29	0.01	3.97	0.00

Exhibit 10A Mississippi Division of Medicaid Summary of CY 2021 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell														
Member Months	745,395	1,708	570,832	570,832	117,512	117,512	5,146	70,289	238,386	79,811	9,828	3,350,611	348,614	5,538,132
Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non- Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$42,515,207	\$140,988	\$7,642,740	\$0	\$273,976	\$0	\$926,992	\$2,027,472	\$3,058,123	\$196,459	\$82,934	\$7,873,668	\$782,459	\$65,521,016
Surgical	\$59,631,045	\$121,723	\$11,364,573	\$0	\$326,949	\$0	\$1,842,525	\$4,409,541	\$2,940,623	\$499,821	\$63,877	\$12,992,004	\$1,390,727	\$95,583,408
Maternity / Deliveries	\$2,018,335	\$0	\$1,560,891	\$15,299,062	\$2,500,390	\$50,872,673	\$17,462,603	\$86,170,901	\$482,559	\$69,261	\$7,864	\$3,513,448	\$376,668	\$180,334,655
Psychiatric / Substance Abuse	\$21,640,384	\$10,192	\$3,355,905	\$0	\$141,760	\$0	\$0	\$0	\$5,433	\$17,648,883	\$3,930,126	\$29,545,905	\$3,284,262	\$79,562,849
Skilled Nursing Facility	\$4,713	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$4,713
Missing Data	\$321,171	\$664	\$64,726	\$40,066	\$8,029	\$137,597	\$64,369	\$231,381	\$17,342	\$2,844	\$628	\$112,359	\$12,238	\$1,013,416
Inpatient Behavioral Health Total	\$7,368,400	\$0	\$805,357	\$0	\$45,207	\$0	\$0	\$0	\$0	\$16,546,301	\$3,010,904	\$25,071,862	\$2,668,744	\$55,516,774
Inpatient Facility Total	\$126,130,856	\$273,566	\$23,988,835	\$15,339,129	\$3,251,104	\$51,010,270	\$20,296,488	\$92,839,295	\$6,504,079	\$18,417,268	\$4,085,429	\$54,037,384	\$5,846,354	\$422,020,058
Outpatient Facility Services														
Emergency Room	\$22,398,304	\$42,932	\$14,507,752	\$9,059	\$3,403,797	\$30,732	\$260,099	\$1,456,487	\$5,199,939	\$575,007	\$220,530	\$28,534,785	\$2,160,197	\$78,799,620
Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0	\$147	\$0	\$294	\$0	\$107	\$2,956	\$137	\$3,877
Radiology / Pathology	\$23,538,125	\$457,258	\$12,045,774	\$5,485	\$3,317,862	\$24,885	\$162,105	\$723,400	\$2,742,955	\$512,724	\$148,828	\$19,215,783	\$1,883,645	\$64,778,830
Psychiatric / Alcohol & Drug Abuse	\$3,837,018	\$0	\$115,129	\$0	\$4,155	\$0	\$0	\$0	\$0	\$842,050	\$26,014	\$9,068,840	\$441,573	\$14,334,779
Pharmacy	\$35,673,482	\$834,232	\$5,897,660	\$5,059	\$1,230,167	\$18,608	\$15,930	\$88,015	\$234,989	\$91,028	\$23,979	\$5,312,712	\$566,500	\$49,992,352
Other	\$56,204,488	\$434,356	\$20,556,059	\$26,095	\$3,860,056	\$41,255	\$669,938	\$1,302,517	\$3,882,727	\$1,388,861	\$189,881	\$36,059,874	\$3,450,129	\$128,066,236
Missing Data	\$451,050	\$4,008	\$176,871	\$165	\$35,106	\$376	\$3,279	\$12,515	\$34,958	\$8,433	\$3,620	\$398,012	\$40,218	\$1,168,612
Outpatient Behavioral Health Total	\$3,577,373	\$0	\$11,979	\$0	\$490	\$0	\$0	\$0	\$0	\$841,979	\$26,028	\$9,055,103	\$443,905	\$13,956,856
Outpatient Facility Total	\$142,102,467	\$1,772,777	\$53,299,245	\$45,863	\$11,851,142	\$115,855	\$1,111,498	\$3,582,934	\$12,095,861	\$3,418,103	\$612,960	\$98,592,963	\$8,542,635	\$337,144,306
Physician Services														
IP Visits	\$11,756,317	\$28,230	\$2,080,933	\$81,107	\$296,711	\$185,583	\$6,354,299	\$12,542,533	\$1,909,157	\$254,284	\$167,865	\$2,693,443	\$288,426	\$38,638,890
IP Surgery	\$3,758,289	\$14,628	\$957,283	\$31,939	\$87,771	\$67,949	\$342,187	\$443,196	\$315,250	\$51,073	\$15,555	\$1,328,464	\$148,873	\$7,562,462
Office / Home Visits	\$32,951,187	\$142,089	\$19,421,745	\$1,912	\$1,327,155	\$3,569	\$384,348	\$2,826,008	\$8,567,405	\$2,124,164	\$361,125	\$66,401,757	\$6,519,600	\$141,032,063
Preventive Exams & Immunizations	\$4,480,916	\$15,284	\$6,861,261	\$154,310	\$11,060,181	\$363,829	\$197,194	\$8,107,592	\$9,162,687	\$657,989	\$87,471	\$22,948,064	\$1,651,252	\$65,748,031
Urgent Care Visits	\$361,486	\$1,024	\$658,179	\$0	\$66,227	\$0	\$789	\$113,962	\$76,122	\$13,294	\$2,563,864	\$283,353	\$4,140,178	\$4,140,178
ER Visits and Observation Care	\$7,395,036	\$13,769	\$4,726,002	\$15,278	\$1,214,250	\$58,919	\$83,211	\$513,102	\$1,682,305	\$191,079	\$78,903	\$9,380,426	\$701,414	\$26,053,694
OP Surgery	\$11,146,181	\$120,146	\$5,891,490	\$179	\$315,805	\$1,245	\$100,054	\$211,009	\$838,249	\$374,165	\$45,429	\$10,743,625	\$1,077,100	\$30,864,677
Physical Therapy	\$8,126,988	\$12,436	\$1,379,715	\$0	\$40,330	\$0	\$181,084	\$11,473	\$358,867	\$756,223	\$30,054	\$9,293,434	\$726,492	\$20,917,096
Psychiatric / Substance Abuse	\$29,834,578	\$13,503	\$4,467,091	\$1,302	\$242,104	\$1,824	\$980	\$2,571	\$2,938	\$3,982,305	\$18,505,714	\$31,802,813	\$3,625,175	\$92,482,899
Radiology / Pathology	\$12,191,813	\$173,512	\$10,200,463	\$147,139	\$5,765,373	\$436,029	\$201,656	\$617,547	\$2,812,490	\$573,138	\$110,724	\$22,373,113	\$2,199,284	\$57,802,281
Vision, Hearing, and Speech Exams	\$2,852,452	\$6,531	\$1,698,694	\$73	\$279,045	\$166	\$25,462	\$20,830	\$78,545	\$293,955	\$41,984	\$7,690,964	\$1,064,887	\$14,053,587
Other	\$24,648,428	\$943,832	\$5,051,861	\$3,730,824	\$907,953	\$12,565,313	\$403,304	\$459,533	\$523,676	\$952,268	\$4,440,133	\$7,357,766	\$1,142,725	\$63,127,616
Missing Data	\$284,422	\$3,634	\$143,952	\$9,111	\$53,138	\$35,392	\$14,247	\$77,739	\$61,089	\$5,630	\$2,099	\$396,572	\$42,497	\$1,129,523
Physician Behavioral Health Total	\$32,276,695	\$14,427	\$4,843,313	\$1,477	\$262,048	\$1,588	\$3,069	\$11,071	\$116,809	\$4,460,714	\$22,866,978	\$35,570,294	\$4,033,095	\$104,461,576
Physician Total	\$149,788,094	\$1,488,618	\$63,538,671	\$4,173,173	\$21,656,043	\$13,719,818	\$8,288,815	\$25,835,012	\$26,426,621	\$10,292,394	\$23,900,350	\$194,974,304	\$19,471,080	\$563,552,998
Pharmacy Services														
Pharmacy	\$244,050,225	\$937,031	\$64,635,824	\$88,015	\$4,651,709	\$241,212	\$3,083,084	\$797,579	\$5,639,218	\$7,135,304	\$1,777,312	\$96,386,398	\$13,445,110	\$442,868,023
Missing Data	\$709,635	\$2,391	\$184,277	\$296	\$12,282	\$649	\$5,765	\$2,737	\$17,275	\$3,314	\$3,113	\$331,235	\$45,889	\$1,332,557
Pharmacy Total	\$244,759,861	\$939,423	\$64,820,101	\$88,311	\$4,663,991	\$241,861	\$3,088,849	\$800,317	\$5,656,492	\$7,152,317	\$1,780,425	\$96,717,634	\$13,490,999	\$444,200,580
Dental Services														
Dental	\$6,203,061	\$6,081	\$2,908,628	\$110	\$424,147	\$109	\$3,972	\$41,723	\$259,455	\$1,987,397	\$300,649	\$71,343,280	\$9,790,370	\$93,268,982
Missing Data	\$19,381	\$22	\$8,256	\$0	\$1,252	\$0	\$5	\$32	\$67	\$3,314	\$180	\$217,179	\$34,272	\$283,961
Dental Total	\$6,222,442	\$6,103	\$2,916,885	\$110	\$425,399	\$109	\$3,977	\$41,755	\$259,522	\$1,990,711	\$300,829	\$71,560,459	\$9,824,641	\$93,552,942
Other Services														
Ambulance	\$9,399,082	\$14,684	\$2,544,149	\$87,803	\$434,239	\$169,891	\$125,108	\$772,501	\$510,350	\$146,924	\$124,493	\$3,978,738	\$337,317	\$18,645,278
Non-Emergency Transportation	\$8,433,615	\$47,169	\$888,161	\$4,584	\$197,050	\$6,159	\$117,118	\$32,220	\$109,594	\$30,955	\$31,111	\$1,113,900	\$61,989	\$11,073,624
DME	\$19,249,003	\$48,369	\$2,408,939	\$1,682	\$262,612	\$5,651	\$624,281	\$98,965	\$556,710	\$564,533	\$18,131	\$5,679,924	\$932,499	\$30,451,300
Glasses / Contacts	\$1,198,643	\$3,178	\$816,944	\$86	\$152,224	\$108	\$194	\$194	\$1,654	\$159,670	\$26,825	\$4,186,406	\$628,251	\$7,174,331
Other	\$10,973,062	\$32,309	\$123,013	\$0	\$7,733	\$18	\$408,038	\$9,107	\$236,380	\$390,802	\$16,973	\$1,221,311	\$104,522	\$13,523,268
Missing Data	\$5,315,554	\$9,818	\$957,956	\$10,234	\$132,930	\$21,815	\$27,225	\$99,138	\$346,102	\$578,060	\$28,524	\$6,329,942	\$634,125	\$14,491,423
Other Behavioral Health Total	\$608,903	\$443	\$73,974	\$0	\$3,304	\$0	\$0	\$0	\$0	\$32,327	\$6,031	\$509,980	\$75,879	\$1,310,842
Other Total	\$54,568,959	\$155,527	\$7,739,161	\$104,389	\$1,186,788	\$203,642	\$1,301,918	\$1,012,125	\$1,760,790	\$1,870,943	\$246,057	\$22,510,221	\$2,698,704	\$95,359,224
Total Behavioral Health	\$43,831,370	\$14,870	\$5,734,623	\$1,477	\$11,049	\$1,588	\$3,069	\$11,071	\$116,809	\$21,881,321	\$25,909,941	\$70,207,239	\$7,221,623	\$175,246,048
Grand Total	\$723,572,679	\$4,636,014	\$216,302,898	\$19,750,975	\$43,034,467	\$65,291,555	\$34,091,546	\$124,111,438	\$52,703,365	\$43,141,736	\$30,926,050	\$538,392,966	\$59,874,417	\$1,955,830,108

Exhibit 10B Mississippi Division of Medicaid Summary of CY 2021 MississippiCAN Encounter Claims Summary of Allowed PMPM by Rate Cell														
Member Months	745,395	1,708	570,832	570,832	117,512	117,512	5,146	70,289	238,386	79,811	9,828	3,350,611	348,614	5,538,132
PMPM Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$57.04	\$82.55	\$13.39	\$0.00	\$2.33	\$0.00	\$180.14	\$28.84	\$12.83	\$2.46	\$8.44	\$2.35	\$2.24	\$11.83
Surgical	\$80.00	\$71.27	\$19.91	\$0.00	\$2.78	\$0.00	\$358.05	\$62.73	\$12.34	\$6.26	\$6.50	\$3.88	\$3.99	\$17.26
Maternity / Deliveries	\$2.71	\$0.00	\$2.73	\$26.80	\$21.28	\$432.91	\$3,393.43	\$1,225.95	\$2.02	\$0.87	\$0.80	\$1.05	\$1.08	\$32.56
Psychiatric / Substance Abuse	\$29.03	\$5.97	\$5.88	\$0.00	\$1.21	\$0.00	\$0.00	\$0.00	\$0.02	\$221.13	\$399.89	\$8.82	\$9.42	\$14.37
Skilled Nursing Facility	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.43	\$0.39	\$0.11	\$0.07	\$0.07	\$1.17	\$12.51	\$3.29	\$0.07	\$0.04	\$0.06	\$0.03	\$0.04	\$0.18
Inpatient Behavioral Health Total	\$9.89	\$0.00	\$1.41	\$0.00	\$0.38	\$0.00	\$0.00	\$0.00	\$0.00	\$207.32	\$306.36	\$7.48	\$7.66	\$10.02
Inpatient Facility Total	\$169.21	\$160.17	\$42.02	\$26.87	\$27.67	\$434.09	\$3,944.13	\$1,320.82	\$27.28	\$230.76	\$415.69	\$16.13	\$16.77	\$76.20
Outpatient Facility Services														
Emergency Room	\$30.05	\$25.14	\$25.42	\$0.02	\$28.97	\$0.26	\$50.54	\$20.72	\$21.81	\$7.20	\$22.44	\$8.52	\$6.20	\$14.23
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.03	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$31.58	\$267.72	\$21.10	\$0.01	\$28.23	\$0.21	\$31.50	\$10.29	\$11.51	\$6.42	\$15.14	\$5.74	\$5.40	\$11.70
Psychiatric / Alcohol & Drug Abuse	\$5.15	\$0.00	\$0.20	\$0.00	\$0.04	\$0.00	\$0.00	\$0.00	\$0.00	\$10.55	\$2.65	\$2.71	\$1.27	\$2.59
Pharmacy	\$47.86	\$488.42	\$10.33	\$0.01	\$10.47	\$0.16	\$3.10	\$1.25	\$0.99	\$1.14	\$2.44	\$1.59	\$1.63	\$9.03
Other	\$75.40	\$254.31	\$36.01	\$0.05	\$32.85	\$0.35	\$130.19	\$18.53	\$16.29	\$17.40	\$19.32	\$10.76	\$9.90	\$23.12
Missing Data	\$0.61	\$2.35	\$0.31	\$0.00	\$0.30	\$0.00	\$0.64	\$0.18	\$0.15	\$0.11	\$0.37	\$0.12	\$0.12	\$0.21
Outpatient Behavioral Health Total	\$4.80	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10.55	\$2.65	\$2.70	\$1.27	\$2.52
Outpatient Facility Total	\$190.64	\$1,037.93	\$93.37	\$0.08	\$100.85	\$0.99	\$215.99	\$50.97	\$50.74	\$42.83	\$62.37	\$29.43	\$24.50	\$60.88
Physician Services														
IP Visits	\$15.77	\$16.53	\$3.65	\$0.14	\$2.52	\$1.58	\$1,234.80	\$178.44	\$8.01	\$3.19	\$17.08	\$0.80	\$0.83	\$6.98
IP Surgery	\$5.04	\$8.56	\$1.68	\$0.06	\$0.75	\$0.58	\$66.50	\$6.31	\$1.32	\$0.64	\$1.58	\$0.40	\$0.43	\$1.37
Office / Home Visits	\$44.21	\$83.19	\$34.02	\$0.00	\$11.29	\$0.03	\$74.69	\$40.21	\$35.94	\$26.61	\$36.74	\$19.82	\$18.70	\$25.47
Preventive Exams & Immunizations	\$6.01	\$8.95	\$12.02	\$0.27	\$94.12	\$3.10	\$38.32	\$115.35	\$38.44	\$8.24	\$8.90	\$6.85	\$4.74	\$11.87
Urgent Care Visits	\$0.48	\$0.60	\$1.15	\$0.00	\$0.56	\$0.00	\$0.15	\$0.03	\$0.48	\$0.95	\$1.35	\$0.77	\$0.81	\$0.75
ER Visits and Observation Care	\$9.92	\$8.06	\$8.28	\$0.03	\$10.33	\$0.50	\$16.17	\$7.30	\$7.06	\$2.39	\$8.03	\$2.80	\$2.01	\$4.70
OP Surgery	\$14.95	\$70.34	\$10.32	\$0.00	\$2.69	\$0.01	\$19.44	\$3.00	\$3.52	\$4.69	\$4.62	\$3.21	\$3.09	\$5.57
Physical Therapy	\$10.90	\$7.28	\$2.42	\$0.00	\$0.34	\$0.00	\$35.19	\$0.16	\$1.51	\$9.48	\$3.06	\$2.77	\$2.08	\$3.78
Psychiatric / Substance Abuse	\$40.03	\$7.91	\$7.83	\$0.00	\$2.06	\$0.02	\$0.19	\$0.04	\$0.01	\$49.90	\$1,882.96	\$9.49	\$10.40	\$16.70
Radiology / Pathology	\$16.36	\$101.59	\$17.87	\$0.26	\$49.06	\$3.71	\$39.19	\$8.79	\$11.80	\$7.18	\$11.27	\$6.68	\$6.31	\$10.44
Vision, Hearing, and Speech Exams	\$3.83	\$3.82	\$2.98	\$0.00	\$2.37	\$0.00	\$4.95	\$0.30	\$0.33	\$3.68	\$4.27	\$2.30	\$3.05	\$2.54
Other	\$33.07	\$552.60	\$8.85	\$6.54	\$7.73	\$106.93	\$78.37	\$6.54	\$2.20	\$11.93	\$451.78	\$2.20	\$3.28	\$11.40
Missing Data	\$0.38	\$2.13	\$0.25	\$0.02	\$0.45	\$0.30	\$2.77	\$1.11	\$0.26	\$0.07	\$0.21	\$0.12	\$0.12	\$0.20
Physician Behavioral Health Total	\$43.30	\$8.45	\$8.48	\$0.00	\$2.23	\$0.01	\$0.60	\$0.16	\$0.49	\$55.89	\$2,326.72	\$10.62	\$11.57	\$18.86
Physician Total	\$200.95	\$871.56	\$111.31	\$7.31	\$184.29	\$116.75	\$1,610.73	\$367.55	\$110.86	\$128.96	\$2,431.86	\$58.19	\$55.85	\$101.76
Pharmacy Services														
Pharmacy	\$327.41	\$548.61	\$113.23	\$0.15	\$39.58	\$2.05	\$599.12	\$11.35	\$23.66	\$89.40	\$180.84	\$28.77	\$38.57	\$79.97
Missing Data	\$0.95	\$1.40	\$0.32	\$0.00	\$0.10	\$0.01	\$1.12	\$0.04	\$0.07	\$0.21	\$0.32	\$0.10	\$0.13	\$0.24
Pharmacy Total	\$328.36	\$550.01	\$113.55	\$0.15	\$39.69	\$2.06	\$600.24	\$11.39	\$23.73	\$89.62	\$181.16	\$28.87	\$38.70	\$80.21
Dental Services														
Dental	\$8.32	\$3.56	\$5.10	\$0.00	\$3.61	\$0.00	\$0.77	\$0.59	\$1.09	\$24.90	\$30.59	\$21.29	\$28.08	\$16.84
Missing Data	\$0.03	\$0.01	\$0.01	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.04	\$0.02	\$0.06	\$0.10	\$0.05
Dental Total	\$8.35	\$3.57	\$5.11	\$0.00	\$3.62	\$0.00	\$0.77	\$0.59	\$1.09	\$24.94	\$30.61	\$21.36	\$28.18	\$16.89
Other Services														
Ambulance	\$12.61	\$8.60	\$4.46	\$0.15	\$3.70	\$1.45	\$24.31	\$10.99	\$2.14	\$1.84	\$12.67	\$1.19	\$0.97	\$3.37
Non-Emergency Transportation	\$11.31	\$27.62	\$1.56	\$0.01	\$1.68	\$0.05	\$22.76	\$0.46	\$0.46	\$0.39	\$3.17	\$0.33	\$0.18	\$2.00
DME	\$25.82	\$28.32	\$4.22	\$0.00	\$2.23	\$0.05	\$121.31	\$1.41	\$2.34	\$7.07	\$1.84	\$0.70	\$2.67	\$5.50
Glasses / Contacts	\$1.61	\$1.86	\$1.43	\$0.00	\$1.30	\$0.00	\$0.03	\$0.00	\$0.01	\$2.00	\$2.73	\$1.25	\$1.80	\$1.30
Other	\$14.72	\$18.92	\$0.22	\$0.00	\$0.07	\$0.00	\$79.29	\$0.13	\$0.99	\$4.90	\$1.73	\$0.36	\$0.30	\$2.44
Missing Data	\$7.13	\$5.75	\$1.68	\$0.02	\$1.13	\$0.19	\$5.29	\$1.41	\$1.45	\$7.24	\$2.90	\$1.89	\$1.82	\$2.62
Other Behavioral Health Total	\$0.82	\$0.26	\$0.13	\$0.00	\$0.03	\$0.00	\$0.00	\$0.00	\$0.00	\$0.41	\$0.61	\$0.15	\$0.22	\$0.24
Other Total	\$73.21	\$91.06	\$13.56	\$0.18	\$10.10	\$1.73	\$253.00	\$14.40	\$7.39	\$23.44	\$25.04	\$6.72	\$7.74	\$17.22
Total Behavioral Health	\$58.80	\$8.71	\$10.05	\$0.00	\$2.65	\$0.01	\$0.60	\$0.16	\$0.49	\$274.16	\$2,636.34	\$20.95	\$20.72	\$31.64
Grand Total	\$970.72	\$2,714.29	\$378.93	\$34.60	\$366.21	\$555.62	\$6,624.86	\$1,765.73	\$221.08	\$540.55	\$3,146.73	\$160.69	\$171.75	\$353.16

Exhibit 10C Mississippi Division of Medicaid Summary of CY 2021 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell														
Member Months	745,395	1,708	570,832	570,832	117,512	117,512	5,146	70,289	238,386	79,811	9,828	3,350,611	348,614	5,538,132
% of Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	5.9%	3.0%	3.5%	0.0%	0.6%	0.0%	2.7%	1.6%	5.8%	0.5%	0.3%	1.5%	1.3%	3.4%
Surgical	8.2%	2.6%	5.3%	0.0%	0.8%	0.0%	5.4%	3.6%	5.6%	1.2%	0.2%	2.4%	2.3%	4.9%
Maternity / Deliveries	0.3%	0.0%	0.7%	77.5%	5.8%	77.9%	51.2%	69.4%	0.9%	0.2%	0.0%	0.7%	0.6%	9.2%
Psychiatric / Substance Abuse	3.0%	0.2%	1.6%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	40.9%	12.7%	5.5%	5.5%	4.1%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.2%	0.0%	0.2%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%
Inpatient Behavioral Health Total	1.0%	0.0%	0.4%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	38.4%	9.7%	4.7%	4.5%	2.8%
Inpatient Facility Total	17.4%	5.9%	11.1%	77.7%	7.6%	78.1%	59.5%	74.8%	12.3%	42.7%	13.2%	10.0%	9.8%	21.6%
Outpatient Facility Services														
Emergency Room	3.1%	0.9%	6.7%	0.0%	7.9%	0.0%	0.8%	1.2%	9.9%	1.3%	0.7%	5.3%	3.6%	4.0%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.3%	9.9%	5.6%	0.0%	7.7%	0.0%	0.5%	0.6%	5.2%	1.2%	0.5%	3.6%	3.1%	3.3%
Psychiatric / Alcohol & Drug Abuse	0.5%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.0%	0.1%	1.7%	0.7%	0.7%
Pharmacy	4.9%	18.0%	2.7%	0.0%	2.9%	0.0%	0.0%	0.1%	0.4%	0.2%	0.1%	1.0%	0.9%	2.6%
Other	7.8%	9.4%	9.5%	0.1%	9.0%	0.1%	2.0%	1.0%	7.4%	3.2%	0.6%	6.7%	5.8%	6.5%
Missing Data	0.1%	0.1%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%
Outpatient Behavioral Health Total	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.0%	0.1%	1.7%	0.7%	0.7%
Outpatient Facility Total	19.6%	38.2%	24.6%	0.2%	27.5%	0.2%	3.3%	2.9%	23.0%	7.9%	2.0%	18.3%	14.3%	17.2%
Physician Services														
IP Visits	1.6%	0.6%	1.0%	0.4%	0.7%	0.3%	18.6%	10.1%	3.6%	0.6%	0.5%	0.5%	0.5%	2.0%
IP Surgery	0.5%	0.3%	0.4%	0.2%	0.2%	0.1%	1.0%	0.4%	0.6%	0.1%	0.1%	0.2%	0.2%	0.4%
Office / Home Visits	4.6%	3.1%	9.0%	0.0%	3.1%	0.0%	1.1%	2.3%	16.3%	4.9%	1.2%	12.3%	10.9%	7.2%
Preventive Exams & Immunizations	0.6%	0.3%	3.2%	0.8%	25.7%	0.6%	0.6%	6.5%	17.4%	1.5%	0.3%	4.3%	2.8%	3.4%
Urgent Care Visits	0.0%	0.0%	0.3%	0.0%	0.2%	0.0%	0.0%	0.0%	0.2%	0.2%	0.0%	0.5%	0.5%	0.2%
ER Visits and Observation Care	1.0%	0.3%	2.2%	0.1%	2.8%	0.1%	0.2%	0.4%	3.2%	0.4%	0.3%	1.7%	1.2%	1.3%
OP Surgery	1.5%	2.6%	2.7%	0.0%	0.7%	0.0%	0.3%	0.2%	1.6%	0.9%	0.1%	2.0%	1.8%	1.6%
Physical Therapy	1.1%	0.3%	0.6%	0.0%	0.1%	0.0%	0.5%	0.0%	0.7%	1.8%	0.1%	1.7%	1.2%	1.1%
Psychiatric / Substance Abuse	4.1%	0.3%	2.1%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	9.2%	59.8%	5.9%	6.1%	4.7%
Radiology / Pathology	1.7%	3.7%	4.7%	0.7%	13.4%	0.7%	0.6%	0.5%	5.3%	1.3%	0.4%	4.2%	3.7%	3.0%
Vision, Hearing, and Speech Exams	0.4%	0.1%	0.8%	0.0%	0.6%	0.0%	0.1%	0.0%	0.1%	0.7%	0.1%	1.4%	1.8%	0.7%
Other	3.4%	20.4%	2.3%	18.9%	2.1%	19.2%	1.2%	0.4%	1.0%	2.2%	14.4%	1.4%	1.9%	3.2%
Missing Data	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%
Physician Behavioral Health Total	4.5%	0.3%	2.2%	0.0%	0.6%	0.0%	0.0%	0.0%	0.2%	10.3%	73.9%	6.6%	6.7%	5.3%
Physician Total	20.7%	32.1%	29.4%	21.1%	50.3%	21.0%	24.3%	20.8%	50.1%	23.9%	77.3%	36.2%	32.5%	28.8%
Pharmacy Services														
Pharmacy	33.7%	20.2%	29.9%	0.4%	10.8%	0.4%	9.0%	0.6%	10.7%	16.5%	5.7%	17.9%	22.5%	22.6%
Missing Data	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
Pharmacy Total	33.8%	20.3%	30.0%	0.4%	10.8%	0.4%	9.1%	0.6%	10.7%	16.6%	5.8%	18.0%	22.5%	22.7%
Dental Services														
Dental	0.9%	0.1%	1.3%	0.0%	1.0%	0.0%	0.0%	0.0%	0.5%	4.6%	1.0%	13.3%	16.4%	4.8%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
Dental Total	0.9%	0.1%	1.3%	0.0%	1.0%	0.0%	0.0%	0.0%	0.5%	4.6%	1.0%	13.3%	16.4%	4.8%
Other Services														
Ambulance	1.3%	0.3%	1.2%	0.4%	1.0%	0.3%	0.4%	0.6%	1.0%	0.3%	0.4%	0.7%	0.6%	1.0%
Non-Emergency Transportation	1.2%	1.0%	0.4%	0.0%	0.5%	0.0%	0.3%	0.0%	0.2%	0.1%	0.1%	0.2%	0.1%	0.6%
DME	2.7%	1.0%	1.1%	0.0%	0.6%	0.0%	1.8%	0.1%	1.1%	1.3%	0.1%	1.6%	1.6%	1.6%
Glasses / Contacts	0.2%	0.1%	0.4%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.4%	0.1%	0.8%	1.0%	0.4%
Other	1.5%	0.7%	0.1%	0.0%	0.0%	0.0%	1.2%	0.0%	0.4%	0.9%	0.1%	0.2%	0.2%	0.7%
Missing Data	0.7%	0.2%	0.4%	0.1%	0.3%	0.0%	0.1%	0.1%	0.7%	1.3%	0.1%	1.2%	1.1%	0.7%
Other Behavioral Health Total	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.1%	0.1%
Other Total	7.5%	3.4%	3.6%	0.5%	2.8%	0.3%	3.8%	0.8%	3.3%	4.3%	0.8%	4.2%	4.5%	4.9%
Total Behavioral Health	6.1%	0.3%	2.7%	0.0%	0.7%	0.0%	0.0%	0.0%	0.2%	50.7%	83.8%	13.0%	12.1%	9.0%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Exhibit 10D Mississippi Division of Medicaid Summary of CY 2021 MississippiCAN Encounter Claims Summary of Utilization/1000 and Average Charge by Rate Cell														
Member Months	745,395	1,708	570,832	570,832	117,512	117,512	5,146	70,289	238,386	79,811	9,828	3,350,611	348,614	5,538,132
Utilization/1000														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	66.5	77.3	16.5	0.0	3.6	0.0	228.5	44.4	24.3	5.0	13.4	4.1	3.6	15.4
Surgical	41.8	63.2	13.2	0.0	4.0	0.0	130.6	28.7	7.4	4.1	4.9	2.4	2.3	9.6
Maternity / Deliveries	4.5	0.0	4.7	53.0	49.8	997.7	408.1	3,072.9	0.2	1.4	1.2	2.2	2.4	69.6
Psychiatric / Substance Abuse	47.0	21.1	12.9	0.0	2.9	0.0	0.0	0.0	0.0	100.3	451.8	8.2	9.8	15.6
Skilled Nursing Facility	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Inpatient Behavioral Health Total	12.3	0.0	2.5	0.0	1.0	0.0	0.0	0.0	0.0	78.8	319.9	5.9	6.8	7.6
Inpatient Facility Total	159.8	161.6	47.4	53.0	60.2	997.7	767.2	3,145.9	31.8	110.7	471.3	16.9	18.1	110.2
Pharmacy Services														
Pharmacy	26,685.1	34,742.4	15,820.4	93.9	8,433.1	1,506.9	12,830.2	3,284.2	6,458.9	11,003.9	23,943.8	5,411.7	5,593.8	9,612.5
Pharmacy Total	26,685.1	34,742.4	15,820.4	93.9	8,433.1	1,506.9	12,830.2	3,284.2	6,458.9	11,003.9	23,943.8	5,411.7	5,593.8	9,612.5
Average Charge														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$10,294.24	\$12,817.09	\$9,723.59	\$0.00	\$7,827.89	\$0.00	\$9,459.10	\$7,797.97	\$6,344.65	\$5,953.29	\$7,539.42	\$6,811.13	\$7,523.64	\$9,220.52
Surgical	\$22,970.36	\$13,524.78	\$18,096.45	\$0.00	\$8,383.32	\$0.00	\$32,902.22	\$26,247.27	\$20,004.24	\$18,511.91	\$15,969.21	\$19,105.89	\$21,071.62	\$21,625.21
Maternity / Deliveries	\$7,208.34	\$0.00	\$6,937.29	\$6,068.65	\$5,123.75	\$5,207.03	\$99,786.30	\$4,787.54	\$160,852.87	\$7,695.64	\$7,863.86	\$5,846.00	\$5,305.19	\$5,610.39
Psychiatric / Substance Abuse	\$7,406.02	\$3,397.22	\$5,465.64	\$0.00	\$5,062.84	\$0.00	\$0.00	\$0.00	\$0.00	\$26,460.09	\$10,621.96	\$12,913.42	\$11,523.73	\$11,085.81
Skilled Nursing Facility	\$4,713.44	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,713.44
Inpatient Behavioral Health Total	\$9,631.90	\$0.00	\$6,767.71	\$0.00	\$4,520.74	\$0.00	\$0.00	\$0.00	\$0.00	\$31,576.91	\$11,492.00	\$15,259.81	\$13,478.50	\$15,767.33
Inpatient Facility Total	\$12,703.28	\$11,894.19	\$10,647.51	\$6,084.54	\$5,510.35	\$5,221.11	\$61,691.45	\$5,038.22	\$10,291.26	\$25,023.46	\$10,584.01	\$11,436.48	\$11,114.74	\$8,299.80
Pharmacy Services														
Pharmacy	\$147.23	\$189.49	\$85.89	\$19.70	\$56.33	\$16.35	\$560.36	\$41.46	\$43.95	\$97.50	\$90.63	\$63.79	\$82.74	\$99.83
Pharmacy Total	\$147.66	\$189.97	\$86.13	\$19.77	\$56.48	\$16.39	\$561.40	\$41.60	\$44.08	\$97.73	\$90.79	\$64.01	\$83.02	\$100.13

Exhibit 11
Mississippi Division of Medicaid
Encounter Data - 5% Assessment Categories

COS	COS Description	Rendering Provider Code	Rendering Provider Type Description	Mapped Broad Category of Service	Percent of Total 2021 Allowed in COS and Rendering Provider
03	LABORATORY AND RADIOLOGY	B00	INDEPENDENT LAB	Physician	0.54%
05	PHYSICIAN	A08	CHIROPRACITOR	Physician	0.02%
05	PHYSICIAN	A09	PODIATRIST	Physician	0.02%
06	HOME & COMM BASED SERVICES	L00	HHA UNCLASSIFIED	N/A - No Claims	0.00%
06	HOME & COMM BASED SERVICES	L02	HHA HOSPITAL BASED PROGRAM	N/A - No Claims	0.00%
06	HOME & COMM BASED SERVICES	W01	PERSONAL CARE SERVICES	Other	0.00%
06	HOME & COMM BASED SERVICES	W03	RESPIRE CARE, IN HOME	N/A - No Claims	0.00%
06	HOME & COMM BASED SERVICES	W04	ADULT DAY CARE	N/A - No Claims	0.00%
06	HOME & COMM BASED SERVICES	WC0	ASSISTED LIVING SERVICES PROV	N/A - No Claims	0.00%
07	HOME HEALTH SERVICES	L00	HHA UNCLASSIFIED	Outpatient	0.04%
07	HOME HEALTH SERVICES	L02	HHA HOSPITAL BASED PROGRAM	Outpatient	0.02%
09	MENTAL HEALTH CLINIC SERVICES	X00	COMMUNITY MENTAL HEALTH	Physician, Outpatient	0.17%
09	MENTAL HEALTH CLINIC SERVICES	X01	PRIVATE MENTAL HEALTH	Physician	0.53%
10	EPSDT SCREENING	E00	NURSE SCREENING	Physician	0.14%
10	EPSDT SCREENING	E01	NURSE SCREENING WITH CASE MGMT	N/A - No Claims	0.00%
10	EPSDT SCREENING	E04	PHYSICIANS SCREENER	Physician	0.35%
10	EPSDT SCREENING	E06	FEDERAL CLINIC, SCREEN ONLY	Physician	0.01%
10	EPSDT SCREENING	ED0	SCHOOL BASED SCREEN & CS MGT	Physician	0.00%
10	EPSDT SCREENING	EV0	VACCINE FOR CHILDREN PROVIDER	Physician	0.10%
11	EMERG/NON-EMERG TRANS	J00	AMBULANCE	Other	0.46%
12	DENTAL SERVICES	K00	DENTIST, UNCLASSIFIED	Dental	0.14%
13	EYEGLASS SERVICES	N00	OPTOMETRIST	Physician, Other	0.15%
13	EYEGLASS SERVICES	N01	OPTICAL DISPENSARY	Other	0.01%
16	DENTAL SCREENING	K00	DENTIST, UNCLASSIFIED	Dental	2.29%
17	EYEGLASS SCREENING	N00	OPTOMETRIST	Physician, Other	0.31%
17	EYEGLASS SCREENING	N01	OPTICAL DISPENSARY	Other	0.02%
18	HEARING SCREENING	M00	AUDIOLOGIST	Other, Physician	0.01%
24	MEDICAL SUPPLY (DME)	I00	DME, MEDICAL EQUIP SUPPLIES	Other, Physician	0.78%
24	MEDICAL SUPPLY (DME)	I01	DME, HOME HEALTH	Other	0.01%
24	MEDICAL SUPPLY (DME)	I03	DME, PHARMACY BASED, COMMUNITY	Other, Physician	0.07%
24	MEDICAL SUPPLY (DME)	S02	NURSE PRACTITIONER	Physician, Other	0.00%
24	MEDICAL SUPPLY (DME)	Y03	NF, COUNTY OWNED	N/A - No Claims	0.00%
24	MEDICAL SUPPLY (DME)	ZA0	GROUP, PHYSICIANS	N/A - No Claims	0.00%
24	MEDICAL SUPPLY (DME)	ZZ0	GROUP, OTHERS	N/A - No Claims	0.00%
25	THERAPY SERVICES (OUTSIDE HH)	T00	OCCUPATIONAL THERAPISTS	Physician	0.13%
25	THERAPY SERVICES (OUTSIDE HH)	T01	PHYSICAL THERAPISTS	Physician	0.22%
25	THERAPY SERVICES (OUTSIDE HH)	T02	SPEECH/LANGUAGE THERAPISTS	Physician	0.21%
28	NURSE SERVICES	S00	NURSE ANESTHETIST	Physician	0.15%
28	NURSE SERVICES	S01	NURSE MIDWIVES	Physician	0.01%
28	NURSE SERVICES	S02	NURSE PRACTITIONER	Physician	1.15%
28	NURSE SERVICES	S05	PRIVATE DUTY NURSING	Other	0.17%
28	NURSE SERVICES	S06	PHYSICIAN ASSISTANT	Physician	0.08%
29	AMBULATORY SURGICAL CENTER	V00	AMBULATORY SURGICAL CENTERS	Physician, Outpatient	0.21%
30	PERSONAL CARE SERVICES	W06	PERSONAL CARE ATTENDANT	N/A - No Claims	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X02	SOCIAL WORKER	Physician	0.09%
33	MENTAL HEALTH PRIVATE SERVICES	X03	PSYCHOLOGIST	Physician	0.02%
33	MENTAL HEALTH PRIVATE SERVICES	X05	IDD COMMUNITY SUPPORT PROGRAM	Outpatient, Physician	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X07	LICENSED PROFESIONAL COUNSELOR	Physician	0.20%
33	MENTAL HEALTH PRIVATE SERVICES	X08	BOARD CERTIFD BEHAVIOR ANALYST	Physician	0.02%
35	FREE STANDING DIALYSIS	Q01	KIDNEY DIALYSIS FREESTANDING	Outpatient	0.30%
35	FREE STANDING DIALYSIS	Q02	KIDNEY DIALYSIS HOSPITAL BASED	Outpatient	0.00%
61	PRESCRIBED PED EXT CARE CENTER	S07	PRESCRIBED PED EXT CARE CENTER	Physician	0.18%
57	MYPAC SERVICES	X04	N/A	Physician	0.64%
Percent of Allowed Eligible for 5% Assessment (A)					9.97%
5% Assessment Adjustment (B) = 1 - (A) * 0.05					0.9950

Exhibit 12
Mississippi Division of Medicaid
Summary of Program, Population, and Reimbursement Changes

Change	Change Type	Effective Date	Impacted Rate Cells	Where Reflected in Rate Development
PDL Adjustment	Program	Annually on January 1	All	Exhibit 2A
Seasonal Virus Adjustment	Program	March 15, 2021	All	Exhibit 2A
Acuity Adjustment - Shift to FFS	Program	June 1, 2021	MA Adult, MA Children, Quasi-CHIP	Exhibit 2A
Pharmacy Rate Freeze Repricing	Reimbursement	July 1, 2021	All	Exhibit 1
SSI Children - COE Change	Program	July 1, 2021	SSI	Exhibit 1
Removal of 5% Assessment	Reimbursement	July 1, 2021	All	Exhibit 2A
Preventative and Diagnostic Dental Reimbursement Change	Reimbursement	July 1, 2021, July 1, 2022 and July 1, 2023	All	Exhibit 2A
Psychiatric Residential Treatment Facilities (PRTF) Fee Schedule Update	Reimbursement	January 1, 2023 and January 1, 2024	All	Exhibit 2A
Restorative Dental Reimbursement Change	Reimbursement	July 1, 2022, July 1, 2023 and July 1, 2024	All	Exhibit 2A
Prescribed Pediatric Extended Care (PPEC) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Private Duty Nursing Services (PDN) Fee Schedule Update	Reimbursement	October 1, 2022 and July 1, 2023	All	Exhibit 2A
Behavioral Health Services (BHS) Fee Schedule Update	Reimbursement	July 1, 2023 and November 1, 2023	All	Exhibit 2A
Mississippi Youth Program Around the Clock (MYPAC) Fee Schedule Update	Reimbursement	November 1, 2023	All	Exhibit 2A
Orthodontia Services Fee Schedule Update	Reimbursement	October 1, 2023	All	Exhibit 2A
Ambulatory Sugical Center (ASC) Fee Schedule Update	Reimbursement	October 1, 2023 and January 1, 2024	All	Exhibit 2A
Home Health Agency (HHA) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Autism Spectrum Disorder (ASD) Fee Schedule Update	Reimbursement	January 1, 2023	All	Exhibit 2A
Postpartum Coverage Extension	Reimbursement	July 1, 2023	Pregnant Women	Exhibit 2A
MYPAC Member Identification Change	Population	July 1, 2022	Non-Newborn SSI / Disabled, Foster Care, MYPAC, MA Children, Quasi-CHIP	Exhibit 1

Exhibit 11A Mississippi Division of Medicaid Projected SFY 2023 and SFY 2024 Exposures		
Cap. Cell	SFY 2023 Exposures	SFY 2024 Exposures
Non-Newborn SSI / Disabled	719,346	713,375
Breast and Cervical Cancer	992	947
MA Adult	469,546	551,911
Pregnant Women	91,902	175,053
SSI / Disabled Newborn	4,066	7,065
Non-SSI Newborns 0 to 2 Months	74,603	67,990
Non-SSI Newborns 3 to 12 Months	215,942	234,084
Foster Care	86,381	90,993
MYPAC	5,177	13,368
MA Children	2,631,991	2,821,371
Quasi-CHIP	287,026	319,128
Total - All Cap Cells	4,586,971	4,995,247

Exhibit 11B Mississippi Division of Medicaid Components of SFY 2023 Cancellation Rates					
Cap. Cell	Non-Service Expenses		Quality Withhold	Total	
	PMPM	PMPM		Capitation Rate Prior to Withhold	Capitation Rate after Withhold
Non-Newborn SSI / Disabled	\$1,079.30	\$129.04	(\$2.08)	\$1,208.34	\$1,186.25
Breast and Cervical Cancer	\$3,488.34	\$390.92	(\$8.79)	\$3,879.26	\$3,840.47
MA Adult	\$490.24	\$65.00	(\$5.55)	\$555.24	\$549.69
Pregnant Women	\$1,031.58	\$123.85	(\$11.55)	\$1,155.43	\$1,143.87
SSI / Disabled Newborn	\$8,000.01	\$881.38	(\$88.81)	\$8,881.39	\$8,792.57
Non-SSI Newborns 0 to 2 Month	\$2,834.16	\$211.10	(\$20.45)	\$2,045.26	\$2,024.81
Non-SSI Newborns 3 to 12 Month	\$248.67	\$38.74	(\$2.87)	\$287.41	\$284.54
Foster Care	\$639.31	\$81.20	(\$7.21)	\$720.51	\$713.31
MYPAC	\$417.95	\$417.80	(\$41.53)	\$4,103.40	\$4,111.86
MA Children	\$200.39	\$33.49	(\$2.34)	\$233.88	\$231.54
Quasi-CHIP	\$202.70	\$33.74	(\$2.39)	\$236.44	\$234.08
Total - All Cap Cells ¹	\$433.42	\$58.82	(\$4.92)	\$492.24	\$487.32
Using SFY 2023 Exposures	\$440.81	\$59.63	(\$5.00)	\$500.43	\$495.43
Using SFY 2024 Exposures					
Total Expenditures					
Using SFY 2023 Exposures	\$1,988,078,377	\$269,817,313	(\$22,578,957)	\$2,257,895,690	\$2,235,316,733
Using SFY 2024 Exposures	\$2,201,344,072	\$297,485,714	(\$24,997,898)	\$2,499,795,796	\$2,474,793,889

¹ Non-Benefit Expenses PMPM include margin, administrative costs, and premium (as prior to MHPAP).

Exhibit 11C Mississippi Division of Medicaid Components of SFY 2024 Cancellation Rates					
Cap. Cell	Non-Service Expenses		Quality Withhold	Total	
	PMPM	PMPM		Capitation Rate Prior to Withhold	Capitation Rate after Withhold
Non-Newborn SSI / Disabled	\$1,178.31	\$142.06	(\$13.29)	\$1,320.36	\$1,307.06
Breast and Cervical Cancer	\$3,114.60	\$356.12	(\$34.70)	\$3,469.71	\$3,435.02
MA Adult	\$497.58	\$67.15	(\$5.65)	\$564.73	\$559.08
Pregnant Women	\$648.98	\$83.77	(\$7.22)	\$732.35	\$725.03
SSI / Disabled Newborn	\$7,520.28	\$839.89	(\$83.60)	\$8,360.17	\$8,276.57
Non-SSI Newborns 0 to 2 Month	\$2,039.08	\$236.77	(\$22.78)	\$2,275.83	\$2,253.07
Non-SSI Newborns 3 to 12 Month	\$262.22	\$41.26	(\$3.03)	\$303.48	\$300.44
Foster Care	\$650.29	\$83.96	(\$7.34)	\$734.25	\$726.91
MYPAC	\$3,535.36	\$401.41	(\$39.37)	\$3,936.78	\$3,897.41
MA Children	\$206.13	\$34.97	(\$2.48)	\$240.10	\$237.70
Quasi-CHIP	\$216.99	\$36.28	(\$2.53)	\$253.27	\$250.74
Total - All Cap Cells ¹	\$449.08	\$61.82	(\$5.11)	\$510.90	\$505.79
Using SFY 2023 Exposures	\$448.26	\$61.73	(\$5.10)	\$509.99	\$504.89
Using SFY 2024 Exposures					
Total Expenditures					
Using SFY 2023 Exposures	\$2,059,904,605	\$283,556,932	(\$23,434,615)	\$2,343,461,536	\$2,320,026,921
Using SFY 2024 Exposures	\$2,235,182,626	\$308,345,715	(\$25,475,083)	\$2,541,058,341	\$2,522,033,258

¹ Non-Benefit Expenses PMPM include margin, administrative costs, and premium (as prior to MHPAP).

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Exhibit 15 Mississippi Division of Medicaid SFY 2024 MississippiCAN Capitation Rate Development Seasonal Virus Adjustment												
Year	SSI ¹			Newborns ²			Children ³			Adults ⁴		
	COVID-19	Flu/RSV	Total	COVID-19	Flu/RSV	Total	COVID-19	Flu/RSV	Total	COVID-19	Flu/RSV	Total
CY 2018	\$0.00	\$5.78	\$5.78	\$0.00	\$34.76	\$34.76	\$0.00	\$4.68	\$4.68	\$0.00	\$2.51	\$2.51
CY 2019	\$0.00	\$5.67	\$5.67	\$0.00	\$34.00	\$34.00	\$0.00	\$7.41	\$7.41	\$0.00	\$2.94	\$2.94
CY 2021	\$26.29	\$4.10	\$30.39	\$11.37	\$30.48	\$41.85	\$6.41	\$2.45	\$8.85	\$19.98	\$1.04	\$21.02
SFY 2024 Estimate ⁵	\$13.14	\$5.73	\$18.87	\$5.68	\$34.38	\$40.07	\$3.20	\$6.05	\$9.25	\$9.99	\$2.73	\$12.72
SFY 2024 Adjustment	-\$13.14	\$1.63	-\$11.52	-\$5.68	\$3.90	-\$1.78	-\$3.20	\$3.60	\$0.40	-\$9.99	\$1.69	-\$8.30

¹ SSI includes the Non-Newborn SSI / Disabled rate cell.
² Newborns include the SSI / Disabled Newborn, Non-SSI Newborns 0 to 2 Months, and Non-SSI Newborns 3 to 12 months rate cells.
³ Children include the CHIP, Foster Care, MA Children, Quasi-CHIP, and MYPAC rate cells.
⁴ Adults include the MA Adult, Pregnant Women, and Breast and Cervical Cancer rate cells.
⁵ The SFY 2024 estimate includes 50% of the observed CY 2021 COVID-19 costs and 100% of the average CY 2018 and CY 2019 historical flu/RSV costs.

Exhibit 16														
Mississippi Division of Medicaid														
SFY 2024 MississippiCAN Capitation Rate Development														
SFY 2024 MississippiCAN Expenditure Estimate														
	a	b	c	d	e	f	g	h	i	j	k = sum of b through j	l = a + k	m	n = l + m
Rate Cell	Projected SFY 2024 Member Months	SFY 2024 Statewide Capitation Rates ¹	MHAP-FSA PMPM	Premium Tax on MHAP-FSA PMPM	MHAP-QIPP PMPM	Premium Tax on MHAP-QIPP PMPM	TREAT PMPM	Premium Tax on TREAT PMPM	MAPS PMPM	Premium Tax on MAPS PMPM	Total Rate at 1.0 Risk Score after Withhold	MississippiCAN Estimated Cost	FMAP / EFMAP ²	Federal Estimated Cost
Non-Newborn SSI / Disabled	713,375	\$1,320.36	\$340.85	\$10.54	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$1,846.89	\$1,317,451,277	78.42%	\$1,033,112,355
North Region	244,896	1,201.06	299.06	9.25	157.86	4.88	4.13	0.13	7.89	0.24	1,684.50	412,526,199	78.42%	323,492,732
Central Region	259,544	1,370.44	367.15	11.36	157.86	4.88	4.13	0.13	7.89	0.24	1,924.08	499,575,274	78.42%	391,754,441
South Region	208,835	1,397.66	367.17	11.06	157.86	4.88	4.13	0.13	7.89	0.24	1,941.00	405,349,804	78.42%	317,865,182
Breast and Cervical Cancer	947	\$3,469.71	\$971.18	\$30.04	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$4,648.07	\$4,475,890	78.42%	\$3,509,873
North Region	179	3,156.19	649.59	20.09	157.86	4.88	4.13	0.13	7.89	0.24	4,001.01	714,636	78.42%	560,400
Central Region	365	3,601.30	767.10	23.72	157.86	4.88	4.13	0.13	7.89	0.24	4,567.26	1,667,022	78.42%	1,307,237
South Region	404	3,672.83	1,297.88	40.14	157.86	4.88	4.13	0.13	7.89	0.24	5,185.99	2,094,221	78.42%	1,642,236
MA Adult	551,911	\$564.73	\$158.43	\$4.90	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$903.19	\$498,590,458	78.42%	\$390,982,173
North Region	166,853	537.32	144.36	4.48	157.86	4.88	4.13	0.13	7.89	0.24	861.89	143,898,665	78.42%	112,771,160
Central Region	185,364	577.83	166.82	5.16	157.86	4.88	4.13	0.13	7.89	0.24	924.94	171,450,609	78.42%	134,447,282
South Region	199,694	576.03	161.89	5.01	157.86	4.88	4.13	0.13	7.89	0.24	918.06	183,331,183	78.42%	143,763,731
Pregnant Women	175,053	\$732.35	\$334.23	\$10.34	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$1,252.66	\$219,066,286	78.42%	\$171,786,304
North Region	56,212	696.80	327.55	10.13	157.86	4.88	4.13	0.13	7.89	0.24	1,209.62	67,995,779	78.42%	53,320,590
Central Region	62,792	749.24	347.21	10.74	157.86	4.88	4.13	0.13	7.89	0.24	1,282.42	80,526,403	78.42%	63,146,792
South Region	56,049	747.01	326.39	10.09	157.86	4.88	4.13	0.13	7.89	0.24	1,258.62	70,544,103	78.42%	55,318,922
SSI / Disabled Newborn	7,065	\$8,360.17	\$4,896.46	\$151.44	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$13,583.21	\$96,182,241	78.42%	\$75,423,709
North Region	2,080	8,256.42	5,016.37	155.15	157.86	4.88	4.13	0.13	7.89	0.24	13,603.07	28,294,957	78.42%	22,188,198
Central Region	3,084	8,599.82	5,625.75	173.99	157.86	4.88	4.13	0.13	7.89	0.24	14,574.69	44,943,664	78.42%	35,243,697
South Region	1,902	8,197.13	3,862.54	110.80	157.86	4.88	4.13	0.13	7.89	0.24	12,065.71	22,943,621	78.42%	17,991,814
Non-SSI Newborns 0 to 2 Months	67,950	\$2,275.83	\$1,619.20	\$50.08	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$4,120.24	\$280,010,335	78.42%	\$219,577,105
North Region	21,286	2,247.59	1,544.41	47.77	157.86	4.88	4.13	0.13	7.89	0.24	4,014.89	85,462,253	78.42%	67,017,362
Central Region	24,738	2,341.07	1,711.23	52.92	157.86	4.88	4.13	0.13	7.89	0.24	4,280.35	105,885,250	78.42%	83,032,566
South Region	21,926	2,231.45	1,587.99	49.11	157.86	4.88	4.13	0.13	7.89	0.24	4,043.68	88,662,832	78.42%	69,527,177
Non-SSI Newborns 3 to 12 Months	234,084	\$303.48	\$67.53	\$2.09	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$548.22	\$128,356,867	78.42%	\$100,654,246
North Region	73,573	299.71	68.29	2.11	157.86	4.88	4.13	0.13	7.89	0.24	545.25	40,115,549	78.42%	31,457,611
Central Region	85,736	312.18	75.33	2.33	157.86	4.88	4.13	0.13	7.89	0.24	564.97	48,438,771	78.42%	37,984,473
South Region	74,775	297.56	57.82	1.79	157.86	4.88	4.13	0.13	7.89	0.24	532.30	39,802,546	78.42%	31,212,162
Foster Care	90,993	\$734.25	\$337.32	\$10.43	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$1,257.13	\$114,186,207	78.42%	\$89,541,969
North Region	26,774	725.14	333.89	10.33	157.86	4.88	4.13	0.13	7.89	0.24	1,244.49	33,319,604	78.42%	26,128,401
Central Region	27,117	755.30	443.89	13.73	157.86	4.88	4.13	0.13	7.89	0.24	1,388.05	37,639,873	78.42%	29,516,247
South Region	37,102	719.93	261.90	8.10	157.86	4.88	4.13	0.13	7.89	0.24	1,165.96	43,226,730	78.42%	33,887,321
MYPAC	13,368	\$3,836.78	\$653.78	\$20.22	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$4,785.91	\$63,845,936	78.42%	\$50,066,387
North Region	4,563	3,887.92	578.25	17.88	157.86	4.88	4.13	0.13	7.89	0.24	4,659.18	21,261,020	78.42%	16,672,360
Central Region	4,046	4,049.62	676.11	20.91	157.86	4.88	4.13	0.13	7.89	0.24	4,921.78	19,911,771	78.42%	15,614,313
South Region	4,759	3,860.00	707.23	21.87	157.86	4.88	4.13	0.13	7.89	0.24	4,764.24	22,673,146	78.42%	17,779,714
MA Children	2,821,371	\$240.10	\$46.14	\$1.43	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$462.80	\$1,305,753,371	78.42%	\$1,023,939,150
North Region	876,676	227.12	42.96	1.33	157.86	4.88	4.13	0.13	7.89	0.24	456.54	400,240,176	78.42%	313,856,340
Central Region	1,014,288	246.98	48.48	1.50	157.86	4.88	4.13	0.13	7.89	0.24	472.09	478,835,605	78.42%	375,490,911
South Region	930,407	235.42	46.60	1.44	157.86	4.88	4.13	0.13	7.89	0.24	458.59	426,677,590	78.42%	334,589,899
Quasi-CHIP	319,128	\$253.27	\$42.91	\$1.33	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$472.64	\$150,879,320	84.55%	\$127,560,921
North Region	103,227	250.13	37.29	1.15	157.86	4.88	4.13	0.13	7.89	0.24	463.70	47,866,131	84.55%	40,468,420
Central Region	117,778	260.53	44.05	1.36	157.86	4.88	4.13	0.13	7.89	0.24	481.07	56,659,446	84.55%	47,902,728
South Region	98,124	248.33	47.47	1.47	157.86	4.88	4.13	0.13	7.89	0.24	472.40	46,353,743	84.55%	39,189,772
Total - All Rate Cells	4,995,247	\$509.99	\$146.89	\$4.54	\$157.86	\$4.88	\$4.13	\$0.13	\$7.89	\$0.24	\$836.55	\$4,178,798,177	78.64%	\$3,296,154,101
North Region	1,576,319	495.74	137.90	4.26	157.86	4.88	4.13	0.13	7.89	0.24	813.04	1,281,604,970	78.65%	1,007,935,574
Central Region	1,784,952	526.94	158.88	4.91	157.86	4.88	4.13	0.13	7.89	0.24	865.87	1,545,533,688	78.64%	1,215,440,687
South Region	1,633,976	505.21	142.47	4.41	157.86	4.88	4.13	0.13	7.89	0.24	827.22	1,351,659,519	78.63%	1,062,777,929

¹ Capitation rates prior to quality withhold, excluding MHAP, MAPS, and TREAT.

² Calculated using a premium tax of 3.00%.

³ For SFY 2024, FMAP is calculated as the blend of three months using an FMAP of 80.36%, three months using an FMAP of 78.77%, and six months using an FMAP of 77.27%. For SFY 2024, EFMAP is calculated as the blend of six months using an EFMAP of 85.00% and six months using an EFMAP of 84.09%. These FMAP and EFMAP projections include the phase-down of the additional federal match as described in the 2023 Consolidated Appropriations Act.

Exhibit 17A
Mississippi Division of Medicaid
SFY 2024 MississippiCAN Capitation Rate Development
High-Cost Pharmacy Risk Corridor
Illustrative Settlement Calculation

	a	b	c	d = c / a
	Illustrative Actual SFY 2024 Membership ¹	SFY 2024 Regional High-Cost Pharmacy Target PMPM	Illustrative Actual SFY 2024 High-Cost Pharmacy Costs ^{2,3}	Illustrative Actual SFY 2024 High-Cost Pharmacy PMPM
Rate Cell				
Non-Newborn SSI / Disabled	713,000	\$65.99	\$49,700,000	\$69.71
Breast and Cervical Cancer	1,000	\$0.00	\$0	\$0.00
MA Adult	552,000	\$1.26	\$1,400,000	\$2.54
Pregnant Women	175,000	\$0.00	\$0	\$0.00
SSI / Disabled Newborn	7,000	\$0.00	\$0	\$0.00
Non-SSI Newborns 0 to 2 Months	68,000	\$24.96	\$1,700,000	\$25.00
Non-SSI Newborns 3 to 12 Months	234,000	\$7.36	\$1,900,000	\$8.12
Foster Care	91,000	\$9.58	\$2,600,000	\$28.57
MYPAC	13,000	\$15.71	\$200,000	\$15.38
MA Children	2,821,000	\$2.08	\$11,100,000	\$3.93
Quasi-CHIP	319,000	\$0.00	\$500,000	\$1.57
Total	4,994,000	\$11.63	\$69,100,000	\$13.84

Illustrative Actual Risk Corridor Eligible Costs	\$69,100,000	e = c
Illustrative Target Risk Corridor Eligible Costs	\$58,101,612	f = a × b
Difference (\$)	\$10,998,388	g = e - f
Difference (%)	18.93%	h = g / f

Risk Corridor Bands	% i	\$ j = i × f	Settlement k = j × DOM %
< -6%: 0% CCO / 100% DOM	0.00%	\$0	\$0
-6% to -3%: 50% CCO / 50% DOM	0.00%	\$0	\$0
-3% to 0%: 100% CCO / 0% DOM	0.00%	\$0	\$0
0% to 3%: 100% CCO / 0% DOM	3.00%	\$1,743,048	\$0
3% to 6%: 50% CCO / 50% DOM	3.00%	\$1,743,048	(\$871,524)
> 6%: 0% CCO / 100% DOM	12.93%	\$7,512,291	(\$7,512,291)

Total Risk Corridor Settlement Received (Paid) by DOM **(\$8,383,815)**

¹ Illustrative values demonstrate projected regional enrollment mix. Actual values will use CCO-specific regional enrollment mix.

² PMPM calculation will be populated with actual SFY 2024 CCO-specific values.

³ Includes all costs incurred during SFY 2024 eligible for the risk corridor, as outlined in the rate certification. Actual costs, but not target costs, will be populated with actual SFY 2024 CCO-specific experience.

⁴ Costs and premiums associated with the High-Cost Pharmacy Risk Corridor will not be accounted for or included in the calculation of the Program-Wide Risk Corridor.

Exhibit 17B																							
Mississippi Division of Medicaid																							
SFY 2024 Mississippi/CAN Capitation Rate Development																							
Illustrative MLR Development																							
a		b		c	d = d x c		e	f = d x (b + 150) / (1 - 150)		g	h		i	j		k	l = d + f + g + h + i + j						
Rate Cell		SFY 2024 Regional Capitation Rates		Illustrative Risk Score ¹	Risk Adjusted Premium Net % of Withhold Returned ¹		Withhold Returned	MHAP-PSA PMPM Gross of Premium Tax ²		Gross of Premium Tax ²	MHAP-QPP MAPS Gross of Premium Tax ²		Gross of Premium Tax ²	TREAT Gross of Premium Tax ²	Total Revenue ³	SFY 2024 High-Cost Pharmacy Target PMPM	Illustrative High-Cost Pharmacy Actual SFY 2024 PMPM	Projected SFY 2024 Medical Service Costs PMPM ⁴	Projected Total Service Costs PMPM	Illustrative Actual SFY 2024 Medical Service Costs PMPM ⁴	Illustrative Actual Total Service Costs PMPM	Illustrative Actual Target MLR	Illustrative Actual MLR
Non-Newborn SSI / Disabled Breast and Cervical Cancer	713,376	\$1,307.16	1,000	\$1,307.16	100%		\$13.20	\$353.39	\$162.74	\$8.14	\$4.25	\$1,466.89	\$66.95	\$69.71	\$1,178.31	\$1,638.06	\$1,240.00	\$1,696.82	\$1,696.82	\$1,696.82	92.0%	95.3%	
MA Adult	947	\$3,435.02	1,000	\$3,435.02	100%		\$34.70	\$1,003.22	\$162.74	\$8.14	\$4.25	\$4,646.07	\$0.00	\$0.00	\$3,114.60	\$4,290.95	\$3,270.00	\$4,446.35	\$4,446.35	\$4,446.35	92.4%	95.7%	
Pregnant Women	151,911	\$559.08	1,000	\$559.08	100%		\$5.65	\$163.33	\$162.74	\$8.14	\$4.25	\$903.19	\$1.29	\$2.54	\$497.58	\$634.77	\$620.00	\$695.92	\$695.92	\$695.92	92.0%	94.9%	
SSI / Disabled Newborn	175,053	\$725.03	1,000	\$725.03	100%		\$7.32	\$344.57	\$162.74	\$8.14	\$4.25	\$1,252.06	\$0.00	\$0.00	\$648.58	\$1,168.29	\$680.00	\$1,199.70	\$1,199.70	\$1,199.70	93.3%	95.9%	
Non-SSI Newborns 0 to 2 Months	7,065	\$8,276.57	1,000	\$8,276.57	100%		\$83.60	\$5,047.90	\$162.74	\$8.14	\$4.25	\$13,583.21	\$0.00	\$0.00	\$7,520.28	\$12,743.31	\$7,900.00	\$13,123.03	\$13,123.03	\$13,123.03	93.8%	96.0%	
Non-SSI Newborns 3 to 12 Months	67,860	\$2,753.07	1,000	\$2,753.07	100%		\$27.76	\$1,669.28	\$162.74	\$8.14	\$4.25	\$4,120.24	\$24.96	\$25.00	\$2,039.06	\$3,864.51	\$2,140.00	\$3,999.41	\$3,999.41	\$3,999.41	94.2%	96.7%	
Foster Care	234,084	\$300.44	1,000	\$300.44	100%		\$3.03	\$69.62	\$162.74	\$8.14	\$4.25	\$548.22	\$7.36	\$8.12	\$262.22	\$499.61	\$280.00	\$516.63	\$516.63	\$516.63	92.4%	95.5%	
MYCAC	50,993	\$726.51	1,000	\$726.51	100%		\$7.34	\$347.75	\$162.74	\$8.14	\$4.25	\$1,257.13	\$9.98	\$29.57	\$650.29	\$1,163.60	\$680.00	\$1,174.11	\$1,174.11	\$1,174.11	93.3%	94.1%	
MI Children	13,368	\$3,897.41	1,000	\$3,897.41	100%		\$39.37	\$674.01	\$162.74	\$8.14	\$4.25	\$4,785.91	\$15.71	\$15.38	\$3,535.36	\$4,368.79	\$3,710.00	\$4,543.75	\$4,543.75	\$4,543.75	91.0%	95.3%	
Quasi-CHIP	2,821,371	\$237.70	1,000	\$237.70	100%		\$2.40	\$47.87	\$162.74	\$8.14	\$4.25	\$463.86	\$2.00	\$3.93	\$205.13	\$425.75	\$220.00	\$438.77	\$438.77	\$438.77	92.4%	95.2%	
Total	3,191,128	\$250.74	1,000	\$250.74	100%		\$5.53	\$44.24	\$162.74	\$8.14	\$4.25	\$472.64	\$0.00	\$1.57	\$216.99	\$436.36	\$230.00	\$447.81	\$447.81	\$447.81	92.3%	94.7%	

Illustrative Actual MLR	95.33%
Illustrative Target MLR	92.52%
MLR Difference	-2.81%
MLR Difference Exceeding Corridor	-0.83%
Total Revenue ⁵	(\$33,479,785)
Risk Corridor Settlement Received (Paid) by DOM	(\$33,479,785)

¹ MLR calculation will be populated with actual SFY 2024 CCO-specific values.

² Illustrative values demonstrate projected regional enrollment mix. Actual values will use CCO-specific regional enrollment mix.

³ Includes all services incurred during SFY 2024 with payments made to providers as defined in Exhibit C of the CCO Contract, including fee-for-service payments, subcapitation payments, and settlement payments. Actual MLR, but not target MLR, will be populated with actual SFY 2024 CCO-specific values. Additionally, both actual and target costs will use CCO-specific regional enrollment mix. Actual MLR will include adjustments for items found in MLR audits and adjustments to remove services not covered by the Mississippi state plan.

⁴ Costs and premium associated with the High-Cost Pharmacy Risk Corridor will not be accounted for or included in the calculation of the Program-Wide Risk Corridor.

⁵ Excluding high-cost pharmacy target PMPM.

Exhibit 17C Mississippi Division of Medicaid SFY 2024 High Cost Pharmacy Risk Corridor Development																							
		Non-Newborn SSI / Disabled		Breast and Cervical Cancer		MA Adult		Pregnant Women		SSI / Disabled Newborn		Non-SSI Newborns 0 to 2 Months		Non-SSI Newborns 3 to 12 Months		Foster Care		MYPAC		MA Children		Quasi-CHIP	
		PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total	PMPM	Total
Step One: Remove cost of program changes from SFY 2024 pharmacy PMPM																							
(a)	Projected SFY 2024 Pharmacy Spend ¹	\$438.09	\$326,661,485	\$611.17	\$1,043,871	\$141.22	\$80,612,270	\$34.99	\$4,112,000	\$635.82	\$3,271,949	\$44.83	\$3,151,337	\$34.36	\$8,191,777	\$101.34	\$8,083,923	\$192.01	\$1,914,168	\$37.88	\$126,902,626	\$48.53	\$16,919,738
(b)	Hemophilia A Population Curve-In Pharmacy Spend ²	\$3.16	\$2,359,742	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.16	\$38,995	\$2.35	\$187,315	\$0.00	\$0	\$0.40	\$1,325,790	\$0.92	\$320,801
(c)	Hemophilia B Population Curve-In Pharmacy Spend ²	\$1.37	\$1,024,882	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.01	\$405	\$0.00	\$0	\$0.13	\$444,990	\$0.00	\$0
(d)	Hemophilia A Gene Therapy	\$6.71	\$5,000,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.75	\$2,500,000	\$0.00	\$0
	Gross Pharmacy Costs	\$0.56	\$414,066	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.06	\$207,033	\$0.00	\$0
	Anticipated Pharmacy Savings	\$6.15	\$4,585,934	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.68	\$2,292,967	\$0.00	\$0
(e)	Hemophilia B Gene Therapy	\$4.69	\$3,500,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Gross Pharmacy Costs	\$0.14	\$105,692	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Anticipated Pharmacy Savings	\$4.55	\$3,394,308	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(f)	Sickle Cell Disease Gene Therapy	\$50.96	\$38,000,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.60	\$2,000,000	\$0.00	\$0
	Gross Pharmacy Costs	\$0.33	\$247,695	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$13,037	\$0.00	\$0
	Anticipated Pharmacy Savings	\$50.63	\$37,752,305	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.59	\$1,986,963	\$0.00	\$0
(g)	Duchenne Muscular Dystrophy Gene Therapy	\$4.29	\$3,200,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Gross Pharmacy Costs	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Anticipated Pharmacy Savings	\$4.29	\$3,200,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(h)	Spinal Muscular Atrophy Gene Therapy	\$3.02	\$2,254,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$32.07	\$2,254,412	\$9.46	\$2,254,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Gross Pharmacy Costs	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Anticipated Pharmacy Savings	\$3.02	\$2,254,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$32.07	\$2,254,412	\$9.46	\$2,254,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(i)	Beta-Thalassemia Gene Therapy	\$3.76	\$2,800,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Gross Pharmacy Costs	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Anticipated Pharmacy Savings	\$3.76	\$2,800,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(j) = (a) - sum((b) to (i)) Adjusted SFY 2024 Pharmacy Spend		\$356.86	\$266,089,903	\$611.17	\$1,043,871	\$141.22	\$80,612,270	\$34.99	\$4,112,000	\$635.82	\$3,271,949	\$12.76	\$896,925	\$24.74	\$5,898,370	\$98.98	\$7,896,203	\$192.01	\$1,914,168	\$36.07	\$120,851,915	\$47.61	\$16,598,937
Step Two: Using CY 2021 encounter data, estimate the percentage of pharmacy costs that will exceed the risk corridor threshold.																							
(k)	Historical Percentage of Claims Over Threshold ³	1.2%	1.2%	0.0%	0.0%	0.9%	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	9.7%	9.7%	8.2%	8.2%	2.7%	2.7%	0.0%	0.0%
(l) = (j) * (k) Anticipated SFY 2024 Pharmacy Cost Over Threshold, Prior to Program Changes		\$4.17	\$3,108,401	\$0.00	\$0	\$1.26	\$721,264	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$9.58	\$763,919	\$15.71	\$156,632	\$0.96	\$3,231,122	\$0.00	\$0
Step Three: Add the cost of new pharmacy covered services for SFY 2024 to Step Two.																							
(m)	Hemophilia A Population Curve-In	\$3.16	\$2,359,742	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.16	\$38,995	\$2.35	\$187,315	\$0.00	\$0	\$0.40	\$1,325,790	\$0.92	\$320,801
	Total Pharmacy Spend	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Historical Percentage of Claims Over Threshold	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(n)	Hemophilia B Population Curve-In	\$1.37	\$1,024,882	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.01	\$405	\$0.00	\$0	\$0.13	\$444,990	\$0.00	\$0
	Total Pharmacy Spend	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Historical Percentage of Claims Over Threshold	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
(o)	Hemophilia A Gene Therapy	\$5.18	\$3,863,551	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.59	\$1,982,365	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(p)	Hemophilia B Gene Therapy	\$4.01	\$2,987,480	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(q)	Sickle Cell Disease Gene Therapy	\$43.30	\$32,288,109	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.52	\$1,748,458	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(r)	Duchenne Muscular Dystrophy Gene Therapy	\$3.62	\$2,700,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(s)	Spinal Muscular Atrophy Gene Therapy	\$2.35	\$1,754,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$24.96	\$1,754,412	\$7.36	\$1,754,412	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(t)	Beta-Thalassemia Gene Therapy	\$3.35	\$2,500,000	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0	\$0.00	\$0
	Risk Corridor Eligible Spend ⁴																						
(ul) = sum((l) to (t)) Anticipated SFY 2024 Pharmacy Cost Over Threshold, Including Program Changes		\$65.99	\$49,201,953	\$0.00	\$0	\$1.26	\$721,264	\$0.00	\$0	\$0.00	\$0	\$24.96	\$1,754,412	\$7.36	\$1,754,412	\$9.58	\$763,919	\$15.71	\$156,632	\$2.08	\$6,961,945	\$0.00	\$0

¹ PMPM amounts tie to the projected SFY 2024 PMPM costs of Exhibit 2A for each rate cell.
² CY 2021 claims for anticipated members transitioning from FFS to MSCAN trended forward to SFY 2024.
³ SFY 2024 threshold of \$500,000 adjusted to a CY 2021 level using the population specific specialty unit cost pharmacy trend.
⁴ See Exhibit 17D for the development of the risk corridor eligible spend for each gene therapy.

Exhibit 17D												
Mississippi Division of Medicaid												
SFY 2024 High Cost Pharmacy Risk Corridor Development - Gene Therapy Supplemental Support												
		Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP
Hemophilia A Gene Therapy												
(a)	Expected Number of Therapies	2	0	0	0	0	0	0	0	0	1	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$4,585,934	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,292,967	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$4,585,934	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,292,967	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$2,292,967	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,292,967	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$138,808	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$189,399	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$500,000	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$1,931,775	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,982,366	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$3,863,551	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,982,366	\$0
Hemophilia B Gene Therapy												
(a)	Expected Number of Therapies	1	0	0	0	0	0	0	0	0	0	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$3,394,308	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$3,394,308	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$3,394,308	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$93,171	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$148,330	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$500,000	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$2,987,480	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$2,987,480	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Sickle Cell Disease Gene Therapy												
(a)	Expected Number of Therapies	19	0	0	0	0	0	0	0	0	1	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$37,752,305	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,986,963	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$3,800,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$200,000	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$41,552,305	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,186,963	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$2,186,963	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$2,186,963	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$12,411	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$61,494	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$500,000	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$1,699,374	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,748,458	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$32,288,109	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,748,458	\$0
Duchene Muscular Dystrophy Gene Therapy												
(a)	Expected Number of Therapies	1	0	0	0	0	0	0	0	0	0	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$3,200,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$3,200,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$3,200,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$2,700,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$2,700,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Spinal Muscular Atrophy Gene Therapy												
(a)	Expected Number of Therapies	1	0	0	0	0	1	1	0	0	0	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$2,254,412	\$0	\$0	\$0	\$0	\$2,254,412	\$2,254,412	\$0	\$0	\$0	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$2,254,412	\$0	\$0	\$0	\$0	\$2,254,412	\$2,254,412	\$0	\$0	\$0	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$2,254,412	\$0	\$0	\$0	\$0	\$2,254,412	\$2,254,412	\$0	\$0	\$0	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$500,000	\$500,000	\$0	\$0	\$0	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$1,754,412	\$0	\$0	\$0	\$0	\$1,754,412	\$1,754,412	\$0	\$0	\$0	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$1,754,412	\$0	\$0	\$0	\$0	\$1,754,412	\$1,754,412	\$0	\$0	\$0	\$0
Beta-Thalassemia Gene Therapy												
(a)	Expected Number of Therapies	1	0	0	0	0	0	0	0	0	0	0
(b)	Net Pharmacy Cost for Gene Therapy ¹	\$2,800,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(c)	Applicable Inpatient Hospital Cost for Gene Therapy	\$200,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(d) = (b) + (c)	Total Gene Therapy Cost	\$3,000,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(e) = (d) / (a)	Total Cost per Therapy	\$3,000,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(f)	Average Prior Pharmacy Spend per Member ²	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(g)	Pharmacy RC Threshold per Member	\$500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(h) = max[(e) + (f) - (g), 0]	RC Eligible Dollars per Member	\$2,500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
(i) = (h) x (a)	Total RC Eligible Dollars	\$2,500,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

¹ Reconciles to Exhibit 17C items (d) through (i).
² CY 2021 average pharmacy spend trended forward to SFY 2024 for gene therapies with more than 10 potential patients.

Exhibit 18A			
Mississippi Division of Medicaid			
Procedure Codes for Non-Psychiatric Physician Visits			
W9009	90066	90544	92004
W9348	90067	90545	92012
W9349	90068	90546	92014
90000	90069	90547	99062
90001	90070	90548	99063
90002	90071	90549	99064
90003	90072	90550	99065
90004	90073	90551	99241
90005	90074	90552	99242
90006	90075	90553	99243
90007	90076	90554	99244
90008	90077	90555	99245
90009	90078	90556	99271
90010	90079	90557	99272
90011	90080	90558	99273
90012	90500	90559	99274
90013	90501	90560	99275
90014	90502	90561	99341
90015	90503	90562	99342
90016	90504	90563	99343
90017	90505	90564	99344
90018	90506	90565	99345
90019	90507	90566	99347
90020	90508	90567	99348
90040	90509	90568	99349
90041	90510	90569	99350
90042	90511	90570	
90043	90512	90571	
90044	90513	90572	
90045	90514	90573	
90046	90515	90574	
90047	90516	90575	
90048	90517	90576	
90049	90518	90577	
90050	90519	90578	
90051	90520	90579	
90052	90530	90580	
90053	90531	90600	
90054	90532	90605	
90055	90533	90610	
90056	90534	90620	
90057	90535	90630	
90058	90536	90640	
90059	90537	90641	
90060	90538	90642	
90061	90539	90643	
90062	90540	90650	
90063	90541	90651	
90064	90542	90652	
90065	90543	92002	

Exhibit 18B
Mississippi Division of Medicaid
Procedure Codes for Psychiatric Physician Visits

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

Exhibit 18C

Mississippi Division of Medicaid

NDCs Excluded from Monthly Pharmacy Script Limits

00002763511	00052060302	00135052001	00223004963	00378699789	00891057101	01741002986	05388000856	08011123520	08011750107	08011968624	08080159611	08080226100	08080311149	08080361900	08080441215	08080531046	08080611200	08080660218	08080708401
00002763611	00052433001	00135052904	00223004975	00409005101	00891059101	01741004075	05388000857	08011123530	08011750301	08011971015	08080160405	08080226200	08080311248	08080361900	08080441216	08080532900	08080611100	08080660320	08080708500
00002763711	00064022002	00135055701	00223004986	004040731560	00891059111	01741006089	05388000858	08011123620	08011750307	08026465400	08080161200	08080226300	08080311347	08080362300	08080441217	08080533000	08080611300	08080660330	08080708600
00002956001	00065018002	00135055901	00223004987	004040731790	00891059201	01741006857	05388000859	08011150101	08011750379	08026763800	08080161400	08080229100	08080311446	08080363100	08080441218	08080536000	08080611400	08080660340	08080708700
00002956101	00065018007	00135055930	00223004988	004040731791	00891059211	01741007989	05388000860	08011150102	08011770715	08080000555	08080161600	08080229100	08080311545	08080368500	08080441219	08080540111	08080611500	08080660350	08080708800
00002956201	00065026500	00135060201	00223004989	00456074413	00891059301	01741009080	05388000436	08011150103	08011771114	08080000777	08080161900	08080229200	08080311743	08080383400	08080441250	08080540400	08080611600	08080660400	08080710000
00002967301	00065920073	00135060301	00223041124	00456074513	00891059311	01741053610	05388000448	08011150108	08011771215	08080032010	08080162100	08080229300	08080314100	08080392200	08080441251	08080540500	08080612000	08080664100	08080710500
00003052620	00065920074	00143929501	00223041493	00456074613	00891059401	01741053814	05388018382	08011150111	08011772414	08080055535	08080162200	08080230000	08080314400	08080393000	08080441400	08080541034	08080612100	08080664200	08080710701
00005010001	00067097840	00143929601	00223042024	00456315467	00891061100	01741061314	053880049375	08011150121	08011772415	08080055544	08080162400	08080233601	08080314400	08080396700	08080441401	08080541067	08080612200	08080664700	08080710826
00005010005	00069041102	00143952901	00223042027	00487900360	00891061101	02594001806	053880050378	08011150131	08011772416	08080055566	08080162500	08080234600	08080315700	08080396800	08080441402	08080541400	08080613200	08080664800	08080710842
00005010010	00069041110	00169185189	00223042030	00487900760	00891061200	02594001814	053880050379	08011150200	08011772514	08080072030	08080162600	08080241910	08080317000	08080399500	08080441403	08080555220	08080614000	08080665100	08080710859
00005197101	00069090120	00169185250	00223042036	00516001312	00891061201	02594001818	053880056446	08011150201	08011775516	08080094700	08080162800	08080241911	08080319500	08080400616	08080441404	08080555221	08080615300	08080666000	08080710867
00005197102	00069091198	00169185274	00223043850	00536110301	00891061300	02594001822	053880057722	08011150202	08011782100	08080096800	08080163100	08080241912	08080320112	08080401400	08080441405	08080555330	08080615400	08080666200	08080711006
00005197105	00069092198	00169185275	00223043851	00536111932	00891061301	02594001828	053880087811	08011150203	08011782102	08080098400	08080170000	08080243800	08080320157	08080402718	08080441406	08080555331	08080615500	08080666500	08080711246
00005200002	00074182078	00169185389	00223043852	00548540000	00891061400	02594001842	05928090901	08011150319	08011800316	08080098800	08080171010	08080245000	08080320256	08080403200	08080441407	08080555332	08080615600	08080669901	08080711253
00005200010	00074183268	00169185459	00223043853	00548540025	00891061401	02594001847	062780009069	08011150332	08011800318	08080099500	08080171300	08080248000	08080320800	08080403728	08080441408	08080555351	08080617500	08080670000	08080711500
00006404701	00074249002	00169185550	00223043854	00548541000	00891063101	02594001852	06278000398	08011150419	08011800516	08080100005	08080176250	08080250000	08080321100	08080420200	08080441410	08080555440	08080620112	08080670930	08080711501
00006404720	00074583002	00169776411	00223044128	00548541025	00891063201	02594001857	062780005267	08011150432	08011800518	08080100555	08080179200	08080250600	08080321112	08080420300	08080441411	08080555441	08080620600	08080670950	08080711519
00006404741	00074722218	00169776413	00223044137	00548570100	00891063301	02594001860	07411060007	08011150501	08011802001	08080100707	08080180100	08080253300	08080321700	08080420400	08080441412	08080555442	08080620800	08080671500	08080711550
00006409301	00074722220	00179872402	00223044140	00548571100	00891063401	02813303400	07411089003	08011150502	08011802002	08080100777	08080180600	08080253900	08080322100	08080420600	08080441415	08080555443	08080620900	08080671600	08080711568
00006409302	00074791501	00179901012	00223044146	00573300502	00891064101	04351044050	08004041300	08011150503	08011802010	08080103800	08080181030	08080254000	08080322110	08080426500	08080441501	08080555480	08080621000	08080672000	08080712080
00006409401	00074808378	00193146550	00223044190	00573300503	00891064201	04351052510	08004042800	08011150507	08011802011	08080104000	08080181400	08080255600	08080322112	08080427100	08080441502	08080555481	08080621100	08080672500	08080712100
00006409402	00085121701	00193146621	00223044896	00573300504	00891064301	04351062510	08004046500	08011150520	08011802015	08080104200	08080181700	08080256200	08080322200	08080427800	08080441503	08080555550	08080621112	08080673000	08080712120
00006409501	00085121702	00193325350	00223044905	00573300905	00891064401	04351063506	08004047300	08011150525	08011802016	08080104400	08080181800	08080256300	08080322210	08080427900	08080441504	08080555660	08080621212	08080673500	08080712150
00006409502	00085460202	00193280221	00223044911	00573300913	00891071010	04351078710	08004049400	08011150615	08011802018	08080104600	08080182400	08080256400	08080323100	08080428000	08080441505	08080555661	08080622901	08080676434	08080712170
00006409601	00085460203	00573301001	00223044920	00573301001	00891071011	04351078810	08004052000	08011150619	08011802030	08080105000	08080189200	08080256500	08080325000	08080428100	08080441506	08080555662	08080624100	08080678000	08080712200
00006409602	00093301101	00193288021	00223045277	00573301002	00891071020	04351079510	08004054800	08011150632	08011802031	08080105800	08080190300	08080258500	08080325058	08080428200	08080441507	08080555880	08080624200	08080678030	08080712230
00006411901	00093308601	00193288050	00223045278	00573301003	00891071021	04351079710	08004054900	08011150702	08011802035	08080109300	08080191300	08080260000	08080325100	08080428300	08080441602	08080555881	08080624250	08080680002	08080712250
00006411903	00093308619	00193288221	00223045289	00573301007	00891071030	04351079750	08004054950	08011150703	08011802055	08080110900	08080191411	08080260010	08080325114	08080428400	08080441603	08080555882	08080624300	08080681800	08080712270
00006412101	00093308684	00193288250	00223045292	00573301016	00891071031	04351079810	08004056300	08011150707	08011802060	08080111100	08080191412	08080260100	08080327114	08080428500	08080441604	08080557000	08080624400	08080682010	08080712300
00006412102	00093308701	00193288350	00223045295	00573301017	00891081021	04351079850	08004056300	08011150719	08011802065	08080111300	08080191600	08080260200	08080327900	08080428900	08080441605	08080557400	08080624600	08080685001	08080712301
00006417100	00093308719	00193596531	00223045698	00573301096	00891081031	04351080710	08011001002	08011150732	08011802100	08080111400	08080200055	08080263000	08080330200	08080429600	08080441606	08080558970	08080625100	08080688000	08080712350
00006417101	00093308784	00193620101	00223045615	00573301301	00891081041	04351080810	08011000500	08011150819	08011802110	08080111500	08080200077	08080263400	08080330500	08080429700	08080441607	08080558980	08080625500	08080688030	08080712400
00006432902	00093435901	00193620301	00223046308	00573301303	00891081051	04351085810	08011000538	08011150832	08011802115	08080114063	08080200777	08080263506	08080330600	08080429800	08080442200	08080600030	08080626100	08080688160	08080712450
00006432903	00093435905	00193620701	00223046314	00573301304	00891081071	04351085850	080110003750	08011150919	08011802130	08080114300	08080202132	08080265001	08080331000	08080429900	08080442201	08080600040	08080626800	08080688185	08080712500
00006468100	00093435919	00193626201	00223046867	00573301501	00891081081	04351088710	08011004052	08011150932	08011802412	08080116700	08080205010	08080271800	08080332000	08080430000	08080442212	08080600057	08080630300	08080688200	08080713400
00006468101	00093435993	00193656831	00223046868	00573301502	00891082001	04351088810	08011004053	08011150919	08011802414	08080116900	08080201010	08080272000	08080332400	08080430100	08080442213	08080600073	08080630303	08080688201	08080713600
00006482700	00093440401	00193656821	00223046869	00573301534	00891082301	04351096510	08011004054	08011151932	08011802416	08080120500	08080213200	08080272200	08080333100						

Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																									
08080717600	08080730790	08080783400	080808941110	08137002281	08137002603	08137004414	08137005390	08137006655	08137102126	08137116894	08137607623	08173909101	08214028739	08214057601	08214114027	08222094193	08225002602	08225005486	08225008702						
08080718080	08080731000	08080791100	0808080941210	08137002283	08137002604	08137004424	08137005501	08137006660	08137102390	08137117120	08164100125	08179002810	08214028755	08214057716	08214115027	08222094931	08225002603	08225005523	08225008703						
08080718100	08080731100	08080808000	0808080941310	08137002285	08137002607	08137004430	08137005505	08137006665	08137102394	08137117121	08164100525	08179002827	08214029721	08214057717	08214130001	08222094599	08225002605	08225005525	08225008705						
08080718120	08080731300	08080808001	0808080941410	08137002287	08137002608	08137004431	08137005518	08137006670	08137102488	08137117128	08164100625	08179002834	08214029724	08214057761	08214131001	08222095121	08225002802	08225005533	08225008706						
08080718150	08080731901	08080804200	0808080941610	08137002301	08137002613	08137004434	08137005520	08137006675	08137102491	08137117120	08164100725	08179002841	08214029727	08214058539	08214131101	08222095435	08225002803	08225005555	08225009010						
08080718170	08080732300	08080804300	0808080948000	08137002302	08137002618	08137004436	08137005523	08137006680	08137102561	08137117297	08173000201	08179010204	08214029735	08214058716	08214210001	08222095459	08225002805	08225005582	08225011601						
08080718200	08080732501	08080804400	0808080949000	08137002303	08137002619	08137004438	08137005532	08137006685	08137102760	08137117299	08173000301	08179010303	08214029737	08214058717	08214215001	08222095534	08225002806	08225005583	08225011602						
08080718230	08080733100	08080804500	0808080949010	08137002304	08137002623	08137004444	08137005534	08137006690	08137102765	08137117400	08173000525	08179015209	08214029739	08214058733	08214300001	08222095626	08225002902	08225005585	08225011701						
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Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																								
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Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																									
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Exhibit 18C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

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Exhibit 18C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

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6/24/2025

		Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																			
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		Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																			
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Exhibit 18C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																											
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89129010002	89152172805	89155111001	90166012505	90891013158	90891024666	90891094606	91237000172	92293006018	92293012454	92293097630	93169000298	94030000283	96295010284	96295012207	96295013738	98302001432	98939000040								
89134050202	89152172905	89155200201	90166012804	90891013200	90891024667	90891094607	91237000173	92293006019	92293012455	92293097631	93169000299	94030000286	96295010286	96295012208	96295013739	98302001433	98939000041								
89134050302	89152254105	89155200401	90166013004	90891016000	90891024808	90891094704	91237000174	92293006020	92293020120	92293098009	93573090011	94030000287	96295010287	96295012209	96295013849	98302001434	98939000042								
89134052602	89152281705	89155200601	90166013505	90891016111	90891024820	90891094705	91237000175	92293006022	92293020125	92293098010	93764000100	94030000291	96295010288	96295012210	96295013863	98302001435	98939000044								
89134052702	89152281805	89155200801	90166013645	90891016112	90891024821	90891094706	91237000176	92293006060	92293020130	92293098016	93764000200	94030000292	96295010313	96295012211	96295013873	98302001480	98939000045								
89134052802	89152281905	89155201001	90166015615	90891016113	90891024822	90891094760	91237000177	92293006061	92293020135	92293098018	93764001069	94030000294	96295010470	96295012300	96295013874	98302001511	98939000058								
89134052902	89152282005	89155210201	90166015635	90891016115	90891024823	90891094761	91237000178	92293006085	92293020140	92293098026	93764001154	94030000100	96295010625	96295012301	96295013875	98302001391	98939000059								
89134061802	89152282105	89155210401	90166015655	90891016117	90891025800	90891094762	91237000182	92293006300	92293020120	92293098032	93764001467	94030000101	96295010676	96295012302	96295013876	98302001392	98939000060								
89134062002	89152282205	89155210601	90166020205	90891018416	90891025801	90891095084	91237000184	92293006301	92293021125	92293099010	93764010101	94030000102	96295010831	96295012329	96295013877	98302001393	98939000061								
89134062202	89152282305	89155210801	90166022203	90891019001	90891025802	90891095085	91237000185	92293006342	92293020130	92293099016	93764010105	94030000103	96295010931	96295012336	96295013930	98302001393	98939000076								
89134062501	89152282405	89155211001	90166023645	90891019003	90891025808	90891095086	91237000187	92293006343	92293020135	92293099026	93764020201	94030000104	96295011057	96295012337	96295013931	98302001393	98939000081								
89134062601	89152282505	89155300001	90166025635	90891019004	90891025810	90891095087	91237000188	92293006344	92293021140	92293099032	93764020205	94030000105	96295011125	96295012432	96295013961	98302001393	99073011001								
89134063002	89152282605	89155310001	90166030305	90891019005	90891026415	90891095088	91237000189	92293006345	92293022130	92293099044	93764022767	94030000106	96295011126	96295012446	96295038687	98302001394	99073011003								
89134063102	89152282705	89155400001	90166031645	90891019006	90891026810	90891095089	91237000192	92293006346	92293022135	92293099044	93764030301	94030000107	96295011127	96295012475	96785000209	98302001395	99073011004								
89134072202	89152282805	89155500101	90166033042	90891019007	90891030030																				

Exhibit 19 Mississippi Division of Medicaid AMP Cap Drug Price Reduction by Product				
Insulin Drugs				
Product Name	NDC	Manufacturer	Assumed Price Reduction	Effective Date
Apidra Injection Solution 100 UNIT/ML	00088250033	SANOFI-AVENTIS U.S.	Price Reduced by 70%	1/1/2024
Apidra SoloStar Subcutaneous Solution Pen-injector 100 UNIT/ML	00088250205	SANOFI-AVENTIS U.S.	Price Reduced by 70%	1/1/2024
HumaLOG Injection Solution 100 UNIT/ML	00002751001	LILLY	Price Reduced by 76%	4Q2023
HumaLOG Junior KwikPen Subcutaneous Solution Pen-injector 100 UNIT/ML	00002771459	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Junior KwikPen Subcutaneous Solution Pen-injector 100 UNIT/ML	00002771401	LILLY	Price Reduced by 70%	4Q2023
HumaLOG KwikPen Subcutaneous Solution Pen-injector 100 UNIT/ML	00002879959	LILLY	Price Reduced by 70%	4Q2023
HumaLOG KwikPen Subcutaneous Solution Pen-injector 100 UNIT/ML	00002879901	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Mix 50/50 Subcutaneous Suspension (50-50) 100 UNIT/ML	00002751201	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Mix 75/25 KwikPen Subcutaneous Suspension Pen-injector (75-25) 100 UNIT/ML	00002879759	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Mix 75/25 KwikPen Subcutaneous Suspension Pen-injector (75-25) 100 UNIT/ML	00002879701	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Mix 75/25 Subcutaneous Suspension (75-25) 100 UNIT/ML	00002751101	LILLY	Price Reduced by 70%	4Q2023
HumaLOG Subcutaneous Solution Cartridge 100 UNIT/ML	00002751659	LILLY	Price Reduced by 70%	4Q2023
HumuLIN 70/30 KwikPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00002880359	LILLY	Price Reduced by 70%	4Q2023
HumuLIN 70/30 KwikPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00002880301	LILLY	Price Reduced by 70%	4Q2023
HumuLIN 70/30 Subcutaneous Suspension (70-30) 100 UNIT/ML	00002871501	LILLY	Price Reduced by 70%	4Q2023
HumuLIN 70/30 Subcutaneous Suspension (70-30) 100 UNIT/ML	00002871517	LILLY	Price Reduced by 70%	4Q2023
HumuLIN N KwikPen Subcutaneous Suspension Pen-injector 100 UNIT/ML	00002880559	LILLY	Price Reduced by 70%	4Q2023
HumuLIN N Subcutaneous Suspension 100 UNIT/ML	00002831501	LILLY	Price Reduced by 70%	4Q2023
HumuLIN R Injection Solution 100 UNIT/ML	00002821501	LILLY	Price Reduced by 70%	4Q2023
Insulin Asp Prot & Asp FlexPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	73070020315	NOVO NORDISK PHARMA	Price Reduced by 50%	1/1/2024
Insulin Aspart FlexPen Subcutaneous Solution Pen-injector 100 UNIT/ML	73070010310	NOVO NORDISK PHARMA	Price Reduced by 50%	1/1/2024
Insulin Aspart FlexPen Subcutaneous Solution Pen-injector 100 UNIT/ML	73070010315	NOVO NORDISK PHARMA	Price Reduced by 50%	1/1/2024
Insulin Aspart Injection Solution 100 UNIT/ML	73070010011	NOVO NORDISK PHARMA	Price Reduced by 50%	1/1/2024
Insulin Aspart PenFill Subcutaneous Solution Cartridge 100 UNIT/ML	73070010215	NOVO NORDISK PHARMA	Price Reduced by 50%	1/1/2024
Insulin Aspart Prot & Aspart Subcutaneous Suspension (70-30) 100 UNIT/ML	73070020011	NOVO NORDISK PHARMA	Price Reduced by 52%	1/1/2024
Insulin Lispro Injection Solution 100 UNIT/ML	66733077301	LILLY	Price Reduced by 70%	5/1/2023
Insulin Lispro Injection Solution 100 UNIT/ML	00002773701	LILLY	Price Reduced by 70%	5/1/2023
Lantus SoloStar Subcutaneous Solution Pen-injector 100 UNIT/ML	00088221901	SANOFI-AVENTIS U.S.	Price Reduced by 78%	1/1/2024
Lantus SoloStar Subcutaneous Solution Pen-injector 100 UNIT/ML	00088221905	SANOFI-AVENTIS U.S.	Price Reduced by 78%	1/1/2024
Lantus Subcutaneous Solution 100 UNIT/ML	00088222033	SANOFI-AVENTIS U.S.	Price Reduced by 78%	1/1/2024
Levemir FlexTouch Subcutaneous Solution Pen-injector 100 UNIT/ML	00169643810	NOVO NORDISK	Price Reduced by 65%	1/1/2024
Levemir Subcutaneous Solution 100 UNIT/ML	00169368712	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN 70/30 FlexPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00169300725	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN 70/30 FlexPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00169300715	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN 70/30 ReliOn Subcutaneous Suspension (70-30) 100 UNIT/ML	00169183702	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN 70/30 Subcutaneous Suspension (70-30) 100 UNIT/ML	00169183711	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN N FlexPen ReliOn Subcutaneous Suspension Pen-injector 100 UNIT/ML	00169300425	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN N FlexPen Subcutaneous Suspension Pen-injector 100 UNIT/ML	00169300415	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN N ReliOn Subcutaneous Suspension 100 UNIT/ML	00169183402	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN N Subcutaneous Suspension 100 UNIT/ML	00169183411	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN R FlexPen Injection Solution Pen-injector 100 UNIT/ML	00169300315	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN R FlexPen ReliOn Injection Solution Pen-injector 100 UNIT/ML	00169300325	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN R Injection Solution 100 UNIT/ML	00169183311	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLIN R ReliOn Injection Solution 100 UNIT/ML	00169183302	NOVO NORDISK	Price Reduced by 65%	1/1/2024
NovoLOG 70/30 FlexPen ReliOn Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00169220125	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG FlexPen ReliOn Subcutaneous Solution Pen-injector 100 UNIT/ML	00169210125	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG FlexPen Subcutaneous Solution Pen-injector 100 UNIT/ML	00169633910	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG Injection Solution 100 UNIT/ML	00169750111	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG Mix 70/30 FlexPen Subcutaneous Suspension Pen-injector (70-30) 100 UNIT/ML	00169369619	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG Mix 70/30 ReliOn Subcutaneous Suspension (70-30) 100 UNIT/ML	00169220011	NOVO NORDISK	Price Reduced by 76%	1/1/2024
NovoLOG Mix 70/30 Subcutaneous Suspension (70-30) 100 UNIT/ML	00169368512	NOVO NORDISK	Price Reduced by 76%	1/1/2024
NovoLOG PenFill Subcutaneous Solution Cartridge 100 UNIT/ML	00169330312	NOVO NORDISK	Price Reduced by 75%	1/1/2024
NovoLOG ReliOn Injection Solution 100 UNIT/ML	00169210011	NOVO NORDISK	Price Reduced by 75%	1/1/2024
Victoza Subcutaneous Solution Pen-injector 18 MG/3ML	00169406013	NOVO NORDISK	Price Reduced by 27%	1/1/2024
Victoza Subcutaneous Solution Pen-injector 18 MG/3ML	00169406012	NOVO NORDISK	Price Reduced by 27%	1/1/2024
Inhaler Drugs				
Product Name	NDC	Manufacturer	Price Reduction	Effective Date
Advair Diskus Inhalation Aerosol Powder Breath Activated 100-50 MCG/ACT	00173069500	GLAXO SMITH KLINE	Price Reduced by 51%	1/1/2024
Advair Diskus Inhalation Aerosol Powder Breath Activated 100-50 MCG/ACT	00173069504	GLAXO SMITH KLINE	Price Reduced by 70%	1/1/2024
Advair Diskus Inhalation Aerosol Powder Breath Activated 250-50 MCG/ACT	00173069600	GLAXO SMITH KLINE	Price Reduced by 50%	1/1/2024
Advair Diskus Inhalation Aerosol Powder Breath Activated 250-50 MCG/ACT	00173069604	GLAXO SMITH KLINE	Price Reduced by 70%	1/1/2024
Advair Diskus Inhalation Aerosol Powder Breath Activated 500-50 MCG/ACT	00173069700	GLAXO SMITH KLINE	Price Reduced by 49%	1/1/2024
Advair Diskus Inhalation Aerosol Powder Breath Activated 500-50 MCG/ACT	00173069704	GLAXO SMITH KLINE	Price Reduced by 70%	1/1/2024
Advair HFA Inhalation Aerosol 115-21 MCG/ACT	00173071620	GLAXO SMITH KLINE	Price Reduced by 21%	1/1/2024
Advair HFA Inhalation Aerosol 115-21 MCG/ACT	00173071622	GLAXO SMITH KLINE	Price Reduced by 29%	1/1/2024
Advair HFA Inhalation Aerosol 230-21 MCG/ACT	00173071720	GLAXO SMITH KLINE	Price Reduced by 18%	1/1/2024
Advair HFA Inhalation Aerosol 230-21 MCG/ACT	00173071722	GLAXO SMITH KLINE	Price Reduced by 21%	1/1/2024
Advair HFA Inhalation Aerosol 45-21 MCG/ACT	00173071522	GLAXO SMITH KLINE	Price Reduced by 23%	1/1/2024
Advair HFA Inhalation Aerosol 45-21 MCG/ACT	00173071520	GLAXO SMITH KLINE	Price Reduced by 23%	1/1/2024
Asmanex (30 Metered Doses) Inhalation Aerosol Powder Breath Activated 220 MCG/ACT	78206011404	ORGANON	Price Reduced by 50%	1/2/2024
Asmanex (60 Metered Doses) Inhalation Aerosol Powder Breath Activated 220 MCG/ACT	78206011402	ORGANON	Price Reduced by 50%	1/2/2024
Symbicort Inhalation Aerosol 160-4.5 MCG/ACT	00186037028	ASTRAZENECA LP	Price Reduced by 40%	1/1/2024
Symbicort Inhalation Aerosol 160-4.5 MCG/ACT	00186037020	ASTRAZENECA LP	Price Reduced by 40%	1/1/2024
Symbicort Inhalation Aerosol 80-4.5 MCG/ACT	00186037228	ASTRAZENECA LP	Price Reduced by 40%	1/1/2024
Symbicort Inhalation Aerosol 80-4.5 MCG/ACT	00186037220	ASTRAZENECA LP	Price Reduced by 40%	1/1/2024
Other Drugs				
Product Name	NDC	Manufacturer	Price Reduction	Effective Date
Butrans Transdermal Patch Weekly 10 MCG/HR	59011075104	PURDUE PHARMA L.P.	Price Reduced by 42%	1/1/2024
Butrans Transdermal Patch Weekly 15 MCG/HR	59011075804	PURDUE PHARMA L.P.	Price Reduced by 33%	1/1/2024
Butrans Transdermal Patch Weekly 20 MCG/HR	59011075204	PURDUE PHARMA L.P.	Price Reduced by 42%	1/1/2024
Butrans Transdermal Patch Weekly 5 MCG/HR	59011075004	PURDUE PHARMA L.P.	Price Reduced by 43%	1/1/2024
Butrans Transdermal Patch Weekly 7.5 MCG/HR	59011075704	PURDUE PHARMA L.P.	Price Reduced by 42%	1/1/2024
Cytomel Oral Tablet 5 MCG	60793011501	PFIZER U.S.	Price Reduced by 81%	12/1/2023
Daytrana Transdermal Patch 10 MG/9HR	68968555203	NOVEN THERAPEUTICS	Price Reduced by 61%	12/1/2023
Daytrana Transdermal Patch 15 MG/9HR	68968555303	NOVEN THERAPEUTICS	Price Reduced by 61%	12/1/2023
Daytrana Transdermal Patch 20 MG/9HR	68968555403	NOVEN THERAPEUTICS	Price Reduced by 61%	12/1/2023
Daytrana Transdermal Patch 30 MG/9HR	68968555503	NOVEN THERAPEUTICS	Price Reduced by 61%	12/1/2023
Hemabate Intramuscular Solution 250 MCG/ML	00009085608	PFIZER U.S.	Price Reduced by 61%	10/1/2023
Hemabate Intramuscular Solution 250 MCG/ML	00009085605	PFIZER U.S.	Price Reduced by 61%	10/1/2023
Heparin Sodium (Porcine) Injection Solution Prefilled Syringe 5000 UNIT/0.5ML	63323011805	FRESENIUS KABI USA	Price Reduced by 46%	12/1/2023
LaMictal Oral Tablet 100 MG	00173064255	GLAXO SMITH KLINE	Price Reduced by 39%	1/1/2024
LaMictal Oral Tablet 150 MG	00173064360	GLAXO SMITH KLINE	Price Reduced by 41%	1/1/2024
LaMictal Oral Tablet 200 MG	00173064460	GLAXO SMITH KLINE	Price Reduced by 44%	1/1/2024
LaMictal Oral Tablet Chewable 25 MG	00173052700	GLAXO SMITH KLINE	Price Reduced by 31%	1/1/2024
Pradaxa Oral Capsule 110 MG	00597010860	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Pradaxa Oral Capsule 110 MG	00597010854	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Pradaxa Oral Capsule 150 MG	00597036082	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Pradaxa Oral Capsule 150 MG	00597036055	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Pradaxa Oral Capsule 75 MG	00597035556	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Pradaxa Oral Capsule 75 MG	00597035509	BOEHRINGER INGELHEIM	Price Reduced by 60%	7/1/2023
Precedex Intravenous Solution 200 MCG/2ML	00409163832	HOSPIRA	Price Reduced by 86%	10/1/2023
Precedex Intravenous Solution 200 MCG/2ML	00409163802	HOSPIRA	Price Reduced by 86%	10/1/2023
Pylerra Oral Capsule 140-125-125 MG	58914060120	ALLERGAN	Price Reduced by 67%	11/1/2023
Zyvox Intravenous Solution 600 MG/300ML	00009514004	PFIZER U.S.	Price Reduced by 31%	10/1/2023
Zyvox Intravenous Solution 600 MG/300ML	00009514001	PFIZER U.S.	Price Reduced by 31%	10/1/2023



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October 31, 2024

Jennifer Wentworth
Deputy Executive Director, Finance
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth12 - MississippiCAN Capitation Risk Adjustment – Q1 to Q2 2024 Retrospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2024, which are documented in a separately provided report.¹ As outlined in that report and summarized by Table 1, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 Q1 to Q2 2024 MississippiCAN Risk Scores Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective January 1, 2024 through June 30, 2024 (Q1 to Q2 2024) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2024. Risk scores for July through December 2023 (Q3 to Q4 2023) were provided in a separate letter.²

As described in greater detail below, we develop Q1 to Q2 2024 risk scores using diagnoses from May 2022 to April 2023 and the actual enrollment mix for each CCO from January to June 2024. In addition, we adjusted the enrollment records to identify MYPAC rate cell members that were incorrectly assigned to other children rate cells.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q1 to Q2 2024 were developed using:

- **Diagnosis Period:** Medical and drug diagnosis information from encounter and FFS claims incurred during May 2022 to April 2023 with runout through April 26, 2024. Normally we would use SFY 2023 (July 2022 to June 2023) claims as the diagnosis period but modified slightly given known encounter data issues beginning in mid-2023.
- **Enrollment Period:** Demographic and enrollment information from January to June 2024.

¹ "Report14 - SFY 2024 Preliminary MississippiCAN Rate Calculation and Certification.pdf" dated October 22, 2024.
² "Wentworth10 - Q3 to Q4 2023 MississippiCAN Risk Adjustment.pdf" dated October 29, 2024.



Table 2
Q1 to Q2 2024 MississippiCAN Risk Scores
Based on May 2022 to April 2023 Diagnosis Period

Rate Cell	CCO	North		Central		South	
		Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	57,875	1.008	61,366	1.013	42,656	1.014
Non-Newborn SSI / Disabled	Molina	16,456	0.957	17,219	0.962	14,648	0.975
Non-Newborn SSI / Disabled	United	48,894	1.005	49,249	0.997	44,703	0.995
MA Adult	Magnolia	33,912	1.020	37,694	1.015	37,451	1.015
MA Adult	Molina	22,188	0.955	27,184	0.964	30,388	0.950
MA Adult	United	31,585	1.010	35,615	1.011	44,120	1.021
MA Children	Magnolia	176,900	1.004	206,862	1.011	179,834	0.999
MA Children	Molina	97,287	0.957	119,413	0.951	115,044	0.960
MA Children	United	166,949	1.021	191,766	1.018	194,269	1.024
Quasi-CHIP	Magnolia	21,935	1.000	25,344	1.006	18,893	0.985
Quasi-CHIP	Molina	10,843	0.966	12,394	0.976	11,481	0.971
Quasi-CHIP	United	22,342	1.017	24,793	1.006	22,676	1.027
Foster Care	Magnolia	8,973	0.982	9,364	0.965	12,646	0.965
Foster Care	Molina	1,544	1.097	1,873	1.143	2,642	1.142
Foster Care	United	3,007	1.004	2,868	1.019	4,046	1.016

We would normally rely on a snapshot month prior to the start of the risk adjustment period; however, DOM changed MMIS vendors in October 2022 and encounter data was not available until after the completion of the risk adjustment period. In addition, the Consolidated Appropriations Act, 2023 (CAA) ended the continuous coverage requirement (CCR) introduced in the Families First Coronavirus Act (FFCRA) effective March 31, 2023. DOM subsequently resumed eligibility redetermination of members in April 2023 and began disenrolling Mississippi Medicaid recipients who were no longer eligible in July 2023 and throughout the following year. Given the significant membership changes due to resumption of eligibility redeterminations, we used actual enrollment from the risk adjustment period to calculate the Q1 to Q2 2024 risk scores.

Only MississippiCAN-eligible members enrolled in a CCO in any given month during the enrollment period of January to June 2024 were considered in this analysis. The overall CCO risk scores are a weighted average based upon the number of months individuals were enrolled during the enrollment time period. For example, more weight is placed upon the calculated risk score for an individual enrolled for all six months of the enrollment period compared to someone only enrolled for one month.

Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found on the enrollment record, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment records.

Starting in July 2021, some members in the MYPAC rate cell, which is not risk adjusted, were not correctly assigned a 'SED' lock-in flag and were instead assigned to other children rate cells, including several rate cells that are risk adjusted. We identified members that utilized MYPAC services during the risk adjustment period and recategorized these members to the MYPAC rate cell for the purposes of risk adjustment calculations.

A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members aged 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2024 for all rate



cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.

Risk Score Changes

The last release of risk scores included retrospective budget-neutral risk scores for Q3 to Q4 2023. These risk scores were based on July to December 2023 enrollment and diagnoses from January 2022 through December 2022 with runout through April 2024. Changes in budget-neutral plan risk scores between the Q3 to Q4 2023 risk scores and the Q1 to Q2 2024 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes. Additionally, new risk weights were developed for the Q1 to Q2 2024 time period to reflect the population change to include members diagnosed with hemophilia and Von Willebrand disease in the MississippiCAN program, effective January 1, 2024. The development of these risk weights is documented in a separate report.³

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

- For this risk score iteration, we observe changes similar in magnitude to the last update.
- The significant changes in the Foster Care rate cell are driven by a change in the enrollment practices for this population over time.

Table 3 Q1 to Q2 2024 MississippiCAN Risk Scores Changes in Statewide Budget Neutral Risk Scores Q3 to Q4 2023 vs. Q1 to Q2 2024				
Risk Scores:		Q3 to Q4 2023	Q1 to Q2 2024	
Enrollment:		Jul to Dec 2023	Jan to Jun 2024	
Cohort	Diagnosis Period:	CY 2022	May 2022 to April 2023	% Change
Non-Newborn SSI / Disabled	Magnolia	1.017	1.012	-0.56%
Non-Newborn SSI / Disabled	Molina	0.970	0.964	-0.57%
Non-Newborn SSI / Disabled	United	0.990	0.999	0.86%
MA Adult	Magnolia	1.014	1.017	0.29%
MA Adult	Molina	0.950	0.956	0.68%
MA Adult	United	1.022	1.015	-0.74%
MA Children	Magnolia	1.004	1.005	0.13%
MA Children	Molina	0.953	0.956	0.29%
MA Children	United	1.023	1.021	-0.19%
Quasi-CHIP	Magnolia	0.995	0.998	0.28%
Quasi-CHIP	Molina	0.974	0.971	-0.27%
Quasi-CHIP	United	1.017	1.016	-0.02%
Foster Care	Magnolia	0.944	0.970	2.72%
Foster Care	Molina	1.183	1.131	-4.43%
Foster Care	United	1.051	1.013	-3.56%

Exhibit 2 allocates the change in risk scores between the last release and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Updates the risk scores shown in Column A with an updated diagnosis period.
- Column C: Updates the risk scores shown in Column B with actual enrollment from January to June 2024.
- Column D: Updates the risk scores shown in Column C using the new risk weights developed for January to June 2024. This column contains the final risk scores for this release.

³ "Wentworth11 - Jan to Jun 2024 MSCAN Risk Weight Development.pdf" dated October 31, 2024.



Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2, since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the last release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.

Table 4 Q1 to Q2 2024 MississippiCAN Risk Scores Statewide Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q3 to Q4 2023	98%	94%	97%	97%
Q1 to Q2 2024	97%	93%	96%	96%
MA Adult				
Q3 to Q4 2023	90%	89%	90%	90%
Q1 to Q2 2024	91%	89%	90%	90%
MA Children				
Q3 to Q4 2023	96%	93%	95%	95%
Q1 to Q2 2024	94%	92%	94%	94%
Quasi-CHIP				
Q3 to Q4 2023	97%	93%	96%	96%
Q1 to Q2 2024	96%	93%	95%	95%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Please note, a single exhibit is provided for the Foster Care rate cell.

Table 5 Q1 to Q2 2024 MississippiCAN Risk Scores Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members in the non-utilizer category
 - Count of members assigned to the housing insecurity category, for applicable populations
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category



- **Unscored Members**
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- **Risk Adjustment Results**
 - Calculation of budget neutral risk score for scored and unscored members and in total

Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell, since risk scores for that population do not utilize diagnostic information.

Table 6 Q1 to Q2 2024 MississippiCAN Risk Scores Conditions with the Top Five Disease Impacts Statewide Results				
Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, low	Skeletal, medium	Psychiatric, low	Psychiatric, low
2	Psychiatric, high	Psychiatric, low	Skeletal, medium	Pulmonary, low
3	Skeletal, medium	Diabetes, type 2	Pulmonary, low	Skeletal, medium
4	Diabetes, type 2	Pregnancy, incomplete	Gastro, low	Gastro, low
5	Cardiovascular, medium	Cardiovascular, extra low	CNS, low	Diabetes, type 1

Member-Level Risk Scores

Text files providing member-level demographic, diagnosis, and other risk score category information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, diagnostic, and other risk score category information for each member month
- The “unscored” extract provides only demographic information for each member month

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the letter referenced above that describes the custom risk weight model developed for January to June 2024 for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis.

Exhibits 4A to 4F display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.



Jennifer Wentworth
Mississippi Division of Medicaid
October 31, 2024
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APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

$$\text{CCO Capitation Rate} = \text{Base Capitation Rate} \times \text{CCO Budget Neutral Risk Score}$$

The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates after the application of the quality withhold and prior to the following directed payments, all of which are not risk adjusted.

- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q1 to Q2 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from May 2022 to April 2023 with runout through April 26, 2024, along with eligibility data from January to June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q1 to Q2 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2024 capitation rate report.

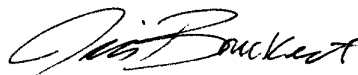
Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. It is certain that actual experience will not conform exactly to the assumptions used. Actual amounts will differ from projected amounts to the extent that actual experience is better or worse than expected.

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



Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,


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


Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

JAB/KNL/cl

Attachments (Provided in Excel)

Caveats and Limitations
Mississippi Division of Medicaid
Q1 to Q2 2024 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q1 to Q2 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from May 2022 to April 2023 with runout through April 2024, along with eligibility data from January to June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q1 to Q2 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2024 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

Jill Bruckert and Katarina Lorenz are actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q1 to Q2 2024 Risk Scores
May 2022 to April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
Magnolia	56,311	0.943	1.008	1,564	1.050	1.009	1.008
Molina	15,308	0.894	0.956	1,148	1.007	0.967	0.957
United	47,175	0.939	1.004	1,719	1.056	1.014	1.005
Total	118,794	0.935	1.000	4,431	1.041	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
Magnolia	59,864	1.020	1.014	1,502	1.056	0.999	1.013
Molina	16,207	0.966	0.959	1,012	1.070	1.012	0.962
United	47,725	1.004	0.997	1,524	1.049	0.992	0.997
Total	123,796	1.007	1.000	4,038	1.057	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
Magnolia	41,200	1.046	1.014	1,456	1.075	1.013	1.014
Molina	13,424	1.006	0.975	1,224	1.036	0.976	0.975
United	42,918	1.025	0.994	1,785	1.067	1.005	0.995
Total	97,542	1.031	1.000	4,465	1.061	1.000	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q1 to Q2 2024 Risk Scores
May 2022 to April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	30,615	0.987	1.022	3,297	0.976	1.007	1.020
Molina	19,518	0.918	0.951	2,670	0.961	0.991	0.955
United	28,266	0.977	1.011	3,319	0.970	1.000	1.010
Total	78,399	0.966	1.000	9,286	0.969	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	34,332	0.988	1.017	3,362	0.978	0.999	1.015
Molina	24,638	0.935	0.962	2,546	0.966	0.987	0.964
United	32,340	0.983	1.011	3,275	0.989	1.011	1.011
Total	91,310	0.972	1.000	9,183	0.979	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	33,806	1.032	1.017	3,645	0.970	1.003	1.015
Molina	27,117	0.958	0.944	3,271	0.964	0.996	0.950
United	40,129	1.039	1.024	3,991	0.968	1.001	1.021
Total	101,052	1.015	1.000	10,907	0.968	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q1 to Q2 2024 Risk Scores
May 2022 to April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	166,468	1.017	1.004	10,432	0.975	1.000	1.004
Molina	88,936	0.966	0.954	8,351	0.971	0.996	0.957
United	156,046	1.035	1.022	10,903	0.979	1.004	1.021
Total	411,450	1.013	1.000	29,686	0.975	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	196,629	1.011	1.012	10,233	0.970	1.001	1.011
Molina	110,464	0.947	0.948	8,949	0.964	0.995	0.951
United	180,673	1.018	1.019	11,093	0.972	1.003	1.018
Total	487,766	0.999	1.000	30,275	0.969	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	169,067	1.025	0.999	10,767	0.971	0.996	0.999
Molina	105,596	0.982	0.957	9,448	0.970	0.995	0.960
United	182,674	1.052	1.026	11,595	0.983	1.008	1.024
Total	457,337	1.026	1.000	31,810	0.975	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q1 to Q2 2024 Risk Scores
May 2022 to April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	20,969	1.052	1.000	966	1.019	0.995	1.000
Molina	9,946	1.013	0.963	897	1.023	0.999	0.966
United	21,301	1.070	1.017	1,041	1.029	1.005	1.017
Total	52,216	1.052	1.000	2,904	1.024	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	24,529	1.032	1.005	815	1.032	1.015	1.006
Molina	11,729	1.001	0.975	665	1.016	0.999	0.976
United	23,872	1.034	1.007	921	1.005	0.988	1.006
Total	60,130	1.027	1.000	2,401	1.017	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	18,275	1.065	0.984	618	1.019	1.002	0.985
Molina	10,690	1.047	0.968	791	1.031	1.014	0.971
United	21,495	1.114	1.029	1,181	1.006	0.990	1.027
Total	50,460	1.082	1.000	2,590	1.017	1.000	1.000

Exhibit 1E
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q1 to Q2 2024 Risk Scores
January 2024 to June 2024 Enrollment Period

North Region

	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	8,973	0.921	0.982
Molina	1,544	1.029	1.097
United	3,007	0.942	1.004
Total	13,524	0.938	1.000

Central Region

	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	9,364	0.988	0.965
Molina	1,873	1.169	1.143
United	2,868	1.043	1.019
Total	14,105	1.023	1.000

South Region

	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	12,646	0.903	0.965
Molina	2,642	1.069	1.142
United	4,046	0.951	1.016
Total	19,334	0.936	1.000

Exhibit 2A
Mississippi Division of Medicaid
Impact Analysis Non-Newborn SSI / Disabled Population
Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.961	0.989	0.969	0.943	2.9%	-1.9%	-2.7%	-1.8%
Molina	0.923	0.959	0.936	0.894	3.9%	-2.4%	-4.5%	-3.2%
United	0.977	0.996	0.967	0.939	2.0%	-3.0%	-2.9%	-3.9%
Unscored Members								
Magnolia	1.033	1.021	1.036	1.050	-1.2%	1.5%	1.3%	1.6%
Molina	1.013	0.984	0.997	1.007	-2.8%	1.3%	0.9%	-0.6%
United	1.039	1.053	1.042	1.056	1.3%	-1.0%	1.3%	1.6%
All Members								
Magnolia	0.963	0.989	0.972	0.947	2.7%	-1.8%	-2.6%	-1.7%
Molina	0.927	0.959	0.938	0.898	3.5%	-2.2%	-4.2%	-3.1%
United	0.979	0.998	0.970	0.943	1.9%	-2.8%	-2.7%	-3.6%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.064	1.083	1.065	1.020	1.8%	-1.6%	-4.2%	-4.1%
Molina	1.020	1.052	1.010	0.966	3.2%	-4.0%	-4.4%	-5.3%
United	1.013	1.044	1.036	1.004	3.0%	-0.8%	-3.1%	-1.0%
Unscored Members								
Magnolia	1.050	1.035	1.046	1.056	-1.5%	1.1%	1.0%	0.6%
Molina	1.048	1.061	1.063	1.070	1.2%	0.2%	0.7%	2.1%
United	1.037	1.016	1.040	1.049	-2.0%	2.4%	0.8%	1.1%
All Members								
Magnolia	1.064	1.082	1.065	1.022	1.7%	-1.6%	-4.0%	-4.0%
Molina	1.021	1.053	1.013	0.970	3.1%	-3.8%	-4.2%	-5.0%
United	1.014	1.044	1.036	1.005	2.9%	-0.8%	-3.0%	-0.9%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.134	1.155	1.115	1.046	1.9%	-3.5%	-6.2%	-7.8%
Molina	1.058	1.092	1.069	1.006	3.3%	-2.2%	-5.8%	-4.9%
United	1.071	1.103	1.078	1.025	2.9%	-2.2%	-4.9%	-4.3%
Unscored Members								
Magnolia	1.061	1.066	1.065	1.075	0.5%	-0.1%	1.0%	1.4%
Molina	1.006	0.984	1.026	1.036	-2.2%	4.2%	1.0%	3.0%
United	1.059	1.062	1.060	1.067	0.3%	-0.2%	0.7%	0.7%
All Members								
Magnolia	1.132	1.153	1.113	1.047	1.9%	-3.5%	-5.9%	-7.4%
Molina	1.056	1.089	1.067	1.007	3.2%	-2.1%	-5.5%	-4.6%
United	1.071	1.102	1.077	1.027	2.9%	-2.2%	-4.6%	-4.1%

Exhibit 2B Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.998	1.001	1.005	1.008	0.3%	0.5%	0.3%	1.0%
Molina	0.959	0.971	0.971	0.956	1.2%	0.0%	-1.5%	-0.4%
United	1.015	1.009	1.003	1.004	-0.6%	-0.6%	0.1%	-1.0%
Unscored Members								
Magnolia	1.003	0.997	1.008	1.009	-0.7%	1.1%	0.1%	0.5%
Molina	0.983	0.961	0.970	0.967	-2.2%	0.9%	-0.3%	-1.6%
United	1.009	1.028	1.013	1.014	1.9%	-1.4%	0.1%	0.5%
All Members								
Magnolia	0.998	1.001	1.006	1.008	0.2%	0.5%	0.3%	1.0%
Molina	0.961	0.970	0.971	0.957	1.0%	0.0%	-1.4%	-0.5%
United	1.015	1.009	1.003	1.005	-0.6%	-0.6%	0.1%	-1.0%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.024	1.018	1.018	1.014	-0.6%	0.0%	-0.4%	-1.0%
Molina	0.982	0.989	0.965	0.959	0.7%	-2.4%	-0.6%	-2.3%
United	0.976	0.982	0.990	0.997	0.6%	0.8%	0.7%	2.2%
Unscored Members								
Magnolia	1.005	1.001	0.998	0.999	-0.4%	-0.3%	0.1%	-0.6%
Molina	1.003	1.026	1.014	1.012	2.3%	-1.2%	-0.1%	1.0%
United	0.993	0.983	0.993	0.992	-1.0%	1.0%	0.0%	0.0%
All Members								
Magnolia	1.024	1.018	1.017	1.013	-0.6%	0.0%	-0.4%	-1.0%
Molina	0.983	0.990	0.968	0.962	0.7%	-2.2%	-0.6%	-2.1%
United	0.976	0.982	0.990	0.997	0.6%	0.8%	0.7%	2.1%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.035	1.028	1.021	1.014	-0.6%	-0.7%	-0.7%	-2.0%
Molina	0.965	0.972	0.978	0.975	0.7%	0.6%	-0.3%	1.1%
United	0.977	0.981	0.987	0.994	0.4%	0.5%	0.7%	1.7%
Unscored Members								
Magnolia	1.015	1.024	1.012	1.013	0.9%	-1.2%	0.1%	-0.2%
Molina	0.962	0.946	0.975	0.976	-1.7%	3.1%	0.1%	1.4%
United	1.013	1.021	1.007	1.005	0.7%	-1.3%	-0.2%	-0.8%
All Members								
Magnolia	1.034	1.028	1.021	1.014	-0.6%	-0.7%	-0.6%	-1.9%
Molina	0.965	0.971	0.978	0.975	0.6%	0.7%	-0.2%	1.1%
United	0.978	0.982	0.988	0.995	0.4%	0.5%	0.7%	1.6%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.988	0.990	0.955	0.987	0.2%	-3.5%	3.3%	-0.1%
Molina	0.913	0.929	0.903	0.918	1.8%	-2.8%	1.7%	0.5%
United	0.978	0.989	0.954	0.977	1.1%	-3.6%	2.4%	-0.2%
Unscored Members								
Magnolia	0.997	1.003	0.996	0.976	0.7%	-0.7%	-2.0%	-2.1%
Molina	0.994	0.991	0.983	0.961	-0.3%	-0.8%	-2.3%	-3.4%
United	0.995	0.994	0.991	0.970	-0.2%	-0.3%	-2.2%	-2.6%
All Members								
Magnolia	0.990	0.991	0.960	0.986	0.2%	-3.2%	2.7%	-0.4%
Molina	0.923	0.934	0.912	0.923	1.2%	-2.4%	1.2%	0.0%
United	0.980	0.989	0.958	0.976	0.9%	-3.2%	1.9%	-0.5%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.983	0.999	0.965	0.988	1.6%	-3.4%	2.4%	0.5%
Molina	0.910	0.938	0.912	0.935	3.0%	-2.8%	2.6%	2.7%
United	0.996	1.001	0.969	0.983	0.5%	-3.2%	1.4%	-1.4%
Unscored Members								
Magnolia	0.986	0.988	0.998	0.978	0.1%	1.1%	-2.1%	-0.9%
Molina	0.992	0.996	0.986	0.966	0.4%	-1.0%	-2.0%	-2.6%
United	1.022	1.013	1.013	0.989	-0.8%	-0.1%	-2.3%	-3.2%
All Members								
Magnolia	0.984	0.998	0.968	0.987	1.5%	-3.0%	2.0%	0.3%
Molina	0.918	0.941	0.918	0.938	2.5%	-2.4%	2.1%	2.1%
United	0.999	1.002	0.973	0.983	0.4%	-2.9%	1.0%	-1.5%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.026	1.048	1.031	1.032	2.2%	-1.6%	0.1%	0.6%
Molina	0.959	0.980	0.964	0.958	2.2%	-1.7%	-0.5%	-0.1%
United	1.042	1.068	1.050	1.039	2.5%	-1.7%	-1.0%	-0.3%
Unscored Members								
Magnolia	0.982	0.988	0.995	0.970	0.6%	0.8%	-2.5%	-1.2%
Molina	0.997	0.990	0.988	0.964	-0.7%	-0.3%	-2.4%	-3.3%
United	0.998	1.000	0.994	0.968	0.1%	-0.6%	-2.6%	-3.0%
All Members								
Magnolia	1.022	1.044	1.028	1.026	2.2%	-1.6%	-0.2%	0.4%
Molina	0.964	0.982	0.967	0.960	1.8%	-1.5%	-0.7%	-0.4%
United	1.038	1.064	1.045	1.032	2.5%	-1.8%	-1.2%	-0.6%

Exhibit 2D
Mississippi Division of Medicaid
Impact Analysis MA Adult Population
Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.023	1.016	1.014	1.022	-0.7%	-0.2%	0.7%	-0.2%
Molina	0.946	0.954	0.959	0.951	0.9%	0.6%	-0.9%	0.5%
United	1.013	1.015	1.013	1.011	0.2%	-0.2%	-0.2%	-0.2%
Unscored Members								
Magnolia	1.001	1.007	1.006	1.007	0.6%	-0.1%	0.1%	0.6%
Molina	0.999	0.995	0.993	0.991	-0.4%	-0.2%	-0.2%	-0.8%
United	1.000	0.997	1.000	1.000	-0.3%	0.3%	0.0%	0.0%
All Members								
Magnolia	1.021	1.016	1.013	1.020	-0.5%	-0.2%	0.7%	-0.1%
Molina	0.952	0.957	0.963	0.955	0.5%	0.6%	-0.8%	0.3%
United	1.011	1.013	1.011	1.010	0.2%	-0.2%	-0.2%	-0.2%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.016	1.016	1.013	1.017	0.0%	-0.3%	0.3%	0.1%
Molina	0.940	0.954	0.958	0.962	1.5%	0.4%	0.5%	2.3%
United	1.029	1.019	1.018	1.011	-1.0%	0.0%	-0.7%	-1.7%
Unscored Members								
Magnolia	0.986	0.989	0.999	0.999	0.3%	1.0%	0.1%	1.3%
Molina	0.992	0.997	0.986	0.987	0.5%	-1.1%	0.1%	-0.5%
United	1.021	1.014	1.013	1.011	-0.7%	-0.2%	-0.2%	-1.0%
All Members								
Magnolia	1.013	1.014	1.012	1.015	0.1%	-0.2%	0.3%	0.2%
Molina	0.945	0.957	0.960	0.964	1.2%	0.4%	0.4%	2.0%
United	1.028	1.018	1.018	1.011	-1.0%	0.0%	-0.6%	-1.7%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.011	1.010	1.011	1.017	-0.1%	0.1%	0.6%	0.6%
Molina	0.945	0.945	0.944	0.944	-0.1%	-0.1%	0.0%	-0.1%
United	1.027	1.029	1.029	1.024	0.2%	0.0%	-0.5%	-0.4%
Unscored Members								
Magnolia	0.989	0.995	1.003	1.003	0.6%	0.8%	0.0%	1.3%
Molina	1.004	0.997	0.995	0.996	-0.7%	-0.2%	0.1%	-0.8%
United	1.006	1.007	1.002	1.001	0.1%	-0.5%	-0.1%	-0.5%
All Members								
Magnolia	1.009	1.009	1.010	1.015	0.0%	0.1%	0.6%	0.6%
Molina	0.952	0.948	0.950	0.950	-0.4%	0.1%	0.0%	-0.2%
United	1.025	1.028	1.026	1.021	0.2%	-0.2%	-0.5%	-0.4%

Exhibit 2E
Mississippi Division of Medicaid
Impact Analysis MA Children Population
Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.040	1.048	1.042	1.017	0.8%	-0.5%	-2.5%	-2.2%
Molina	0.994	0.993	0.997	0.966	-0.1%	0.4%	-3.1%	-2.8%
United	1.059	1.067	1.065	1.035	0.8%	-0.2%	-2.8%	-2.2%
Unscored Members								
Magnolia	0.982	0.994	0.969	0.975	1.2%	-2.6%	0.6%	-0.7%
Molina	0.977	0.993	0.966	0.971	1.6%	-2.7%	0.6%	-0.6%
United	0.985	0.999	0.978	0.979	1.4%	-2.1%	0.1%	-0.6%
All Members								
Magnolia	1.036	1.046	1.037	1.014	1.0%	-0.8%	-2.3%	-2.2%
Molina	0.993	0.994	0.996	0.967	0.0%	0.2%	-2.9%	-2.6%
United	1.055	1.065	1.059	1.032	0.9%	-0.5%	-2.6%	-2.2%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.038	1.049	1.047	1.011	1.0%	-0.1%	-3.4%	-2.6%
Molina	0.976	0.977	0.980	0.947	0.2%	0.2%	-3.3%	-2.9%
United	1.046	1.053	1.048	1.018	0.6%	-0.4%	-2.9%	-2.7%
Unscored Members								
Magnolia	0.984	1.002	0.964	0.970	1.8%	-3.9%	0.7%	-1.5%
Molina	0.972	0.987	0.960	0.964	1.5%	-2.8%	0.4%	-0.9%
United	0.987	0.999	0.967	0.972	1.2%	-3.1%	0.4%	-1.5%
All Members								
Magnolia	1.036	1.047	1.042	1.009	1.1%	-0.5%	-3.2%	-2.6%
Molina	0.976	0.978	0.979	0.949	0.2%	0.1%	-3.1%	-2.8%
United	1.044	1.051	1.044	1.016	0.7%	-0.7%	-2.7%	-2.7%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.062	1.069	1.075	1.025	0.6%	0.6%	-4.6%	-3.5%
Molina	1.007	1.015	1.028	0.982	0.8%	1.4%	-4.5%	-2.5%
United	1.098	1.098	1.104	1.052	0.0%	0.5%	-4.7%	-4.2%
Unscored Members								
Magnolia	0.985	1.001	0.971	0.971	1.6%	-3.0%	-0.1%	-1.4%
Molina	0.978	0.990	0.967	0.970	1.2%	-2.3%	0.3%	-0.9%
United	0.990	1.004	0.980	0.983	1.5%	-2.4%	0.3%	-0.7%
All Members								
Magnolia	1.059	1.068	1.069	1.022	0.8%	0.1%	-4.4%	-3.5%
Molina	1.006	1.014	1.025	0.982	0.8%	1.1%	-4.3%	-2.4%
United	1.093	1.096	1.096	1.048	0.2%	0.0%	-4.4%	-4.2%

Exhibit 2F
Mississippi Division of Medicaid
Impact Analysis MA Children Population
Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.002	1.004	1.001	1.004	0.2%	-0.3%	0.3%	0.2%
Molina	0.958	0.951	0.958	0.954	-0.7%	0.7%	-0.4%	-0.4%
United	1.021	1.022	1.023	1.022	0.1%	0.1%	-0.1%	0.2%
Unscored Members								
Magnolia	1.000	0.999	0.997	1.000	-0.2%	-0.1%	0.2%	-0.1%
Molina	0.995	0.997	0.994	0.996	0.2%	-0.3%	0.2%	0.1%
United	1.003	1.003	1.007	1.004	0.0%	0.4%	-0.3%	0.0%
All Members								
Magnolia	1.002	1.004	1.001	1.004	0.2%	-0.3%	0.3%	0.2%
Molina	0.961	0.953	0.961	0.957	-0.7%	0.8%	-0.4%	-0.3%
United	1.020	1.022	1.022	1.021	0.2%	0.0%	-0.1%	0.1%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.010	1.014	1.014	1.012	0.3%	0.1%	-0.2%	0.1%
Molina	0.950	0.945	0.949	0.948	-0.5%	0.4%	-0.1%	-0.2%
United	1.018	1.018	1.016	1.019	0.0%	-0.2%	0.3%	0.1%
Unscored Members								
Magnolia	1.003	1.006	1.000	1.001	0.3%	-0.6%	0.2%	-0.2%
Molina	0.990	0.990	0.996	0.995	0.0%	0.5%	-0.1%	0.5%
United	1.005	1.002	1.004	1.003	-0.3%	0.2%	-0.1%	-0.2%
All Members								
Magnolia	1.010	1.014	1.014	1.011	0.3%	0.0%	-0.2%	0.1%
Molina	0.952	0.946	0.952	0.951	-0.6%	0.6%	-0.1%	-0.1%
United	1.018	1.017	1.015	1.018	0.0%	-0.2%	0.3%	0.0%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.998	1.001	0.999	0.999	0.3%	-0.2%	0.0%	0.1%
Molina	0.946	0.950	0.956	0.957	0.4%	0.7%	0.1%	1.2%
United	1.032	1.028	1.026	1.026	-0.4%	-0.2%	0.0%	-0.6%
Unscored Members								
Magnolia	1.000	1.002	0.998	0.996	0.2%	-0.4%	-0.2%	-0.4%
Molina	0.994	0.991	0.994	0.995	-0.3%	0.3%	0.1%	0.1%
United	1.005	1.005	1.007	1.008	0.0%	0.2%	0.1%	0.3%
All Members								
Magnolia	0.998	1.001	0.999	0.999	0.3%	-0.2%	0.0%	0.1%
Molina	0.949	0.951	0.959	0.960	0.2%	0.8%	0.1%	1.2%
United	1.031	1.027	1.025	1.024	-0.3%	-0.2%	0.0%	-0.6%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.082	1.089	1.078	1.052	0.7%	-1.1%	-2.4%	-2.8%
Molina	1.041	1.050	1.053	1.013	0.9%	0.3%	-3.8%	-2.7%
United	1.096	1.115	1.099	1.070	1.7%	-1.4%	-2.6%	-2.3%
Unscored Members								
Magnolia	1.027	1.017	1.051	1.019	-1.0%	3.4%	-3.1%	-0.8%
Molina	1.050	1.051	1.054	1.023	0.1%	0.3%	-2.9%	-2.5%
United	1.060	1.053	1.046	1.029	-0.7%	-0.7%	-1.6%	-3.0%
All Members								
Magnolia	1.080	1.087	1.077	1.051	0.7%	-1.0%	-2.4%	-2.7%
Molina	1.042	1.051	1.054	1.015	0.8%	0.3%	-3.7%	-2.7%
United	1.094	1.113	1.097	1.068	1.7%	-1.5%	-2.6%	-2.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.049	1.072	1.064	1.032	2.2%	-0.8%	-2.9%	-1.6%
Molina	1.041	1.059	1.036	1.001	1.8%	-2.2%	-3.3%	-3.8%
United	1.060	1.072	1.058	1.034	1.1%	-1.3%	-2.3%	-2.5%
Unscored Members								
Magnolia	1.064	1.065	1.062	1.032	0.1%	-0.3%	-2.8%	-3.0%
Molina	1.054	1.072	1.057	1.016	1.7%	-1.4%	-3.9%	-3.6%
United	1.048	1.038	1.031	1.005	-1.0%	-0.6%	-2.5%	-4.1%
All Members								
Magnolia	1.050	1.072	1.063	1.032	2.1%	-0.8%	-2.9%	-1.7%
Molina	1.042	1.060	1.037	1.002	1.8%	-2.2%	-3.3%	-3.8%
United	1.060	1.071	1.057	1.033	1.1%	-1.3%	-2.3%	-2.6%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.108	1.108	1.117	1.065	0.0%	0.8%	-4.6%	-3.9%
Molina	1.082	1.083	1.088	1.047	0.1%	0.5%	-3.8%	-3.2%
United	1.160	1.177	1.161	1.114	1.5%	-1.3%	-4.1%	-3.9%
Unscored Members								
Magnolia	1.052	1.052	1.036	1.019	0.0%	-1.6%	-1.6%	-3.1%
Molina	1.046	1.053	1.043	1.031	0.7%	-0.9%	-1.1%	-1.4%
United	1.032	1.038	1.033	1.006	0.5%	-0.5%	-2.5%	-2.5%
All Members								
Magnolia	1.106	1.107	1.113	1.063	0.1%	0.6%	-4.5%	-3.9%
Molina	1.082	1.083	1.087	1.048	0.1%	0.4%	-3.6%	-3.1%
United	1.154	1.172	1.155	1.109	1.6%	-1.5%	-4.0%	-3.9%

Exhibit 2H
Mississippi Division of Medicaid
Impact Analysis Quasi-CHIP Population
Q3 to Q4 2023 to Q1 to Q2 2024 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	1.002	0.997	0.996	1.000	-0.5%	-0.1%	0.4%	-0.2%
Molina	0.963	0.961	0.973	0.963	-0.3%	1.3%	-1.1%	-0.1%
United	1.014	1.020	1.016	1.017	0.6%	-0.4%	0.1%	0.3%
Unscored Members								
Magnolia	0.982	0.977	1.001	0.995	-0.5%	2.4%	-0.6%	1.4%
Molina	1.003	1.010	1.004	0.999	0.7%	-0.6%	-0.4%	-0.4%
United	1.013	1.012	0.996	1.005	-0.1%	-1.6%	0.9%	-0.8%
All Members								
Magnolia	1.001	0.996	0.997	1.000	-0.5%	0.0%	0.3%	-0.1%
Molina	0.966	0.963	0.976	0.966	-0.3%	1.3%	-1.0%	-0.1%
United	1.014	1.020	1.015	1.017	0.6%	-0.5%	0.2%	0.2%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.997	1.002	1.007	1.005	0.5%	0.5%	-0.2%	0.8%
Molina	0.989	0.990	0.981	0.975	0.1%	-1.0%	-0.6%	-1.4%
United	1.008	1.002	1.002	1.007	-0.6%	0.0%	0.5%	-0.1%
Unscored Members								
Magnolia	1.009	1.009	1.012	1.015	0.0%	0.3%	0.2%	0.5%
Molina	1.000	1.017	1.008	0.999	1.7%	-0.8%	-0.9%	-0.1%
United	0.994	0.984	0.983	0.988	-1.0%	0.0%	0.5%	-0.6%
All Members								
Magnolia	0.998	1.003	1.008	1.006	0.5%	0.5%	-0.2%	0.8%
Molina	0.990	0.991	0.982	0.976	0.1%	-0.9%	-0.6%	-1.4%
United	1.007	1.001	1.001	1.006	-0.6%	0.0%	0.5%	-0.1%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jul 2023 to Dec 2023	Jul 2023 to Dec 2023	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	% Change Due to New Diagnosis Period	% Change Due to 1H2024 Enrollment Change	% Change Due to Risk Weight Update	Total % Change
Diagnosis Period	CY 2022 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (Prior Risk Weights)	May 2022 to Apr 2023 (New Risk Weights)				
Scored Members								
Magnolia	0.984	0.978	0.989	0.984	-0.7%	1.1%	-0.5%	0.0%
Molina	0.961	0.955	0.963	0.968	-0.6%	0.8%	0.5%	0.7%
United	1.030	1.038	1.028	1.029	0.8%	-1.0%	0.2%	-0.1%
Unscored Members								
Magnolia	1.011	1.006	0.999	1.002	-0.4%	-0.7%	0.3%	-0.8%
Molina	1.004	1.007	1.006	1.014	0.2%	-0.1%	0.8%	0.9%
United	0.991	0.992	0.996	0.990	0.1%	0.4%	-0.7%	-0.2%
All Members								
Magnolia	0.985	0.978	0.989	0.985	-0.7%	1.1%	-0.4%	0.0%
Molina	0.964	0.957	0.966	0.971	-0.7%	0.9%	0.5%	0.7%
United	1.028	1.036	1.026	1.027	0.8%	-1.0%	0.1%	-0.1%

Exhibit 3A
Mississippi Division of Medicaid
Risk Adjustment Results
Non-Newborn SSI / Disabled - North Region - Q1 to Q2 2024 Risk Scores
May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

	Risk Weight	Scored Members								
		Magnolia			Molina			United		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.144	N/A	56,311	100.00%	N/A	15,308	100.00%	N/A	47,175	100.00%
Demographic Categories										
Age 1 to 4	0.253	N/A	1,499	2.66%	N/A	1,161	7.58%	N/A	1,436	3.04%
Age 5 to 14 Male	0.101	N/A	6,528	11.59%	N/A	2,038	13.31%	N/A	5,289	11.21%
Age 5 to 14 Female	0.126	N/A	2,856	5.07%	N/A	848	5.54%	N/A	2,596	5.50%
Age 15 to 24 Male	0.000	N/A	5,166	9.17%	N/A	1,529	9.99%	N/A	4,670	9.90%
Age 15 to 24 Female	0.097	N/A	2,757	4.90%	N/A	809	5.28%	N/A	2,609	5.53%
Age 25 to 44 Male	0.110	N/A	6,904	12.26%	N/A	1,574	10.28%	N/A	6,029	12.78%
Age 25 to 44 Female	0.182	N/A	6,389	11.35%	N/A	1,436	9.38%	N/A	5,140	10.90%
Age 45 and Older Male	0.117	N/A	10,136	18.00%	N/A	3,095	20.22%	N/A	8,425	17.86%
Age 45 and Older Female	0.138	N/A	14,076	25.00%	N/A	2,818	18.41%	N/A	10,981	23.28%
Non-Utilizer Category										
No Base Period Medical Utilization	(0.114)	N/A	4,986	8.85%	N/A	1,715	11.20%	N/A	4,164	8.91%
Homelessness Category										
Homelessness	0.693	N/A	254	0.45%	N/A	112	0.73%	N/A	167	0.35%
Disease Categories										
Cancer, very high	2.226	24	227	0.40%	12	83	0.54%	24	166	0.35%
Cancer, high	0.762	23	664	1.18%	18	204	1.33%	23	511	1.08%
Cancer, medium	0.548	21	972	1.73%	26	194	1.27%	15	998	2.12%
Cancer, low	0.202	39	586	1.04%	43	120	0.78%	41	440	0.96%
Cardiovascular, very high	0.780	34	318	0.56%	31	107	0.70%	35	267	0.57%
Cardiovascular, medium	0.439	5	6,203	11.02%	4	1,703	11.12%	5	4,965	10.52%
Cardiovascular, low	0.156	14	4,154	7.38%	14	1,130	7.38%	16	2,896	6.07%
Cardiovascular, extra low	0.046	11	15,055	26.74%	20	2,982	19.48%	13	12,411	26.31%
CNS, high	1.165	19	485	0.86%	24	104	0.68%	25	301	0.64%
CNS, medium	0.402	26	1,171	2.08%	22	331	2.16%	22	1,092	2.18%
CNS, low	0.231	6	8,991	15.97%	7	2,118	13.84%	6	7,919	16.79%
DD, low to medium	0.104	35	2,006	3.56%	34	536	3.50%	34	2,050	4.35%
Diabetes, type 1	0.803	16	767	1.36%	25	136	0.89%	17	664	1.41%
Diabetes, type 2	0.389	3	9,440	16.76%	5	1,897	12.39%	4	7,416	15.72%
Eye, low	0.202	41	542	0.96%	44	76	0.50%	42	346	0.73%
Eye, very low	0.109	22	4,795	8.52%	33	591	3.86%	27	2,793	5.92%
Gastro, medium to high	0.420	9	2,578	4.58%	9	685	4.47%	9	2,097	4.45%
Gastro, low	0.097	10	10,800	19.18%	11	2,262	14.78%	10	8,260	17.52%
Genital, extra low	0.057	42	1,833	3.26%	41	454	2.97%	40	1,732	3.67%
Hematological, extra high	5.677	37	23	0.04%	36	9	0.06%	37	24	0.05%
Hematological, medium to very high	0.620	17	989	1.76%	19	232	1.52%	14	892	1.89%
Hematological, low	0.169	40	668	1.19%	38	220	1.44%	39	631	1.28%
Infectious, high to very high	1.205	7	1,557	2.77%	6	411	2.68%	7	1,318	2.79%
Infectious, medium	0.262	32	1,267	2.25%	29	356	2.33%	32	1,033	2.19%
Metabolic, high	0.526	12	1,289	2.29%	10	427	2.79%	12	1,122	2.38%
Metabolic, medium	0.097	28	3,955	7.02%	28	1,008	6.58%	30	2,979	6.31%
Pregnancy, incomplete	0.477	43	174	0.31%	46	24	0.16%	46	91	0.19%
Psychiatric, high	0.938	4	3,364	5.97%	3	933	6.09%	3	3,210	6.80%
Psychiatric, medium	0.408	27	975	1.73%	23	300	1.96%	26	777	1.65%
Psychiatric, low	0.198	1	21,024	37.34%	1	5,546	36.23%	1	18,404	39.01%
Pulmonary, very high	0.678	13	996	1.77%	16	247	1.61%	18	721	1.53%
Pulmonary, high	0.507	45	114	0.20%	40	54	0.35%	45	90	0.19%
Pulmonary, medium	0.348	15	1,844	3.27%	15	497	3.25%	19	1,400	2.97%
Pulmonary, low	0.141	8	9,283	16.49%	8	2,237	14.61%	8	6,958	14.75%
Rare Diseases	3.420	36	45	0.08%	48	0	0.00%	36	48	0.10%
Renal, extra high	2.509	20	224	0.40%	13	71	0.46%	11	267	0.57%
Renal, medium	0.278	18	2,109	3.75%	21	491	3.21%	16	1,936	4.10%
Renal, low	0.132	33	1,953	3.47%	35	412	2.69%	33	1,612	3.42%
Skeletal, medium	0.267	2	15,302	27.17%	2	3,678	24.03%	2	12,508	26.51%
Skeletal, very low to low	0.093	29	4,095	7.27%	32	860	5.62%	28	3,226	6.84%
Skin, very low to high	0.081	30	4,669	8.29%	30	1,145	7.48%	29	3,640	7.72%
Substance abuse, very low to low	0.138	25	3,490	6.20%	17	1,188	7.76%	21	3,207	6.80%
Disabled Children Add-On - CNS, high	0.420	46	137	0.24%	47	27	0.18%	48	58	0.12%
Disabled Children Add-On - Diabetes, type 1	0.418	48	123	0.22%	45	36	0.24%	47	74	0.16%
Disabled Children Add-On - Gastro, high	0.766	31	460	0.82%	27	128	0.84%	32	332	0.70%
Disabled Children Add-On - Metabolic, high	0.192	47	278	0.49%	39	157	1.03%	43	275	0.58%
Disabled Children Add-On - Metabolic, medium	0.218	44	312	0.55%	42	115	0.75%	44	212	0.45%
Disabled Children Add-On - Pulmonary, very high	0.579	38	217	0.39%	37	84	0.55%	38	213	0.45%
Population Statistics										
No Classified Disease Categories	N/A	N/A	6,002	10.66%	N/A	1,947	12.72%	N/A	5,028	10.66%

Demographic Categories	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.082	N/A	145	9.27%	N/A	114	9.93%	N/A	151	8.78%	N/A	410	9.25%
Age 5 to 14 Male	0.593	N/A	112	7.16%	N/A	107	9.32%	N/A	160	9.31%	N/A	379	8.55%
Age 5 to 14 Female	0.696	N/A	63	4.03%	N/A	52	4.53%	N/A	90	5.24%	N/A	205	4.63%
Age 15 to 24 Male	0.517	N/A	97	6.20%	N/A	84	7.32%	N/A	85	4.94%	N/A	266	6.00%
Age 15 to 24 Female	0.735	N/A	84	5.37%	N/A	85	7.40%	N/A	44	2.56%	N/A	213	4.81%
Age 25 to 44 Male	0.938	N/A	185	11.83%	N/A	119	10.37%	N/A	185	10.76%	N/A	489	11.04%
Age 25 to 44 Female	1.133	N/A	112	7.16%	N/A	117	10.19%	N/A	151	8.78%	N/A	380	8.58%
Age 45 and Older Male	1.163	N/A	367	23.47%	N/A	271	23.61%	N/A	403	23.44%	N/A	1,041	23.49%
Age 45 and Older Female	1.344	N/A	399	25.51%	N/A	199	17.33%	N/A	450	26.18%	N/A	1,048	23.65%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		56,311	15,308	47,175
Unadjusted Plan Factor		0.943	0.894	0.939
Budget Neutral Plan Factor		1.008	0.956	1.004
Unscored Members				
Member Months		1,564	1,148	1,719
Unadjusted Plan Factor		1.050	1.007	1.056
Budget Neutral Plan Factor		1.009	0.967	1.014
Total Members				
Member Months		57,875	16,456	48,894
Unadjusted Plan Factor		0.947	0.898	0.943
Budget Neutral Plan Factor		1.008	0.957	1.005

Exhibit 3B

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - Central Region - Q1 to Q2 2024 Risk Scores

May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.144	N/A	59,864	100.00%	N/A	16,207	100.00%	N/A	47,725	100.00%	N/A	123,796	100.00%
Demographic Categories													
Age 1 to 4	0.253	N/A	1,919	3.21%	N/A	1,599	9.87%	N/A	1,590	3.33%	N/A	5,108	4.13%
Age 5 to 14 Male	0.101	N/A	6,839	11.42%	N/A	2,172	13.40%	N/A	5,672	11.88%	N/A	14,683	11.86%
Age 5 to 14 Female	0.126	N/A	3,202	5.35%	N/A	873	5.39%	N/A	2,666	5.54%	N/A	6,721	5.43%
Age 15 to 24 Male	0.000	N/A	5,963	9.96%	N/A	1,727	10.66%	N/A	4,560	9.55%	N/A	12,250	9.90%
Age 15 to 24 Female	0.097	N/A	3,145	5.25%	N/A	907	5.60%	N/A	2,409	5.05%	N/A	6,461	5.22%
Age 25 to 44 Male	0.110	N/A	7,450	12.44%	N/A	1,729	10.67%	N/A	6,110	12.80%	N/A	15,289	12.35%
Age 25 to 44 Female	0.182	N/A	6,653	11.11%	N/A	1,254	7.74%	N/A	4,823	10.11%	N/A	12,730	10.28%
Age 45 and Older Male	0.117	N/A	10,579	17.67%	N/A	3,356	20.71%	N/A	9,259	19.40%	N/A	23,194	18.74%
Age 45 and Older Female	0.138	N/A	14,114	23.58%	N/A	2,590	15.98%	N/A	10,656	22.33%	N/A	27,360	22.10%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.114)	N/A	4,373	7.30%	N/A	1,440	8.89%	N/A	3,824	8.01%	N/A	9,637	7.78%
Homelessness Category													
Homelessness	0.693	N/A	454	0.76%	N/A	263	1.62%	N/A	478	1.00%	N/A	1,195	0.97%
Disease Categories													
Cancer, very high	2.226	18	304	0.51%	10	113	0.70%	25	177	0.37%	22	594	0.48%
Cancer, high	0.762	26	719	1.20%	26	181	1.12%	23	657	1.38%	25	1,557	1.26%
Cancer, medium	0.548	25	1,055	1.76%	24	275	1.70%	17	1,038	2.17%	23	2,368	1.91%
Cancer, low	0.202	42	592	0.99%	41	160	0.99%	42	433	0.91%	43	1,185	0.96%
Cardiovascular, very high	0.780	30	500	0.84%	35	87	0.54%	36	297	0.62%	33	884	0.71%
Cardiovascular, medium	0.439	5	6,325	10.57%	4	1,878	11.59%	5	5,087	10.66%	5	13,290	10.74%
Cardiovascular, low	0.159	24	3,756	6.27%	19	1,168	7.21%	24	3,045	6.38%	24	7,969	6.44%
Cardiovascular, extra low	0.046	16	16,105	26.90%	23	3,317	20.47%	15	12,522	26.24%	16	31,944	25.80%
CNS, high	1.165	13	803	1.34%	17	167	1.03%	12	654	1.37%	13	1,624	1.31%
CNS, medium	0.402	22	1,557	2.60%	18	458	2.83%	21	1,291	2.71%	20	3,306	2.67%
CNS, low	0.231	7	10,412	17.38%	6	2,950	18.20%	7	8,806	18.45%	7	22,188	17.91%
DD, low to medium	0.104	35	2,632	4.40%	34	717	4.42%	37	2,132	4.47%	36	5,481	4.43%
Diabetes, type 1	0.803	19	838	1.40%	25	187	1.15%	16	714	1.50%	19	1,739	1.40%
Diabetes, type 2	0.389	3	9,923	16.58%	5	2,017	12.45%	4	7,228	15.15%	4	19,168	15.48%
Eye, low	0.202	39	744	1.24%	40	195	1.20%	41	476	1.00%	40	1,415	1.14%
Eye, very low	0.109	23	5,705	9.53%	31	909	5.61%	26	3,237	6.78%	26	9,851	7.96%
Gastro, medium to high	0.420	9	3,012	5.03%	8	911	5.00%	9	2,184	4.60%	9	6,017	4.86%
Gastro, low	0.097	11	10,634	17.76%	13	2,244	13.85%	13	7,851	16.45%	11	20,729	16.74%
Genital, extra low	0.057	41	2,111	3.53%	42	507	3.13%	40	1,686	3.53%	41	4,304	3.48%
Hematological, extra high	5.677	47	12	0.02%	45	4	0.02%	35	42	0.09%	38	58	0.05%
Hematological, medium to very high	0.620	14	1,347	2.25%	21	254	1.57%	14	1,005	2.11%	14	2,606	2.11%
Hematological, low	0.169	38	945	1.58%	38	286	1.70%	38	927	1.91%	38	1,858	1.50%
Infectious, high to very high	1.205	6	2,049	3.42%	7	492	3.04%	6	1,808	3.79%	6	4,349	3.51%
Infectious, medium	0.262	33	1,369	2.29%	28	423	2.61%	34	971	2.03%	32	2,763	2.23%
Metabolic, high	0.526	12	1,793	3.00%	15	400	2.47%	10	1,559	3.27%	12	3,752	3.03%
Metabolic, medium	0.097	29	4,232	7.07%	32	1,003	6.19%	31	3,094	6.48%	31	8,329	6.73%
Pregnancy, incomplete	0.477	45	179	0.30%	46	47	0.29%	47	98	0.21%	46	324	0.26%
Psychiatric, high	0.938	1	5,482	9.16%	2	1,256	7.75%	1	4,197	8.79%	1	10,935	8.83%
Psychiatric, medium	0.408	28	1,092	1.82%	27	328	2.02%	30	756	1.58%	28	2,176	1.76%
Psychiatric, low	0.198	2	23,196	38.75%	1	6,140	37.88%	2	18,317	38.38%	2	47,653	38.49%
Pulmonary, very high	0.678	15	1,151	1.92%	14	312	1.93%	19	800	1.68%	15	2,263	1.83%
Pulmonary, high	0.507	40	242	0.40%	37	105	0.65%	44	135	0.28%	42	482	0.39%
Pulmonary, medium	0.348	17	2,020	3.37%	11	684	4.22%	20	1,508	3.18%	17	4,212	3.40%
Pulmonary, low	0.141	10	8,958	14.96%	9	2,267	13.99%	8	6,807	14.26%	8	18,022	14.57%
Rare Diseases	3.420	36	72	0.12%	39	12	0.07%	32	84	0.18%	35	168	0.14%
Renal, extra high	2.509	8	548	0.92%	12	89	0.55%	11	309	0.65%	10	946	0.76%
Renal, medium	0.278	21	2,281	3.81%	20	628	3.87%	22	1,857	3.89%	21	4,766	3.85%
Renal, low	0.132	34	2,627	4.39%	33	579	3.57%	33	1,936	4.06%	34	5,142	4.15%
Skeletal, medium	0.267	4	14,112	23.57%	3	3,278	20.23%	3	11,262	23.60%	3	28,652	23.14%
Skeletal, very low to low	0.093	27	5,218	8.72%	29	1,170	7.22%	27	3,761	7.88%	27	10,149	8.20%
Skin, very low to high	0.081	32	4,689	7.83%	30	1,306	8.06%	28	4,025	8.43%	30	10,020	8.09%
Substance abuse, very low to low	0.138	20	4,863	8.12%	16	1,446	8.92%	18	4,104	8.60%	18	10,413	8.41%
Disabled Children Add-On - CNS, high	0.420	43	241	0.40%	48	26	0.16%	45	146	0.31%	45	413	0.33%
Disabled Children Add-On - Diabetes, type 1	0.418	46	171	0.29%	47	31	0.19%	46	138	0.29%	47	340	0.27%
Disabled Children Add-On - Gastro, high	0.765	31	499	0.83%	22	200	1.22%	29	410	0.86%	29	1,109	0.90%
Disabled Children Add-On - Metabolic, high	0.192	44	489	0.82%	44	136	0.84%	43	375	0.79%	44	1,000	0.81%
Disabled Children Add-On - Metabolic, medium	0.218	48	235	0.39%	43	131	0.81%	48	109	0.23%	48	475	0.38%
Disabled Children Add-On - Pulmonary, very hig	0.579	37	294	0.49%	36	104	0.64%	39	178	0.37%	37	576	0.47%
Population Statistics													
No Classified Disease Categories	N/A	N/A	6,158	10.29%	N/A	1,761	10.87%	N/A	5,015	10.51%	N/A	12,934	10.45%

Demographic Categories	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.082	N/A	170	11.32%	N/A	196	19.37%	N/A	197	12.93%	N/A	563	13.94%
Age 5 to 14 Male	0.593	N/A	102	6.79%	N/A	78	7.71%	N/A	107	7.02%	N/A	287	7.11%
Age 5 to 14 Female	0.696	N/A	42	2.80%	N/A	45	4.45%	N/A	73	4.79%	N/A	160	3.96%
Age 15 to 24 Male	0.517	N/A	108	7.19%	N/A	27	2.67%	N/A	105	6.89%	N/A	240	5.94%
Age 15 to 24 Female	0.735	N/A	58	3.86%	N/A	31	3.06%	N/A	60	3.94%	N/A	149	3.69%
Age 25 to 44 Male	0.938	N/A	157	10.45%	N/A	94	9.29%	N/A	135	8.86%	N/A	386	9.56%
Age 25 to 44 Female	1.133	N/A	122	8.12%	N/A	78	7.71%	N/A	106	6.96%	N/A	306	7.58%
Age 45 and Older Male	1.163	N/A	384	25.57%	N/A	232	22.92%	N/A	384	25.20%	N/A	1,000	24.76%
Age 45 and Older Female	1.344	N/A	359	23.90%	N/A	231	22.83%	N/A	357	23.43%	N/A	947	23.45%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia	Molina	United			Magnolia	Molina	United
Scored Members					Unscored Members				
Member Months		59,864	16,207	47,725	Member Months		59,864	16,207	47,725
Unadjusted Plan Factor		1.020	0.966	1.004	Unadjusted Plan Factor		1.020	0.966	1.004
Budget Neutral Plan Factor		1.014	0.959	0.997	Budget Neutral Plan Factor		1.014	0.959	0.997
Unscored Members					Unscored Members				
Member Months		1,502	1,012	1,524	Member Months		1,502	1,012	1,524
Unadjusted Plan Factor		1.056	1.070	1.049	Unadjusted Plan Factor		1.056	1.070	1.049
Budget Neutral Plan Factor		0.999	1.012	0.992	Budget Neutral Plan Factor		0.999	1.012	0.992
Total Members					Total Members				
Member Months		61,366	17,219	49,249	Member Months		61,366	17,219	49,249
Unadjusted Plan Factor		1.022	0.970	1.005	Unadjusted Plan Factor		1.022	0.970	1.005
Budget Neutral Plan Factor		1.013	0.962	0.997	Budget Neutral Plan Factor		1.013	0.962	0.997

Exhibit 3C Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - South Region - Q1 to Q2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.144	N/A	41,200	100.00%	N/A	13,424	100.00%	N/A	42,918	100.00%	N/A	97,542	100.00%
Demographic Categories													
Age 1 to 4	0.253	N/A	1,236	3.00%	N/A	1,061	7.90%	N/A	1,278	2.98%	N/A	3,575	3.67%
Age 5 to 14 Male	0.101	N/A	5,375	13.05%	N/A	1,524	11.35%	N/A	5,226	12.18%	N/A	12,125	12.43%
Age 5 to 14 Female	0.126	N/A	2,551	6.19%	N/A	774	5.77%	N/A	2,292	5.34%	N/A	5,617	5.76%
Age 15 to 24 Male	0.000	N/A	3,866	9.38%	N/A	1,377	10.26%	N/A	3,944	9.19%	N/A	9,187	9.42%
Age 15 to 24 Female	0.097	N/A	1,999	4.85%	N/A	776	5.78%	N/A	2,050	4.78%	N/A	4,825	4.95%
Age 25 to 44 Male	0.110	N/A	4,294	10.42%	N/A	1,295	9.65%	N/A	4,851	11.30%	N/A	10,440	10.70%
Age 25 to 44 Female	0.182	N/A	4,028	9.78%	N/A	1,062	7.91%	N/A	4,283	9.98%	N/A	9,373	9.61%
Age 45 and Older Male	0.117	N/A	7,559	18.35%	N/A	2,720	20.26%	N/A	8,401	19.57%	N/A	18,680	19.15%
Age 45 and Older Female	0.138	N/A	10,292	24.98%	N/A	2,835	21.12%	N/A	10,593	24.68%	N/A	23,720	24.32%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.114)	N/A	3,212	7.80%	N/A	1,247	9.29%	N/A	3,168	7.38%	N/A	7,627	7.82%
Homelessness Category													
Homelessness	0.693	N/A	404	0.98%	N/A	305	2.27%	N/A	410	0.96%	N/A	1,119	1.15%
Disease Categories													
Cancer, very high	2.226	15	279	0.68%	15	86	0.64%	21	210	0.49%	18	575	0.59%
Cancer, high	0.762	23	610	1.48%	14	265	1.97%	25	562	1.31%	23	1,437	1.47%
Cancer, medium	0.548	29	594	1.44%	25	215	1.60%	26	761	1.77%	27	1,570	1.61%
Cancer, low	0.202	39	473	1.15%	40	159	1.18%	36	645	1.50%	38	1,277	1.31%
Cardiovascular, very high	0.780	34	313	0.76%	30	118	0.88%	35	289	0.67%	34	720	0.74%
Cardiovascular, medium	0.439	5	4,783	11.61%	5	1,512	11.26%	5	5,058	11.79%	5	11,353	11.64%
Cardiovascular, low	0.156	18	3,399	8.25%	22	946	7.05%	16	3,535	8.24%	19	7,880	8.08%
Cardiovascular, extra low	0.046	24	9,849	23.91%	24	2,767	20.61%	20	10,525	24.52%	24	23,141	23.72%
CNS, high	1.165	22	410	1.00%	20	129	0.96%	15	490	1.14%	20	1,029	1.05%
CNS, medium	0.402	14	1,556	3.78%	19	391	2.91%	18	1,323	3.08%	15	3,270	3.35%
CNS, low	0.231	6	7,973	19.35%	7	2,367	17.63%	6	8,134	18.95%	6	18,474	18.94%
DD, low to medium	0.104	35	2,193	5.32%	35	650	4.84%	33	2,344	5.46%	35	5,187	5.32%
Diabetes, type 1	0.803	13	808	1.96%	29	131	0.98%	17	669	1.56%	17	1,608	1.65%
Diabetes, type 2	0.389	4	6,454	15.67%	4	1,741	12.97%	4	6,584	15.34%	4	14,779	15.15%
Eye, low	0.202	41	455	1.10%	45	93	0.69%	42	404	0.94%	42	952	0.98%
Eye, very low	0.109	27	3,175	7.71%	33	695	5.18%	29	2,531	5.90%	29	6,401	6.56%
Gastro, medium to high	0.420	8	2,595	6.30%	8	859	6.40%	8	2,727	6.35%	8	6,181	6.34%
Gastro, low	0.097	10	8,528	20.70%	10	2,477	18.45%	10	8,349	19.45%	10	19,354	19.84%
Genital, extra low	0.057	40	1,651	4.01%	41	515	3.84%	39	1,666	3.88%	41	3,832	3.93%
Hematological, extra high	5.677	38	21	0.05%	38	6	0.04%	41	15	0.03%	39	42	0.04%
Hematological, medium to very high	0.620	20	825	2.00%	17	262	1.95%	23	738	1.72%	22	1,825	1.87%
Hematological, low	0.169	37	791	1.92%	39	182	1.43%	38	689	1.61%	37	1,672	1.71%
Infectious, high to very high	1.205	7	1,326	3.22%	6	489	3.64%	7	1,417	3.30%	7	3,232	3.31%
Infectious, medium	0.262	33	1,003	2.43%	28	411	3.06%	30	981	2.29%	31	2,395	2.46%
Metabolic, high	0.526	16	1,177	2.86%	18	308	2.29%	12	1,301	3.03%	12	2,786	2.86%
Metabolic, medium	0.097	31	2,880	6.99%	32	862	6.42%	31	2,575	6.00%	32	6,317	6.48%
Pregnancy, incomplete	0.477	47	92	0.22%	42	58	0.43%	45	108	0.25%	44	258	0.26%
Psychiatric, high	0.938	2	3,241	7.87%	2	1,062	7.91%	2	3,572	8.32%	2	7,875	8.07%
Psychiatric, medium	0.408	25	959	2.33%	23	339	2.53%	27	994	2.32%	25	2,292	2.35%
Psychiatric, low	0.198	1	17,524	42.53%	1	5,173	38.54%	1	18,131	42.25%	1	40,828	41.86%
Pulmonary, very high	0.678	11	1,016	2.47%	12	302	2.25%	12	937	2.18%	11	2,255	2.31%
Pulmonary, high	0.507	45	91	0.22%	43	50	0.37%	47	84	0.20%	45	225	0.23%
Pulmonary, medium	0.348	17	1,586	3.85%	11	685	5.10%	14	1,735	4.04%	13	4,006	4.11%
Pulmonary, low	0.141	9	7,134	17.32%	9	1,997	14.88%	9	7,080	16.50%	9	16,211	16.62%
Rare Diseases	3.420	36	51	0.12%	37	12	0.09%	37	36	0.08%	36	99	0.10%
Renal, extra high	2.509	12	271	0.66%	16	67	0.50%	22	184	0.43%	16	522	0.54%
Renal, medium	0.278	21	1,817	4.41%	21	541	4.03%	19	1,762	4.11%	21	4,120	4.22%
Renal, low	0.132	32	2,032	4.93%	34	550	4.10%	34	1,738	4.05%	33	4,320	4.43%
Skeletal, medium	0.267	3	9,484	23.02%	3	2,603	19.39%	3	9,984	23.26%	3	22,071	22.63%
Skeletal, very low to low	0.093	26	4,169	10.12%	26	1,254	9.34%	24	4,625	10.78%	26	10,048	10.30%
Skin, very low to high	0.081	28	4,249	10.31%	27	1,381	10.29%	28	4,410	10.28%	28	10,040	10.29%
Substance abuse, very low to low	0.138	19	3,760	9.13%	13	1,478	11.01%	13	4,444	10.35%	14	9,682	9.93%
Disabled Children Add-On - CNS, high	0.420	44	119	0.29%	47	30	0.22%	48	96	0.22%	47	245	0.25%
Disabled Children Add-On - Diabetes, type 1	0.418	46	109	0.26%	48	8	0.06%	44	124	0.29%	48	241	0.25%
Disabled Children Add-On - Gastro, high	0.766	30	379	0.92%	31	118	0.88%	32	323	0.75%	30	820	0.84%
Disabled Children Add-On - Metabolic, high	0.192	43	314	0.76%	46	88	0.66%	43	300	0.70%	43	702	0.72%
Disabled Children Add-On - Metabolic, medium	0.218	48	160	0.39%	44	103	0.77%	46	215	0.50%	46	478	0.49%
Disabled Children Add-On - Pulmonary, very hig	0.579	42	153	0.37%	36	75	0.56%	40	158	0.37%	40	386	0.40%
Population Statistics													
No Classified Disease Categories	N/A	N/A	4,040	9.81%	N/A	1,492	11.11%	N/A	4,005	9.33%	N/A	9,537	9.78%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	1.082	N/A	128	8.79%	N/A	140	11.44%	N/A	213	11.93%	N/A	481	10.77%
Age 5 to 14 Male	0.593	N/A	106	7.28%	N/A	88	7.19%	N/A	138	7.73%	N/A	332	7.44%
Age 5 to 14 Female	0.696	N/A	44	3.02%	N/A	47	3.84%	N/A	71	3.98%	N/A	162	3.63%
Age 15 to 24 Male	0.517	N/A	93	6.39%	N/A	86	7.03%	N/A	69	3.87%	N/A	248	5.55%
Age 15 to 24 Female	0.735	N/A	48	3.30%	N/A	62	5.07%	N/A	70	3.92%	N/A	180	4.03%
Age 25 to 44 Male	0.938	N/A	124	8.52%	N/A	140	11.44%	N/A	154	8.63%	N/A	418	9.36%
Age 25 to 44 Female	1.133	N/A	133	9.13%	N/A	99	8.09%	N/A	196	10.96%	N/A	428	9.59%
Age 45 and Older Male	1.163	N/A	358	24.59%	N/A	316	25.82%	N/A	472	26.44%	N/A	1,146	25.67%
Age 45 and Older Female	1.344	N/A	422	28.98%	N/A	246	20.10%	N/A	402	22.52%	N/A	1,070	23.96%
Risk Adjustment Results													
Scored Members													
Member Months			41,200			13,424			42,918			97,542	
Unadjusted Plan Factor			1.046			1.006			1.025			1.031	
Budget Neutral Plan Factor			1.014			0.975			0.994			1.000	
Unscored Members													
Member Months			1,456			1,224			1,785			4,465	
Unadjusted Plan Factor			1.075			1.036			1.067			1.061	
Budget Neutral Plan Factor			1.013			0.976			1.005			1.000	
Total Members													
Member Months			42,656			14,648			44,703			102,007	
Unadjusted Plan Factor			1.047			1.007			1.027			1.033	
Budget Neutral Plan Factor			1.014			0.975			0.995			1.000	

Exhibit 3D Mississippi Division of Medicaid Risk Adjustment Results MA Adult - North Region - 01 to 02 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period																	
Scored Members																	
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months				
Regression Intercept	0.119	N/A	N/A	30,615	100.00%	N/A	N/A	19,518	100.00%	N/A	N/A	28,266	100.00%	N/A	N/A	78,399	100.00%
Demographic Categories																	
Age 19 to 24 Male	0.000	N/A	N/A	92	0.30%	N/A	N/A	47	0.24%	N/A	N/A	98	0.35%	N/A	N/A	237	0.30%
Age 19 to 24 Female	0.284	N/A	N/A	2,588	8.45%	N/A	N/A	2,223	11.39%	N/A	N/A	2,742	9.70%	N/A	N/A	7,553	9.63%
Age 25 to 44 Male	0.101	N/A	N/A	1,502	4.91%	N/A	N/A	911	4.67%	N/A	N/A	1,562	5.53%	N/A	N/A	3,975	5.07%
Age 25 to 44 Female	0.265	N/A	N/A	23,106	75.47%	N/A	N/A	14,772	75.88%	N/A	N/A	20,917	74.00%	N/A	N/A	58,795	74.99%
Age 45 and Older Male	0.229	N/A	N/A	551	1.80%	N/A	N/A	317	1.62%	N/A	N/A	488	1.73%	N/A	N/A	1,356	1.73%
Age 45 and Older Female	0.323	N/A	N/A	2,776	9.07%	N/A	N/A	1,248	6.39%	N/A	N/A	2,459	8.70%	N/A	N/A	6,483	8.27%
Non-Utilizer Category																	
No Base Period Medical Utilization	(0.119)	N/A	N/A	2,242	7.32%	N/A	N/A	1,734	8.88%	N/A	N/A	2,271	8.03%	N/A	N/A	6,247	7.97%
Disease Categories																	
Cancer, very high	3.548	32	13	0.04%	30	10	0.05%	29	18	0.06%	30	41	0.05%	30	41	0.05%	
Cancer, high	1.726	23	99	0.32%	24	36	0.18%	23	85	0.30%	23	220	0.28%	23	220	0.28%	
Cancer, medium	0.757	22	237	0.77%	22	109	0.56%	22	207	0.73%	21	553	0.71%	21	553	0.71%	
Cancer, low	0.624	31	82	0.27%	32	25	0.13%	31	79	0.28%	31	186	0.24%	31	186	0.24%	
Cardiovascular, very high	1.451	34	24	0.08%	31	23	0.12%	35	10	0.04%	34	57	0.07%	34	57	0.07%	
Cardiovascular, medium	0.397	10	1,361	4.45%	12	752	3.85%	11	1,208	4.27%	11	3,321	4.24%	11	3,321	4.24%	
Cardiovascular, low	0.366	15	901	2.94%	14	573	2.94%	14	946	3.35%	14	2,420	3.09%	14	2,420	3.09%	
Cardiovascular, extra low	0.113	5	8,546	27.91%	5	4,542	23.27%	5	7,108	25.15%	5	20,196	25.76%	5	20,196	25.76%	
CNS, high	1.356	21	141	0.46%	27	40	0.20%	26	88	0.31%	24	269	0.34%	24	269	0.34%	
CNS, low to medium	0.333	8	1,868	6.10%	10	999	5.12%	9	1,678	5.94%	9	4,545	5.80%	9	4,545	5.80%	
Diabetes, type 1	1.962	12	250	0.82%	11	156	0.80%	12	235	0.83%	12	641	0.82%	12	641	0.82%	
Diabetes, type 2	0.761	3	3,014	9.84%	3	1,510	7.74%	3	2,625	9.29%	3	7,149	9.12%	3	7,149	9.12%	
Eye, low	0.365	33	114	0.37%	33	42	0.22%	32	111	0.39%	32	267	0.34%	32	267	0.34%	
Eye, very low	0.242	28	431	1.41%	28	191	0.98%	28	338	1.20%	28	960	1.22%	28	960	1.22%	
Gastro, high	1.218	30	44	0.14%	34	8	0.04%	33	27	0.10%	33	79	0.10%	33	79	0.10%	
Gastro, medium	0.725	16	423	1.38%	16	259	1.33%	16	415	1.47%	16	1,097	1.40%	16	1,097	1.40%	
Gastro, low	0.196	6	4,312	14.08%	8	2,087	10.69%	6	3,588	12.69%	6	9,987	12.74%	6	9,987	12.74%	
Genital, extra low	0.120	17	2,157	7.05%	18	1,271	6.51%	18	1,888	6.68%	18	5,316	6.78%	18	5,316	6.78%	
Infectious, high to very high	1.283	11	416	1.36%	9	264	1.35%	10	388	1.37%	10	1,068	1.36%	10	1,068	1.36%	
Infectious, low to medium	0.285	20	671	2.19%	21	300	1.54%	20	605	2.14%	20	1,576	2.01%	20	1,576	2.01%	
Metabolic, high	0.918	18	262	0.86%	17	172	0.88%	15	339	1.20%	17	773	0.99%	17	773	0.99%	
Pregnancy, complete	0.141	9	4,049	13.23%	7	3,036	15.55%	8	4,065	14.38%	8	11,150	14.22%	8	11,150	14.22%	
Pregnancy, incomplete	1.061	4	1,134	3.70%	4	724	3.71%	4	1,045	3.70%	4	2,903	3.70%	4	2,903	3.70%	
Psychiatric, high	0.980	19	223	0.73%	19	117	0.60%	19	183	0.65%	19	523	0.67%	19	523	0.67%	
Psychiatric, medium	0.560	25	257	0.84%	20	198	1.01%	21	281	0.99%	22	736	0.94%	22	736	0.94%	
Psychiatric, low	0.325	2	7,349	24.00%	2	4,722	24.19%	2	7,378	26.10%	2	19,449	24.81%	2	19,449	24.81%	
Pulmonary, very high	0.412	35	16	0.05%	35	22	0.11%	34	42	0.15%	35	80	0.10%	35	80	0.10%	
Pulmonary, low to medium	0.250	7	3,121	10.19%	6	1,715	8.79%	7	2,553	9.03%	7	7,389	9.42%	7	7,389	9.42%	
Rare Diseases	3.615	37	0	0.00%	37	0	0.00%	37	0	0.00%	37	0	0.00%	37	0	0.00%	
Renal, extra high	1.050	36	6	0.02%	36	6	0.03%	36	9	0.03%	36	21	0.03%	36	21	0.03%	
Renal, medium	0.593	26	208	0.68%	25	100	0.51%	27	183	0.65%	27	491	0.63%	27	491	0.63%	
Renal, low	0.337	24	496	1.62%	26	173	0.89%	24	400	1.42%	25	1,069	1.36%	25	1,069	1.36%	
Skeletal, medium	0.368	1	10,117	33.05%	1	5,632	28.86%	1	9,117	32.25%	1	24,866	31.72%	1	24,866	31.72%	
Skeletal, very low to low	0.101	27	1,172	3.83%	23	767	3.93%	25	1,212	4.29%	26	3,151	4.02%	26	3,151	4.02%	
Skin, low to high	0.747	29	99	0.32%	29	58	0.30%	30	73	0.26%	29	230	0.29%	29	230	0.29%	
Skin, very low	0.172	14	1,990	6.50%	15	1,214	6.22%	17	1,690	5.98%	15	4,894	6.24%	15	4,894	6.24%	
Substance abuse, low	0.409	13	1,114	3.64%	13	691	3.54%	13	1,021	3.61%	13	2,826	3.60%	13	2,826	3.60%	
Population Statistics																	
No Classified Disease Categories	N/A	N/A	N/A	5,695	18.60%	N/A	N/A	3,898	19.97%	N/A	N/A	5,204	18.41%	N/A	N/A	14,797	18.87%
Unscored Members																	
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months				
Demographic Categories																	
Age 19 to 24 Male	0.449	N/A	N/A	79	2.40%	N/A	N/A	46	1.72%	N/A	N/A	41	1.24%	N/A	N/A	166	1.79%
Age 19 to 24 Female	0.880	N/A	N/A	179	5.43%	N/A	N/A	172	6.44%	N/A	N/A	191	5.75%	N/A	N/A	542	5.84%
Age 25 to 44 Male	0.697	N/A	N/A	455	13.80%	N/A	N/A	466	17.45%	N/A	N/A	519	15.64%	N/A	N/A	1,440	15.51%
Age 25 to 44 Female	0.990	N/A	N/A	2,112	64.06%	N/A	N/A	1,658	62.10%	N/A	N/A	2,152	64.84%	N/A	N/A	5,922	63.77%
Age 45 and Older Male	1.137	N/A	N/A	134	4.06%	N/A	N/A	102	3.82%	N/A	N/A	137	4.13%	N/A	N/A	373	4.02%
Age 45 and Older Female	1.375	N/A	N/A	338	10.25%	N/A	N/A	226	8.46%	N/A	N/A	279	8.41%	N/A	N/A	843	9.08%
Risk Adjustment Results																	
			Magnolia		Molina				United			Total					
Scored Members																	
Member Months			30,615		19,518				28,266			78,399					
Unadjusted Plan Factor			0.987		0.918				0.977			0.966					
Budget Neutral Plan Factor			1.022		0.951				1.011			1.000					
Unscored Members																	
Member Months			3,297		2,670				3,319			9,286					
Unadjusted Plan Factor			0.976		0.961				0.970			0.969					
Budget Neutral Plan Factor			1.007		0.991				1.000			1.000					
Total Members																	
Member Months			33,912		22,188				31,585			87,685					
Unadjusted Plan Factor			0.986		0.923				0.976			0.966					
Budget Neutral Plan Factor			1.020		0.955				1.010			1.000					

Exhibit 3E Mississippi Division of Medicaid Risk Adjustment Results MA Adult - Central Region - O1 to O2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Regression Intercept	0.119	N/A	N/A	34.332	100.00%	N/A	N/A	24.638	100.00%	N/A	N/A	32.340	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	N/A	46	0.13%	N/A	N/A	38	0.15%	N/A	N/A	59	0.18%
Age 19 to 24 Female	0.284	N/A	N/A	2,960	8.62%	N/A	N/A	2,571	10.44%	N/A	N/A	2,961	9.16%
Age 25 to 44 Male	0.101	N/A	N/A	1,497	4.36%	N/A	N/A	1,155	4.69%	N/A	N/A	1,469	4.54%
Age 25 to 44 Female	0.265	N/A	N/A	25,893	75.42%	N/A	N/A	18,879	76.63%	N/A	N/A	23,960	74.09%
Age 45 and Older Male	0.229	N/A	N/A	703	2.05%	N/A	N/A	388	1.57%	N/A	N/A	712	2.20%
Age 45 and Older Female	0.323	N/A	N/A	3,233	9.42%	N/A	N/A	1,607	6.52%	N/A	N/A	3,179	9.83%
Duration Categories													
No Base Period Medical Utilization	(0.119)	N/A	N/A	2,592	7.55%	N/A	N/A	2,176	8.83%	N/A	N/A	2,577	7.97%
Disease Categories													
Cancer, very high	3.548	31	18	0.05%	35	6	0.02%	34	8	0.02%	33	32	0.04%
Cancer, high	1.726	28	69	0.20%	27	51	0.21%	24	97	0.30%	27	217	0.24%
Cancer, medium	0.757	27	210	0.61%	24	143	0.58%	23	240	0.74%	23	593	0.65%
Cancer, low	0.624	32	78	0.23%	29	96	0.39%	32	91	0.28%	32	265	0.29%
Cardiovascular, very high	1.451	35	17	0.05%	33	20	0.08%	33	29	0.09%	34	66	0.07%
Cardiovascular, medium	0.397	12	1,475	4.30%	13	853	3.46%	12	1,532	4.74%	12	3,860	4.23%
Cardiovascular, low	0.366	17	1,020	2.97%	19	551	2.24%	18	776	2.40%	19	2,347	2.57%
Cardiovascular, extra low	0.113	5	9,374	27.30%	5	6,235	25.31%	5	8,597	26.58%	5	24,206	26.51%
CNS, high	1.356	15	296	0.86%	12	268	1.09%	15	272	0.84%	14	836	0.92%
CNS, low to medium	0.333	10	1,970	5.74%	11	1,260	5.11%	11	1,857	5.74%	11	5,087	5.57%
Diabetes, type 1	1.962	13	282	0.82%	15	149	0.60%	13	289	0.89%	13	720	0.79%
Diabetes, type 2	0.761	3	3,146	9.16%	3	1,787	7.25%	3	2,846	8.80%	3	7,779	8.52%
Eye, low	0.365	30	296	0.86%	31	124	0.50%	31	188	0.58%	30	608	0.67%
Eye, very low	0.242	25	694	2.02%	28	279	1.13%	28	488	1.51%	28	1,461	1.60%
Gastro, high	1.218	33	33	0.10%	30	49	0.20%	30	60	0.19%	31	142	0.16%
Gastro, medium	0.725	14	559	1.63%	14	405	1.64%	14	564	1.74%	15	1,528	1.67%
Gastro, low	0.196	7	4,311	12.56%	6	2,769	11.24%	6	4,128	12.76%	6	11,208	12.27%
Genital, extra low	0.120	20	2,292	6.68%	20	1,648	6.69%	19	2,282	7.06%	20	6,222	6.81%
Infectious, high to very high	1.283	8	535	1.56%	9	349	1.42%	7	576	1.78%	8	1,460	1.60%
Infectious, low to medium	0.285	24	645	1.88%	22	386	1.57%	22	689	2.13%	22	1,720	1.88%
Metabolic, high	0.918	19	361	1.05%	18	245	0.99%	17	338	1.05%	18	944	1.03%
Pregnancy, complete	0.141	9	4,760	13.86%	7	3,686	14.96%	10	4,448	13.75%	9	12,894	14.12%
Pregnancy, incomplete	1.061	4	1,502	4.37%	4	1,226	4.98%	4	1,277	3.95%	4	4,005	4.39%
Psychiatric, high	0.980	16	384	1.12%	16	275	1.12%	20	276	0.85%	17	935	1.02%
Psychiatric, medium	0.560	21	447	1.30%	21	251	1.02%	21	390	1.21%	21	1,088	1.19%
Psychiatric, low	0.325	2	8,545	24.89%	2	6,013	24.41%	2	8,511	26.32%	2	23,069	25.26%
Pulmonary, very high	0.412	34	72	0.21%	36	25	0.10%	36	25	0.08%	36	122	0.13%
Pulmonary, low to medium	0.250	6	3,426	9.98%	8	2,070	8.40%	8	2,899	8.96%	7	8,395	9.19%
Rare Diseases	3.615	36	6	0.02%	34	6	0.02%	35	5	0.02%	35	17	0.02%
Renal, extra high	1.050	37	10	0.03%	37	0	0.00%	37	6	0.02%	37	16	0.02%
Renal, medium	0.593	22	333	0.97%	26	155	0.63%	27	227	0.70%	26	715	0.78%
Renal, low	0.337	23	577	1.68%	25	290	1.18%	26	417	1.29%	25	1,284	1.41%
Skeletal, medium	0.368	1	9,052	26.37%	1	5,917	24.02%	1	8,456	26.15%	1	23,425	25.65%
Skeletal, very low to low	0.101	26	1,649	4.80%	23	1,084	4.40%	25	1,568	4.85%	24	4,301	4.71%
Skin, low to high	0.747	29	154	0.45%	32	54	0.22%	29	113	0.35%	29	321	0.35%
Skin, very low	0.172	18	2,164	6.30%	17	1,434	5.82%	16	2,054	6.35%	16	5,652	6.19%
Substance abuse, low	0.409	11	1,571	4.58%	10	1,067	4.33%	9	1,662	5.14%	10	4,300	4.71%
Population Statistics													
No Classified Disease Categories	N/A	N/A	N/A	6,672	19.43%	N/A	N/A	5,290	21.47%	N/A	N/A	6,535	20.21%
N/A	N/A	N/A	N/A	18,497	20.26%	N/A	N/A	18,497	20.26%	N/A	N/A	18,497	20.26%
Unscored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Demographic Categories													
Age 19 to 24 Male	0.449	N/A	N/A	37	1.10%	N/A	N/A	38	N/A	38	N/A	113	1.23%
Age 19 to 24 Female	0.880	N/A	N/A	165	4.91%	N/A	N/A	252	N/A	219	N/A	636	6.93%
Age 25 to 44 Male	0.697	N/A	N/A	526	15.65%	N/A	N/A	316	N/A	398	N/A	1,240	13.50%
Age 25 to 44 Female	0.990	N/A	N/A	2,156	64.13%	N/A	N/A	1,679	N/A	2,085	N/A	5,920	64.47%
Age 45 and Older Male	1.137	N/A	N/A	136	4.05%	N/A	N/A	85	N/A	195	N/A	416	4.53%
Age 45 and Older Female	1.375	N/A	N/A	342	10.17%	N/A	N/A	176	N/A	340	N/A	858	9.34%
Risk Adjustment Results													
Scored Members													
Magnolia													
Member Months				34,332			24,638			32,340			91,310
Unadjusted Plan Factor				0.988			0.935			0.983			0.972
Budget Neutral Plan Factor				1.017			0.962			1.011			1.000
Unscored Members													
Molina													
Member Months				3,362			2,546			3,275			9,183
Unadjusted Plan Factor				0.978			0.966			0.989			0.979
Budget Neutral Plan Factor				0.999			0.987			1.011			1.000
Total Members													
United													
Member Months				37,694			27,184			35,615			100,493
Unadjusted Plan Factor				0.987			0.938			0.983			0.972
Budget Neutral Plan Factor				1.015			0.964			1.011			1.000

Exhibit 3F Mississippi Division of Medicaid Risk Adjustment Results MA Adult - South Region - 01 to 02 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period																	
Scored Members																	
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months				
Regression Intercept	0.119	N/A	N/A	33,806	100.00%	N/A	N/A	27,117	100.00%	N/A	N/A	40,129	100.00%	N/A	N/A	101,052	100.00%
Demographic Categories																	
Age 19 to 24 Male	0.000	N/A	N/A	65	0.19%	N/A	N/A	99	0.37%	N/A	N/A	72	0.18%	N/A	N/A	236	0.23%
Age 19 to 24 Female	0.284	N/A	N/A	2,674	7.91%	N/A	N/A	2,444	9.01%	N/A	N/A	3,194	7.96%	N/A	N/A	8,312	8.23%
Age 25 to 44 Male	0.101	N/A	N/A	2,236	6.61%	N/A	N/A	1,758	6.48%	N/A	N/A	2,703	6.74%	N/A	N/A	6,697	6.63%
Age 25 to 44 Female	0.265	N/A	N/A	24,518	72.53%	N/A	N/A	19,875	73.29%	N/A	N/A	28,665	71.43%	N/A	N/A	73,058	72.30%
Age 45 and Older Male	0.229	N/A	N/A	871	2.58%	N/A	N/A	697	2.57%	N/A	N/A	1,271	3.17%	N/A	N/A	2,839	2.81%
Age 45 and Older Female	0.323	N/A	N/A	3,442	10.18%	N/A	N/A	2,244	8.28%	N/A	N/A	4,224	10.53%	N/A	N/A	9,910	9.81%
Duration Categories																	
No Base Period Medical Utilization	(0.119)	N/A	N/A	2,640	7.81%	N/A	N/A	2,628	9.69%	N/A	N/A	3,156	7.86%	N/A	N/A	8,424	8.34%
Disease Categories																	
Cancer, very high	3.548	32	20	0.06%	32	16	0.06%	33	29	0.07%	32	29	0.06%	32	65	0.06%	
Cancer, high	1.726	28	83	0.25%	26	55	0.20%	26	128	0.32%	26	266	0.26%	26	266	0.26%	
Cancer, medium	0.757	26	211	0.62%	22	210	0.77%	25	325	0.81%	24	746	0.74%	24	746	0.74%	
Cancer, low	0.624	30	196	0.58%	29	114	0.42%	31	172	0.43%	30	482	0.48%	30	482	0.48%	
Cardiovascular, very high	1.451	36	19	0.06%	35	18	0.07%	34	50	0.12%	34	87	0.09%	34	87	0.09%	
Cardiovascular, medium	0.397	13	1,610	4.76%	12	1,112	4.10%	12	1,789	4.46%	12	4,511	4.46%	12	4,511	4.46%	
Cardiovascular, low	0.366	16	1,201	3.55%	13	1,060	3.91%	15	1,715	4.27%	15	3,976	3.93%	15	3,976	3.93%	
Cardiovascular, extra low	0.113	6	8,483	25.09%	5	5,845	21.55%	5	10,397	25.91%	5	24,725	24.47%	5	24,725	24.47%	
CNS, high	1.356	29	100	0.30%	25	91	0.34%	24	189	0.47%	25	380	0.38%	25	380	0.38%	
CNS, low to medium	0.333	7	2,601	7.69%	9	1,781	6.57%	7	3,344	8.33%	7	7,726	7.69%	7	7,726	7.69%	
Diabetes, type 1	1.962	10	391	1.16%	15	354	1.30%	13	510	1.50%	11	915	0.91%	11	915	0.91%	
Diabetes, type 2	0.761	3	2,967	8.78%	3	1,942	7.16%	3	3,630	9.05%	3	8,539	8.45%	3	8,539	8.45%	
Eye, low	0.365	31	198	0.59%	30	191	0.70%	30	307	0.77%	31	696	0.69%	31	696	0.69%	
Eye, very low	0.242	27	614	1.82%	27	338	1.25%	29	514	1.28%	29	1,466	1.45%	29	1,466	1.45%	
Gastro, high	1.218	24	143	0.42%	31	57	0.21%	28	117	0.29%	28	317	0.31%	28	317	0.31%	
Gastro, medium	0.725	11	952	2.82%	10	735	2.71%	10	1,116	2.78%	10	2,803	2.77%	10	2,803	2.77%	
Gastro, low	0.196	5	4,990	14.76%	7	3,237	11.94%	6	5,793	14.44%	6	14,020	13.87%	6	14,020	13.87%	
Genital, extra low	0.120	19	2,405	7.11%	18	1,752	6.46%	19	2,674	6.66%	20	6,831	6.76%	20	6,831	6.76%	
Infectious, high to very high	1.283	12	525	1.55%	14	269	0.99%	11	572	1.43%	13	1,366	1.35%	13	1,366	1.35%	
Infectious, low to medium	0.285	22	867	2.56%	21	639	2.36%	22	1,038	2.59%	21	2,544	2.52%	21	2,544	2.52%	
Metabolic, high	0.918	15	571	1.69%	17	351	1.29%	17	503	1.25%	16	1,425	1.41%	16	1,425	1.41%	
Pregnancy, complete	0.141	14	4,069	12.04%	11	3,741	13.80%	14	4,521	11.27%	14	12,331	12.20%	14	12,331	12.20%	
Pregnancy, incomplete	1.061	4	1,291	3.82%	4	1,128	4.16%	4	1,311	3.27%	4	3,730	3.69%	4	3,730	3.69%	
Psychiatric, high	0.980	20	291	0.86%	20	200	0.74%	18	445	1.11%	18	936	0.93%	18	936	0.93%	
Psychiatric, medium	0.560	18	536	1.59%	19	375	1.38%	20	571	1.42%	19	1,482	1.47%	19	1,482	1.47%	
Psychiatric, low	0.325	1	10,422	30.83%	1	8,511	31.39%	1	13,854	34.52%	1	32,787	32.45%	1	32,787	32.45%	
Pulmonary, very high	0.412	35	87	0.26%	36	39	0.14%	35	119	0.30%	36	245	0.24%	36	245	0.24%	
Pulmonary, low to medium	0.250	8	3,259	9.64%	8	2,477	9.13%	9	4,008	9.99%	9	9,744	9.64%	9	9,744	9.64%	
Rare Diseases	3.615	34	12	0.04%	33	15	0.06%	36	6	0.01%	35	33	0.03%	35	33	0.03%	
Renal, extra high	1.050	37	0	0.00%	37	6	0.02%	37	11	0.03%	37	17	0.02%	37	17	0.02%	
Renal, medium	0.593	25	289	0.85%	28	135	0.50%	27	325	0.81%	27	749	0.74%	27	749	0.74%	
Renal, low	0.337	21	778	2.30%	23	441	1.63%	21	912	2.27%	22	2,131	2.11%	22	2,131	2.11%	
Skeletal, medium	0.368	2	8,805	26.05%	2	5,987	22.08%	2	10,442	26.02%	2	25,234	24.97%	2	25,234	24.97%	
Skeletal, very low to low	0.101	23	2,211	6.54%	24	1,372	5.06%	23	2,782	6.93%	23	6,365	6.30%	23	6,365	6.30%	
Skin, low to high	0.747	33	91	0.27%	34	67	0.25%	32	141	0.35%	33	299	0.30%	33	299	0.30%	
Skin, very low	0.172	17	2,480	7.34%	16	1,895	6.99%	16	2,963	7.38%	17	7,338	7.26%	17	7,338	7.26%	
Substance abuse, low	0.409	9	1,990	5.89%	6	1,580	5.83%	8	2,535	6.32%	8	6,105	6.04%	8	6,105	6.04%	
Population Statistics																	
No Classified Disease Categories	N/A	N/A	N/A	6,211	18.37%	N/A	N/A	5,408	19.94%	N/A	N/A	7,064	17.60%	N/A	N/A	18,683	18.49%
Unscored Members																	
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months				
Demographic Categories																	
Age 19 to 24 Male	0.449	N/A	N/A	32	0.88%	N/A	N/A	51	1.56%	N/A	N/A	62	1.55%	N/A	N/A	145	1.33%
Age 19 to 24 Female	0.880	N/A	N/A	398	10.92%	N/A	N/A	351	10.73%	N/A	N/A	324	8.12%	N/A	N/A	1,073	9.84%
Age 25 to 44 Male	0.697	N/A	N/A	536	14.71%	N/A	N/A	482	14.74%	N/A	N/A	654	16.39%	N/A	N/A	1,672	15.33%
Age 25 to 44 Female	0.990	N/A	N/A	2,186	59.97%	N/A	N/A	1,983	60.62%	N/A	N/A	2,369	59.36%	N/A	N/A	6,538	59.94%
Age 45 and Older Male	1.137	N/A	N/A	185	5.08%	N/A	N/A	143	4.37%	N/A	N/A	205	5.14%	N/A	N/A	533	4.89%
Age 45 and Older Female	1.375	N/A	N/A	308	8.45%	N/A	N/A	261	7.98%	N/A	N/A	377	9.45%	N/A	N/A	946	8.67%
Risk Adjustment Results																	
Scored Members																	
			Magnolia			Molina			United			Total					
Member Months			33,806			27,117			40,129			101,052					
Unadjusted Plan Factor			1.032			0.958			1.039			1.015					
Budget Neutral Plan Factor			1.017			0.944			1.024			1.000					
Unscored Members																	
Member Months			3,645			3,271			3,991			10,907					
Unadjusted Plan Factor			0.970			0.964			0.968			0.968					
Budget Neutral Plan Factor			1.003			0.996			1.001			1.000					
Total Members																	
Member Months			37,451			30,388			44,120			111,959					
Unadjusted Plan Factor			1.026			0.960			1.032			1.011					
Budget Neutral Plan Factor			1.015			0.950			1.021			1.000					

Exhibit 3G Mississippi Division of Medicaid Risk Adjustment Results MA Children - North Region - Q1 to Q2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period															
Scored Members															
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Total Member Months	% of Member Months			
Regression Intercept	0.554	N/A	166,468	100.00%	N/A	88,936	100.00%	N/A	156,046	100.00%	N/A	100.00%			
Demographic Categories															
Age 1 to 4	0.123	N/A	36,674	22.03%	N/A	28,959	32.56%	N/A	36,542	23.42%	N/A	102,175	24.83%		
Age 5 to 14 Male	0.048	N/A	45,579	27.38%	N/A	22,304	25.08%	N/A	41,674	26.71%	N/A	109,557	26.63%		
Age 5 to 14 Female	0.103	N/A	48,249	28.99%	N/A	23,156	26.04%	N/A	43,236	27.71%	N/A	113,402	27.58%		
Age 15 to 18 Male	0.000	N/A	18,170	10.92%	N/A	7,079	7.96%	N/A	16,914	10.84%	N/A	42,163	10.25%		
Age 15 to 18 Female	0.270	N/A	19,035	11.43%	N/A	7,438	8.36%	N/A	17,680	11.33%	N/A	44,153	10.73%		
Non-Utilizer Category															
No Base Period Medical Utilization	(0.370)	N/A	9,085	5.46%	N/A	6,419	7.22%	N/A	8,539	5.47%	N/A	24,043	5.84%		
Homelessness Category															
Homelessness	2.375	N/A	0	0.00%	N/A	12	0.01%	N/A	12	0.01%	N/A	24	0.01%		
Disease Categories															
Cancer, very high	5.506	42	0	0.00%	39	1	0.00%	41	1	0.00%	42	2	0.00%		
Cancer, medium to high	3.976	15	189	0.11%	15	92	0.10%	13	221	0.14%	15	502	0.12%		
Cardiovascular, very high	2.740	38	22	0.01%	38	6	0.01%	38	14	0.01%	38	42	0.01%		
Cardiovascular, medium	0.462	22	861	0.52%	20	529	0.59%	21	890	0.56%	20	2,270	0.55%		
Cardiovascular, low	0.450	11	2,029	1.22%	10	1,258	1.41%	12	2,122	1.36%	11	5,409	1.31%		
Cardiovascular, extra low	0.259	21	1,634	0.98%	24	623	0.70%	23	1,463	0.94%	22	3,720	0.90%		
Cerebrovascular, medium	1.635	39	13	0.01%	41	0	0.00%	40	6	0.00%	40	19	0.00%		
CNS, high	2.669	37	24	0.01%	32	24	0.03%	32	61	0.04%	35	109	0.03%		
CNS, medium	0.897	33	148	0.09%	33	64	0.07%	33	179	0.11%	33	391	0.10%		
CNS, low	0.706	5	2,552	1.53%	5	1,493	1.68%	5	2,594	1.66%	5	6,639	1.61%		
DD, low to medium	1.626	23	231	0.14%	26	97	0.11%	19	256	0.16%	23	584	0.14%		
Diabetes, type 1	4.912	6	325	0.20%	11	110	0.12%	6	373	0.24%	6	808	0.20%		
Diabetes, type 2	1.003	24	352	0.21%	28	95	0.11%	27	264	0.17%	27	711	0.17%		
Eye, very low to extra low	0.287	27	1,014	0.61%	25	556	0.63%	26	980	0.63%	26	2,550	0.62%		
Gastro, high	4.073	25	81	0.05%	18	73	0.08%	22	99	0.06%	21	253	0.06%		
Gastro, medium	3.246	13	260	0.16%	12	144	0.16%	13	260	0.16%	13	654	0.16%		
Gastro, low	0.419	4	7,647	4.59%	4	4,366	4.91%	4	7,521	4.82%	4	19,534	4.75%		
Genital, extra low	0.333	26	916	0.55%	22	518	0.58%	25	907	0.58%	25	2,341	0.57%		
Hematological, extra high	21.738	17	24	0.01%	31	3	0.00%	16	34	0.02%	17	61	0.01%		
Hematological, very high	2.711	36	34	0.02%	36	13	0.01%	37	16	0.01%	37	63	0.02%		
Hematological, low to medium	0.388	20	1,178	0.71%	19	652	0.73%	20	1,060	0.68%	19	2,890	0.70%		
Infectious, very high	1.226	41	1	0.00%	37	17	0.02%	39	18	0.01%	39	36	0.01%		
Infectious, high	0.583	31	247	0.15%	30	147	0.17%	34	275	0.18%	32	669	0.16%		
Metabolic, high	1.437	12	624	0.37%	13	269	0.30%	10	715	0.46%	12	1,608	0.39%		
Metabolic, medium	0.673	28	398	0.24%	21	311	0.35%	29	349	0.22%	28	1,058	0.26%		
Pregnancy, complete	0.379	34	330	0.20%	34	129	0.15%	35	348	0.22%	34	807	0.20%		
Pregnancy, incomplete	3.031	14	270	0.16%	14	121	0.14%	14	275	0.18%	14	666	0.16%		
Psychiatric, high	3.981	32	36	0.02%	40	1	0.00%	28	62	0.04%	31	99	0.02%		
Psychiatric, medium	2.298	9	550	0.33%	9	266	0.30%	11	421	0.27%	10	1,237	0.30%		
Psychiatric, low	1.069	1	23,426	14.07%	1	10,333	11.62%	1	22,561	14.46%	1	56,320	13.69%		
Pulmonary, very high	5.225	10	210	0.13%	7	118	0.13%	7	301	0.19%	8	629	0.15%		
Pulmonary, high	0.721	29	307	0.18%	23	226	0.25%	30	306	0.20%	29	839	0.20%		
Pulmonary, medium	0.588	19	802	0.48%	17	512	0.58%	18	832	0.53%	18	2,146	0.52%		
Pulmonary, low	0.502	3	14,490	8.70%	3	6,335	7.12%	3	13,080	8.38%	3	33,905	8.24%		
Rare Diseases	19.703	18	24	0.01%	27	6	0.01%	24	18	0.01%	24	48	0.01%		
Renal, extra high	3.719	40	5	0.00%	41	0	0.00%	42	0	0.00%	41	5	0.00%		
Renal, medium	1.263	30	134	0.08%	29	69	0.08%	31	133	0.09%	30	336	0.08%		
Renal, low	0.495	16	1,270	0.76%	16	671	0.75%	17	1,021	0.65%	16	2,962	0.72%		
Skeletal, medium	0.416	2	21,357	12.83%	2	10,506	11.81%	2	20,730	13.28%	2	52,593	12.78%		
Skeletal, very low to low	0.284	8	4,490	2.70%	8	2,162	2.43%	8	4,785	3.07%	9	11,437	2.78%		
Skin, very low to high	0.235	7	6,064	3.64%	6	3,157	3.55%	9	5,597	3.59%	7	14,818	3.60%		
Substance abuse, very low to low	0.463	35	251	0.15%	35	98	0.11%	36	272	0.17%	36	621	0.15%		
Population Statistics															
No Classified Disease Categories	N/A	N/A	90,408	54.31%	N/A	49,598	55.77%	N/A	83,408	53.45%	N/A	223,414	54.30%		
Unscored Members															
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Total Member Months	% of Member Months			
Demographic Categories															
Age 1 to 4	0.915	N/A	4,704	45.09%	N/A	3,910	46.82%	N/A	4,852	44.50%	N/A	13,466	45.36%		
Age 5 to 14 Male	0.978	N/A	2,105	20.18%	N/A	1,537	18.40%	N/A	2,283	20.94%	N/A	5,925	19.96%		
Age 5 to 14 Female	0.946	N/A	2,174	20.84%	N/A	1,727	20.68%	N/A	2,164	19.85%	N/A	6,065	20.43%		
Age 15 to 18 Male	0.982	N/A	635	6.09%	N/A	584	6.99%	N/A	664	6.09%	N/A	1,883	6.34%		
Age 15 to 18 Female	1.381	N/A	814	7.80%	N/A	593	7.10%	N/A	940	8.62%	N/A	2,347	7.91%		
Risk Adjustment Results															
Magnolia				Molina				United				Total			
Member Months				88,936				156,046				411,450			
Unadjusted Plan Factor				0.966				1.035				1.013			
Budget Neutral Plan Factor				0.954				1.022				1.000			
Unscored Members															
Member Months				8,351				10,903				29,686			
Unadjusted Plan Factor				0.971				0.979				0.975			
Budget Neutral Plan Factor				0.996				1.004				1.000			
Total Members															
Member Months				97,287				166,949				441,136			
Unadjusted Plan Factor				0.967				1.032				1.010			
Budget Neutral Plan Factor				0.957				1.021				1.000			

Exhibit 3H Mississippi Division of Medicaid Risk Adjustment Results MA Children - Central Region- 01 to 02 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Regression Intercept	0.554	N/A	196,629	100.00%	N/A	110,464	100.00%	N/A	180,673	100.00%	N/A	487,766	100.00%
Demographic Categories													
Age 1 to 4	0.123	N/A	41,761	21.24%	N/A	35,949	32.54%	N/A	43,885	24.29%	N/A	121,595	24.93%
Age 5 to 14 Male	0.048	N/A	53,843	27.38%	N/A	27,305	24.72%	N/A	47,889	26.51%	N/A	129,037	26.45%
Age 5 to 14 Female	0.103	N/A	55,421	28.19%	N/A	28,505	25.80%	N/A	49,188	27.22%	N/A	133,114	27.29%
Age 15 to 18 Male	0.000	N/A	22,027	11.20%	N/A	9,317	8.43%	N/A	19,307	10.69%	N/A	50,651	10.38%
Age 15 to 18 Female	0.270	N/A	23,577	11.99%	N/A	9,388	8.50%	N/A	20,404	11.29%	N/A	53,369	10.94%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.370)	N/A	11,132	5.66%	N/A	8,214	7.44%	N/A	10,121	5.60%	N/A	29,467	6.04%
Homelessness Category													
Homelessness	2.375	N/A	6	0.00%	N/A	0	0.00%	N/A	24	0.01%	N/A	30	0.01%
Disease Categories													
Cancer, very high	5.506	42	0	0.00%	41	0	0.00%	41	0	0.00%	42	0	0.00%
Cancer, medium to high	3.976	14	207	0.11%	14	114	0.10%	11	290	0.16%	12	611	0.13%
Cardiovascular, very high	2.740	38	22	0.01%	39	5	0.00%	36	24	0.01%	38	51	0.01%
Cardiovascular, medium	0.462	25	870	0.44%	21	445	0.40%	23	897	0.50%	22	2,212	0.45%
Cardiovascular, low	0.450	10	2,572	1.31%	10	1,588	1.44%	9	2,734	1.51%	10	6,894	1.41%
Cardiovascular, extra low	0.259	20	1,844	0.94%	26	706	0.64%	19	1,876	1.04%	21	4,426	0.91%
Cerebrovascular, medium	1.635	39	24	0.01%	37	13	0.01%	40	6	0.00%	39	43	0.01%
CNS, high	2.669	30	102	0.05%	31	32	0.03%	29	85	0.05%	30	219	0.04%
CNS, medium	0.897	32	247	0.13%	30	96	0.09%	33	169	0.09%	31	512	0.10%
CNS, low	0.706	5	3,341	1.70%	5	1,868	1.69%	5	3,177	1.76%	5	8,386	1.72%
DD, low to medium	1.626	19	331	0.17%	22	123	0.11%	21	266	0.15%	20	720	0.15%
Diabetes, type 1	4.912	6	422	0.21%	6	189	0.17%	6	448	0.25%	6	1,059	0.22%
Diabetes, type 2	1.003	23	444	0.23%	27	153	0.14%	22	417	0.23%	23	1,014	0.21%
Eye, very low to extra low	0.287	22	1,577	0.80%	23	672	0.61%	25	1,228	0.68%	24	3,477	0.71%
Gastro, high	4.073	21	116	0.06%	20	51	0.05%	18	121	0.07%	19	288	0.06%
Gastro, medium	3.246	12	298	0.15%	13	146	0.13%	13	328	0.18%	11	772	0.16%
Gastro, low	0.419	4	9,321	4.74%	4	5,903	5.34%	4	9,418	5.21%	4	24,642	5.05%
Genital, extra low	0.333	28	1,019	0.52%	19	728	0.66%	26	1,040	0.58%	25	2,787	0.57%
Hematological, extra high	21.738	27	18	0.01%	35	2	0.00%	24	18	0.01%	27	38	0.01%
Hematological, very high	2.711	35	47	0.02%	36	14	0.01%	37	13	0.01%	37	74	0.02%
Hematological, low to medium	0.388	18	1,415	0.72%	17	894	0.80%	20	1,192	0.66%	18	3,491	0.72%
Infectious, very high	1.226	41	12	0.01%	40	11	0.01%	39	12	0.01%	41	35	0.01%
Infectious, high	0.583	36	181	0.09%	34	102	0.09%	34	191	0.11%	35	474	0.10%
Metabolic, high	1.437	11	708	0.36%	11	367	0.33%	14	603	0.33%	13	1,678	0.34%
Metabolic, medium	0.673	26	592	0.30%	25	276	0.25%	28	473	0.26%	26	1,341	0.27%
Pregnancy, complete	0.379	33	536	0.27%	29	240	0.22%	32	403	0.22%	32	1,179	0.24%
Pregnancy, incomplete	3.031	13	272	0.14%	18	95	0.09%	15	255	0.14%	15	622	0.13%
Psychiatric, high	3.981	29	78	0.04%	28	34	0.03%	27	86	0.05%	28	198	0.04%
Psychiatric, medium	2.298	7	731	0.37%	9	359	0.32%	10	514	0.28%	9	1,604	0.33%
Psychiatric, low	1.069	1	28,533	14.51%	1	11,691	10.58%	1	25,380	14.05%	1	65,604	13.45%
Pulmonary, very high	5.225	15	154	0.08%	12	94	0.09%	12	209	0.12%	14	457	0.09%
Pulmonary, high	0.721	31	315	0.16%	24	262	0.24%	31	236	0.13%	29	813	0.17%
Pulmonary, medium	0.588	17	1,153	0.59%	15	756	0.68%	17	1,054	0.58%	17	2,963	0.61%
Pulmonary, low	0.502	2	17,011	8.65%	3	8,373	7.58%	3	15,975	8.84%	3	41,359	8.48%
Rare Diseases	19.703	24	22	0.01%	41	0	0.00%	41	0	0.00%	34	22	0.00%
Renal, extra high	3.719	40	6	0.00%	38	5	0.00%	38	6	0.00%	40	17	0.00%
Renal, medium	1.263	37	70	0.04%	32	60	0.05%	35	56	0.03%	36	186	0.04%
Renal, low	0.495	16	1,562	0.79%	16	765	0.69%	16	1,375	0.76%	16	3,702	0.76%
Skeletal, medium	0.416	3	19,399	9.87%	2	11,267	10.20%	2	20,346	11.26%	2	51,012	10.46%
Skeletal, very low to low	0.284	8	5,848	2.97%	8	2,926	2.65%	8	5,179	2.87%	8	13,953	2.86%
Skin, very low to high	0.235	9	6,800	3.46%	7	3,765	3.41%	7	6,360	3.52%	7	16,925	3.47%
Substance abuse, very low to low	0.463	34	403	0.20%	33	149	0.13%	30	408	0.23%	33	960	0.20%
Population Statistics													
No Classified Disease Categories	N/A	N/A	109,047	55.46%	N/A	62,562	56.64%	N/A	99,230	54.92%	N/A	270,839	55.53%
Unscored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.915	N/A	5,394	52.71%	N/A	4,665	52.13%	N/A	5,382	48.52%	N/A	15,441	51.00%
Age 5 to 14 Male	0.978	N/A	1,846	18.04%	N/A	1,590	17.77%	N/A	1,985	17.89%	N/A	5,421	17.91%
Age 5 to 14 Female	0.946	N/A	1,777	17.37%	N/A	1,626	18.17%	N/A	2,210	19.92%	N/A	5,613	18.54%
Age 15 to 18 Male	0.982	N/A	446	4.36%	N/A	539	6.02%	N/A	690	6.22%	N/A	1,675	5.53%
Age 15 to 18 Female	1.381	N/A	770	7.52%	N/A	529	5.91%	N/A	826	7.45%	N/A	2,125	7.02%
Risk Adjustment Results													
			Magnolia		Molina				United			Total	
Scored Members													
Member Months			196,629		110,464				180,673			487,766	
Unadjusted Plan Factor			1.011		0.947				1.018			0.999	
Budget Neutral Plan Factor			1.012		0.948				1.019			1.000	
Unscored Members													
Member Months			10,233		8,949				11,093			30,275	
Unadjusted Plan Factor			0.970		0.964				0.972			0.969	
Budget Neutral Plan Factor			1.001		0.995				1.003			1.000	
Total Members													
Member Months			206,862		119,413				191,766			518,041	
Unadjusted Plan Factor			1.009		0.949				1.016			0.998	
Budget Neutral Plan Factor			1.011		0.951				1.018			1.000	

Exhibit 3I Mississippi Division of Medicaid Risk Adjustment Results MA Children - South Region - Q1 to Q2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Regression Intercept	0.554	N/A	169,067	100.00%	N/A	105,596	100.00%	N/A	182,674	100.00%	N/A	457,337	100.00%
Demographic Categories													
Age 1 to 4	0.123	N/A	34,013	20.12%	N/A	33,890	32.09%	N/A	38,756	21.22%	N/A	106,659	23.32%
Age 5 to 14 Male	0.048	N/A	48,004	28.39%	N/A	26,805	25.38%	N/A	50,532	27.66%	N/A	125,341	27.41%
Age 5 to 14 Female	0.103	N/A	48,634	28.77%	N/A	26,527	25.12%	N/A	51,489	28.19%	N/A	126,650	27.69%
Age 15 to 18 Male	0.000	N/A	18,728	11.08%	N/A	9,271	8.78%	N/A	20,583	11.27%	N/A	48,582	10.62%
Age 15 to 18 Female	0.270	N/A	19,688	11.65%	N/A	9,103	8.62%	N/A	21,314	11.67%	N/A	50,105	10.96%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.370)	N/A	9,747	5.77%	N/A	8,143	7.71%	N/A	10,023	5.49%	N/A	27,913	6.10%
Homelessness Category													
Homelessness	2.375	N/A	16	0.01%	N/A	0	0.00%	N/A	5	0.00%	N/A	21	0.00%
Disease Categories													
Cancer, very high	5.506	41	0	0.00%	40	0	0.00%	39	11	0.01%	39	11	0.00%
Cancer, medium to high	3.976	11	211	0.12%	12	149	0.14%	12	262	0.14%	12	622	0.14%
Cardiovascular, very high	2.740	39	6	0.00%	38	14	0.01%	38	29	0.02%	38	49	0.01%
Cardiovascular, medium	0.462	21	892	0.53%	27	357	0.34%	23	897	0.49%	23	2,146	0.47%
Cardiovascular, low	0.450	13	1,804	1.07%	14	1,171	1.11%	13	2,108	1.15%	13	5,083	1.11%
Cardiovascular, extra low	0.259	23	1,434	0.85%	26	637	0.60%	19	1,917	1.05%	22	3,988	0.87%
Cerebrovascular, medium	1.635	40	7	0.00%	40	0	0.00%	40	21	0.01%	41	28	0.01%
CNS, high	2.669	32	59	0.03%	34	32	0.03%	35	46	0.03%	33	137	0.03%
CNS, medium	0.897	27	283	0.17%	29	162	0.15%	29	270	0.15%	29	715	0.16%
CNS, low	0.705	9	2,230	1.32%	5	1,576	1.49%	8	2,518	1.38%	8	6,324	1.38%
DD, low to medium	1.626	24	190	0.11%	25	124	0.12%	22	267	0.15%	24	581	0.13%
Diabetes, type 1	4.912	6	362	0.21%	8	196	0.19%	5	525	0.29%	5	1,083	0.24%
Diabetes, type 2	1.003	28	244	0.14%	31	106	0.10%	30	226	0.12%	30	576	0.13%
Eye, very low to extra low	0.287	26	1,032	0.61%	23	786	0.74%	25	1,278	0.70%	26	3,096	0.68%
Gastro, high	4.073	20	105	0.06%	18	91	0.09%	20	115	0.06%	20	311	0.07%
Gastro, medium	3.246	12	258	0.15%	11	215	0.20%	10	360	0.20%	11	833	0.18%
Gastro, low	0.419	4	10,201	6.03%	4	6,892	6.53%	4	11,593	6.35%	4	28,686	6.27%
Genital, extra low	0.333	25	908	0.54%	22	686	0.65%	24	1,232	0.67%	25	2,826	0.62%
Hematological, extra high	21.738	15	26	0.02%	13	25	0.02%	28	12	0.01%	18	63	0.01%
Hematological, very high	2.711	34	49	0.03%	32	36	0.03%	37	32	0.02%	35	117	0.03%
Hematological, low to medium	0.388	22	1,024	0.61%	20	816	0.77%	21	1,195	0.65%	21	3,035	0.66%
Infectious, very high	1.225	38	24	0.01%	39	12	0.01%	42	6	0.00%	40	42	0.01%
Infectious, high	0.583	35	207	0.12%	33	153	0.14%	33	260	0.14%	34	620	0.14%
Metabolic, high	1.437	10	632	0.37%	10	497	0.47%	11	779	0.43%	10	1,908	0.42%
Metabolic, medium	0.673	18	739	0.44%	16	591	0.56%	17	855	0.47%	17	2,185	0.48%
Pregnancy, complete	0.379	36	267	0.16%	35	171	0.16%	34	343	0.19%	36	781	0.17%
Pregnancy, incomplete	3.031	16	177	0.10%	24	70	0.07%	18	176	0.10%	19	423	0.09%
Psychiatric, high	3.981	30	54	0.03%	28	37	0.04%	27	83	0.05%	28	174	0.04%
Psychiatric, medium	2.298	5	820	0.49%	7	454	0.43%	6	929	0.51%	6	2,203	0.48%
Psychiatric, low	1.069	1	27,789	16.44%	1	13,885	13.15%	1	31,823	17.42%	1	73,497	16.07%
Pulmonary, very high	5.225	19	91	0.05%	19	63	0.06%	15	148	0.08%	15	302	0.07%
Pulmonary, high	0.721	31	260	0.15%	30	192	0.18%	32	225	0.12%	31	677	0.15%
Pulmonary, medium	0.588	17	895	0.53%	17	654	0.62%	16	1,039	0.57%	16	2,588	0.57%
Pulmonary, low	0.502	2	14,383	8.51%	2	7,720	7.31%	2	15,551	8.51%	2	37,654	8.23%
Rare Diseases	19.703	29	12	0.01%	21	13	0.01%	26	17	0.01%	27	42	0.01%
Renal, extra high	3.719	41	0	0.00%	40	0	0.00%	41	5	0.00%	42	5	0.00%
Renal, medium	1.263	37	52	0.03%	37	33	0.03%	36	77	0.04%	37	162	0.04%
Renal, low	0.495	14	1,439	0.85%	15	851	0.81%	14	1,749	0.96%	14	4,039	0.88%
Skeletal, medium	0.416	3	13,288	7.86%	3	7,599	7.20%	3	15,380	8.42%	3	36,267	7.93%
Skeletal, very low to low	0.284	8	5,782	3.42%	9	2,920	2.77%	9	6,196	3.39%	9	14,898	3.26%
Skin, very low to high	0.235	7	7,113	4.21%	6	4,440	4.20%	7	8,024	4.39%	7	19,577	4.28%
Substance abuse, very low to low	0.463	33	322	0.19%	36	111	0.11%	31	404	0.22%	32	837	0.18%
Population Statistics													
No Classified Disease Categories	N/A	N/A	91,784	54.29%	N/A	58,922	55.80%	N/A	97,746	53.51%	N/A	248,452	54.33%
Unscored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.915	N/A	5,039	46.80%	N/A	4,484	47.46%	N/A	5,188	44.74%	N/A	14,711	46.25%
Age 5 to 14 Male	0.978	N/A	2,260	20.99%	N/A	1,705	18.05%	N/A	2,281	19.67%	N/A	6,246	19.64%
Age 5 to 14 Female	0.946	N/A	2,212	20.54%	N/A	1,930	20.43%	N/A	2,269	19.57%	N/A	6,411	20.15%
Age 15 to 18 Male	0.982	N/A	491	4.56%	N/A	685	7.25%	N/A	749	6.46%	N/A	1,925	6.05%
Age 15 to 18 Female	1.381	N/A	765	7.11%	N/A	644	6.82%	N/A	1,108	9.56%	N/A	2,517	7.91%
Risk Adjustment Results													
Scored Members				Unscored Members				Total					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					
Unscored Members				Unscored Members				Unscored Members					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					
Total Members				Total Members				Total Members					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					

Exhibit 3J

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - North Region - O1 to O2 2024 Risk Scores

May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.554	N/A	20,969	100.00%	N/A	9,946	100.00%	N/A	21,301	100.00%	N/A	52,216	100.00%
Demographic Categories													
Age 1 to 4	0.123	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.048	N/A	6,827	32.56%	N/A	3,331	33.49%	N/A	7,417	34.82%	N/A	17,575	33.66%
Age 5 to 14 Female	0.103	N/A	34,165	34.17%	N/A	3,471	34.90%	N/A	6,923	32.50%	N/A	17,559	33.63%
Age 15 to 18 Male	0.000	N/A	3,640	17.36%	N/A	1,496	15.04%	N/A	3,499	16.43%	N/A	8,635	16.54%
Age 15 to 18 Female	0.270	N/A	3,337	15.91%	N/A	1,648	16.57%	N/A	3,462	16.25%	N/A	8,447	16.18%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.370)	N/A	883	4.21%	N/A	729	7.33%	N/A	1,019	4.78%	N/A	2,631	5.04%
Homelessness Category													
Homelessness	2.375	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, very high	5.506	36	0	0.00%	33	0	0.00%	26	5	0.02%	35	5	0.01%
Cancer, medium to high	3.976	27	8	0.04%	14	12	0.12%	14	23	0.11%	18	43	0.08%
Cardiovascular, very high	2.740	33	5	0.02%	33	0	0.00%	38	0	0.00%	36	5	0.01%
Cardiovascular, medium	0.462	24	75	0.36%	30	23	0.23%	23	87	0.41%	24	185	0.35%
Cardiovascular, low	0.450	12	253	1.21%	13	109	1.10%	13	249	1.17%	13	611	1.17%
Cardiovascular, extra low	0.259	17	273	1.30%	16	153	1.54%	17	282	1.32%	16	708	1.36%
Cerebrovascular, medium	1.635	35	6	0.03%	33	0	0.00%	38	0	0.00%	37	6	0.01%
CNS, high	2.669	25	12	0.06%	24	6	0.06%	30	8	0.04%	28	26	0.05%
CNS, medium	0.897	23	42	0.20%	20	32	0.32%	32	19	0.09%	25	93	0.18%
CNS, low	0.705	9	232	1.11%	7	110	1.11%	8	277	1.30%	8	619	1.19%
DD, low to medium	1.626	18	39	0.19%	12	31	0.31%	19	38	0.18%	17	108	0.21%
Diabetes, type 1	4.912	8	35	0.17%	8	15	0.15%	5	54	0.25%	6	104	0.20%
Diabetes, type 2	1.003	22	38	0.18%	18	31	0.31%	22	42	0.20%	23	111	0.21%
Eye, very low to extra low	0.287	19	188	0.90%	26	51	0.51%	21	168	0.79%	21	407	0.78%
Gastro, high	4.078	28	7	0.03%	15	11	0.11%	15	21	0.10%	19	39	0.07%
Gastro, medium	3.246	7	55	0.26%	19	9	0.09%	18	22	0.10%	12	88	0.16%
Gastro, low	0.419	4	674	3.21%	4	351	3.53%	4	681	3.20%	4	1,706	3.27%
Genital, extra low	0.333	32	43	0.21%	23	58	0.58%	27	82	0.38%	29	183	0.35%
Hematological, extra high	21.738	11	6	0.03%	33	0	0.00%	7	10	0.05%	11	16	0.03%
Hematological, very high	2.711	36	0	0.00%	33	0	0.00%	36	2	0.01%	38	2	0.00%
Hematological, low to medium	0.389	26	82	0.39%	25	41	0.41%	25	88	0.41%	26	211	0.40%
Infectious, very high	1.226	36	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Infectious, high	0.583	31	30	0.14%	28	23	0.23%	31	33	0.15%	31	86	0.16%
Metabolic, high	1.437	10	100	0.48%	11	43	0.43%	11	100	0.47%	10	243	0.47%
Metabolic, medium	0.673	21	60	0.29%	32	3	0.03%	24	54	0.25%	27	117	0.22%
Pregnancy, complete	0.379	34	29	0.14%	27	37	0.37%	34	32	0.15%	33	98	0.19%
Pregnancy, incomplete	3.031	16	25	0.12%	10	21	0.21%	33	4	0.02%	20	50	0.10%
Psychiatric, high	3.981	36	0	0.00%	22	6	0.06%	35	3	0.01%	34	9	0.02%
Psychiatric, medium	2.298	15	38	0.18%	5	50	0.50%	9	77	0.36%	9	165	0.32%
Psychiatric, low	1.069	1	3,740	17.84%	1	1,659	16.68%	1	4,217	19.80%	1	9,616	18.42%
Pulmonary, very high	5.225	14	17	0.08%	21	5	0.05%	16	14	0.07%	15	36	0.07%
Pulmonary, high	0.721	36	0	0.00%	33	0	0.00%	37	3	0.01%	39	3	0.01%
Pulmonary, medium	0.588	20	86	0.41%	29	22	0.22%	20	83	0.39%	22	191	0.37%
Pulmonary, low	0.502	3	1,981	9.45%	3	788	7.92%	3	1,700	7.98%	3	4,469	8.56%
Rare Diseases	19.703	36	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Renal, extra high	3.719	36	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Renal, medium	1.263	29	16	0.08%	31	8	0.08%	29	20	0.09%	30	44	0.08%
Renal, low	0.495	13	206	0.98%	17	69	0.69%	12	231	1.08%	14	506	0.97%
Skeletal, medium	0.416	2	2,926	13.95%	2	1,152	11.58%	2	2,833	13.30%	2	6,911	13.24%
Skeletal, very low to low	0.284	6	767	3.66%	6	281	2.83%	6	818	3.84%	5	1,866	3.57%
Skin, very low to high	0.235	5	956	4.56%	9	302	3.04%	10	751	3.53%	7	2,009	3.85%
Substance abuse, very low to low	0.463	30	39	0.19%	33	0	0.00%	28	55	0.26%	32	94	0.18%
Population Statistics													
No Classified Disease Categories	N/A	N/A	10,967	52.30%	N/A	5,332	53.61%	N/A	11,141	52.30%	N/A	27,440	52.55%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.915	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.978	N/A	348	36.02%	N/A	310	34.56%	N/A	342	32.85%	N/A	1,000	34.44%
Age 5 to 14 Female	0.946	N/A	408	42.24%	N/A	344	38.35%	N/A	426	40.92%	N/A	1,178	40.56%
Age 15 to 18 Male	0.982	N/A	80	8.28%	N/A	116	12.93%	N/A	109	10.47%	N/A	305	10.50%
Age 15 to 18 Female	1.381	N/A	130	13.46%	N/A	127	14.16%	N/A	164	15.75%	N/A	421	14.50%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia					Molina		
Scored Members									
Member Months		20,969					9,946		
Unadjusted Plan Factor		1.052					1.013		
Budget Neutral Plan Factor		1.000					0.963		
Unscored Members									
Member Months		966					897		
Unadjusted Plan Factor		1.019					1.023		
Budget Neutral Plan Factor		0.995					0.999		
Total Members									
Member Months		21,935					10,843		
Unadjusted Plan Factor		1.051					1.015		
Budget Neutral Plan Factor		1.000					0.966		

Exhibit 3K Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - Central Region - Q1 to Q2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Regression Intercept	0.554	N/A	24,529	100.00%	N/A	11,729	100.00%	N/A	23,872	100.00%	N/A	60,130	100.00%
Demographic Categories													
Age 1 to 4	0.123	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.048	N/A	8,178	33.34%	N/A	4,184	35.67%	N/A	7,971	33.39%	N/A	20,333	33.82%
Age 5 to 14 Female	0.103	N/A	8,049	32.81%	N/A	4,037	34.42%	N/A	7,980	33.09%	N/A	19,986	33.24%
Age 15 to 18 Male	0.000	N/A	4,086	16.66%	N/A	1,905	15.39%	N/A	3,989	16.71%	N/A	9,880	16.43%
Age 15 to 18 Female	0.270	N/A	4,216	17.19%	N/A	1,703	14.52%	N/A	4,012	16.81%	N/A	9,931	16.52%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.370)	N/A	1,171	4.77%	N/A	894	7.62%	N/A	1,105	4.63%	N/A	3,170	5.27%
Homelessness Category													
Homelessness	2.375	N/A	0	0.00%	N/A	0	0.00%	N/A	6	0.03%	N/A	6	0.01%
Disease Categories													
Cancer, very high	5.506	37	0	0.00%	36	0	0.00%	35	0	0.00%	40	0	0.00%
Cancer, medium to high	3.976	7	58	0.24%	5	33	0.28%	10	42	0.18%	8	133	0.22%
Cardiovascular, very high	2.740	37	0	0.00%	32	4	0.03%	33	1	0.00%	38	5	0.01%
Cardiovascular, medium	0.462	27	99	0.40%	24	41	0.35%	28	65	0.27%	27	205	0.34%
Cardiovascular, low	0.450	11	291	1.19%	15	124	1.06%	12	319	1.34%	12	734	1.22%
Cardiovascular, extra low	0.259	20	250	1.02%	19	116	0.99%	17	269	1.13%	19	635	1.06%
Cerebrovascular, medium	1.635	31	9	0.04%	36	0	0.00%	35	0	0.00%	37	9	0.01%
CNS, high	2.669	35	2	0.01%	35	1	0.01%	23	18	0.08%	30	21	0.03%
CNS, medium	0.897	21	72	0.29%	36	0	0.00%	22	58	0.24%	24	130	0.22%
CNS, low	0.705	6	348	1.42%	10	134	1.14%	8	353	1.48%	6	805	1.39%
DD, low to medium	1.626	18	46	0.19%	21	15	0.13%	14	61	0.26%	17	122	0.20%
Diabetes, type 1	4.912	12	26	0.11%	4	39	0.33%	6	55	0.23%	7	120	0.20%
Diabetes, type 2	1.003	22	61	0.25%	28	16	0.14%	20	58	0.24%	23	135	0.22%
Eye, very low to extra low	0.287	24	194	0.79%	25	64	0.55%	18	224	0.94%	22	482	0.80%
Gastro, high	4.078	23	14	0.06%	36	0	0.00%	21	13	0.05%	25	27	0.04%
Gastro, medium	3.246	16	31	0.13%	9	32	0.27%	13	39	0.16%	11	102	0.17%
Gastro, low	0.419	4	776	3.16%	8	260	2.22%	4	807	3.38%	4	1,843	3.07%
Genital, extra low	0.333	29	89	0.36%	29	48	0.41%	29	66	0.28%	29	203	0.34%
Hematological, extra high	21.738	37	0	0.00%	22	1	0.01%	11	7	0.03%	18	8	0.01%
Hematological, very high	2.711	37	0	0.00%	31	5	0.04%	35	0	0.00%	39	5	0.01%
Hematological, low to medium	0.388	19	177	0.72%	18	84	0.72%	24	98	0.41%	21	359	0.60%
Infectious, very high	1.226	37	0	0.00%	36	0	0.00%	35	0	0.00%	40	0	0.00%
Infectious, high	0.583	32	24	0.10%	30	25	0.21%	31	11	0.05%	34	60	0.10%
Metabolic, high	1.437	13	88	0.36%	11	60	0.51%	15	69	0.29%	13	217	0.36%
Metabolic, medium	0.673	25	79	0.32%	27	24	0.20%	27	47	0.20%	26	150	0.25%
Pregnancy, complete	0.379	30	49	0.20%	23	53	0.45%	30	26	0.11%	32	128	0.21%
Pregnancy, incomplete	3.031	15	35	0.14%	16	14	0.12%	32	2	0.01%	20	51	0.08%
Psychiatric, high	3.981	26	12	0.05%	36	0	0.00%	35	0	0.00%	33	12	0.02%
Psychiatric, medium	2.298	14	54	0.22%	13	32	0.27%	5	127	0.53%	9	213	0.35%
Psychiatric, low	1.069	1	4,188	17.07%	1	1,871	15.95%	1	4,108	17.21%	1	10,167	16.91%
Pulmonary, very high	5.225	10	27	0.11%	17	7	0.06%	19	12	0.05%	16	46	0.08%
Pulmonary, high	0.721	34	13	0.05%	34	6	0.05%	34	3	0.01%	36	22	0.04%
Pulmonary, medium	0.588	28	51	0.21%	26	31	0.26%	26	57	0.24%	28	139	0.23%
Pulmonary, low	0.502	2	2,484	10.13%	2	958	8.17%	2	2,111	8.84%	2	5,553	9.23%
Rare Diseases	19.703	9	8	0.03%	6	6	0.05%	35	0	0.00%	14	14	0.02%
Renal, extra high	3.719	37	0	0.00%	36	0	0.00%	35	0	0.00%	40	0	0.00%
Renal, medium	1.263	36	4	0.02%	20	22	0.19%	35	0	0.00%	35	26	0.04%
Renal, low	0.495	17	194	0.79%	14	121	1.03%	16	194	0.81%	15	509	0.85%
Skeletal, medium	0.416	3	2,346	9.56%	3	982	8.37%	3	2,445	10.24%	3	5,773	9.60%
Skeletal, very low to low	0.284	5	1,003	4.09%	7	408	3.48%	7	927	3.88%	5	2,338	3.89%
Skin, very low to high	0.235	8	755	3.08%	12	331	2.82%	9	748	3.13%	10	1,834	3.05%
Substance abuse, very low to low	0.463	33	29	0.12%	33	15	0.13%	25	73	0.31%	31	117	0.19%
Population Statistics													
No Classified Disease Categories	N/A	N/A	13,530	55.16%	N/A	6,659	56.77%	N/A	13,384	56.07%	N/A	33,573	55.83%
Unscored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.915	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.978	N/A	285	34.97%	N/A	238	35.79%	N/A	328	35.61%	N/A	851	35.44%
Age 5 to 14 Female	0.946	N/A	269	33.01%	N/A	275	41.35%	N/A	386	41.91%	N/A	930	38.73%
Age 15 to 18 Male	0.982	N/A	131	16.07%	N/A	68	10.23%	N/A	115	12.49%	N/A	314	13.08%
Age 15 to 18 Female	1.381	N/A	130	15.95%	N/A	84	12.63%	N/A	92	9.99%	N/A	306	12.74%
Risk Adjustment Results													
			Magnolia		Molina			United				Total	
Scored Members													
Member Months			24,529		11,729			23,872				60,130	
Unadjusted Plan Factor			1.032		1.001			1.034				1.027	
Budget Neutral Plan Factor			1.005		0.975			1.007				1.000	
Unscored Members													
Member Months			815		665			921				2,401	
Unadjusted Plan Factor			1.032		1.016			1.005				1.017	
Budget Neutral Plan Factor			1.015		0.999			0.988				1.000	
Total Members													
Member Months			25,344		12,394			24,793				62,531	
Unadjusted Plan Factor			1.032		1.002			1.033				1.027	
Budget Neutral Plan Factor			1.006		0.976			1.006				1.000	

Exhibit 3L Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - South Region - Q1 to Q2 2024 Risk Scores May 2022 through April 2023 Diagnosis Period - January 2024 to June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Regression Intercept	0.554	N/A	18,275	100.00%	N/A	10,690	100.00%	N/A	21,495	100.00%	N/A	50,460	100.00%
Demographic Categories													
Age 1 to 4	0.123	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.048	N/A	6,234	34.11%	N/A	3,750	35.08%	N/A	7,257	33.76%	N/A	17,241	34.17%
Age 5 to 14 Female	0.103	N/A	5,891	32.24%	N/A	3,714	34.74%	N/A	6,889	32.05%	N/A	16,494	32.69%
Age 15 to 18 Male	0.000	N/A	3,035	16.61%	N/A	1,660	15.53%	N/A	3,894	18.12%	N/A	8,589	17.02%
Age 15 to 18 Female	0.270	N/A	3,115	17.05%	N/A	1,566	14.65%	N/A	3,455	16.07%	N/A	8,136	16.12%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.370)	N/A	883	4.83%	N/A	864	8.08%	N/A	929	4.32%	N/A	2,676	5.30%
Homelessness Category													
Homelessness	2.375	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, very high	5.506	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
Cancer, medium to high	3.976	8	41	0.22%	13	11	0.10%	13	23	0.11%	10	75	0.15%
Cardiovascular, very high	2.740	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
Cardiovascular, medium	0.462	26	64	0.35%	20	50	0.47%	25	84	0.39%	28	198	0.39%
Cardiovascular, low	0.450	16	158	0.86%	15	69	0.65%	15	200	0.93%	14	427	0.85%
Cardiovascular, extra low	0.259	19	220	1.20%	21	88	0.82%	14	351	1.63%	17	659	1.31%
Cerebrovascular, medium	1.635	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
CNS, high	2.669	29	6	0.03%	35	1	0.01%	35	2	0.01%	34	9	0.02%
CNS, medium	0.897	20	56	0.31%	29	15	0.14%	24	46	0.21%	24	117	0.23%
CNS, low	0.705	10	217	1.19%	8	127	1.19%	9	255	1.19%	9	599	1.19%
DD, low to medium	1.626	17	41	0.22%	30	6	0.06%	20	35	0.16%	19	82	0.16%
Diabetes, type 1	4.912	5	51	0.28%	5	30	0.28%	4	88	0.41%	5	169	0.33%
Diabetes, type 2	1.003	22	40	0.22%	24	18	0.17%	26	36	0.17%	27	94	0.19%
Eye, very low to extra low	0.287	23	118	0.65%	22	78	0.73%	22	167	0.78%	25	363	0.72%
Gastro, high	4.078	12	26	0.14%	17	7	0.07%	23	11	0.05%	15	44	0.09%
Gastro, medium	3.246	14	28	0.15%	12	9	0.09%	12	30	0.14%	11	85	0.17%
Gastro, low	0.419	4	793	4.34%	4	460	4.30%	5	974	4.53%	4	2,227	4.41%
Genital, extra low	0.333	28	73	0.40%	26	48	0.45%	31	64	0.30%	30	185	0.37%
Hematological, extra high	21.738	35	0	0.00%	6	6	0.06%	36	0	0.00%	20	6	0.01%
Hematological, very high	2.711	33	2	0.01%	28	5	0.05%	28	9	0.04%	31	16	0.03%
Hematological, low to medium	0.388	24	85	0.47%	25	42	0.39%	30	59	0.27%	29	186	0.37%
Infectious, very high	1.226	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
Infectious, high	0.583	34	1	0.01%	31	16	0.15%	32	22	0.10%	35	39	0.08%
Metabolic, high	1.437	11	81	0.44%	12	32	0.30%	11	73	0.34%	12	186	0.37%
Metabolic, medium	0.673	21	73	0.40%	33	9	0.08%	18	90	0.42%	22	172	0.34%
Pregnancy, complete	0.379	31	26	0.14%	34	13	0.12%	34	15	0.07%	36	54	0.11%
Pregnancy, incomplete	3.031	25	10	0.05%	23	6	0.06%	19	19	0.09%	23	35	0.07%
Psychiatric, high	3.981	18	16	0.09%	14	9	0.08%	17	18	0.08%	16	43	0.09%
Psychiatric, medium	2.298	6	101	0.55%	16	13	0.12%	6	148	0.69%	6	262	0.52%
Psychiatric, low	1.069	1	3,840	21.01%	1	2,389	22.35%	1	5,186	24.13%	1	11,415	22.62%
Pulmonary, very high	5.225	15	14	0.08%	19	5	0.05%	27	5	0.02%	21	24	0.05%
Pulmonary, high	0.721	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
Pulmonary, medium	0.588	27	45	0.25%	18	46	0.43%	26	86	0.40%	26	177	0.35%
Pulmonary, low	0.502	2	1,370	7.50%	2	777	7.27%	2	1,886	8.77%	2	4,033	7.99%
Rare Diseases	19.703	35	0	0.00%	36	0	0.00%	10	8	0.04%	18	8	0.02%
Renal, extra high	3.719	35	0	0.00%	36	0	0.00%	36	0	0.00%	37	0	0.00%
Renal, medium	1.263	32	7	0.04%	32	6	0.06%	29	19	0.09%	32	32	0.06%
Renal, low	0.495	13	187	1.02%	11	106	0.99%	16	177	0.82%	13	470	0.93%
Skeletal, medium	0.416	3	1,291	7.06%	3	703	6.58%	3	1,657	7.71%	3	3,651	7.24%
Skeletal, very low to low	0.284	7	711	3.89%	7	357	3.34%	7	880	4.09%	7	1,948	3.86%
Skin, very low to high	0.235	9	667	3.65%	10	352	3.29%	8	961	4.47%	8	1,980	3.92%
Substance abuse, very low to low	0.463	30	23	0.13%	27	30	0.28%	33	17	0.08%	33	70	0.14%
Population Statistics													
No Classified Disease Categories	N/A	N/A	9,967	54.54%	N/A	5,574	52.14%	N/A	11,007	51.21%	N/A	26,548	52.61%
Unscored Members													
	Risk Weight	Disease Impact Rank	Magnolia Member Months	% of Member Months	Disease Impact Rank	Molina Member Months	% of Member Months	Disease Impact Rank	United Member Months	% of Member Months	Disease Impact Rank	Total Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.915	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.978	N/A	198	32.04%	N/A	274	34.64%	N/A	444	37.60%	N/A	916	35.37%
Age 5 to 14 Female	0.946	N/A	247	39.97%	N/A	295	37.29%	N/A	454	38.44%	N/A	996	38.46%
Age 15 to 18 Male	0.982	N/A	91	14.72%	N/A	95	12.01%	N/A	165	13.97%	N/A	351	13.55%
Age 15 to 18 Female	1.381	N/A	82	13.27%	N/A	127	16.06%	N/A	118	9.99%	N/A	327	12.63%
Risk Adjustment Results													
			Magnolia		Molina			United			Total		
Scored Members			Member Months	18,275	Member Months	10,690		Member Months	21,495		Member Months		50,460
Unadjusted Plan Factor				1.065		1.047			1.114		Unadjusted Plan Factor		1.082
Budget Neutral Plan Factor				0.984		0.968			1.029		Budget Neutral Plan Factor		1.000
Unscored Members													
Member Months			618		791			1,181			Member Months		2,590
Unadjusted Plan Factor				1.019		1.031			1.006		Unadjusted Plan Factor		1.017
Budget Neutral Plan Factor				1.002		1.014			0.990		Budget Neutral Plan Factor		1.000
Total Members													
Member Months			18,893		11,481			22,676			Member Months		53,050
Unadjusted Plan Factor				1.063		1.048			1.109		Unadjusted Plan Factor		1.079
Budget Neutral Plan Factor				0.985		0.971			1.027		Budget Neutral Plan Factor		1.000

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Risk Scores
January 2024 to June 2024 Enrollment Period

North Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.521		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.112	1,601	17.84%	405	26.23%	576	19.16%	2,582	19.09%
Money Code 3	Receiving IV-E Assistance	0.784	1,394	15.54%	298	19.30%	517	17.19%	2,209	16.33%
Money Code 4	Receiving IV-E Subadoption Ast	0.130	5,533	61.66%	773	50.06%	1,686	56.07%	7,992	59.09%
Other	All other Money Codes	0.000	445	4.96%	68	4.40%	228	7.58%	741	5.48%
Unadjusted Plan Factor			0.921		1.029		0.942		0.938	
Member Months			8,973		1,544		3,007		13,524	
Budget Neutral Plan Factor			0.982		1.097		1.004		1.000	

Central Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.521		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.112	1,989	21.24%	620	33.10%	659	22.98%	3,268	23.17%
Money Code 3	Receiving IV-E Assistance	0.784	1,906	20.35%	565	30.17%	766	26.71%	3,237	22.95%
Money Code 4	Receiving IV-E Subadoption Ast	0.130	5,109	54.56%	624	33.32%	1,257	43.83%	6,990	49.56%
Other	All other Money Codes	0.000	360	3.84%	64	3.42%	186	6.49%	610	4.32%
Unadjusted Plan Factor			0.988		1.169		1.043		1.023	
Member Months			9,364		1,873		2,868		14,105	
Budget Neutral Plan Factor			0.965		1.143		1.019		1.000	

South Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.521		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.112	1,818	14.38%	704	26.65%	727	17.97%	3,249	16.80%
Money Code 3	Receiving IV-E Assistance	0.784	2,266	17.92%	648	24.53%	831	20.54%	3,745	19.37%
Money Code 4	Receiving IV-E Subadoption Ast	0.130	7,927	62.68%	1,203	45.53%	2,142	52.94%	11,272	58.30%
Other	All other Money Codes	0.000	635	5.02%	87	3.29%	346	8.55%	1,068	5.52%
Unadjusted Plan Factor			0.903		1.069		0.951		0.936	
Member Months			12,646		2,642		4,046		19,334	
Budget Neutral Plan Factor			0.965		1.142		1.016		1.000	

Exhibit 4A
Mississippi Division of Medicaid
SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024
Custom Risk Weights - Non-Newborn SSI / Disabled Rate Cell

Model R-Squared: 33.2%						
Risk Weight Category	CY 2022 Member Months ¹	Scored Member Coefficient	Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	690,171	0.144	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	27,529	0.253	4.0%	N/A	1.082	1.082
Age 5 to 14 Male	81,473	0.101	11.8%	N/A	0.593	0.593
Age 5 to 14 Female	37,232	0.126	5.4%	N/A	0.696	0.696
Age 15 to 24 Male	62,798	-	9.1%	N/A	0.517	0.517
Age 15 to 24 Female	35,115	0.097	5.1%	N/A	0.735	0.735
Age 25 to 44 Male	80,008	0.110	11.6%	N/A	0.938	0.938
Age 25 to 44 Female	73,922	0.182	10.7%	N/A	1.133	1.133
Age 45 and Older Male	129,568	0.117	18.8%	N/A	1.163	1.163
Age 45 and Older Female	162,526	0.138	23.5%	N/A	1.344	1.344
Non-Utilizer Category						
No Base Period Medical Utilization	43,744	(0.114)	6.3%	0.000	0.137	N/A
Homelessness						
Homelessness	4,940	0.693	0.7%	0.000	2.667	N/A
Disease Categories						
Cancer, very high	3,851	2.226	0.6%	0.000	4.035	N/A
Cancer, high	8,531	0.762	1.2%	0.000	2.492	N/A
Cancer, medium	12,392	0.548	1.8%	0.000	2.133	N/A
Cancer, low	7,739	0.202	1.1%	0.000	1.664	N/A
Cardiovascular, very high	5,077	0.780	0.7%	0.000	3.889	N/A
Cardiovascular, medium	77,205	0.439	11.2%	0.000	2.051	N/A
Cardiovascular, low	53,798	0.156	7.8%	0.000	1.474	N/A
Cardiovascular, extra low	178,945	0.046	25.9%	0.003	1.128	N/A
CNS, high	6,562	1.165	1.0%	0.000	2.692	N/A
CNS, medium	19,949	0.402	2.9%	0.000	1.668	N/A
CNS, low	125,479	0.231	18.2%	0.000	1.594	N/A
DD, low to medium	32,576	0.104	4.7%	0.000	1.164	N/A
Diabetes, type 1	10,964	0.803	1.6%	0.000	2.438	N/A
Diabetes, type 2	101,613	0.389	14.7%	0.000	1.743	N/A
Eye, low	7,084	0.202	1.0%	0.000	1.721	N/A
Eye, very low	52,015	0.109	7.5%	0.000	1.565	N/A
Gastro, medium to high	40,177	0.420	5.8%	0.000	2.336	N/A
Gastro, low	127,638	0.097	18.5%	0.000	1.511	N/A
Genital, extra low	25,995	0.057	3.8%	0.038	1.747	N/A
Hematological, extra high	12	5.677	0.0%	0.000	6.185	N/A
Hematological, medium to very high	13,284	0.620	1.9%	0.000	2.561	N/A
Hematological, low	11,254	0.169	1.6%	0.000	2.382	N/A
Infectious, high to very high	20,578	1.205	3.0%	0.000	2.951	N/A
Infectious, medium	16,415	0.262	2.4%	0.000	2.231	N/A
Metabolic, high	17,452	0.526	2.5%	0.000	2.522	N/A
Metabolic, medium	45,370	0.097	6.6%	0.000	2.100	N/A
Pregnancy, incomplete	1,821	0.477	0.3%	0.000	1.415	N/A
Psychiatric, high	54,318	0.938	7.9%	0.000	1.879	N/A
Psychiatric, medium	14,017	0.408	2.0%	0.000	1.435	N/A
Psychiatric, low	273,367	0.198	39.6%	0.000	1.087	N/A
Pulmonary, very high	13,482	0.678	2.0%	0.000	2.879	N/A
Pulmonary, high	2,119	0.507	0.3%	0.000	2.375	N/A
Pulmonary, medium	34,523	0.348	5.0%	0.000	2.228	N/A
Pulmonary, low	106,713	0.141	15.5%	0.000	1.304	N/A
Rare Diseases	629	3.420	0.1%	0.000	5.318	N/A
Renal, extra high	4,037	2.509	0.6%	0.000	4.946	N/A
Renal, medium	26,992	0.278	3.9%	0.000	2.097	N/A
Renal, low	29,353	0.132	4.3%	0.000	1.742	N/A
Skeletal, medium	156,781	0.267	22.7%	0.000	1.587	N/A
Skeletal, very low to low	65,117	0.093	9.4%	0.000	1.363	N/A
Skin, very low to high	60,893	0.081	8.8%	0.000	1.705	N/A
Substance abuse, very low to low	66,766	0.138	9.7%	0.000	1.786	N/A
Disabled Children Add-On						
Disabled Children Add-On - CNS, high	1,889	0.420	0.3%	0.000	3.148	N/A
Disabled Children Add-On - Diabetes, type 1	1,763	0.418	0.3%	0.000	1.940	N/A
Disabled Children Add-On - Gastro, high	6,139	0.766	0.9%	0.000	2.884	N/A
Disabled Children Add-On - Metabolic, high	5,123	0.192	0.7%	0.007	2.390	N/A
Disabled Children Add-On - Metabolic, medium	2,739	0.218	0.4%	0.012	2.339	N/A
Disabled Children Add-On - Pulmonary, very high	2,744	0.579	0.4%	0.000	3.163	N/A

¹ CY 2022 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4B Mississippi Division of Medicaid SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024 CDPS+Rx Mapping to Custom Risk Weight Categories - Non-Newborn SSI / Disabled Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	2.226
CANH	Cancer, high	Cancer, high	0.762
CANM	Cancer, medium	Cancer, medium	0.548
CANL	Cancer, low	Cancer, low	0.202
CARVH	Cardiovascular, very high	Cardiovascular, very high	0.780
CARM	Cardiovascular, medium	Cardiovascular, medium	0.439
CARL	Cardiovascular, low	Cardiovascular, low	0.156
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.046
CERM	Cerebrovascular, medium	Not Used	Not Used
CNSH	CNS, high	CNS, high	1.165
CNSM	CNS, medium	CNS, medium	0.402
CNSL	CNS, low	CNS, low	0.231
DDM	DD, medium	DD, low to medium	0.104
DDL	DD, low	DD, low to medium	0.104
DIA1	Diabetes, type 1	Diabetes, type 1	0.803
DIA2	Diabetes, type 2	Diabetes, type 2	0.389
EYEL	Eye, low	Eye, low	0.202
EYEVL	Eye, very low	Eye, very low	0.109
GIH	Gastro, high	Gastro, medium to high	0.420
GIM	Gastro, medium	Gastro, medium to high	0.420
GIL	Gastro, low	Gastro, low	0.097
GENEL	Genital, extra low	Genital, extra low	0.057
HEMEH	Hematological, extra high	Hematological, extra high	5.677
HEMVH	Hematological, very high	Hematological, medium to very high	0.620
HEMM	Hematological, medium	Hematological, medium to very high	0.620
HEML	Hematological, low	Hematological, low	0.169
INFVH	Infectious, very high	Infectious, high to very high	1.205
INFH	Infectious, high	Infectious, high to very high	1.205
INFM	Infectious, medium	Infectious, medium	0.262
INFL	Infectious, low	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.526
METM	Metabolic, medium	Metabolic, medium	0.097
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.477
PSYH	Psychiatric, high	Psychiatric, high	0.938
PSYM	Psychiatric, medium	Psychiatric, medium	0.408
PSYL	Psychiatric, low	Psychiatric, low	0.198
PULVH	Pulmonary, very high	Pulmonary, very high	0.678
PULH	Pulmonary, high	Pulmonary, high	0.507
PULM	Pulmonary, medium	Pulmonary, medium	0.348
PULL	Pulmonary, low	Pulmonary, low	0.141
RENEH	Renal, extra high	Renal, extra high	2.509
RENM	Renal, medium	Renal, medium	0.278
RENL	Renal, low	Renal, low	0.132
SKCM	Skeletal, medium	Skeletal, medium	0.267
SKCL	Skeletal, low	Skeletal, very low to low	0.093
SKCVL	Skeletal, very low	Skeletal, very low to low	0.093
SKNH	Skin, high	Skin, very low to high	0.081
SKNL	Skin, low	Skin, very low to high	0.081
SKNVL	Skin, very low	Skin, very low to high	0.081
SUBL	Substance abuse, low	Substance abuse, very low to low	0.138
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.138
CCARVH	Disabled Children Add-On - Cardiovascular, very high	Not Used	Not Used
CCARM	Disabled Children Add-On - Cardiovascular, medium	Not Used	Not Used
CCNSH	Disabled Children Add-On - CNS, high	Disabled Children Add-On - CNS, high	0.420
CDDM	Disabled Children Add-On - DD, medium	Not Used	Not Used
CDIA1	Disabled Children Add-On - Diabetes, type 1	Disabled Children Add-On - Diabetes, type 1	0.418
CGIH	Disabled Children Add-On - Gastro, high	Disabled Children Add-On - Gastro, high	0.766
CHEMEH	Disabled Children Add-On - Hematological, extra high	Not Used	Not Used
CHEMVH	Disabled Children Add-On - Hematological, very high	Not Used	Not Used
CINFVH	Disabled Children Add-On - Infectious, very high	Not Used	Not Used
CINFH	Disabled Children Add-On - Infectious, high	Not Used	Not Used
CINFM	Disabled Children Add-On - Infectious, medium	Not Used	Not Used
CMETH	Disabled Children Add-On - Metabolic, high	Disabled Children Add-On - Metabolic, high	0.192
CMETM	Disabled Children Add-On - Metabolic, medium	Disabled Children Add-On - Metabolic, medium	0.218
CPSYH	Disabled Children Add-On - Psychiatric, high	Not Used	Not Used
CPSYM	Disabled Children Add-On - Psychiatric, medium	Not Used	Not Used
CPULVH	Disabled Children Add-On - Pulmonary, very high	Disabled Children Add-On - Pulmonary, very high	0.579
CRENEH	Disabled Children Add-On - Renal, extra high	Not Used	Not Used
CSUBL	Disabled Children Add-On - Substance abuse, low	Not Used	Not Used
CSUBVL	Disabled Children Add-On - Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.439
MRX2	Cardiac	Cardiovascular, extra low	0.046
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.198
MRX4	Diabetes	Diabetes, type 2	0.389
MRX5	Hemophilia/von Willebrands	Hematological, extra high	5.677
MRX6	Hepatitis	Infectious, medium	0.262
MRX7	HIV	Infectious, medium	0.262
MRX8	Infections, high	Infectious, high to very high	1.205
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.267
MRX10	Malignancies	Cancer, medium	0.548
MRX11	Multiple Sclerosis / Paralysis	CNS, high	1.165
MRX12	Parkinsons / Tremor	CNS, low	0.231
MRX13	Rare Diseases	Rare Diseases	3.420
MRX14	Seizure disorders	CNS, low	0.231
MRX15	Tuberculosis	Not Used	Not Used

Exhibit 4C
Mississippi Division of Medicaid
SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024
Custom Risk Weights - MA Adult Rate Cell

Model R-Squared: 39.9%						
Risk Weight Category	CY 2022 Member Months ¹	Scored Member Coefficient	Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	367,518	0.119	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 15 to 18 Male	914	-	0.2%	N/A	0.449	0.449
Age 15 to 18 Female	29,514	0.284	8.0%	N/A	0.880	0.880
Age 25 to 44 Male	24,017	0.101	6.5%	N/A	0.697	0.697
Age 25 to 44 Female	270,056	0.265	73.5%	N/A	0.990	0.990
Age 45 and Older Male	8,799	0.229	2.4%	N/A	1.137	1.137
Age 45 and Older Female	34,218	0.323	9.3%	N/A	1.375	1.375
Non-Utilizer Category						
No Base Period Medical Utilization	23,627	(0.119)	6.4%	0.001	0.237	N/A
Disease Categories						
Cancer, very high	198	3.548	0.1%	0.000	5.580	N/A
Cancer, high	1,050	1.726	0.3%	0.000	3.851	N/A
Cancer, medium	2,590	0.757	0.7%	0.000	2.447	N/A
Cancer, low	1,633	0.624	0.4%	0.000	2.078	N/A
Cardiovascular, very high	376	1.451	0.1%	0.000	3.972	N/A
Cardiovascular, medium	17,677	0.397	4.8%	0.000	2.035	N/A
Cardiovascular, low	14,017	0.366	3.8%	0.000	1.867	N/A
Cardiovascular, extra low	98,973	0.113	26.9%	0.000	1.291	N/A
CNS, high	1,487	1.356	0.4%	0.000	3.166	N/A
CNS, low to medium	27,048	0.333	7.4%	0.000	1.963	N/A
Diabetes, type 1	3,409	1.962	0.9%	0.000	3.464	N/A
Diabetes, type 2	24,990	0.761	6.8%	0.000	2.157	N/A
Eye, low	2,411	0.365	0.7%	0.000	1.827	N/A
Eye, very low	5,511	0.242	1.5%	0.001	1.860	N/A
Gastro, high	952	1.218	0.3%	0.000	3.415	N/A
Gastro, medium	10,606	0.725	2.9%	0.000	2.364	N/A
Gastro, low	51,414	0.196	14.0%	0.000	1.582	N/A
Genital, extra low	26,267	0.120	7.1%	0.000	1.490	N/A
Infectious, high to very high	5,356	1.283	1.5%	0.000	3.038	N/A
Infectious, low to medium	9,032	0.285	2.5%	0.000	1.984	N/A
Metabolic, high	3,568	0.918	1.0%	0.000	2.876	N/A
Pregnancy, complete	40,378	0.141	11.0%	0.000	1.023	N/A
Pregnancy, incomplete	12,140	1.061	3.3%	0.000	1.851	N/A
Psychiatric, high	3,345	0.980	0.9%	0.000	2.365	N/A
Psychiatric, medium	5,075	0.560	1.4%	0.000	1.752	N/A
Psychiatric, low	111,467	0.325	30.3%	0.000	1.476	N/A
Pulmonary, very high	893	0.412	0.2%	0.018	2.950	N/A
Pulmonary, low to medium	40,463	0.250	11.0%	0.000	1.726	N/A
Rare Diseases	51	3.615	0.0%	0.000	6.856	N/A
Renal, extra high	119	1.050	0.0%	0.027	4.758	N/A
Renal, medium	3,252	0.593	0.9%	0.000	2.685	N/A
Renal, low	7,606	0.337	2.1%	0.000	2.119	N/A
Skeletal, medium	92,593	0.368	25.2%	0.000	1.540	N/A
Skeletal, very low to low	24,843	0.101	6.8%	0.003	1.286	N/A
Skin, low to high	1,432	0.747	0.4%	0.000	3.424	N/A
Skin, very low	26,403	0.172	7.2%	0.000	1.538	N/A
Substance abuse, low	23,728	0.409	6.5%	0.000	1.789	N/A

¹ CY 2022 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4D Mississippi Division of Medicaid SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024 CDPS+Rx Mapping to Custom Risk Weight Categories - MA Adult Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	3.548
CANH	Cancer, high	Cancer, high	1.726
CANM	Cancer, medium	Cancer, medium	0.757
CANL	Cancer, low	Cancer, low	0.624
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.451
CARM	Cardiovascular, medium	Cardiovascular, medium	0.397
CARL	Cardiovascular, low	Cardiovascular, low	0.366
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.113
CERM	Cerebrovascular, medium	Not Used	Not Used
CNSH	CNS, high	CNS, high	1.356
CNSM	CNS, medium	CNS, low to medium	0.333
CNSL	CNS, low	CNS, low to medium	0.333
DDM	DD, medium	Not Used	Not Used
DDL	DD, low	Not Used	Not Used
DIA1	Diabetes, type 1	Diabetes, type 1	1.962
DIA2	Diabetes, type 2	Diabetes, type 2	0.761
EYEL	Eye, low	Eye, low	0.365
EYEVH	Eye, very low	Eye, very low	0.242
GIH	Gastro, high	Gastro, high	1.218
GIM	Gastro, medium	Gastro, medium	0.725
GIL	Gastro, low	Gastro, low	0.196
GENEL	Genital, extra low	Genital, extra low	0.120
HEMEH	Hematological, extra high	Not Used	Not Used
HEMVH	Hematological, very high	Not Used	Not Used
HEMM	Hematological, medium	Not Used	Not Used
HEML	Hematological, low	Not Used	Not Used
INFVH	Infectious, very high	Infectious, high to very high	1.283
INFH	Infectious, high	Infectious, high to very high	1.283
INFM	Infectious, medium	Infectious, low to medium	0.285
INFL	Infectious, low	Infectious, low to medium	0.285
METH	Metabolic, high	Metabolic, high	0.918
METM	Metabolic, medium	Not Used	Not Used
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.141
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	1.061
PSYH	Psychiatric, high	Psychiatric, high	0.980
PSYM	Psychiatric, medium	Psychiatric, medium	0.560
PSYL	Psychiatric, low	Psychiatric, low	0.325
PULVH	Pulmonary, very high	Pulmonary, very high	0.412
PULH	Pulmonary, high	Pulmonary, low to medium	0.250
PULM	Pulmonary, medium	Pulmonary, low to medium	0.250
PULL	Pulmonary, low	Pulmonary, low to medium	0.250
RENEH	Renal, extra high	Renal, extra high	1.050
RENM	Renal, medium	Renal, medium	0.593
RENH	Renal, low	Renal, low	0.337
SKCM	Skeletal, medium	Skeletal, medium	0.368
SKCL	Skeletal, low	Skeletal, very low to low	0.101
SKCVL	Skeletal, very low	Skeletal, very low to low	0.101
SKNH	Skin, high	Skin, low to high	0.747
SKNL	Skin, low	Skin, low to high	0.747
SKNVL	Skin, very low	Skin, very low	0.172
SUBL	Substance abuse, low	Substance abuse, low	0.409
SUBVL	Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.397
MRX2	Cardiac	Cardiovascular, extra low	0.113
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.325
MRX4	Diabetes	Diabetes, type 2	0.761
MRX5	Hemophilia/von Willebrands	Not Used	Not Used
MRX6	Hepatitis	Infectious, low to medium	0.285
MRX7	HIV	Infectious, low to medium	0.285
MRX8	Infections, high	Infectious, high to very high	1.283
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.368
MRX10	Malignancies	Cancer, medium	0.757
MRX11	Multiple Sclerosis / Paralysis	CNS, high	1.356
MRX12	Parkinsons / Tremor	CNS, low to medium	0.333
MRX13	Rare Diseases	Rare Diseases	3.615
MRX14	Seizure disorders	CNS, low to medium	0.333
MRX15	Tuberculosis	Infectious, low to medium	0.285

Exhibit 4E

Mississippi Division of Medicaid

SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024

Custom Risk Weights - MississippiCAN Children Rate Cells

Model R-Squared: 14.8%						
Risk Weight Category	CY 2022 Member Months ¹	Scored Member Coefficient	Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	2,541,786	0.554	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	560,012	0.123	22.0%	N/A	0.915	0.915
Age 5 to 14 Male	708,909	0.048	27.9%	N/A	0.978	0.978
Age 5 to 14 Female	720,783	0.103	28.4%	N/A	0.946	0.946
Age 15 to 18 Male	271,720	-	10.7%	N/A	0.982	0.982
Age 15 to 18 Female	280,362	0.270	11.0%	N/A	1.381	1.381
Non-Utilizer Category						
No Base Period Medical Utilization	136,535	(0.370)	5.4%	0.000	0.272	N/A
Homelessness						
Homelessness	69	2.375	0.0%	0.001	4.410	N/A
Disease Categories						
Cancer, very high	72	5.506	0.0%	0.000	11.853	N/A
Cancer, medium to high	3,085	3.976	0.1%	0.000	6.414	N/A
Cardiovascular, very high	213	2.740	0.0%	0.000	8.923	N/A
Cardiovascular, medium	10,956	0.462	0.4%	0.000	2.385	N/A
Cardiovascular, low	32,243	0.450	1.3%	0.000	2.043	N/A
Cardiovascular, extra low	24,157	0.259	1.0%	0.000	2.157	N/A
Cerebrovascular, medium	226	1.635	0.0%	0.000	5.296	N/A
CNS, high	782	2.669	0.0%	0.000	5.970	N/A
CNS, medium	3,136	0.897	0.1%	0.000	3.114	N/A
CNS, low	35,115	0.706	1.4%	0.000	2.419	N/A
DD, low to medium	3,491	1.626	0.1%	0.000	4.080	N/A
Diabetes, type 1	6,443	4.912	0.3%	0.000	6.373	N/A
Diabetes, type 2	4,622	1.003	0.2%	0.000	2.875	N/A
Eye, very low to extra low	13,197	0.287	0.5%	0.000	1.590	N/A
Gastro, high	1,607	4.073	0.1%	0.000	7.352	N/A
Gastro, medium	4,292	3.246	0.2%	0.000	5.200	N/A
Gastro, low	118,768	0.419	4.7%	0.000	1.719	N/A
Genital, extra low	14,316	0.333	0.6%	0.000	1.995	N/A
Hematological, extra high	12	21.738	0.0%	0.000	28.509	N/A
Hematological, very high	388	2.711	0.0%	0.000	9.746	N/A
Hematological, low to medium	15,778	0.388	0.6%	0.000	2.179	N/A
Infectious, very high	141	1.226	0.0%	0.018	3.968	N/A
Infectious, high	2,927	0.583	0.1%	0.000	2.913	N/A
Metabolic, high	9,487	1.437	0.4%	0.000	3.916	N/A
Metabolic, medium	7,079	0.673	0.3%	0.000	3.204	N/A
Pregnancy, complete	5,608	0.379	0.2%	0.000	1.884	N/A
Pregnancy, incomplete	3,020	3.031	0.1%	0.000	4.456	N/A
Psychiatric, high	841	3.981	0.0%	0.000	5.372	N/A
Psychiatric, medium	9,624	2.298	0.4%	0.000	3.581	N/A
Psychiatric, low	374,386	1.069	14.7%	0.000	2.031	N/A
Pulmonary, very high	2,023	5.225	0.1%	0.000	7.776	N/A
Pulmonary, high	3,514	0.721	0.1%	0.000	2.141	N/A
Pulmonary, medium	15,609	0.588	0.6%	0.000	2.088	N/A
Pulmonary, low	207,288	0.502	8.2%	0.000	1.650	N/A
Rare Diseases	206	19.703	0.0%	0.000	22.352	N/A
Renal, extra high	51	3.719	0.0%	0.000	7.804	N/A
Renal, medium	1,388	1.263	0.1%	0.000	3.992	N/A
Renal, low	20,353	0.495	0.8%	0.000	2.004	N/A
Skeletal, medium	204,512	0.416	8.0%	0.000	1.660	N/A
Skeletal, very low to low	86,967	0.284	3.4%	0.000	1.467	N/A
Skin, very low to high	92,647	0.235	3.6%	0.000	1.460	N/A
Substance abuse, very low to low	5,177	0.463	0.2%	0.000	2.795	N/A

¹ CY 2022 member months satisfying the regression criteria.

² Reflects the average total risk score for all members associated with the given variable.

³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4F			
Mississippi Division of Medicaid			
SFY 2024 MississippiCAN Risk Weight Development - Effective January to June 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - MississippiCAN Children Rate Cells			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	5.506
CANH	Cancer, high	Cancer, medium to high	3.976
CANM	Cancer, medium	Cancer, medium to high	3.976
CANL	Cancer, low	Not Used	Not Used
CARVH	Cardiovascular, very high	Cardiovascular, very high	2.740
CARM	Cardiovascular, medium	Cardiovascular, medium	0.462
CARL	Cardiovascular, low	Cardiovascular, low	0.450
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.259
CERM	Cerebrovascular, medium	Cerebrovascular, medium	1.635
CNSH	CNS, high	CNS, high	2.669
CNSM	CNS, medium	CNS, medium	0.897
CNSL	CNS, low	CNS, low	0.706
DDM	DD, medium	DD, low to medium	1.626
DDL	DD, low	DD, low to medium	1.626
DIA1	Diabetes, type 1	Diabetes, type 1	4.912
DIA2	Diabetes, type 2	Diabetes, type 2	1.003
EYEL	Eye, low	Eye, very low to extra low	0.287
EYEVH	Eye, very low	Eye, very low to extra low	0.287
GIH	Gastro, high	Gastro, high	4.073
GIM	Gastro, medium	Gastro, medium	3.246
GIL	Gastro, low	Gastro, low	0.419
GENEL	Genital, extra low	Genital, extra low	0.333
HEMEH	Hematological, extra high	Hematological, extra high	21.738
HEMVH	Hematological, very high	Hematological, very high	2.711
HEMM	Hematological, medium	Hematological, low to medium	0.388
HEML	Hematological, low	Hematological, low to medium	0.388
INFVH	Infectious, very high	Infectious, very high	1.226
INFH	Infectious, high	Infectious, high	0.583
INFM	Infectious, medium	Not Used	Not Used
INFL	Infectious, low	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	1.437
METM	Metabolic, medium	Metabolic, medium	0.673
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.379
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	3.031
PSYH	Psychiatric, high	Psychiatric, high	3.981
PSYM	Psychiatric, medium	Psychiatric, medium	2.298
PSYL	Psychiatric, low	Psychiatric, low	1.069
PULVH	Pulmonary, very high	Pulmonary, very high	5.225
PULH	Pulmonary, high	Pulmonary, high	0.721
PULM	Pulmonary, medium	Pulmonary, medium	0.588
PULL	Pulmonary, low	Pulmonary, low	0.502
RENEH	Renal, extra high	Renal, extra high	3.719
RENM	Renal, medium	Renal, medium	1.263
RENH	Renal, low	Renal, low	0.495
SKCM	Skeletal, medium	Skeletal, medium	0.416
SKCL	Skeletal, low	Skeletal, very low to low	0.284
SKCVL	Skeletal, very low	Skeletal, very low to low	0.284
SKNH	Skin, high	Skin, very low to high	0.235
SKNL	Skin, low	Skin, very low to high	0.235
SKNVL	Skin, very low	Skin, very low to high	0.235
SUBL	Substance abuse, low	Substance abuse, very low to low	0.463
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.463
MRX1	Anti-coagulants	Cardiovascular, medium	0.462
MRX2	Cardiac	Cardiovascular, extra low	0.259
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	1.069
MRX4	Diabetes	Diabetes, type 2	1.003
MRX5	Hemophilia/von Willebrands	Hematological, extra high	21.738
MRX6	Hepatitis	Not Used	Not Used
MRX7	HIV	Not Used	Not Used
MRX8	Infections, high	Infectious, high	0.583
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.416
MRX10	Malignancies	Cancer, medium to high	3.976
MRX11	Multiple Sclerosis / Paralysis	CNS, high	2.669
MRX12	Parkinsons / Tremor	CNS, low	0.706
MRX13	Rare Diseases	Rare Diseases	19.703
MRX14	Seizure disorders	CNS, low	0.706
MRX15	Tuberculosis	Not Used	Not Used

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2024

Region:		North							
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0083	\$1,190.00	\$1,199.89	\$310.00	\$160.00	\$10.00	\$4.00	\$484.00	\$1,683.89
Molina	0.9566	\$1,190.00	\$1,138.39	\$310.00	\$160.00	\$10.00	\$4.00	\$484.00	\$1,622.39
United	1.0048	\$1,190.00	\$1,195.66	\$310.00	\$160.00	\$10.00	\$4.00	\$484.00	\$1,679.66
MA Adult									
Magnolia	1.0202	\$530.00	\$540.68	\$150.00	\$160.00	\$10.00	\$4.00	\$324.00	\$864.68
Molina	0.9554	\$530.00	\$506.38	\$150.00	\$160.00	\$10.00	\$4.00	\$324.00	\$830.38
United	1.0097	\$530.00	\$535.12	\$150.00	\$160.00	\$10.00	\$4.00	\$324.00	\$859.12
MA Children									
Magnolia	1.0035	\$230.00	\$230.81	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$444.81
Molina	0.9574	\$230.00	\$220.19	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$434.19
United	1.0211	\$230.00	\$234.85	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$448.85
Quasi-CHIP									
Magnolia	0.9999	\$250.00	\$249.98	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$463.98
Molina	0.9657	\$250.00	\$241.44	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$455.44
United	1.0167	\$250.00	\$254.18	\$40.00	\$160.00	\$10.00	\$4.00	\$214.00	\$468.18
Foster Care									
Magnolia	0.9821	\$720.00	\$707.09	\$340.00	\$160.00	\$10.00	\$4.00	\$514.00	\$1,221.09
Molina	1.0969	\$720.00	\$789.78	\$340.00	\$160.00	\$10.00	\$4.00	\$514.00	\$1,303.78
United	1.0037	\$720.00	\$722.70	\$340.00	\$160.00	\$10.00	\$4.00	\$514.00	\$1,236.70

¹ Capitation rates reflect the removal of the quality withhold.

² Includes associated premium tax.

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2024

Region:		Central							
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0132	\$1,360.00	\$1,378.00	\$380.00	\$160.00	\$10.00	\$4.00	\$554.00	\$1,932.00
Molina	0.9623	\$1,360.00	\$1,308.76	\$380.00	\$160.00	\$10.00	\$4.00	\$554.00	\$1,862.76
United	0.9967	\$1,360.00	\$1,355.48	\$380.00	\$160.00	\$10.00	\$4.00	\$554.00	\$1,909.48
MA Adult									
Magnolia	1.0150	\$570.00	\$578.57	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$922.57
Molina	0.9645	\$570.00	\$549.75	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$893.75
United	1.0112	\$570.00	\$576.39	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$920.39
MA Children									
Magnolia	1.0113	\$240.00	\$242.72	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$466.72
Molina	0.9514	\$240.00	\$228.33	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$452.33
United	1.0180	\$240.00	\$244.33	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$468.33
Quasi-CHIP									
Magnolia	1.0057	\$260.00	\$261.49	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$485.49
Molina	0.9764	\$260.00	\$253.85	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$477.85
United	1.0059	\$260.00	\$261.55	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$485.55
Foster Care									
Magnolia	0.9655	\$750.00	\$724.12	\$460.00	\$160.00	\$10.00	\$4.00	\$634.00	\$1,358.12
Molina	1.1427	\$750.00	\$857.01	\$460.00	\$160.00	\$10.00	\$4.00	\$634.00	\$1,491.01
United	1.0195	\$750.00	\$764.61	\$460.00	\$160.00	\$10.00	\$4.00	\$634.00	\$1,398.61

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2024

Region:		South							
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0141	\$1,380.00	\$1,399.45	\$370.00	\$160.00	\$10.00	\$4.00	\$544.00	\$1,943.45
Molina	0.9755	\$1,380.00	\$1,346.16	\$370.00	\$160.00	\$10.00	\$4.00	\$544.00	\$1,890.16
United	0.9946	\$1,380.00	\$1,372.53	\$370.00	\$160.00	\$10.00	\$4.00	\$544.00	\$1,916.53
MA Adult									
Magnolia	1.0155	\$570.00	\$578.82	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$922.82
Molina	0.9497	\$570.00	\$541.35	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$885.35
United	1.0215	\$570.00	\$582.25	\$170.00	\$160.00	\$10.00	\$4.00	\$344.00	\$926.25
MA Children									
Magnolia	0.9991	\$230.00	\$229.80	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$453.80
Molina	0.9600	\$230.00	\$220.80	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$444.80
United	1.0245	\$230.00	\$235.63	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$459.63
Quasi-CHIP									
Magnolia	0.9850	\$250.00	\$246.24	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$470.24
Molina	0.9708	\$250.00	\$242.70	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$466.70
United	1.0273	\$250.00	\$256.83	\$50.00	\$160.00	\$10.00	\$4.00	\$224.00	\$480.83
Foster Care									
Magnolia	0.9650	\$710.00	\$685.18	\$270.00	\$160.00	\$10.00	\$4.00	\$444.00	\$1,129.18
Molina	1.1425	\$710.00	\$811.17	\$270.00	\$160.00	\$10.00	\$4.00	\$444.00	\$1,255.17
United	1.0162	\$710.00	\$721.50	\$270.00	\$160.00	\$10.00	\$4.00	\$444.00	\$1,165.50

¹ Capitation rates reflect the removal of the quality withhold.

² Includes associated premium tax.



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October 31, 2024

Jennifer Wentworth
Deputy Executive Director, Finance
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth15 - MississippiCAN Capitation Risk Adjustment – Q3 to Q4 2024 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2025, which are documented in a separately provided report¹ As outlined in that report and summarized by Table 1, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 Q3 to Q4 2024 MississippiCAN Risk Scores Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective July 1, 2024 through December 31, 2024 (Q3 to Q4 2024) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2025. Risk scores for January through June 2025 (Q1 to Q2 2025) will be provided in a separate letter.

As described in greater detail below, we develop Q3 to Q4 2024 risk scores using diagnoses from January 2023 to December 2023 (CY 2023) and the enrollment mix for each CCO as of June 2024. In addition, we adjusted the enrollment records to identify MYPAC rate cell members that were incorrectly assigned to other children rate cells.

Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q3 to Q4 2024 were developed using:

- Diagnosis Period: Medical and drug diagnosis information from encounter and FFS claims incurred during CY 2023 with runout through April 26, 2024.
- Enrollment Period: Demographic and enrollment information from June 2024.

¹ "Report12 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification.pdf," dated September 5, 2024.



Table 2
Q3 to Q4 2024 MississippiCAN Risk Scores
Based on CY 2023 Diagnosis Period and June 2024 Enrollment

Rate Cell	CCO	North		Central		South	
		Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,571	0.998	10,165	1.008	7,087	1.017
Non-Newborn SSI / Disabled	Molina	2,747	0.993	2,909	0.998	2,472	1.000
Non-Newborn SSI / Disabled	United	8,097	1.005	8,159	0.990	7,411	0.984
MA Adult	Magnolia	6,030	1.010	6,716	1.019	6,397	1.020
MA Adult	Molina	3,998	0.973	4,891	0.970	5,175	0.962
MA Adult	United	5,575	1.008	6,341	1.003	7,380	1.010
MA Children	Magnolia	29,925	1.003	35,082	1.012	29,290	1.002
MA Children	Molina	16,858	0.967	20,499	0.961	18,911	0.961
MA Children	United	27,931	1.016	32,384	1.012	31,478	1.021
Quasi-CHIP	Magnolia	3,805	1.002	4,326	1.016	3,286	0.994
Quasi-CHIP	Molina	1,949	0.973	2,175	0.955	2,001	0.965
Quasi-CHIP	United	3,842	1.012	4,271	1.007	3,766	1.024
Foster Care	Magnolia	1,519	0.984	1,570	0.970	2,155	0.969
Foster Care	Molina	251	1.080	315	1.149	445	1.159
Foster Care	United	516	1.007	459	1.002	669	0.994

Prior iterations of risk scores relied on actual enrollment during the risk adjustment period, due to data issues and the impact of different enrollment patterns during the COVID-19 pandemic and related public health emergency (PHE). This release of risk scores for July to December 2024 is a return to using a snapshot of enrollment to prospectively set risk scores.

Only MississippiCAN-eligible members enrolled in a CCO during June 2024 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found on the enrollment record, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations a variable based upon the length of enrollment during the diagnostic period is included in the risk score calculation.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment records.

Starting in July 2021, some members in the MYPAC rate cell, which is not risk adjusted, were not correctly assigned a 'SED' lock-in flag and were instead assigned to other children rate cells, including several rate cells that are risk adjusted. We identified members that utilized MYPAC services during the risk adjustment period and recategorized these members to the MYPAC rate cell for the purposes of risk adjustment calculations.

A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members aged 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2025 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.

Risk Score Changes

The last release of risk scores included retrospective budget-neutral risk scores for Q1 to Q2 2024. These risk scores were based on January to June 2024 enrollment and diagnoses from May 2022 through April 2023 with runout through



Jennifer Wentworth
Mississippi Division of Medicaid
October 31, 2024
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April 2024. Changes in budget-neutral plan risk scores between the Q1 to Q2 2024 risk scores and the Q3 to Q4 2024 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes. Additionally, new risk weights were developed for the Q3 to Q4 2024 time period to reflect the removal of certain pharmacy claims that will now be paid through DOM's pharmacy benefits administrator (PBA), effective July 1, 2024. The development of these risk weights is documented in a separate letter.²

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

Table 3 Q3 to Q4 2024 MississippiCAN Risk Scores Changes in Statewide Budget Neutral Risk Scores Q1 to Q2 2024 vs. Q3 to Q4 2024				
Risk Scores:		Q1 to Q2 2024	Q3 to Q4 2024	
Enrollment:		Jan to Jun 2024	June 2024	
Cohort	Diagnosis Period:	May 2022 to April 2023	CY 2023	% Change
Non-Newborn SSI / Disabled	Magnolia	1.012	1.007	-0.49%
Non-Newborn SSI / Disabled	Molina	0.964	0.997	3.39%
Non-Newborn SSI / Disabled	United	0.999	0.993	-0.55%
MA Adult	Magnolia	1.017	1.016	-0.03%
MA Adult	Molina	0.956	0.968	1.20%
MA Adult	United	1.015	1.007	-0.76%
MA Children	Magnolia	1.005	1.006	0.11%
MA Children	Molina	0.956	0.963	0.70%
MA Children	United	1.021	1.017	-0.46%
Quasi-CHIP	Magnolia	0.998	1.005	0.72%
Quasi-CHIP	Molina	0.971	0.964	-0.77%
Quasi-CHIP	United	1.016	1.014	-0.25%
Foster Care	Magnolia	0.970	0.974	0.35%
Foster Care	Molina	1.131	1.136	0.48%
Foster Care	United	1.013	1.000	-1.27%

Exhibit 2 allocates the change in risk scores between the last release and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Updates the risk scores shown in Column A with an updated diagnosis period.
- Column C: Updates the risk scores shown in Column B with enrollment from June 2024, the snapshot enrollment month chosen to represent enrollment for July to December 2024.
- Column D: Updates the risk scores shown in Column C using the new risk weights developed for July to December 2024. This column contains the final risk scores for this release.

Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the last release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.

² "Wentworth15 - July 2024 MSCAN Risk Weight Development.pdf" dated October 31, 2024.



Table 4 Q3 to Q4 2024 MississippiCAN Risk Scores Statewide Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q1 to Q2 2024	97%	93%	96%	96%
Q3 to Q4 2024	98%	96%	98%	98%
MA Adult				
Q1 to Q2 2024	91%	89%	90%	90%
Q3 to Q4 2024	94%	94%	94%	94%
MA Children				
Q1 to Q2 2024	94%	92%	94%	94%
Q3 to Q4 2024	97%	96%	97%	97%
Quasi-CHIP				
Q1 to Q2 2024	96%	93%	95%	95%
Q3 to Q4 2024	97%	96%	97%	97%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 Q3 to Q4 2024 MississippiCAN Risk Scores Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members falling into each durational category
 - Count of members in the non-utilizer category
 - Count of members assigned to the housing insecurity category, for applicable populations
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category
- Unscored Members
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- Risk Adjustment Results
 - Calculation of budget neutral risk score for scored and unscored members and in total



Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6 Q3 to Q4 2024 MississippiCAN Risk Scores Conditions with the Top Five Disease Impacts Statewide Results				
Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, low to medium	Skeletal, medium	Psychiatric, low	Psychiatric, low
2	Cardiovascular, medium	Psychiatric, low	Skeletal, very low to medium	Skeletal, very low to medium
3	Skeletal, medium	Pregnancy, incomplete	Pulmonary, low	Pulmonary, low
4	Psychiatric, high	Gastro, low	Gastro, low	Diabetes, type 1
5	CNS, low	Pregnancy, complete	CNS, low	Gastro, low

Member-Level Risk Scores

Text files providing member-level demographic, duration, diagnosis, and other risk score category information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, diagnostic, and other risk score category information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the letter referenced above that describes the custom risk weight model developed for July to December 2024 for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis.

Exhibits 4A to 4F display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

CCO Capitation Rate = Base Capitation Rate x CCO Budget Neutral Risk Score

The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates after the application of the quality withhold and prior to the following directed payments, all of which are not risk adjusted.



- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2025 and when we anticipate providing each risk score update for the Foster Care rate cell.

Table 7 SFY 2025 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3Q4 2024	November 2024	February 2025
Q1Q2 2025	December 2024	August 2025

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q3 to Q4 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from January 2023 to December 2023 with runout through April 26, 2024, along with eligibility data from June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q3 to Q4 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

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





Jennifer Wentworth
Mississippi Division of Medicaid
October 31, 2024
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Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jill Bruckert'.

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

JAB/KNL/zk

Attachments (Provided in Excel)

A handwritten signature in black ink, appearing to read 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

Caveats and Limitations
Mississippi Division of Medicaid
Q3 to Q4 2024 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q3 to Q4 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from January 2023 through December 2023 with runout through April 2024 and eligibility data from June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q3 to Q4 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2024 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	9,429	0.938	0.998	142	1.041	0.996	0.998
Molina	2,647	0.934	0.994	100	1.027	0.982	0.993
United	7,941	0.944	1.004	156	1.062	1.015	1.005
Total	20,017	0.940	1.000	398	1.046	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	10,033	1.022	1.008	132	1.108	1.034	1.008
Molina	2,815	1.012	0.998	94	1.082	1.010	0.998
United	8,042	1.005	0.991	117	1.022	0.954	0.990
Total	20,890	1.014	1.000	343	1.072	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,944	1.067	1.017	143	1.047	0.981	1.017
Molina	2,364	1.049	1.000	108	1.069	1.001	1.000
United	7,251	1.032	0.983	160	1.085	1.016	0.984
Total	16,559	1.049	1.000	411	1.068	1.000	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	5,678	0.976	1.011	352	0.939	0.997	1.010
Molina	3,710	0.939	0.972	288	0.930	0.988	0.973
United	5,247	0.973	1.008	328	0.954	1.013	1.008
Total	14,635	0.966	1.000	968	0.942	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,354	0.994	1.020	362	0.956	1.000	1.019
Molina	4,607	0.943	0.968	284	0.952	0.995	0.970
United	5,985	0.977	1.003	356	0.960	1.004	1.003
Total	16,946	0.974	1.000	1,002	0.956	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,018	1.030	1.021	379	0.947	0.998	1.020
Molina	4,846	0.968	0.959	329	0.948	0.998	0.962
United	6,989	1.019	1.010	391	0.953	1.004	1.010
Total	17,853	1.009	1.000	1,099	0.949	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	29,017	1.007	1.004	908	0.997	0.996	1.003
Molina	16,168	0.970	0.966	690	0.993	0.992	0.967
United	27,064	1.020	1.016	867	1.011	1.010	1.016
Total	72,249	1.004	1.000	2,465	1.001	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	34,402	1.004	1.012	680	0.994	0.998	1.012
Molina	19,834	0.952	0.959	665	0.994	0.999	0.961
United	31,627	1.005	1.013	757	0.999	1.003	1.012
Total	85,863	0.993	1.000	2,102	0.996	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	28,413	1.026	1.002	877	0.995	0.998	1.002
Molina	18,084	0.982	0.960	827	0.992	0.995	0.961
United	30,615	1.046	1.022	863	1.005	1.007	1.021
Total	77,112	1.023	1.000	2,567	0.997	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,692	1.022	1.002	113	1.005	1.004	1.002
Molina	1,860	0.991	0.972	89	0.995	0.994	0.973
United	3,721	1.033	1.012	121	1.002	1.001	1.012
Total	9,273	1.020	1.000	323	1.001	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	4,220	1.021	1.016	106	1.015	1.020	1.016
Molina	2,109	0.959	0.954	66	0.987	0.992	0.955
United	4,179	1.012	1.007	92	0.977	0.982	1.007
Total	10,508	1.005	1.000	264	0.995	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,208	1.059	0.994	78	1.019	1.011	0.994
Molina	1,930	1.027	0.963	71	1.005	0.996	0.965
United	3,663	1.092	1.025	103	1.003	0.994	1.024
Total	8,801	1.066	1.000	252	1.009	1.000	1.000

Exhibit 1E
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q3 to Q4 2024 Risk Scores
June 2024 Snapshot Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,519	0.941	0.984
Molina	251	1.033	1.080
United	516	0.964	1.007
Total	2,286	0.956	1.000

Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,570	1.011	0.970
Molina	315	1.197	1.149
United	459	1.044	1.002
Total	2,344	1.042	1.000

South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	2,155	0.912	0.969
Molina	445	1.092	1.159
United	669	0.936	0.994
Total	3,269	0.942	1.000

Exhibit 2A Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.943	0.964	0.957	0.938	2.3%	-0.7%	-2.0%	-0.5%
Molina	0.894	0.922	0.907	0.934	3.2%	-1.6%	2.9%	4.5%
United	0.939	0.959	0.951	0.944	2.1%	-0.8%	-0.7%	0.5%
Unscored Members								
Magnolia	1.050	1.034	1.032	1.041	-1.6%	-0.1%	0.9%	-0.8%
Molina	1.007	1.033	1.001	1.027	2.6%	-3.1%	2.6%	2.0%
United	1.056	1.064	1.054	1.062	0.8%	-0.9%	0.7%	0.5%
All Members								
Magnolia	0.947	0.965	0.959	0.940	1.9%	-0.7%	-1.9%	-0.7%
Molina	0.898	0.924	0.909	0.936	2.9%	-1.6%	2.9%	4.2%
United	0.943	0.960	0.953	0.946	1.8%	-0.7%	-0.7%	0.3%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.020	1.045	1.038	1.022	2.4%	-0.7%	-1.5%	0.2%
Molina	0.966	0.980	0.968	1.012	1.5%	-1.2%	4.6%	4.8%
United	1.004	1.028	1.021	1.005	2.4%	-0.7%	-1.6%	0.1%
Unscored Members								
Magnolia	1.056	1.090	1.111	1.108	3.2%	1.9%	-0.2%	4.9%
Molina	1.070	1.090	1.071	1.082	1.8%	-1.8%	1.1%	1.1%
United	1.049	1.037	1.031	1.022	-1.1%	-0.6%	-0.9%	-2.6%
All Members								
Magnolia	1.022	1.046	1.039	1.024	2.4%	-0.7%	-1.5%	0.2%
Molina	0.970	0.982	0.970	1.013	1.2%	-1.2%	4.4%	4.4%
United	1.005	1.028	1.021	1.005	2.3%	-0.7%	-1.5%	0.0%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.046	1.076	1.063	1.067	2.9%	-1.2%	0.4%	2.1%
Molina	1.006	1.030	1.017	1.049	2.3%	-1.2%	3.1%	4.3%
United	1.025	1.045	1.034	1.032	2.0%	-1.1%	-0.3%	0.6%
Unscored Members								
Magnolia	1.075	1.058	1.057	1.047	-1.7%	-0.1%	-0.9%	-2.6%
Molina	1.036	1.061	1.058	1.069	2.4%	-0.3%	1.0%	3.2%
United	1.067	1.072	1.077	1.085	0.5%	0.5%	0.7%	1.7%
All Members								
Magnolia	1.047	1.076	1.063	1.067	2.7%	-1.2%	0.4%	1.9%
Molina	1.007	1.030	1.019	1.049	2.3%	-1.1%	3.0%	4.2%
United	1.027	1.046	1.035	1.033	1.8%	-1.0%	-0.2%	0.6%

Exhibit 2B Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.008	1.008	1.009	0.998	0.0%	0.1%	-1.1%	-1.0%
Molina	0.956	0.964	0.957	0.994	0.9%	-0.8%	3.9%	4.0%
United	1.004	1.002	1.003	1.004	-0.2%	0.1%	0.1%	0.0%
Unscored Members								
Magnolia	1.009	0.990	0.999	0.996	-1.9%	1.0%	-0.4%	-1.3%
Molina	0.967	0.989	0.969	0.982	2.2%	-2.0%	1.3%	1.6%
United	1.014	1.019	1.020	1.015	0.4%	0.2%	-0.5%	0.1%
All Members								
Magnolia	1.008	1.008	1.009	0.998	0.0%	0.1%	-1.1%	-1.0%
Molina	0.957	0.965	0.957	0.993	0.9%	-0.8%	3.8%	3.9%
United	1.005	1.003	1.003	1.005	-0.2%	0.1%	0.1%	0.0%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.014	1.015	1.015	1.008	0.1%	0.1%	-0.7%	-0.6%
Molina	0.959	0.952	0.947	0.998	-0.8%	-0.5%	5.3%	4.0%
United	0.997	0.998	0.999	0.991	0.1%	0.1%	-0.8%	-0.6%
Unscored Members								
Magnolia	0.999	1.017	1.036	1.034	1.8%	1.8%	-0.1%	3.5%
Molina	1.012	1.017	0.998	1.010	0.5%	-1.9%	1.2%	-0.3%
United	0.992	0.968	0.961	0.954	-2.5%	-0.7%	-0.8%	-3.9%
All Members								
Magnolia	1.013	1.015	1.016	1.008	0.2%	0.1%	-0.7%	-0.5%
Molina	0.962	0.953	0.949	0.998	-1.0%	-0.4%	5.2%	3.7%
United	0.997	0.998	0.999	0.990	0.1%	0.1%	-0.8%	-0.6%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.014	1.019	1.018	1.017	0.5%	-0.1%	-0.1%	0.3%
Molina	0.975	0.975	0.974	1.000	-0.1%	-0.1%	2.6%	2.5%
United	0.994	0.990	0.991	0.983	-0.4%	0.1%	-0.7%	-1.1%
Unscored Members								
Magnolia	1.013	0.994	0.992	0.981	-1.9%	-0.1%	-1.2%	-3.2%
Molina	0.976	0.997	0.993	1.001	2.2%	-0.4%	0.8%	2.5%
United	1.005	1.007	1.012	1.016	0.2%	0.4%	0.5%	1.1%
All Members								
Magnolia	1.014	1.019	1.018	1.017	0.4%	-0.1%	-0.1%	0.3%
Molina	0.975	0.976	0.975	1.000	0.0%	0.0%	2.5%	2.5%
United	0.995	0.990	0.991	0.984	-0.4%	0.1%	-0.7%	-1.1%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.987	0.982	0.968	0.976	-0.5%	-1.4%	0.9%	-1.1%
Molina	0.918	0.920	0.914	0.939	0.2%	-0.7%	2.7%	2.2%
United	0.977	0.972	0.963	0.973	-0.4%	-1.0%	1.1%	-0.3%
Unscored Members								
Magnolia	0.976	0.953	0.957	0.939	-2.3%	0.4%	-1.8%	-3.8%
Molina	0.961	0.944	0.944	0.930	-1.8%	0.0%	-1.4%	-3.2%
United	0.970	0.970	0.972	0.954	0.1%	0.2%	-1.8%	-1.6%
All Members								
Magnolia	0.986	0.980	0.967	0.974	-0.6%	-1.3%	0.7%	-1.2%
Molina	0.923	0.922	0.916	0.938	-0.2%	-0.6%	2.5%	1.6%
United	0.976	0.972	0.963	0.972	-0.4%	-0.9%	0.9%	-0.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.988	0.994	0.993	0.994	0.7%	-0.2%	0.1%	0.6%
Molina	0.935	0.926	0.921	0.943	-1.0%	-0.5%	2.4%	0.9%
United	0.983	0.986	0.973	0.977	0.4%	-1.3%	0.4%	-0.6%
Unscored Members								
Magnolia	0.978	0.975	0.972	0.956	-0.3%	-0.3%	-1.6%	-2.2%
Molina	0.966	0.951	0.958	0.952	-1.5%	0.6%	-0.6%	-1.5%
United	0.989	0.982	0.983	0.960	-0.7%	0.1%	-2.4%	-3.0%
All Members								
Magnolia	0.987	0.994	0.992	0.992	0.7%	-0.2%	0.0%	0.5%
Molina	0.938	0.927	0.923	0.944	-1.2%	-0.4%	2.2%	0.6%
United	0.983	0.986	0.974	0.976	0.3%	-1.3%	0.2%	-0.7%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.032	1.036	1.030	1.030	0.4%	-0.6%	0.0%	-0.2%
Molina	0.958	0.960	0.954	0.968	0.1%	-0.6%	1.5%	1.0%
United	1.039	1.037	1.028	1.019	-0.2%	-0.9%	-0.8%	-1.9%
Unscored Members								
Magnolia	0.970	0.959	0.961	0.947	-1.2%	0.2%	-1.5%	-2.4%
Molina	0.964	0.957	0.954	0.948	-0.7%	-0.3%	-0.7%	-1.7%
United	0.968	0.959	0.960	0.953	-1.0%	0.1%	-0.8%	-1.6%
All Members								
Magnolia	1.026	1.033	1.026	1.025	0.7%	-0.7%	-0.1%	-0.1%
Molina	0.960	0.960	0.954	0.967	0.0%	-0.6%	1.4%	0.8%
United	1.032	1.034	1.024	1.016	0.1%	-0.9%	-0.8%	-1.6%

Exhibit 2D Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.022	1.019	1.016	1.011	-0.2%	-0.3%	-0.5%	-1.0%
Molina	0.951	0.956	0.959	0.972	0.5%	0.4%	1.3%	2.3%
United	1.011	1.010	1.011	1.008	-0.1%	0.1%	-0.3%	-0.3%
Unscored Members								
Magnolia	1.007	0.997	0.999	0.997	-1.0%	0.2%	-0.1%	-1.0%
Molina	0.991	0.987	0.985	0.988	-0.4%	-0.2%	0.3%	-0.3%
United	1.000	1.014	1.014	1.013	1.4%	0.0%	-0.1%	1.3%
All Members								
Magnolia	1.020	1.018	1.015	1.010	-0.2%	-0.3%	-0.5%	-1.0%
Molina	0.955	0.957	0.961	0.973	0.2%	0.4%	1.2%	1.8%
United	1.010	1.010	1.011	1.008	0.0%	0.1%	-0.3%	-0.1%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.022	1.027	1.020	0.5%	0.5%	-0.7%	0.4%
Molina	0.962	0.952	0.953	0.968	-1.1%	0.2%	1.6%	0.6%
United	1.011	1.014	1.007	1.003	0.2%	-0.7%	-0.4%	-0.8%
Unscored Members								
Magnolia	0.999	1.004	1.000	1.000	0.5%	-0.4%	0.0%	0.1%
Molina	0.987	0.980	0.985	0.995	-0.7%	0.5%	1.0%	0.8%
United	1.011	1.012	1.012	1.004	0.1%	0.0%	-0.8%	-0.7%
All Members								
Magnolia	1.015	1.021	1.026	1.019	0.6%	0.5%	-0.6%	0.4%
Molina	0.964	0.953	0.955	0.970	-1.2%	0.2%	1.5%	0.5%
United	1.011	1.014	1.007	1.003	0.2%	-0.6%	-0.4%	-0.8%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.020	1.021	1.021	0.3%	0.1%	0.0%	0.4%
Molina	0.944	0.945	0.946	0.959	0.1%	0.1%	1.4%	1.6%
United	1.024	1.021	1.019	1.010	-0.3%	-0.1%	-0.9%	-1.3%
Unscored Members								
Magnolia	1.003	1.000	1.002	0.998	-0.2%	0.2%	-0.5%	-0.5%
Molina	0.996	0.999	0.995	0.998	0.3%	-0.3%	0.3%	0.3%
United	1.001	1.001	1.001	1.004	0.0%	0.1%	0.2%	0.3%
All Members								
Magnolia	1.015	1.019	1.020	1.020	0.4%	0.1%	-0.1%	0.4%
Molina	0.950	0.947	0.949	0.962	-0.3%	0.2%	1.4%	1.3%
United	1.021	1.020	1.018	1.010	-0.1%	-0.2%	-0.8%	-1.1%

Exhibit 2E Mississippi Division of Medicaid Impact Analysis MA Children Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.028	1.027	1.007	1.1%	0.0%	-2.0%	-0.9%
Molina	0.966	0.973	0.976	0.970	0.7%	0.3%	-0.6%	0.4%
United	1.035	1.042	1.044	1.020	0.6%	0.2%	-2.3%	-1.5%
Unscored Members								
Magnolia	0.975	0.997	0.994	0.997	2.3%	-0.3%	0.4%	2.3%
Molina	0.971	0.994	0.990	0.993	2.4%	-0.4%	0.3%	2.3%
United	0.979	1.011	1.011	1.011	3.2%	0.1%	0.0%	3.3%
All Members								
Magnolia	1.014	1.027	1.026	1.007	1.3%	-0.1%	-1.9%	-0.7%
Molina	0.967	0.974	0.976	0.971	0.7%	0.3%	-0.6%	0.4%
United	1.032	1.041	1.043	1.020	0.9%	0.2%	-2.3%	-1.2%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.011	1.021	1.021	1.004	1.0%	0.0%	-1.7%	-0.7%
Molina	0.947	0.951	0.954	0.952	0.3%	0.4%	-0.2%	0.5%
United	1.018	1.019	1.020	1.005	0.1%	0.0%	-1.4%	-1.3%
Unscored Members								
Magnolia	0.970	0.992	0.988	0.994	2.3%	-0.4%	0.6%	2.4%
Molina	0.964	0.989	0.989	0.994	2.6%	0.0%	0.5%	3.2%
United	0.972	0.997	0.999	0.999	2.6%	0.2%	0.0%	2.8%
All Members								
Magnolia	1.009	1.021	1.021	1.004	1.2%	0.0%	-1.6%	-0.5%
Molina	0.949	0.952	0.956	0.953	0.3%	0.4%	-0.2%	0.5%
United	1.016	1.019	1.019	1.005	0.3%	0.0%	-1.4%	-1.1%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.025	1.041	1.045	1.026	1.5%	0.3%	-1.8%	0.0%
Molina	0.982	0.981	0.994	0.982	0.0%	1.3%	-1.2%	0.0%
United	1.052	1.064	1.070	1.046	1.1%	0.5%	-2.2%	-0.6%
Unscored Members								
Magnolia	0.971	0.991	0.991	0.995	2.0%	0.0%	0.4%	2.5%
Molina	0.970	0.983	0.984	0.992	1.4%	0.2%	0.8%	2.3%
United	0.983	1.004	1.003	1.005	2.2%	-0.2%	0.2%	2.2%
All Members								
Magnolia	1.022	1.040	1.043	1.025	1.8%	0.3%	-1.7%	0.3%
Molina	0.982	0.982	0.994	0.983	0.0%	1.3%	-1.1%	0.1%
United	1.048	1.063	1.067	1.044	1.5%	0.4%	-2.2%	-0.3%

Exhibit 2F Mississippi Division of Medicaid Impact Analysis MA Children Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.004	1.007	1.005	1.004	0.3%	-0.1%	-0.1%	0.0%
Molina	0.954	0.953	0.955	0.966	-0.1%	0.2%	1.2%	1.3%
United	1.022	1.020	1.022	1.016	-0.2%	0.1%	-0.5%	-0.6%
Unscored Members								
Magnolia	1.000	0.996	0.995	0.996	-0.4%	-0.1%	0.1%	-0.3%
Molina	0.996	0.993	0.991	0.992	-0.3%	-0.2%	0.1%	-0.4%
United	1.004	1.010	1.012	1.010	0.6%	0.3%	-0.2%	0.7%
All Members								
Magnolia	1.004	1.006	1.005	1.003	0.3%	-0.2%	-0.1%	0.0%
Molina	0.957	0.954	0.956	0.967	-0.3%	0.2%	1.2%	1.0%
United	1.021	1.020	1.021	1.016	-0.1%	0.1%	-0.5%	-0.5%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.012	1.017	1.016	1.012	0.5%	-0.1%	-0.4%	0.0%
Molina	0.948	0.946	0.949	0.959	-0.2%	0.3%	1.1%	1.2%
United	1.019	1.015	1.014	1.013	-0.4%	-0.1%	-0.2%	-0.6%
Unscored Members								
Magnolia	1.001	0.999	0.996	0.998	-0.2%	-0.4%	0.2%	-0.4%
Molina	0.995	0.996	0.997	0.999	0.1%	0.1%	0.2%	0.4%
United	1.003	1.004	1.007	1.003	0.1%	0.3%	-0.4%	0.0%
All Members								
Magnolia	1.011	1.017	1.016	1.012	0.5%	-0.1%	-0.4%	0.0%
Molina	0.951	0.948	0.951	0.961	-0.4%	0.3%	1.0%	1.0%
United	1.018	1.015	1.014	1.012	-0.3%	-0.1%	-0.2%	-0.6%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.999	1.005	1.002	1.002	0.5%	-0.3%	0.0%	0.3%
Molina	0.957	0.947	0.953	0.960	-1.0%	0.7%	0.7%	0.3%
United	1.026	1.027	1.026	1.022	0.1%	-0.1%	-0.4%	-0.4%
Unscored Members								
Magnolia	0.996	0.998	0.998	0.998	0.2%	0.0%	0.0%	0.2%
Molina	0.995	0.990	0.991	0.995	-0.5%	0.2%	0.3%	0.0%
United	1.008	1.012	1.010	1.007	0.4%	-0.2%	-0.3%	-0.1%
All Members								
Magnolia	0.999	1.004	1.002	1.002	0.5%	-0.3%	0.0%	0.3%
Molina	0.960	0.948	0.955	0.961	-1.2%	0.7%	0.6%	0.1%
United	1.024	1.027	1.025	1.021	0.2%	-0.1%	-0.4%	-0.3%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.052	1.070	1.064	1.022	1.7%	-0.6%	-4.0%	-2.9%
Molina	1.013	1.018	1.016	0.991	0.5%	-0.1%	-2.5%	-2.1%
United	1.070	1.082	1.072	1.033	1.1%	-0.9%	-3.7%	-3.5%
Unscored Members								
Magnolia	1.019	1.015	1.022	1.005	-0.4%	0.7%	-1.6%	-1.3%
Molina	1.023	1.011	1.011	0.995	-1.2%	0.1%	-1.6%	-2.8%
United	1.029	1.017	1.018	1.002	-1.2%	0.1%	-1.6%	-2.6%
All Members								
Magnolia	1.051	1.069	1.062	1.021	1.7%	-0.6%	-3.9%	-2.8%
Molina	1.015	1.018	1.017	0.992	0.3%	-0.1%	-2.4%	-2.3%
United	1.068	1.081	1.070	1.032	1.2%	-1.0%	-3.6%	-3.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.032	1.058	1.059	1.021	2.5%	0.0%	-3.6%	-1.1%
Molina	1.001	1.009	0.993	0.959	0.8%	-1.7%	-3.4%	-4.3%
United	1.034	1.048	1.050	1.012	1.4%	0.1%	-3.6%	-2.1%
Unscored Members								
Magnolia	1.032	1.035	1.037	1.015	0.3%	0.1%	-2.1%	-1.7%
Molina	1.016	1.007	1.001	0.987	-0.9%	-0.6%	-1.4%	-2.9%
United	1.005	0.983	0.992	0.977	-2.2%	0.9%	-1.5%	-2.8%
All Members								
Magnolia	1.032	1.058	1.058	1.021	2.5%	0.0%	-3.5%	-1.1%
Molina	1.002	1.009	0.993	0.960	0.7%	-1.6%	-3.4%	-4.3%
United	1.033	1.047	1.048	1.011	1.4%	0.1%	-3.5%	-2.1%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.065	1.100	1.101	1.059	3.2%	0.1%	-3.7%	-0.6%
Molina	1.047	1.066	1.059	1.027	1.8%	-0.7%	-3.0%	-2.0%
United	1.114	1.151	1.136	1.092	3.3%	-1.2%	-3.9%	-2.0%
Unscored Members								
Magnolia	1.019	1.031	1.038	1.019	1.1%	0.7%	-1.8%	0.0%
Molina	1.031	1.012	1.024	1.005	-1.8%	1.2%	-1.9%	-2.5%
United	1.006	1.024	1.024	1.003	1.8%	0.0%	-2.1%	-0.4%
All Members								
Magnolia	1.063	1.098	1.099	1.058	3.3%	0.0%	-3.7%	-0.4%
Molina	1.048	1.066	1.058	1.026	1.7%	-0.7%	-3.0%	-2.0%
United	1.109	1.148	1.133	1.090	3.5%	-1.3%	-3.9%	-1.7%

Exhibit 2H Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.000	1.005	1.006	1.002	0.5%	0.1%	-0.4%	0.2%
Molina	0.963	0.956	0.961	0.972	-0.7%	0.5%	1.1%	0.9%
United	1.017	1.016	1.014	1.012	-0.1%	-0.3%	-0.1%	-0.5%
Unscored Members								
Magnolia	0.995	1.001	1.004	1.004	0.5%	0.4%	0.0%	0.9%
Molina	0.999	0.996	0.994	0.994	-0.3%	-0.2%	0.0%	-0.6%
United	1.005	1.002	1.000	1.001	-0.3%	-0.2%	0.0%	-0.4%
All Members								
Magnolia	1.000	1.005	1.006	1.002	0.5%	0.1%	-0.4%	0.2%
Molina	0.966	0.957	0.962	0.973	-0.9%	0.6%	1.1%	0.7%
United	1.017	1.016	1.013	1.012	-0.1%	-0.3%	-0.1%	-0.5%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.005	1.013	1.016	1.016	0.8%	0.3%	0.0%	1.1%
Molina	0.975	0.966	0.953	0.954	-0.9%	-1.4%	0.1%	-2.2%
United	1.007	1.003	1.007	1.007	-0.3%	0.4%	0.0%	0.0%
Unscored Members								
Magnolia	1.015	1.024	1.024	1.020	0.9%	0.0%	-0.4%	0.6%
Molina	0.999	0.996	0.989	0.992	-0.3%	-0.7%	0.3%	-0.7%
United	0.988	0.973	0.980	0.982	-1.6%	0.8%	0.2%	-0.6%
All Members								
Magnolia	1.006	1.013	1.017	1.016	0.8%	0.3%	0.0%	1.0%
Molina	0.976	0.967	0.954	0.955	-1.0%	-1.4%	0.1%	-2.2%
United	1.006	1.003	1.007	1.007	-0.3%	0.4%	0.0%	0.1%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.984	0.987	0.995	0.994	0.3%	0.8%	-0.1%	1.0%
Molina	0.968	0.957	0.957	0.963	-1.1%	0.0%	0.7%	-0.4%
United	1.029	1.032	1.027	1.025	0.3%	-0.5%	-0.3%	-0.5%
Unscored Members								
Magnolia	1.002	1.008	1.009	1.011	0.6%	0.1%	0.1%	0.9%
Molina	1.014	0.990	0.996	0.996	-2.4%	0.6%	0.1%	-1.7%
United	0.990	1.002	0.996	0.994	1.2%	-0.6%	-0.2%	0.5%
All Members								
Magnolia	0.985	0.987	0.995	0.994	0.2%	0.8%	-0.1%	1.0%
Molina	0.971	0.958	0.958	0.965	-1.3%	0.0%	0.7%	-0.6%
United	1.027	1.032	1.026	1.024	0.4%	-0.5%	-0.3%	-0.3%

Exhibit 3A Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	9,429	100.00%	N/A	2,647	100.00%	N/A	7,941	100.00%	N/A	20,017	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	255	2.70%	N/A	186	7.03%	N/A	249	3.14%	N/A	690	3.45%
Age 5 to 14 Male	0.184	N/A	1,079	11.44%	N/A	359	13.56%	N/A	889	11.20%	N/A	2,327	11.63%
Age 5 to 14 Female	0.265	N/A	479	5.08%	N/A	146	5.52%	N/A	445	5.60%	N/A	1,070	5.35%
Age 15 to 24 Male	0.000	N/A	863	9.15%	N/A	265	10.01%	N/A	776	9.77%	N/A	1,904	9.51%
Age 15 to 24 Female	0.187	N/A	452	4.79%	N/A	144	5.44%	N/A	427	5.38%	N/A	1,023	5.11%
Age 25 to 44 Male	0.003	N/A	1,172	12.43%	N/A	279	10.54%	N/A	1,014	12.77%	N/A	2,465	12.31%
Age 25 to 44 Female	0.133	N/A	1,058	11.22%	N/A	240	9.07%	N/A	856	10.78%	N/A	2,154	10.76%
Age 45 and Older Male	0.107	N/A	1,709	18.12%	N/A	535	20.21%	N/A	1,440	18.13%	N/A	3,684	18.40%
Age 45 and Older Female	0.027	N/A	2,362	25.05%	N/A	493	18.62%	N/A	1,845	23.23%	N/A	4,700	23.48%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	39	0.41%	N/A	27	1.02%	N/A	48	0.60%	N/A	114	0.57%
Diagnosis Period Duration, 8 Months	0.320	N/A	25	0.27%	N/A	19	0.72%	N/A	29	0.37%	N/A	73	0.36%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	87	0.92%	N/A	74	2.80%	N/A	83	1.05%	N/A	244	1.22%
Diagnosis Period Duration, 12 Months	0.000	N/A	9,278	98.40%	N/A	2,527	95.47%	N/A	7,781	97.99%	N/A	19,586	97.85%
Homelessness Category													
Homelessness	0.931	N/A	66	0.70%	N/A	28	1.06%	N/A	41	0.52%	N/A	135	0.67%
Disease Categories													
Cancer, very high	3.067	13	48	0.51%	7	20	0.76%	16	36	0.45%	13	104	0.52%
Cancer, high	0.816	24	111	1.18%	20	35	1.32%	28	81	1.02%	26	227	1.13%
Cancer, medium	0.611	26	146	1.55%	27	35	1.32%	20	159	2.00%	23	340	1.70%
Cancer, low	0.318	38	103	1.09%	38	22	0.83%	37	79	0.99%	37	204	1.02%
Cardiovascular, very high	1.460	29	46	0.49%	30	13	0.49%	24	59	0.74%	27	118	0.59%
Cardiovascular, medium	0.584	3	1,081	11.46%	2	298	11.26%	3	855	10.77%	3	2,234	11.16%
Cardiovascular, extra low to low	0.081	7	3,153	33.44%	8	706	26.67%	7	2,582	32.51%	7	6,441	32.18%
Cerebrovascular, medium	0.115	43	121	1.28%	42	35	1.32%	43	111	1.40%	44	267	1.33%
CNS, high	0.781	32	77	0.82%	31	20	0.76%	33	52	0.65%	32	149	0.74%
CNS, medium	0.479	22	205	2.17%	21	58	2.19%	21	193	2.43%	21	456	2.28%
CNS, low	0.243	5	1,507	15.98%	5	400	15.11%	5	1,333	16.79%	5	3,240	16.19%
DD, low to medium	0.174	30	360	3.82%	32	86	3.25%	30	365	4.60%	30	811	4.05%
Diabetes, type 1	0.862	19	126	1.34%	23	31	1.17%	19	113	1.42%	19	270	1.35%
Diabetes, type 2	0.199	6	1,629	17.28%	6	338	12.77%	6	1,290	16.24%	6	3,257	16.27%
Gastro, high	0.320	36	130	1.38%	36	33	1.25%	36	101	1.27%	36	264	1.32%
Gastro, medium	0.268	27	297	3.15%	29	75	2.83%	27	263	3.31%	28	635	3.17%
Gastro, low	0.135	8	1,876	19.90%	10	402	15.19%	8	1,440	18.13%	8	3,718	18.57%
Hematological, extra high	4.752	42	3	0.03%	45	0	0.00%	39	4	0.05%	41	7	0.03%
Hematological, medium to very high	0.931	12	172	1.82%	14	45	1.70%	10	169	2.13%	11	386	1.93%
Hematological, low	0.370	33	140	1.48%	33	40	1.51%	32	118	1.49%	33	298	1.49%
Infectious, high to very high	0.300	28	261	2.77%	26	76	2.87%	29	216	2.72%	29	553	2.76%
Infectious, low to medium	0.188	31	333	3.53%	28	113	4.27%	31	254	3.20%	31	700	3.50%
Metabolic, high	0.468	21	228	2.42%	18	65	2.46%	18	209	2.63%	18	502	2.51%
Metabolic, medium	0.239	11	677	7.18%	13	187	7.06%	12	563	7.09%	12	1,427	7.13%
Pregnancy, complete	0.173	44	80	0.85%	41	26	0.98%	44	72	0.91%	43	178	0.89%
Pregnancy, incomplete	0.841	39	38	0.40%	37	9	0.34%	40	21	0.26%	38	68	0.34%
Psychiatric, high	0.643	4	584	6.19%	4	162	6.12%	4	535	6.74%	4	1,281	6.40%
Psychiatric, low to medium	0.225	1	3,526	37.40%	1	1,012	38.23%	1	3,126	39.37%	1	7,664	38.29%
Pulmonary, very high	0.816	15	175	1.86%	16	48	1.81%	17	123	1.55%	17	346	1.73%
Pulmonary, high	0.481	45	19	0.20%	44	7	0.26%	45	15	0.19%	45	41	0.20%
Pulmonary, medium	0.472	14	303	3.21%	17	77	2.91%	14	261	3.29%	14	641	3.20%
Pulmonary, low	0.131	9	1,630	17.29%	12	361	13.64%	11	1,196	15.06%	10	3,187	15.92%
Rare Diseases	2.664	40	9	0.10%	40	2	0.08%	38	9	0.11%	40	20	0.10%
Renal, extra high	4.191	10	46	0.49%	9	13	0.49%	9	46	0.58%	9	105	0.52%
Renal, medium	0.362	16	382	4.05%	15	109	4.12%	15	332	4.18%	16	823	4.11%
Renal, low	0.277	23	333	3.53%	25	86	3.25%	26	263	3.31%	25	682	3.41%
Skeletal, medium	0.254	2	2,604	27.62%	3	620	23.42%	2	2,058	25.92%	2	5,282	26.39%
Skeletal, very low to low	0.070	34	685	7.26%	35	152	5.74%	34	545	6.86%	34	1,382	6.90%
Skin, low to high	0.624	25	144	1.53%	19	46	1.74%	22	141	1.78%	24	331	1.65%
Skin, very low	0.169	20	638	6.77%	24	153	5.78%	25	487	6.13%	22	1,278	6.38%
Substance abuse, low	0.324	17	384	4.07%	11	156	5.89%	13	390	4.91%	15	930	4.65%
Substance abuse, very low	0.202	35	211	2.24%	34	60	2.27%	35	167	2.10%	35	438	2.19%
Disabled Children Add-On - CNS, high	1.388	37	26	0.28%	39	4	0.15%	41	11	0.14%	39	41	0.20%
Disabled Children Add-On - Gastro, high	1.508	18	74	0.78%	22	18	0.68%	23	58	0.73%	20	150	0.75%
Disabled Children Add-On - Pulmonary, very hig	0.419	41	36	0.38%	43	9	0.34%	42	34	0.43%	42	79	0.39%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,903	20.18%	N/A	642	24.25%	N/A	1,576	19.85%	N/A	4,121	20.59%
Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	1.364	N/A	11	7.75%	N/A	10	10.00%	N/A	11	7.05%	N/A	32	8.04%
Age 5 to 14 Male	0.701	N/A	15	10.56%	N/A	11	11.00%	N/A	15	9.62%	N/A	41	10.30%
Age 5 to 14 Female	0.872	N/A	6	4.23%	N/A	3	3.00%	N/A	8	5.13%	N/A	17	4.27%
Age 15 to 24 Male	0.522	N/A	10	7.04%	N/A	6	6.00%	N/A	6	3.85%	N/A	22	5.53%
Age 15 to 24 Female	0.831	N/A	8	5.63%	N/A	10	10.00%	N/A	4	2.56%	N/A	22	5.53%
Age 25 to 44 Male	0.797	N/A	15	10.56%	N/A	11	11.00%	N/A	18	11.54%	N/A	44	11.06%
Age 25 to 44 Female	1.120	N/A	9	6.34%	N/A	12	12.00%	N/A	23	14.74%	N/A	44	11.06%
Age 45 and Older Male	1.188	N/A	28	19.72%	N/A	19	19.00%	N/A	35	22.44%	N/A	82	20.60%
Age 45 and Older Female	1.249	N/A	40	28.17%	N/A	18	18.00%	N/A	36	23.08%	N/A	94	23.62%
Risk Adjustment Results													
Scored Members													
Member Months		9,429		2,647			7,941			20,017			
Unadjusted Plan Factor		0.938		0.934			0.944			0.940			
Budget Neutral Plan Factor		0.998		0.994			1.004			1.000			
Unscored Members													
Member Months		142		100			156			398			
Unadjusted Plan Factor		1.041		1.027			1.062			1.046			
Budget Neutral Plan Factor		0.996		0.982			1.015			1.000			
Total Members													
Member Months		9,571		2,747			8,097			20,415			
Unadjusted Plan Factor		0.940		0.936			0.946			0.942			
Budget Neutral Plan Factor		0.998		0.993			1.005			1.000			

Exhibit 3B

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - Central Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	10,033	100.00%	N/A	2,815	100.00%	N/A	8,042	100.00%	N/A	20,890	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	331	3.30%	N/A	296	10.52%	N/A	290	3.61%	N/A	917	4.39%
Age 5 to 14 Male	0.184	N/A	1,126	11.22%	N/A	374	13.29%	N/A	941	11.70%	N/A	2,441	11.69%
Age 5 to 14 Female	0.265	N/A	523	5.21%	N/A	151	5.36%	N/A	441	5.48%	N/A	1,115	5.34%
Age 15 to 24 Male	0.000	N/A	1,011	10.08%	N/A	295	10.48%	N/A	774	9.62%	N/A	2,080	9.96%
Age 15 to 24 Female	0.187	N/A	532	5.30%	N/A	152	5.40%	N/A	402	5.00%	N/A	1,086	5.20%
Age 25 to 44 Male	0.003	N/A	1,247	12.43%	N/A	298	10.59%	N/A	1,022	12.71%	N/A	2,567	12.29%
Age 25 to 44 Female	0.133	N/A	1,105	11.01%	N/A	217	7.71%	N/A	809	10.06%	N/A	2,131	10.20%
Age 45 and Older Male	0.107	N/A	1,795	17.89%	N/A	583	20.71%	N/A	1,561	19.41%	N/A	3,939	18.86%
Age 45 and Older Female	0.027	N/A	2,363	23.55%	N/A	449	15.95%	N/A	1,802	22.41%	N/A	4,614	22.09%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	37	0.37%	N/A	24	0.85%	N/A	37	0.46%	N/A	98	0.47%
Diagnosis Period Duration, 8 Months	0.320	N/A	18	0.18%	N/A	18	0.64%	N/A	27	0.34%	N/A	63	0.30%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	90	0.90%	N/A	65	2.31%	N/A	111	1.38%	N/A	266	1.27%
Diagnosis Period Duration, 12 Months	0.000	N/A	9,888	98.55%	N/A	2,708	96.20%	N/A	7,867	97.82%	N/A	20,463	97.96%
Homelessness Category													
Homelessness	0.931	N/A	94	0.94%	N/A	40	1.42%	N/A	93	1.16%	N/A	227	1.09%
Disease Categories													
Cancer, very high	3.067	10	71	0.71%	7	25	0.89%	20	35	0.44%	12	131	0.63%
Cancer, high	0.816	25	136	1.36%	24	35	1.24%	27	116	1.44%	26	287	1.37%
Cancer, medium	0.611	28	163	1.62%	27	41	1.46%	18	183	2.28%	25	387	1.85%
Cancer, low	0.318	39	90	0.90%	38	31	1.10%	40	73	0.91%	39	194	0.93%
Cardiovascular, very high	1.460	21	91	0.91%	23	21	0.75%	25	66	0.82%	23	178	0.85%
Cardiovascular, medium	0.584	2	1,091	10.87%	2	317	11.26%	2	850	10.57%	2	2,258	10.81%
Cardiovascular, extra low to low	0.081	8	3,289	32.78%	9	769	27.32%	7	2,598	32.31%	8	6,656	31.86%
Cerebrovascular, medium	0.115	41	167	1.66%	42	56	1.99%	41	144	1.79%	40	367	1.76%
CNS, high	0.781	30	116	1.16%	30	29	1.03%	28	112	1.39%	29	257	1.23%
CNS, medium	0.479	19	282	2.81%	19	77	2.74%	21	223	2.77%	20	582	2.79%
CNS, low	0.243	5	1,776	17.70%	5	491	17.44%	5	1,451	18.04%	5	3,718	17.80%
DD, low to medium	0.174	31	461	4.59%	31	119	4.23%	31	348	4.33%	31	928	4.44%
Diabetes, type 1	0.862	22	147	1.47%	22	37	1.31%	22	123	1.53%	21	307	1.47%
Diabetes, type 2	0.199	7	1,700	16.94%	8	356	12.65%	6	1,269	15.78%	7	3,325	15.92%
Gastro, high	0.320	36	156	1.55%	36	61	2.17%	36	124	1.54%	35	341	1.63%
Gastro, medium	0.268	29	362	3.61%	29	86	3.06%	30	264	3.28%	30	712	3.41%
Gastro, low	0.135	9	1,849	18.43%	13	404	14.35%	9	1,355	16.85%	9	3,608	17.27%
Hematological, extra high	4.752	45	1	0.01%	44	1	0.04%	39	6	0.07%	44	8	0.04%
Hematological, medium to very high	0.931	12	215	2.14%	18	43	1.53%	11	184	2.29%	11	442	2.12%
Hematological, low	0.370	32	185	1.84%	34	45	1.60%	35	111	1.38%	33	341	1.63%
Infectious, high to very high	0.300	26	363	3.62%	28	77	2.74%	26	319	3.97%	27	759	3.63%
Infectious, low to medium	0.188	33	353	3.52%	33	102	3.62%	32	262	3.26%	32	717	3.43%
Metabolic, high	0.468	17	323	3.22%	20	75	2.66%	15	269	3.34%	17	667	3.19%
Metabolic, medium	0.239	14	756	7.54%	15	201	7.14%	14	550	6.84%	15	1,507	7.21%
Pregnancy, complete	0.173	44	81	0.81%	45	23	0.82%	45	54	0.67%	45	158	0.76%
Pregnancy, incomplete	0.841	43	20	0.20%	36	15	0.53%	43	15	0.19%	41	50	0.24%
Psychiatric, high	0.643	4	911	9.08%	4	207	7.35%	4	710	8.83%	4	1,828	8.75%
Psychiatric, low to medium	0.225	1	3,996	39.83%	1	1,080	38.37%	1	3,164	39.34%	1	8,240	39.44%
Pulmonary, very high	0.816	18	180	1.79%	16	52	1.85%	17	138	1.72%	18	370	1.77%
Pulmonary, high	0.481	40	43	0.43%	41	15	0.53%	44	21	0.26%	43	79	0.38%
Pulmonary, medium	0.472	15	378	3.77%	11	125	4.44%	13	289	3.59%	14	792	3.79%
Pulmonary, low	0.131	13	1,492	14.87%	14	376	13.36%	12	1,131	14.06%	13	2,999	14.36%
Rare Diseases	2.664	37	15	0.15%	43	2	0.07%	34	17	0.21%	37	34	0.16%
Renal, extra high	4.191	6	91	0.91%	6	21	0.75%	8	50	0.62%	6	162	0.78%
Renal, medium	0.362	16	422	4.21%	17	113	4.01%	16	336	4.18%	16	871	4.17%
Renal, low	0.277	20	486	4.84%	25	102	3.62%	24	354	4.40%	22	942	4.51%
Skeletal, medium	0.254	3	2,450	24.42%	3	573	20.36%	3	1,932	24.02%	3	4,955	23.72%
Skeletal, very low to low	0.070	34	865	8.62%	35	206	7.32%	33	669	8.32%	34	1,740	8.33%
Skin, low to high	0.624	27	163	1.62%	21	55	1.95%	23	162	2.01%	24	380	1.82%
Skin, very low	0.169	24	675	6.73%	26	154	5.47%	29	508	6.32%	28	1,337	6.40%
Substance abuse, low	0.324	11	658	6.56%	10	184	6.54%	10	538	6.69%	10	1,380	6.61%
Substance abuse, very low	0.202	38	184	1.83%	37	55	1.95%	38	155	1.93%	38	394	1.89%
Disabled Children Add-On - CNS, high	1.388	35	36	0.36%	40	6	0.21%	37	28	0.35%	36	70	0.34%
Disabled Children Add-On - Gastro, high	1.508	23	82	0.82%	12	37	1.31%	19	72	0.90%	19	191	0.91%
Disabled Children Add-On - Pulmonary, very high	0.419	42	43	0.43%	39	22	0.78%	42	32	0.40%	42	97	0.46%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,788	17.82%	N/A	592	21.03%	N/A	1,499	18.64%	N/A	3,879	18.57%

Unscored Members													
Demographic Categories	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.364	N/A	10	7.58%	N/A	7	7.45%	N/A	5	4.27%	N/A	22	6.41%
Age 5 to 14 Male	0.701	N/A	6	4.55%	N/A	8	8.51%	N/A	11	9.40%	N/A	25	7.29%
Age 5 to 14 Female	0.872	N/A	2	1.52%	N/A	6	6.38%	N/A	1	0.85%	N/A	9	2.62%
Age 15 to 24 Male	0.522	N/A	9	6.82%	N/A	1	1.06%	N/A	12	10.26%	N/A	22	6.41%
Age 15 to 24 Female	0.831	N/A	2	1.52%	N/A	5	5.32%	N/A	4	3.42%	N/A	11	3.21%
Age 25 to 44 Male	0.797	N/A	9	6.82%	N/A	10	10.64%	N/A	16	13.68%	N/A	35	10.20%
Age 25 to 44 Female	1.120	N/A	15	11.36%	N/A	8	8.51%	N/A	10	8.55%	N/A	33	9.62%
Age 45 and Older Male	1.188	N/A	38	28.79%	N/A	24	25.53%	N/A	30	25.64%	N/A	92	26.82%
Age 45 and Older Female	1.249	N/A	41	31.06%	N/A	25	26.60%	N/A	28	23.93%	N/A	94	27.41%

Risk Adjustment Results													
Magnolia				Molina				United				Total	
Scored Members				Unscored Members				Unscored Members				Unscored Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	
Unscored Members				Unscored Members				Unscored Members				Unscored Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	
Total Members				Total Members				Total Members				Total Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	

Exhibit 3C

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - South Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	6,944	100.00%	N/A	2,364	100.00%	N/A	7,251	100.00%	N/A	16,559	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	224	3.23%	N/A	190	8.04%	N/A	229	3.16%	N/A	643	3.88%
Age 5 to 14 Male	0.184	N/A	894	12.87%	N/A	267	11.29%	N/A	878	12.11%	N/A	2,039	12.31%
Age 5 to 14 Female	0.265	N/A	421	6.06%	N/A	138	5.84%	N/A	388	5.35%	N/A	947	5.72%
Age 15 to 24 Male	0.000	N/A	644	9.27%	N/A	240	10.15%	N/A	665	9.17%	N/A	1,549	9.35%
Age 15 to 24 Female	0.187	N/A	334	4.81%	N/A	129	5.46%	N/A	349	4.81%	N/A	812	4.90%
Age 25 to 44 Male	0.003	N/A	740	10.66%	N/A	231	9.77%	N/A	824	11.36%	N/A	1,795	10.84%
Age 25 to 44 Female	0.133	N/A	671	9.66%	N/A	187	7.91%	N/A	715	9.86%	N/A	1,573	9.50%
Age 45 and Older Male	0.107	N/A	1,285	18.51%	N/A	482	20.39%	N/A	1,433	19.76%	N/A	3,200	19.32%
Age 45 and Older Female	0.027	N/A	1,731	24.93%	N/A	500	21.15%	N/A	1,770	24.41%	N/A	4,001	24.16%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	35	0.50%	N/A	31	1.31%	N/A	43	0.59%	N/A	109	0.66%
Diagnosis Period Duration, 8 Months	0.320	N/A	30	0.43%	N/A	19	0.80%	N/A	37	0.51%	N/A	86	0.52%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	88	1.27%	N/A	74	3.13%	N/A	100	1.38%	N/A	262	1.58%
Diagnosis Period Duration, 12 Months	0.000	N/A	6,791	97.80%	N/A	2,240	94.75%	N/A	7,071	97.52%	N/A	16,102	97.24%
Homelessness Category													
Homelessness	0.931	N/A	78	1.12%	N/A	49	2.07%	N/A	67	0.92%	N/A	194	1.17%
Disease Categories													
Cancer, very high	3.067	13	46	0.66%	9	19	0.80%	20	33	0.46%	14	98	0.59%
Cancer, high	0.816	21	124	1.79%	18	41	1.73%	27	100	1.38%	23	265	1.60%
Cancer, medium	0.611	32	89	1.28%	29	33	1.40%	26	134	1.85%	30	256	1.55%
Cancer, low	0.318	38	90	1.30%	38	37	1.57%	36	104	1.43%	36	231	1.40%
Cardiovascular, very high	1.460	27	55	0.79%	27	17	0.72%	30	46	0.63%	28	118	0.71%
Cardiovascular, medium	0.584	2	809	11.65%	2	291	12.31%	2	856	11.81%	2	1,956	11.81%
Cardiovascular, extra low to low	0.081	9	2,207	31.78%	11	647	27.37%	9	2,377	32.78%	9	5,231	31.59%
Cerebrovascular, medium	0.115	42	123	1.77%	41	44	1.86%	41	129	1.78%	41	296	1.79%
CNS, high	0.781	30	71	1.02%	34	22	0.93%	32	76	1.05%	32	169	1.02%
CNS, medium	0.479	17	259	3.73%	24	56	2.37%	16	238	3.28%	17	553	3.34%
CNS, low	0.243	5	1,341	19.31%	5	411	17.39%	5	1,398	19.28%	5	3,150	19.02%
DD, low to medium	0.174	29	400	5.76%	30	108	4.57%	29	400	5.52%	29	908	5.48%
Diabetes, type 1	0.862	18	134	1.93%	33	20	0.85%	17	120	1.65%	20	274	1.65%
Diabetes, type 2	0.199	6	1,130	16.27%	6	319	13.49%	6	1,143	15.76%	6	2,592	15.65%
Gastro, high	0.320	35	137	1.97%	32	55	2.33%	35	127	1.75%	35	319	1.93%
Gastro, medium	0.268	25	330	4.75%	26	96	4.06%	25	326	4.50%	26	752	4.54%
Gastro, low	0.135	8	1,421	20.46%	10	422	17.85%	8	1,444	19.91%	7	3,287	19.85%
Hematological, extra high	4.752	40	4	0.06%	42	1	0.04%	44	2	0.03%	42	7	0.04%
Hematological, medium to very high	0.931	15	147	2.12%	15	44	1.86%	14	129	1.78%	15	320	1.93%
Hematological, low	0.370	33	144	2.07%	31	48	2.03%	34	127	1.75%	34	319	1.93%
Infectious, high to very high	0.300	28	243	3.50%	23	95	4.02%	28	244	3.37%	27	582	3.51%
Infectious, low to medium	0.188	31	293	4.22%	28	117	4.95%	31	320	4.41%	31	730	4.41%
Metabolic, high	0.468	24	192	2.76%	25	56	2.37%	23	204	2.81%	24	452	2.73%
Metabolic, medium	0.239	16	520	7.49%	16	170	7.19%	15	498	6.87%	16	1,188	7.17%
Pregnancy, complete	0.173	44	46	0.66%	45	16	0.68%	45	50	0.69%	45	112	0.68%
Pregnancy, incomplete	0.841	41	17	0.24%	39	8	0.34%	40	22	0.30%	40	47	0.28%
Psychiatric, high	0.643	4	569	8.19%	4	185	7.83%	4	606	8.36%	4	1,360	8.21%
Psychiatric, low to medium	0.225	1	2,997	43.16%	1	927	39.21%	1	3,146	43.39%	1	7,070	42.70%
Pulmonary, very high	0.816	12	176	2.53%	14	54	2.28%	13	161	2.22%	13	391	2.36%
Pulmonary, high	0.481	45	16	0.23%	44	9	0.38%	43	23	0.32%	44	48	0.29%
Pulmonary, medium	0.472	14	292	4.21%	12	110	4.65%	12	317	4.37%	12	719	4.34%
Pulmonary, low	0.131	11	1,168	16.82%	13	360	15.23%	11	1,162	16.03%	11	2,690	16.24%
Rare Diseases	2.664	39	10	0.14%	40	2	0.08%	39	8	0.11%	39	20	0.12%
Renal, extra high	4.191	7	46	0.66%	7	15	0.63%	10	38	0.52%	10	99	0.60%
Renal, medium	0.362	19	314	4.52%	17	108	4.57%	19	280	3.86%	18	702	4.24%
Renal, low	0.277	22	364	5.24%	22	104	4.40%	22	348	4.80%	22	816	4.93%
Skeletal, medium	0.254	3	1,594	22.96%	3	506	21.40%	3	1,655	22.82%	3	3,755	22.68%
Skeletal, very low to low	0.070	34	691	9.95%	35	199	8.42%	33	791	10.91%	33	1,681	10.15%
Skin, low to high	0.624	26	139	2.00%	21	48	2.03%	24	150	2.07%	25	337	2.04%
Skin, very low	0.169	23	592	8.53%	19	188	7.95%	18	606	8.36%	21	1,386	8.37%
Substance abuse, low	0.324	10	543	7.82%	8	193	8.16%	7	629	8.67%	8	1,365	8.24%
Substance abuse, very low	0.202	37	151	2.17%	37	59	2.50%	37	154	2.12%	37	364	2.20%
Disabled Children Add-On - CNS, high	1.388	36	25	0.36%	36	9	0.38%	38	18	0.25%	38	52	0.31%
Disabled Children Add-On - Gastro, high	1.508	20	74	1.07%	20	21	0.89%	21	65	0.90%	19	160	0.97%
Disabled Children Add-On - Pulmonary, very hig	0.419	43	23	0.33%	43	11	0.47%	42	31	0.43%	43	65	0.39%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,257	18.10%	N/A	507	21.45%	N/A	1,247	17.20%	N/A	3,011	18.18%

Demographic Categories	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.364	N/A	6	4.20%	N/A	7	6.48%	N/A	11	6.88%	N/A	24	5.84%
Age 5 to 14 Male	0.701	N/A	14	9.79%	N/A	5	4.63%	N/A	8	5.00%	N/A	27	6.57%
Age 5 to 14 Female	0.872	N/A	3	2.10%	N/A	6	5.56%	N/A	7	4.38%	N/A	16	3.89%
Age 15 to 24 Male	0.522	N/A	9	6.29%	N/A	7	6.48%	N/A	7	4.38%	N/A	23	5.60%
Age 15 to 24 Female	0.831	N/A	6	4.20%	N/A	7	6.48%	N/A	7	4.38%	N/A	20	4.87%
Age 25 to 44 Male	0.797	N/A	17	11.89%	N/A	9	8.33%	N/A	14	8.75%	N/A	40	9.73%
Age 25 to 44 Female	1.120	N/A	17	11.89%	N/A	10	9.26%	N/A	27	16.88%	N/A	54	13.14%
Age 45 and Older Male	1.188	N/A	30	20.98%	N/A	31	28.70%	N/A	43	26.88%	N/A	104	25.30%
Age 45 and Older Female	1.249	N/A	41	28.67%	N/A	26	24.07%	N/A	36	22.50%	N/A	103	25.06%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		6,944	2,364	7,251
Unadjusted Plan Factor		1.067	1.049	1.032
Budget Neutral Plan Factor		1.017	1.000	0.983
Unscored Members				
Member Months		143	108	160
Unadjusted Plan Factor		1.047	1.069	1.085
Budget Neutral Plan Factor		0.981	1.001	1.016
Total Members				
Member Months		7,087	2,472	7,411
Unadjusted Plan Factor		1.067	1.049	1.033
Budget Neutral Plan Factor		1.017	1.000	0.984

Exhibit 3D Mississippi Division of Medicaid Risk Adjustment Results MA Adult - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.126	N/A	5,678	100.00%	N/A	3,710	100.00%	N/A	5,247	100.00%	N/A	14,635	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	18	0.32%	N/A	12	0.32%	N/A	20	0.38%	N/A	50	0.34%
Age 19 to 24 Female	0.460	N/A	499	8.79%	N/A	408	11.00%	N/A	523	9.97%	N/A	1,430	9.77%
Age 25 to 44 Male	0.111	N/A	283	4.98%	N/A	175	4.72%	N/A	295	5.62%	N/A	753	5.15%
Age 25 to 44 Female	0.305	N/A	4,263	75.08%	N/A	2,814	75.85%	N/A	3,903	74.39%	N/A	10,980	75.03%
Age 45 and Older Male	0.127	N/A	106	1.87%	N/A	69	1.86%	N/A	89	1.70%	N/A	264	1.80%
Age 45 and Older Female	0.326	N/A	509	8.96%	N/A	232	6.25%	N/A	417	7.95%	N/A	1,158	7.91%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	73	1.29%	N/A	58	1.56%	N/A	58	1.11%	N/A	189	1.29%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	5,605	98.71%	N/A	3,652	98.44%	N/A	5,189	98.89%	N/A	14,446	98.71%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	467	8.22%	N/A	331	8.92%	N/A	451	8.60%	N/A	1,249	8.53%
Homelessness Category													
Homelessness	0.472	N/A	2	0.04%	N/A	5	0.13%	N/A	2	0.04%	N/A	9	0.06%
Disease Categories													
Cancer, high to very high	2.607	11	34	0.60%	17	11	0.30%	17	20	0.38%	15	65	0.44%
Cancer, low to medium	0.394	29	52	0.92%	30	25	0.67%	29	43	0.82%	29	120	0.82%
Cardiovascular, very high	2.004	35	4	0.07%	34	2	0.05%	33	5	0.10%	33	11	0.08%
Cardiovascular, medium	0.547	9	234	4.12%	7	141	3.80%	7	233	4.44%	7	608	4.15%
Cardiovascular, low	0.442	13	176	3.10%	12	105	2.83%	12	151	2.88%	12	432	2.95%
Cardiovascular, extra low	0.118	5	1,567	27.60%	6	890	23.99%	6	1,253	23.88%	6	3,710	25.35%
Cerebrovascular, medium	0.456	37	10	0.18%	36	4	0.11%	37	14	0.27%	38	28	0.19%
CNS, high	0.552	34	16	0.28%	35	5	0.13%	36	12	0.23%	35	33	0.23%
CNS, medium	0.544	30	34	0.60%	32	14	0.38%	31	30	0.57%	31	78	0.53%
CNS, low	0.425	8	302	5.32%	10	155	4.18%	8	269	5.13%	9	726	4.96%
Diabetes, type 1	1.366	17	41	0.72%	16	23	0.62%	13	48	0.91%	17	112	0.77%
Diabetes, type 2	0.241	10	531	9.35%	9	277	7.47%	10	442	8.42%	10	1,250	8.54%
Eye, very low to extra low	0.271	24	112	1.97%	28	53	1.43%	26	93	1.77%	25	258	1.76%
Gastro, high	0.864	33	12	0.21%	37	0	0.00%	38	6	0.11%	37	18	0.12%
Gastro, medium	0.585	18	84	1.48%	18	49	1.32%	18	81	1.54%	18	214	1.46%
Gastro, low	0.278	4	811	14.28%	5	407	10.97%	5	625	11.91%	4	1,843	12.59%
Genital, extra low	0.232	12	351	6.18%	11	214	5.77%	11	332	6.33%	11	897	6.13%
Infectious, very high	1.355	38	2	0.04%	37	0	0.00%	39	1	0.02%	39	3	0.02%
Infectious, high	0.426	20	79	1.39%	22	45	1.21%	23	75	1.36%	22	199	1.36%
Infectious, low to medium	0.196	28	111	1.95%	25	78	2.10%	28	122	2.33%	28	311	2.13%
Metabolic, high	0.528	27	42	0.74%	24	32	0.86%	22	62	1.18%	24	136	0.93%
Metabolic, medium	0.296	14	251	4.42%	14	150	4.04%	16	211	4.02%	14	612	4.18%
Pregnancy, complete	0.295	6	615	10.83%	4	448	12.08%	4	654	12.46%	5	1,717	11.73%
Pregnancy, incomplete	1.430	2	185	3.26%	2	148	3.99%	2	183	3.49%	2	516	3.53%
Psychiatric, high	0.665	22	48	0.85%	23	28	0.75%	27	37	0.71%	23	113	0.77%
Psychiatric, medium	0.490	25	54	0.95%	26	31	0.84%	24	53	1.01%	26	138	0.94%
Psychiatric, low	0.200	3	1,227	21.61%	3	897	24.18%	3	1,306	24.89%	3	3,430	23.44%
Pulmonary, medium to very high	0.499	21	65	1.14%	19	55	1.48%	19	79	1.51%	20	199	1.36%
Pulmonary, low	0.271	7	488	8.59%	8	270	7.28%	9	394	7.51%	8	1,152	7.87%
Rare Diseases	6.883	36	1	0.02%	37	0	0.00%	32	2	0.04%	34	3	0.02%
Renal, extra high	2.600	39	1	0.02%	37	0	0.00%	40	0	0.00%	40	1	0.01%
Renal, medium	0.539	26	46	0.81%	27	27	0.73%	25	47	0.90%	27	120	0.82%
Renal, low	0.472	19	91	1.60%	21	44	1.19%	20	76	1.45%	19	211	1.44%
Skeletal, medium	0.270	1	1,917	33.76%	1	1,132	30.51%	1	1,727	32.91%	1	4,776	32.63%
Skeletal, low	0.251	23	124	2.18%	20	86	2.32%	21	139	2.65%	21	349	2.38%
Skeletal, very low	0.189	31	96	1.69%	29	56	1.51%	30	87	1.66%	30	239	1.63%
Skin, high	1.732	40	1	0.02%	33	3	0.08%	35	5	0.10%	36	9	0.06%
Skin, low	0.891	32	18	0.32%	31	10	0.27%	34	11	0.21%	32	39	0.27%
Skin, very low	0.178	16	352	6.20%	15	228	6.15%	15	352	6.71%	16	932	6.37%
Substance abuse, very low to low	0.299	15	247	4.35%	13	154	4.15%	14	212	4.04%	13	613	4.19%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,071	18.86%	N/A	742	20.00%	N/A	1,029	19.61%	N/A	2,842	19.42%
Unscored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 19 to 24 Male	0.331	N/A	10	2.84%	N/A	5	1.74%	N/A	6	1.83%	N/A	21	2.17%
Age 19 to 24 Female	1.115	N/A	20	5.68%	N/A	22	7.64%	N/A	15	4.57%	N/A	57	5.89%
Age 25 to 44 Male	0.639	N/A	65	18.47%	N/A	63	21.88%	N/A	50	15.24%	N/A	178	18.39%
Age 25 to 44 Female	0.993	N/A	212	60.23%	N/A	164	56.94%	N/A	215	65.55%	N/A	591	61.05%
Age 45 and Older Male	0.943	N/A	10	2.84%	N/A	12	4.17%	N/A	11	3.35%	N/A	33	3.41%
Age 45 and Older Female	1.245	N/A	35	9.94%	N/A	22	7.64%	N/A	31	9.45%	N/A	88	9.09%
Risk Adjustment Results													
	Magnolia			Molina			United			Total			
Scored Members													
Member Months	5,678			3,710			5,247			14,635			
Unadjusted Plan Factor	0.976			0.939			0.973			0.966			
Budget Neutral Plan Factor	1.011			0.972			1.008			1.000			
Unscored Members													
Member Months	352			288			328			968			
Unadjusted Plan Factor	0.939			0.930			0.954			0.942			
Budget Neutral Plan Factor	0.997			0.988			1.013			1.000			
Total Members													
Member Months	6,030			3,998			5,575			15,603			
Unadjusted Plan Factor	0.974			0.938			0.972			0.964			
Budget Neutral Plan Factor	1.010			0.973			1.008			1.000			

Exhibit 3E Mississippi Division of Medicaid Risk Adjustment Results MA Adult - Central Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period											
Scored Members											
Risk Weight	Magnolia			Molina			United			Total	
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months
Regression Intercept	0.126	N/A	6,354	100.00%	N/A	4,607	100.00%	N/A	5,985	100.00%	N/A
Demographic Categories											
Age 19 to 24 Male	0.000	N/A	8	0.13%	N/A	8	0.17%	N/A	10	0.17%	N/A
Age 19 to 24 Female	0.460	N/A	561	8.83%	N/A	496	10.77%	N/A	564	9.42%	N/A
Age 25 to 44 Male	0.111	N/A	299	4.71%	N/A	219	4.75%	N/A	269	4.49%	N/A
Age 25 to 44 Female	0.305	N/A	4,775	75.15%	N/A	3,513	76.25%	N/A	4,443	74.24%	N/A
Age 45 and Older Male	0.127	N/A	133	2.09%	N/A	71	1.54%	N/A	123	2.06%	N/A
Age 45 and Older Female	0.326	N/A	578	9.10%	N/A	300	6.51%	N/A	576	9.62%	N/A
Duration Category											
Diagnosis Period Duration, 6 Months	0.448	N/A	58	0.91%	N/A	70	1.52%	N/A	75	1.25%	N/A
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	6,296	99.09%	N/A	4,537	98.48%	N/A	5,910	98.75%	N/A
Non-Utilizer Category											
No Base Period Medical Utilization	(0.126)	N/A	521	8.20%	N/A	398	8.64%	N/A	488	8.15%	N/A
Duration Categories											
Homelessness	0.472	N/A	15	0.24%	N/A	4	0.09%	N/A	7	0.12%	N/A
Disease Categories											
Cancer, high to very high	2.607	23	17	0.27%	23	10	0.22%	18	22	0.37%	18
Cancer, low to medium	0.394	31	57	0.90%	31	37	0.80%	31	55	0.92%	31
Cardiovascular, very high	2.004	36	4	0.06%	38	0	0.00%	35	6	0.10%	36
Cardiovascular, medium	0.547	7	274	4.31%	7	173	3.76%	7	247	4.13%	7
Cardiovascular, low	0.442	13	188	2.96%	16	96	2.08%	15	150	2.51%	13
Cardiovascular, extra low	0.118	6	1,689	26.57%	6	1,110	24.09%	6	1,560	26.07%	6
Cerebrovascular, medium	0.456	38	10	0.16%	36	5	0.11%	39	7	0.12%	39
CNS, high	0.552	28	52	0.82%	25	39	0.85%	26	58	0.97%	27
CNS, medium	0.544	32	39	0.61%	32	24	0.52%	32	29	0.48%	32
CNS, low	0.425	9	332	5.23%	8	201	4.36%	8	312	5.21%	8
Diabetes, type 1	1.366	14	55	0.87%	17	55	0.84%	13	50	0.84%	17
Diabetes, type 2	0.241	8	617	9.71%	10	335	7.27%	9	500	8.35%	9
Eye, very low to extra low	0.271	21	168	2.64%	27	73	1.58%	25	121	2.02%	25
Gastro, high	0.864	39	4	0.06%	34	11	0.24%	36	12	0.20%	35
Gastro, medium	0.585	16	122	1.92%	13	83	1.80%	17	107	1.79%	15
Gastro, low	0.278	5	802	12.62%	5	524	11.37%	4	772	12.90%	5
Genital, extra low	0.232	12	433	6.81%	11	306	6.64%	12	372	6.22%	12
Infectious, very high	1.355	40	0	0.00%	38	0	0.00%	38	5	0.08%	40
Infectious, high	0.426	24	98	1.54%	19	75	1.63%	19	97	1.62%	21
Infectious, low to medium	0.196	30	122	1.92%	30	75	1.63%	29	130	2.17%	29
Metabolic, high	0.528	26	74	1.16%	26	39	0.85%	27	58	0.97%	26
Metabolic, medium	0.296	15	252	3.97%	15	155	3.36%	14	226	3.78%	14
Pregnancy, complete	0.295	4	776	12.21%	4	598	12.98%	5	721	12.05%	4
Pregnancy, incomplete	1.430	2	259	4.08%	2	205	4.45%	2	231	3.86%	2
Psychiatric, high	0.665	20	74	1.16%	22	42	0.91%	23	51	0.85%	22
Psychiatric, medium	0.490	22	91	1.43%	24	48	1.04%	22	73	1.22%	24
Psychiatric, low	0.200	3	1,512	23.80%	3	1,037	22.51%	3	1,475	24.64%	3
Pulmonary, medium to very high	0.499	19	102	1.61%	18	72	1.56%	20	79	1.32%	19
Pulmonary, low	0.271	10	504	7.93%	9	302	6.56%	10	442	7.39%	10
Rare Diseases	6.883	34	2	0.03%	38	0	0.00%	34	2	0.03%	34
Renal, extra high	2.600	37	3	0.05%	35	2	0.04%	40	1	0.02%	38
Renal, medium	0.539	27	64	1.01%	28	30	0.65%	28	51	0.85%	28
Renal, low	0.472	18	118	1.86%	21	61	1.32%	24	71	1.19%	20
Skeletal, medium	0.270	1	1,792	28.20%	1	1,198	26.00%	1	1,704	28.47%	1
Skeletal, low	0.251	25	165	2.60%	20	127	2.76%	21	146	2.44%	23
Skeletal, very low	0.189	29	127	2.00%	29	79	1.71%	30	125	2.09%	30
Skin, high	1.732	35	5	0.08%	37	1	0.02%	37	4	0.07%	37
Skin, low	0.891	33	23	0.36%	33	12	0.26%	33	17	0.28%	33
Skin, very low	0.178	17	392	6.17%	14	266	5.77%	16	362	6.05%	16
Substance abuse, very low to low	0.299	11	352	5.54%	12	236	5.12%	11	321	5.36%	11
Population Statistics											
No Classified Disease Categories	N/A	N/A	1,236	19.45%	N/A	1,026	22.27%	N/A	1,243	20.77%	N/A
Unscored Members											
Risk Weight	Magnolia			Molina			United			Total	
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months
Demographic Categories											
Age 19 to 24 Male	0.331	N/A	7	1.93%	N/A	6	2.11%	N/A	8	2.25%	N/A
Age 19 to 24 Female	1.115	N/A	19	5.25%	N/A	22	7.75%	N/A	16	4.49%	N/A
Age 25 to 44 Male	0.639	N/A	55	15.19%	N/A	39	13.73%	N/A	42	11.80%	N/A
Age 25 to 44 Female	0.993	N/A	234	64.64%	N/A	189	66.55%	N/A	231	64.89%	N/A
Age 45 and Older Male	0.943	N/A	11	3.04%	N/A	12	4.23%	N/A	28	7.87%	N/A
Age 45 and Older Female	1.245	N/A	36	9.94%	N/A	16	5.63%	N/A	31	8.71%	N/A
Risk Adjustment Results											
Magnolia			Molina			United			Total		
Scored Members			Scored Members			Scored Members			Scored Members		
Member Months			Member Months			Member Months			Member Months		
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor		
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor		
Unscored Members			Unscored Members			Unscored Members			Unscored Members		
Member Months			Member Months			Member Months			Member Months		
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor		
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor		
Total Members			Total Members			Total Members			Total Members		
Member Months			Member Months			Member Months			Member Months		
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor		
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor		

Exhibit 3F Mississippi Division of Medicaid Risk Adjustment Results MA Adult - South Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period																	
Scored Members																	
Regression Intercept	Risk Weight	Magnolia			Molina			United			Total						
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months				
0.126	N/A	N/A	6,018	100.00%	N/A	N/A	4,846	100.00%	N/A	N/A	6,989	100.00%	N/A	N/A	17,853	100.00%	
Demographic Categories																	
Age 19 to 24 Male	0.000	N/A	N/A	13	0.22%	N/A	N/A	22	0.45%	N/A	N/A	14	0.20%	N/A	N/A	49	0.27%
Age 19 to 24 Female	0.460	N/A	N/A	526	8.74%	N/A	N/A	443	9.14%	N/A	N/A	584	8.36%	N/A	N/A	1,553	8.70%
Age 25 to 44 Male	0.111	N/A	N/A	384	6.38%	N/A	N/A	314	6.48%	N/A	N/A	471	6.74%	N/A	N/A	1,169	6.55%
Age 25 to 44 Female	0.305	N/A	N/A	4,368	72.58%	N/A	N/A	3,556	73.38%	N/A	N/A	5,020	71.83%	N/A	N/A	12,944	72.50%
Age 45 and Older Male	0.127	N/A	N/A	155	2.58%	N/A	N/A	129	2.66%	N/A	N/A	211	3.02%	N/A	N/A	495	2.77%
Age 45 and Older Female	0.326	N/A	N/A	572	9.50%	N/A	N/A	382	7.88%	N/A	N/A	689	9.86%	N/A	N/A	1,643	9.20%
Duration Category																	
Diagnosis Period Duration, 6 Months	0.448	N/A	N/A	76	1.26%	N/A	N/A	69	1.42%	N/A	N/A	82	1.17%	N/A	N/A	227	1.27%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	N/A	5,942	98.74%	N/A	N/A	4,777	98.58%	N/A	N/A	6,907	98.83%	N/A	N/A	17,626	98.73%
Non-Utilizer Category																	
No Base Period Medical Utilization	(0.126)	N/A	N/A	506	8.41%	N/A	N/A	495	10.21%	N/A	N/A	581	8.31%	N/A	N/A	1,582	8.86%
Duration Categories																	
Homelessness	0.472	N/A	N/A	11	0.18%	N/A	N/A	6	0.12%	N/A	N/A	13	0.19%	N/A	N/A	30	0.17%
Disease Categories																	
Cancer, high to very high	2.607	19	22	0.37%	19	16	0.33%	18	28	0.40%	19	66	0.37%				
Cancer, low to medium	0.394	30	62	1.03%	29	80	1.01%	30	80	1.14%	30	191	1.07%				
Cardiovascular, very high	2.004	37	6	0.10%	34	5	0.10%	38	2	0.03%	36	13	0.07%				
Cardiovascular, medium	0.547	9	268	4.45%	9	185	3.82%	8	325	4.65%	8	778	4.36%				
Cardiovascular, low	0.442	13	227	3.77%	12	175	3.61%	12	288	4.12%	12	690	3.86%				
Cardiovascular, extra low	0.118	7	1,473	24.48%	6	1,032	21.30%	7	1,736	24.84%	7	4,241	23.76%				
Cerebrovascular, medium	0.456	40	5	0.08%	38	7	0.14%	39	8	0.11%	40	20	0.11%				
CNS, high	0.552	35	22	0.37%	33	22	0.45%	35	26	0.37%	35	70	0.39%				
CNS, medium	0.544	31	42	0.70%	28	38	0.78%	31	54	0.77%	31	134	0.75%				
CNS, low	0.425	6	432	7.18%	7	277	5.72%	5	527	7.54%	6	1,236	6.92%				
Diabetes, type 1	1.366	12	80	1.33%	17	34	0.70%	16	60	0.86%	16	174	0.97%				
Diabetes, type 2	0.241	10	536	8.91%	10	363	7.49%	10	638	9.13%	11	1,537	8.51%				
Eye, very low to extra low	0.271	23	168	2.79%	25	102	2.10%	27	153	2.19%	25	423	2.37%				
Gastro, high	0.864	32	20	0.33%	36	9	0.19%	33	24	0.34%	33	53	0.30%				
Gastro, medium	0.585	15	167	2.78%	14	122	2.52%	13	209	2.99%	13	498	2.79%				
Gastro, low	0.278	4	882	14.66%	5	608	12.55%	4	957	13.69%	4	2,447	13.71%				
Genital, extra low	0.232	14	427	7.10%	13	313	6.46%	14	431	6.17%	14	1,171	6.58%				
Infectious, very high	1.355	38	4	0.07%	39	2	0.04%	40	2	0.03%	39	8	0.04%				
Infectious, high	0.426	26	89	1.48%	26	60	1.24%	26	108	1.55%	26	257	1.44%				
Infectious, low to medium	0.196	28	154	2.56%	27	110	2.27%	28	186	2.66%	28	450	2.52%				
Metabolic, high	0.528	22	90	1.50%	22	61	1.26%	22	96	1.37%	22	247	1.38%				
Metabolic, medium	0.296	18	221	3.67%	16	161	3.32%	17	274	3.92%	17	656	3.67%				
Pregnancy, complete	0.295	5	691	11.48%	4	604	12.46%	6	722	10.33%	5	2,017	11.30%				
Pregnancy, incomplete	1.430	3	192	3.19%	3	178	3.67%	3	189	2.70%	3	559	3.13%				
Psychiatric, high	0.665	25	62	1.03%	24	44	0.91%	23	75	1.07%	24	181	1.01%				
Psychiatric, medium	0.490	24	92	1.53%	23	61	1.26%	24	97	1.39%	23	250	1.40%				
Psychiatric, low	0.200	2	1,775	29.49%	2	1,423	29.36%	2	2,318	33.17%	2	5,516	30.90%				
Pulmonary, medium to very high	0.499	21	99	1.65%	20	78	1.61%	19	140	2.00%	20	317	1.78%				
Pulmonary, low	0.271	8	549	9.12%	8	375	7.74%	11	549	7.86%	9	1,473	8.25%				
Rare Diseases	6.883	33	2	0.03%	32	2	0.04%	32	4	0.06%	32	8	0.04%				
Renal, extra high	2.600	39	2	0.03%	40	1	0.02%	37	2	0.03%	38	5	0.03%				
Renal, medium	0.539	29	47	0.78%	29	63	0.68%	29	63	0.90%	29	143	0.80%				
Renal, low	0.472	17	141	2.34%	21	78	1.61%	20	146	2.09%	18	365	2.04%				
Skeletal, medium	0.270	1	1,583	26.30%	1	1,122	23.15%	1	1,845	26.40%	1	4,550	25.49%				
Skeletal, low	0.251	20	215	3.57%	18	169	3.49%	21	236	3.38%	21	620	3.47%				
Skeletal, very low	0.189	27	189	3.14%	30	102	2.10%	25	247	3.53%	27	538	3.01%				
Skin, high	1.732	36	7	0.12%	37	2	0.04%	36	5	0.07%	37	14	0.08%				
Skin, low	0.891	34	15	0.25%	35	10	0.21%	34	21	0.30%	34	46	0.26%				
Skin, very low	0.178	16	456	7.58%	15	342	7.06%	15	539	7.71%	15	1,337	7.49%				
Substance abuse, very low to low	0.299	11	432	7.18%	11	287	5.92%	9	522	7.47%	10	1,241	6.95%				
Population Statistics																	
No Classified Disease Categories	N/A	N/A	N/A	1,082	17.98%	N/A	N/A	992	20.47%	N/A	N/A	1,271	18.19%	N/A	N/A	3,345	18.74%
Unscored Members																	
Regression Intercept	Risk Weight	Magnolia			Molina			United			Total						
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months				
Demographic Categories																	
Age 19 to 24 Male	0.331	N/A	N/A	3	0.79%	N/A	N/A	7	2.13%	N/A	N/A	6	1.53%	N/A	N/A	16	1.46%
Age 19 to 24 Female	1.115	N/A	N/A	26	6.86%	N/A	N/A	34	10.33%	N/A	N/A	38	9.72%	N/A	N/A	98	8.92%
Age 25 to 44 Male	0.639	N/A	N/A	72	19.00%	N/A	N/A	55	16.72%	N/A	N/A	68	17.39%	N/A	N/A	195	17.74%
Age 25 to 44 Female	0.993	N/A	N/A	229	60.42%	N/A	N/A	191	58.05%	N/A	N/A	228	58.31%	N/A	N/A	648	58.96%
Age 45 and Older Male	0.943	N/A	N/A	18	4.75%	N/A	N/A	18	5.47%	N/A	N/A	17	4.35%	N/A	N/A	53	4.82%
Age 45 and Older Female	1.245	N/A	N/A	31	8.18%	N/A	N/A	24	7.29%	N/A	N/A	34	8.70%	N/A	N/A	89	8.10%
Risk Adjustment Results																	
Magnolia			Molina			United			Total								
Scored Members			Scored Members			Scored Members			Scored Members								
Member Months			Member Months			Member Months			Member Months								
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor								
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor								
Unscored Members			Unscored Members			Unscored Members			Unscored Members								
Member Months			Member Months			Member Months			Member Months								
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor								
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor								
Total Members			Total Members			Total Members			Total Members								
Member Months			Member Months			Member Months			Member Months								
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor								
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor								

Exhibit 3G Mississippi Division of Medicaid Risk Adjustment Results MA Children - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	29,017	100.00%	N/A	16,168	100.00%	N/A	27,064	100.00%	N/A	72,249	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	6,696	23.08%	N/A	5,302	32.79%	N/A	6,619	24.46%	N/A	18,617	25.77%
Age 5 to 14 Male	0.038	N/A	7,852	27.06%	N/A	4,065	25.14%	N/A	7,140	26.38%	N/A	19,057	26.38%
Age 5 to 14 Female	0.112	N/A	8,132	28.02%	N/A	4,180	25.85%	N/A	7,408	27.37%	N/A	19,720	27.29%
Age 15 to 18 Male	0.000	N/A	3,100	10.68%	N/A	1,276	7.89%	N/A	2,884	10.66%	N/A	7,260	10.05%
Age 15 to 18 Female	0.257	N/A	3,237	11.16%	N/A	1,345	8.32%	N/A	3,013	11.13%	N/A	7,595	10.51%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	188	0.65%	N/A	132	0.82%	N/A	191	0.71%	N/A	511	0.71%
Diagnosis Period Duration, 7 Months	0.098	N/A	194	0.67%	N/A	154	0.95%	N/A	175	0.65%	N/A	523	0.72%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	28,635	98.68%	N/A	15,882	98.23%	N/A	26,698	98.65%	N/A	71,215	98.57%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	1,633	5.63%	N/A	1,121	6.93%	N/A	1,465	5.41%	N/A	4,219	5.84%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	13	32	0.11%	14	16	0.10%	11	43	0.16%	12	91	0.13%
Cardiovascular, very high	1.724	39	3	0.01%	39	2	0.01%	37	4	0.01%	37	9	0.01%
Cardiovascular, medium	0.733	11	159	0.55%	10	80	0.49%	12	137	0.51%	11	376	0.52%
Cardiovascular, low	0.450	9	297	1.02%	8	191	1.18%	9	306	1.13%	9	794	1.10%
Cardiovascular, extra low	0.412	12	254	0.88%	17	104	0.64%	13	229	0.85%	13	587	0.81%
Cerebrovascular, medium	2.021	36	5	0.02%	41	1	0.01%	39	1	0.00%	39	7	0.01%
CNS, high	2.129	37	3	0.01%	34	4	0.02%	36	6	0.02%	36	13	0.02%
CNS, medium	1.173	27	29	0.10%	28	16	0.10%	27	36	0.13%	26	81	0.11%
CNS, low	0.751	5	478	1.65%	5	226	1.40%	5	447	1.65%	5	1,151	1.59%
DD, low	1.630	14	53	0.18%	12	32	0.20%	17	45	0.17%	14	130	0.18%
DD, medium	6.081	41	0	0.00%	31	2	0.01%	41	0	0.00%	41	2	0.00%
Diabetes, type 1	3.867	6	60	0.21%	9	19	0.12%	6	70	0.26%	6	149	0.21%
Diabetes, type 2	0.479	30	60	0.21%	32	24	0.15%	33	49	0.18%	31	133	0.18%
Eye, very low to extra low	0.256	25	153	0.53%	25	88	0.54%	26	166	0.61%	25	407	0.56%
Gastro, high	3.331	24	14	0.05%	22	9	0.06%	22	17	0.06%	24	40	0.06%
Gastro, medium	1.271	20	48	0.17%	21	26	0.16%	23	42	0.16%	21	116	0.16%
Gastro, low	0.340	4	1,265	4.36%	4	719	4.45%	4	1,259	4.65%	4	3,243	4.49%
Genital, extra low	0.472	18	153	0.53%	11	118	0.73%	16	170	0.63%	15	441	0.61%
Hematological, extra high	3.863	35	3	0.01%	38	1	0.01%	30	7	0.03%	34	11	0.02%
Hematological, very high	3.011	34	5	0.02%	37	2	0.01%	35	5	0.02%	35	12	0.02%
Hematological, low to medium	0.381	16	199	0.69%	15	115	0.71%	18	190	0.70%	18	504	0.70%
Infectious, high to very high	0.682	26	57	0.20%	27	31	0.19%	31	39	0.14%	28	127	0.18%
Infectious, medium	0.176	21	345	1.19%	18	233	1.44%	21	324	1.20%	19	902	1.25%
Metabolic, high	0.754	15	103	0.35%	20	44	0.27%	15	110	0.41%	17	257	0.36%
Metabolic, medium	0.391	29	76	0.26%	26	74	0.35%	28	74	0.27%	29	206	0.29%
Pregnancy, complete	0.277	31	86	0.30%	33	41	0.25%	32	85	0.31%	32	212	0.29%
Pregnancy, incomplete	3.124	10	41	0.14%	16	14	0.09%	10	43	0.16%	10	98	0.14%
Psychiatric, high	3.507	28	9	0.03%	36	2	0.01%	24	14	0.05%	27	25	0.03%
Psychiatric, medium	1.859	7	124	0.43%	6	67	0.41%	8	103	0.38%	7	294	0.41%
Psychiatric, low	0.930	1	4,356	15.01%	1	1,980	12.25%	1	4,058	14.99%	1	10,394	14.39%
Pulmonary, very high	1.975	23	24	0.08%	19	19	0.12%	19	34	0.13%	20	77	0.11%
Pulmonary, medium to high	0.457	17	159	0.55%	13	110	0.68%	14	183	0.68%	16	452	0.63%
Pulmonary, low	0.321	3	2,554	8.80%	3	1,224	7.57%	3	2,272	8.39%	3	6,050	8.37%
Rare Diseases	7.505	32	3	0.01%	35	1	0.01%	34	3	0.01%	33	7	0.01%
Renal, extra high	15.124	41	0	0.00%	30	1	0.01%	41	0	0.00%	38	1	0.00%
Renal, medium	1.178	33	19	0.07%	29	13	0.08%	29	24	0.09%	30	56	0.08%
Renal, low	0.277	19	238	0.82%	23	107	0.66%	25	164	0.61%	22	509	0.70%
Skeletal, very low to medium	0.319	2	4,684	16.14%	2	2,433	15.05%	2	4,613	17.04%	2	11,730	16.24%
Skin, high	0.773	38	7	0.02%	40	3	0.02%	38	7	0.03%	40	17	0.02%
Skin, low	0.487	40	8	0.03%	42	2	0.01%	40	2	0.01%	42	12	0.02%
Skin, very low	0.190	8	1,081	3.73%	7	612	3.79%	7	1,057	3.91%	8	2,750	3.81%
Substance abuse, very low to low	1.082	22	45	0.16%	24	21	0.13%	20	61	0.23%	23	127	0.18%
Population Statistics													
No Classified Disease Categories	N/A	N/A	15,348	52.89%	N/A	8,836	54.65%	N/A	14,189	52.43%	N/A	38,373	53.11%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	244	26.87%	N/A	189	27.39%	N/A	224	25.84%	N/A	657	26.65%
Age 5 to 14 Male	0.957	N/A	233	25.66%	N/A	188	27.25%	N/A	239	27.57%	N/A	660	26.77%
Age 5 to 14 Female	0.953	N/A	265	29.19%	N/A	183	26.52%	N/A	218	25.14%	N/A	666	27.02%
Age 15 to 18 Male	0.944	N/A	72	7.93%	N/A	67	9.71%	N/A	63	7.27%	N/A	202	8.19%
Age 15 to 18 Female	1.321	N/A	94	10.35%	N/A	63	9.13%	N/A	123	14.19%	N/A	280	11.36%
Risk Adjustment Results													
Magnolia				Molina				United				Total	
Scored Members				Scored Members				Scored Members					
Member Months				Member Months				Member Months				72,249	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				1.004	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	
Unscored Members				Unscored Members				Unscored Members					
Member Months				Member Months				Member Months				2,465	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				1.001	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	
Total Members				Total Members				Total Members				74,714	
Member Months				Member Months				Member Months				74,714	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				1.004	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	

Exhibit 3H

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - Central Region - 03 to 04 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	34,402	100.00%	N/A	19,834	100.00%	N/A	31,627	100.00%	N/A	85,863	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	7,760	22.56%	N/A	6,491	32.73%	N/A	8,046	25.44%	N/A	22,297	25.97%
Age 5 to 14 Male	0.038	N/A	9,226	26.82%	N/A	4,902	24.72%	N/A	8,271	26.15%	N/A	22,399	26.09%
Age 5 to 14 Female	0.112	N/A	9,565	27.80%	N/A	5,107	25.75%	N/A	8,479	26.81%	N/A	23,151	26.96%
Age 15 to 18 Male	0.000	N/A	3,805	11.06%	N/A	1,674	8.44%	N/A	3,300	10.43%	N/A	8,779	10.22%
Age 15 to 18 Female	0.257	N/A	4,046	11.76%	N/A	1,660	8.37%	N/A	3,531	11.16%	N/A	9,237	10.76%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	180	0.52%	N/A	165	0.83%	N/A	203	0.64%	N/A	548	0.64%
Diagnosis Period Duration, 7 Months	0.098	N/A	195	0.57%	N/A	156	0.79%	N/A	172	0.54%	N/A	523	0.61%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	34,027	98.91%	N/A	19,513	98.39%	N/A	31,252	98.81%	N/A	84,792	98.75%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	2,047	5.95%	N/A	1,467	7.40%	N/A	1,866	5.90%	N/A	5,380	6.27%
Homelessness Category													
Homelessness Category	1.243	N/A	3	0.01%	N/A	2	0.01%	N/A	5	0.02%	N/A	10	0.01%
Disease Categories													
Cancer, medium to very high	2.895	12	43	0.12%	11	23	0.12%	12	40	0.13%	12	106	0.12%
Cardiovascular, very high	1.724	37	5	0.01%	38	1	0.01%	39	5	0.02%	38	11	0.01%
Cardiovascular, medium	0.733	16	133	0.39%	12	90	0.45%	14	143	0.45%	15	366	0.43%
Cardiovascular, low	0.450	9	404	1.17%	9	202	1.02%	9	372	1.18%	9	978	1.14%
Cardiovascular, extra low	0.412	10	328	0.95%	14	147	0.74%	11	301	0.95%	11	776	0.90%
Cerebrovascular, medium	2.021	40	3	0.01%	37	1	0.01%	41	3	0.01%	40	7	0.01%
CNS, high	2.129	28	20	0.06%	32	6	0.03%	26	20	0.06%	28	46	0.05%
CNS, medium	1.173	25	53	0.15%	25	19	0.10%	27	35	0.11%	26	107	0.12%
CNS, low	0.751	5	578	1.68%	5	318	1.60%	5	549	1.74%	5	1,445	1.68%
DD, low	1.630	14	67	0.19%	18	32	0.16%	13	69	0.22%	14	168	0.20%
DD, medium	6.081	39	1	0.00%	40	0	0.00%	40	1	0.00%	41	2	0.00%
Diabetes, type 1	3.867	7	75	0.22%	8	31	0.16%	6	79	0.25%	7	185	0.22%
Diabetes, type 2	0.479	30	72	0.21%	31	31	0.16%	29	67	0.21%	30	170	0.20%
Eye, very low to extra low	0.256	24	280	0.81%	23	111	0.56%	23	224	0.71%	23	615	0.72%
Gastro, high	3.331	23	22	0.06%	27	6	0.03%	24	17	0.05%	24	45	0.05%
Gastro, medium	1.271	18	68	0.20%	22	27	0.14%	22	47	0.15%	22	142	0.17%
Gastro, low	0.340	4	1,499	4.36%	4	952	4.80%	4	1,487	4.70%	4	3,938	4.59%
Genital, extra low	0.472	17	202	0.59%	13	134	0.68%	16	179	0.57%	17	515	0.60%
Hematological, extra high	3.863	38	2	0.01%	33	3	0.02%	36	3	0.01%	35	8	0.01%
Hematological, very high	3.011	41	2	0.01%	36	1	0.01%	38	3	0.01%	39	6	0.01%
Hematological, low to medium	0.381	15	263	0.76%	15	156	0.79%	18	221	0.70%	16	640	0.75%
Infectious, high to very high	0.682	33	43	0.12%	29	25	0.13%	31	36	0.11%	31	104	0.12%
Infectious, medium	0.176	21	448	1.30%	17	310	1.56%	20	412	1.30%	19	1,170	1.36%
Metabolic, high	0.754	20	110	0.32%	20	55	0.28%	19	103	0.33%	20	268	0.31%
Metabolic, medium	0.391	27	116	0.34%	28	51	0.26%	28	91	0.29%	27	258	0.30%
Pregnancy, complete	0.277	32	107	0.31%	30	54	0.27%	32	83	0.26%	32	244	0.28%
Pregnancy, incomplete	3.124	11	43	0.12%	16	19	0.10%	10	42	0.13%	10	104	0.12%
Psychiatric, high	3.507	26	16	0.05%	26	6	0.03%	25	14	0.04%	25	36	0.04%
Psychiatric, medium	1.859	6	162	0.47%	6	86	0.43%	7	143	0.45%	6	391	0.46%
Psychiatric, low	0.930	1	5,184	15.07%	1	2,190	11.04%	1	4,552	14.39%	1	11,926	13.89%
Pulmonary, very high	1.975	29	20	0.06%	24	13	0.07%	30	15	0.05%	29	48	0.06%
Pulmonary, medium to high	0.457	13	251	0.73%	10	170	0.86%	15	216	0.68%	13	637	0.74%
Pulmonary, low	0.321	3	2,919	8.48%	3	1,441	7.27%	3	2,713	8.58%	3	7,073	8.24%
Rare Diseases	7.505	31	4	0.01%	40	0	0.00%	35	2	0.01%	34	6	0.01%
Renal, extra high	15.124	35	1	0.00%	40	0	0.00%	34	1	0.00%	36	2	0.00%
Renal, medium	1.178	34	18	0.05%	34	7	0.04%	33	15	0.05%	33	40	0.05%
Renal, low	0.277	19	301	0.87%	21	147	0.74%	21	249	0.79%	21	697	0.81%
Skeletal, very low to medium	0.319	2	4,719	13.72%	2	2,699	13.61%	2	4,686	14.82%	2	12,104	14.10%
Skin, high	0.773	42	3	0.01%	39	2	0.01%	42	2	0.01%	42	7	0.01%
Skin, low	0.487	36	21	0.06%	35	16	0.08%	37	19	0.06%	37	56	0.07%
Skin, very low	0.190	8	1,221	3.55%	7	703	3.54%	8	1,126	3.56%	8	3,050	3.55%
Substance abuse, very low to low	1.082	22	71	0.21%	19	42	0.21%	17	78	0.25%	18	191	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	18,545	53.91%	N/A	11,065	55.79%	N/A	17,141	54.20%	N/A	46,751	54.45%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	198	29.12%	N/A	200	30.08%	N/A	177	23.38%	N/A	575	27.35%
Age 5 to 14 Male	0.957	N/A	180	26.47%	N/A	184	27.67%	N/A	215	28.40%	N/A	579	27.55%
Age 5 to 14 Female	0.953	N/A	189	27.79%	N/A	164	24.66%	N/A	209	27.61%	N/A	562	26.74%
Age 15 to 18 Male	0.944	N/A	51	7.50%	N/A	55	8.27%	N/A	73	9.64%	N/A	179	8.52%
Age 15 to 18 Female	1.321	N/A	62	9.12%	N/A	62	9.32%	N/A	83	10.96%	N/A	207	9.85%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia		Molina		United		Total	
Scored Members									
Member Months		34,402		19,834		31,627		85,863	
Unadjusted Plan Factor		1.004		0.952		1.005		0.993	
Budget Neutral Plan Factor		1.012		0.959		1.013		1.000	
Unscored Members									
Member Months		680		665		757		2,102	
Unadjusted Plan Factor		0.994		0.994		0.999		0.996	
Budget Neutral Plan Factor		0.998		0.999		1.003		1.000	
Total Members									
Member Months		35,082		20,499		32,384		87,965	
Unadjusted Plan Factor		1.004		0.953		1.005		0.993	
Budget Neutral Plan Factor		1.012		0.961		1.012		1.000	

Exhibit 3I
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - South Region - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	28,413	100.00%	N/A	18,084	100.00%	N/A	30,615	100.00%	N/A	77,112	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	6,126	21.56%	N/A	5,852	32.36%	N/A	6,849	22.37%	N/A	18,827	24.42%
Age 5 to 14 Male	0.038	N/A	7,881	27.74%	N/A	4,555	25.19%	N/A	8,273	27.02%	N/A	20,709	26.86%
Age 5 to 14 Female	0.112	N/A	8,069	28.40%	N/A	4,541	25.11%	N/A	8,517	27.82%	N/A	21,127	27.40%
Age 15 to 18 Male	0.000	N/A	3,068	10.80%	N/A	1,553	8.59%	N/A	3,412	11.14%	N/A	8,033	10.42%
Age 15 to 18 Female	0.257	N/A	3,269	11.51%	N/A	1,583	8.75%	N/A	3,564	11.64%	N/A	8,416	10.91%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	199	0.70%	N/A	139	0.77%	N/A	201	0.66%	N/A	539	0.70%
Diagnosis Period Duration, 7 Months	0.098	N/A	160	0.56%	N/A	151	0.83%	N/A	181	0.59%	N/A	492	0.64%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	28,054	98.74%	N/A	17,794	98.40%	N/A	30,233	98.75%	N/A	76,081	98.66%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	1,614	5.68%	N/A	1,324	7.32%	N/A	1,691	5.52%	N/A	4,629	6.00%
Homelessness Category													
Homelessness Cases	1.243	N/A	1	0.00%	N/A	1	0.01%	N/A	2	0.01%	N/A	4	0.01%
Disease Categories													
Cancer, medium to very high	2.895	15	31	0.11%	9	26	0.14%	12	41	0.13%	11	98	0.13%
Cardiovascular, very high	1.724	41	0	0.00%	37	3	0.02%	39	4	0.01%	39	7	0.01%
Cardiovascular, medium	0.733	13	130	0.46%	15	67	0.37%	19	119	0.39%	15	316	0.41%
Cardiovascular, low	0.450	10	271	0.95%	10	164	0.91%	9	324	1.06%	9	759	0.98%
Cardiovascular, extra low	0.412	12	248	0.87%	16	114	0.63%	10	300	0.98%	13	662	0.86%
Cerebrovascular, medium	2.021	39	1	0.00%	41	0	0.00%	36	6	0.02%	38	7	0.01%
CNS, high	2.129	30	9	0.03%	36	4	0.02%	38	5	0.02%	35	18	0.02%
CNS, medium	1.173	21	50	0.18%	27	23	0.13%	24	54	0.18%	25	127	0.16%
CNS, low	0.751	6	403	1.42%	6	277	1.53%	6	447	1.46%	6	1,127	1.46%
DD, low	1.630	24	34	0.12%	19	27	0.15%	14	61	0.20%	18	122	0.16%
DD, medium	6.081	37	1	0.00%	41	0	0.00%	42	0	0.00%	41	1	0.00%
Diabetes, type 1	3.867	5	108	0.38%	5	54	0.30%	5	145	0.47%	5	307	0.40%
Diabetes, type 2	0.479	32	37	0.13%	34	23	0.13%	33	44	0.14%	32	104	0.13%
Eye, very low to extra low	0.256	27	184	0.65%	25	130	0.72%	26	225	0.73%	26	539	0.70%
Gastro, high	3.331	25	16	0.06%	24	11	0.06%	18	27	0.09%	21	54	0.07%
Gastro, medium	1.271	20	48	0.17%	23	31	0.17%	21	58	0.19%	22	137	0.18%
Gastro, low	0.340	4	1,580	5.56%	4	1,046	5.78%	4	1,831	5.88%	4	4,457	5.78%
Genital, extra low	0.472	16	156	0.55%	12	111	0.61%	16	199	0.65%	16	466	0.60%
Hematological, extra high	3.863	36	2	0.01%	32	4	0.02%	37	3	0.01%	36	9	0.01%
Hematological, very high	3.011	31	6	0.02%	30	7	0.04%	32	7	0.02%	31	20	0.03%
Hematological, low to medium	0.381	19	182	0.64%	18	121	0.67%	22	183	0.60%	20	486	0.63%
Infectious, high to very high	0.682	29	37	0.13%	29	32	0.18%	28	66	0.22%	29	135	0.18%
Infectious, medium	0.176	22	322	1.13%	20	241	1.33%	23	361	1.18%	24	924	1.20%
Metabolic, high	0.754	18	94	0.33%	13	69	0.38%	17	123	0.40%	17	286	0.37%
Metabolic, medium	0.391	26	134	0.47%	14	128	0.71%	25	157	0.51%	23	419	0.54%
Pregnancy, complete	0.277	33	55	0.19%	35	39	0.22%	34	75	0.24%	33	169	0.22%
Pregnancy, incomplete	3.124	9	46	0.16%	17	15	0.08%	11	39	0.13%	10	100	0.13%
Psychiatric, high	3.507	23	16	0.06%	31	5	0.03%	29	11	0.04%	27	32	0.04%
Psychiatric, medium	1.859	7	148	0.52%	7	93	0.51%	7	164	0.54%	7	405	0.53%
Psychiatric, low	0.930	1	4,962	17.46%	1	2,490	13.77%	1	5,518	18.02%	1	12,970	16.82%
Pulmonary, very high	1.975	28	15	0.05%	28	12	0.07%	27	25	0.08%	28	52	0.07%
Pulmonary, medium to high	0.457	11	249	0.88%	11	154	0.85%	15	212	0.69%	12	615	0.80%
Pulmonary, low	0.321	3	2,284	8.04%	3	1,251	6.92%	3	2,508	8.19%	3	6,043	7.84%
Rare Diseases	7.505	34	2	0.01%	26	4	0.02%	30	4	0.01%	30	10	0.01%
Renal, extra high	15.124	41	0	0.00%	33	1	0.01%	35	1	0.00%	37	2	0.00%
Renal, medium	1.178	35	11	0.04%	38	3	0.02%	31	21	0.07%	34	35	0.05%
Renal, low	0.277	17	264	0.93%	21	149	0.82%	20	281	0.92%	19	694	0.90%
Skeletal, very low to medium	0.319	2	3,232	11.38%	2	1,857	10.27%	2	3,628	11.85%	2	8,717	11.30%
Skin, high	0.773	38	3	0.01%	39	4	0.02%	40	6	0.02%	40	13	0.02%
Skin, low	0.487	40	3	0.01%	40	2	0.01%	41	6	0.02%	42	11	0.01%
Skin, very low	0.190	8	1,228	4.32%	8	727	4.02%	8	1,345	4.39%	8	3,300	4.28%
Substance abuse, very low to low	1.082	14	86	0.30%	22	37	0.20%	13	95	0.31%	14	218	0.28%
Population Statistics													
No Classified Disease Categories	N/A	N/A	15,172	53.40%	N/A	10,137	56.06%	N/A	16,212	52.95%	N/A	41,521	53.85%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	248	28.28%	N/A	272	32.89%	N/A	236	27.35%	N/A	756	29.45%
Age 5 to 14 Male	0.957	N/A	260	29.65%	N/A	195	23.58%	N/A	226	26.19%	N/A	681	26.53%
Age 5 to 14 Female	0.953	N/A	229	26.11%	N/A	210	25.39%	N/A	215	24.91%	N/A	654	25.48%
Age 15 to 18 Male	0.944	N/A	56	6.39%	N/A	79	9.55%	N/A	80	9.27%	N/A	215	8.38%
Age 15 to 18 Female	1.321	N/A	84	9.58%	N/A	71	8.59%	N/A	106	12.28%	N/A	261	10.17%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia		Molina		United		Total	
Scored Members									
Member Months		28,413		18,084		30,615		77,112	
Unadjusted Plan Factor		1.026		0.982		1.046		1.023	
Budget Neutral Plan Factor		1.002		0.960		1.022		1.000	
Unscored Members									
Member Months		877		827		863		2,567	
Unadjusted Plan Factor		0.995		0.992		1.005		0.997	
Budget Neutral Plan Factor		0.998		0.995		1.007		1.000	
Total Members									
Member Months		29,290		18,911		31,478		79,679	
Unadjusted Plan Factor		1.025		0.983		1.044		1.023	
Budget Neutral Plan Factor		1.002		0.961		1.021		1.000	

Exhibit 3J Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,692	100.00%	N/A	1,860	100.00%	N/A	3,721	100.00%	N/A	9,273	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,206	32.67%	N/A	648	34.84%	N/A	1,296	34.84%	N/A	3,150	33.97%
Age 5 to 14 Female	0.112	N/A	1,275	34.53%	N/A	633	34.03%	N/A	1,228	33.00%	N/A	3,136	33.82%
Age 15 to 18 Male	0.000	N/A	617	16.71%	N/A	274	14.73%	N/A	585	15.72%	N/A	1,476	15.92%
Age 15 to 18 Female	0.257	N/A	594	16.09%	N/A	305	16.40%	N/A	612	16.45%	N/A	1,511	16.29%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	15	0.41%	N/A	28	1.51%	N/A	29	0.78%	N/A	72	0.78%
Diagnosis Period Duration, 7 Months	0.098	N/A	17	0.46%	N/A	21	1.13%	N/A	16	0.43%	N/A	54	0.58%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,660	99.13%	N/A	1,811	97.37%	N/A	3,676	98.79%	N/A	9,147	98.64%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	166	4.50%	N/A	117	6.29%	N/A	189	5.08%	N/A	472	5.09%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	22	2	0.05%	14	2	0.11%	16	3	0.08%	18	7	0.08%
Cardiovascular, very high	1.724	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Cardiovascular, medium	0.733	14	17	0.46%	23	4	0.22%	14	13	0.35%	13	34	0.37%
Cardiovascular, low	0.450	9	42	1.14%	10	21	1.13%	10	35	0.94%	10	98	1.06%
Cardiovascular, extra low	0.412	10	45	1.22%	9	27	1.45%	9	45	1.21%	9	117	1.26%
Cerebrovascular, medium	2.021	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
CNS, high	2.129	32	1	0.03%	24	1	0.05%	29	2	0.05%	31	4	0.04%
CNS, medium	1.173	19	7	0.19%	17	4	0.22%	25	4	0.11%	20	15	0.16%
CNS, low	0.751	6	37	1.00%	6	5	1.13%	6	51	1.37%	6	118	1.18%
DD, low	1.630	13	9	0.24%	16	3	0.16%	23	3	0.08%	14	15	0.16%
DD, medium	6.081	36	0	0.00%	12	1	0.05%	36	0	0.01%	33	1	0.01%
Diabetes, type 1	3.867	5	9	0.24%	6	4	0.22%	4	11	0.30%	5	24	0.26%
Diabetes, type 2	0.479	30	8	0.22%	26	4	0.22%	31	6	0.16%	30	18	0.19%
Eye, very low to extra low	0.256	18	34	0.92%	30	5	0.27%	28	17	0.46%	23	56	0.60%
Gastro, high	3.331	21	2	0.05%	20	1	0.05%	12	3	0.08%	19	6	0.06%
Gastro, medium	1.271	12	13	0.35%	15	4	0.22%	33	2	0.05%	15	19	0.20%
Gastro, low	0.340	4	111	3.01%	4	55	2.96%	5	117	3.14%	4	283	3.05%
Genital, extra low	0.472	24	10	0.27%	21	7	0.38%	24	10	0.29%	24	27	0.29%
Hematological, extra high	3.863	29	1	0.03%	33	0	0.00%	30	1	0.03%	32	2	0.02%
Hematological, very high	3.011	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Hematological, low to medium	0.381	23	15	0.41%	19	9	0.48%	18	21	0.56%	22	45	0.49%
Infectious, high to very high	0.682	25	7	0.19%	25	3	0.16%	27	7	0.19%	26	17	0.18%
Infectious, medium	0.176	33	12	0.33%	32	4	0.22%	32	16	0.43%	34	32	0.35%
Metabolic, high	0.754	11	24	0.65%	13	8	0.43%	17	11	0.30%	12	43	0.46%
Metabolic, medium	0.391	26	11	0.30%	28	4	0.22%	26	12	0.32%	27	27	0.29%
Pregnancy, complete	0.277	34	3	0.08%	27	6	0.32%	34	5	0.13%	35	14	0.15%
Pregnancy, incomplete	3.124	8	7	0.19%	11	2	0.11%	15	3	0.08%	11	12	0.13%
Psychiatric, high	3.507	20	2	0.05%	18	1	0.05%	21	2	0.05%	21	5	0.05%
Psychiatric, medium	1.859	15	6	0.16%	7	8	0.43%	7	18	0.48%	8	32	0.35%
Psychiatric, low	0.930	1	663	17.96%	1	320	17.20%	1	736	19.78%	1	1,719	18.54%
Pulmonary, very high	1.975	28	2	0.05%	33	0	0.00%	19	4	0.11%	25	6	0.06%
Pulmonary, medium to high	0.457	27	9	0.24%	29	3	0.16%	22	11	0.30%	28	23	0.25%
Pulmonary, low	0.321	3	346	9.37%	3	146	7.85%	3	313	8.41%	3	805	8.68%
Rare Diseases	7.505	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Renal, extra high	15.124	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Renal, medium	1.178	31	2	0.05%	33	0	0.00%	20	6	0.16%	29	8	0.09%
Renal, low	0.277	17	32	0.87%	22	11	0.59%	13	36	0.97%	16	79	0.85%
Skeletal, very low to medium	0.319	2	678	18.36%	2	286	15.38%	2	660	17.74%	2	1,624	17.51%
Skin, high	0.773	35	1	0.03%	33	0	0.00%	36	0	0.00%	37	1	0.01%
Skin, low	0.487	36	0	0.00%	33	0	0.00%	35	1	0.03%	36	1	0.01%
Skin, very low	0.190	7	140	3.79%	8	74	3.98%	8	149	4.00%	7	363	3.91%
Substance abuse, very low to low	1.082	16	9	0.24%	31	1	0.05%	11	10	0.27%	17	20	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,901	51.49%	N/A	1,012	54.41%	N/A	1,899	51.03%	N/A	4,812	51.89%
Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	38	33.63%	N/A	33	37.08%	N/A	38	31.40%	N/A	109	33.75%
Age 5 to 14 Female	0.953	N/A	48	42.48%	N/A	35	39.33%	N/A	53	43.80%	N/A	136	42.11%
Age 15 to 18 Male	0.944	N/A	11	9.73%	N/A	11	12.36%	N/A	14	11.57%	N/A	36	11.15%
Age 15 to 18 Female	1.321	N/A	16	14.16%	N/A	10	11.24%	N/A	16	13.22%	N/A	42	13.00%
Risk Adjustment Results													
		Magnolia			Molina			United			Total		
Scored Members													
Member Months		3,692			1,860			3,721			9,273		
Unadjusted Plan Factor		1.022			0.991			1.033			1.020		
Budget Neutral Plan Factor		1.002			0.972			1.012			1.000		
Unscored Members													
Member Months		113			89			121			323		
Unadjusted Plan Factor		1.005			0.995			1.002			1.001		
Budget Neutral Plan Factor		1.004			0.994			1.001			1.000		
Total Members													
Member Months		3,805			1,949			3,842			9,596		
Unadjusted Plan Factor		1.021			0.992			1.032			1.019		
Budget Neutral Plan Factor		1.002			0.973			1.012			1.000		

Exhibit 3K

Mississippi Division of Medicaid

Risk Adjustment Results

Ouasi-CHIP - Central Region - 03 to 04 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members							
		Magnolia			Molina			United	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Total Member Months
Regression Intercept	0.595	N/A	4,220	100.00%	N/A	2,109	100.00%	N/A	10,508
Demographic Categories									
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0
Age 5 to 14 Male	0.038	N/A	1,446	34.27%	N/A	740	35.09%	N/A	3,587
Age 5 to 14 Female	0.112	N/A	1,375	32.58%	N/A	736	34.90%	N/A	3,512
Age 15 to 18 Male	0.000	N/A	684	16.21%	N/A	325	15.41%	N/A	1,714
Age 15 to 18 Female	0.257	N/A	715	16.94%	N/A	308	14.60%	N/A	1,695
Duration Category									
Diagnosis Period Duration, 6 Months	0.108	N/A	22	0.52%	N/A	10	0.47%	N/A	48
Diagnosis Period Duration, 7 Months	0.098	N/A	17	0.40%	N/A	13	0.62%	N/A	56
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	4,181	99.08%	N/A	2,086	98.91%	N/A	10,404
Non-Utilizer Category									
No Base Period Medical Utilization	(0.410)	N/A	187	4.43%	N/A	180	8.53%	N/A	570
Homelessness Category									
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0
Disease Categories									
Cancer, medium to very high	2.895	8	10	0.24%	9	4	0.19%	9	23
Cardiovascular, very high	1.724	35	1	0.02%	31	1	0.05%	35	2
Cardiovascular, medium	0.733	13	21	0.50%	16	7	0.33%	16	45
Cardiovascular, low	0.450	12	38	0.90%	10	20	0.95%	10	111
Cardiovascular, extra low	0.412	11	53	1.26%	12	19	0.90%	12	125
Cerebrovascular, medium	2.021	30	2	0.05%	37	0	0.00%	35	2
CNS, high	2.129	34	1	0.02%	14	3	0.14%	24	7
CNS, medium	1.173	14	13	0.31%	21	3	0.14%	21	23
CNS, low	0.751	5	62	1.47%	5	29	1.38%	4	154
DD, low	1.630	24	5	0.12%	26	2	0.09%	11	21
DD, medium	6.081	39	0	0.00%	37	0	0.00%	35	0
Diabetes, type 1	3.867	6	8	0.19%	4	7	0.33%	5	6
Diabetes, type 2	0.479	29	10	0.24%	33	2	0.09%	27	30
Eye, very low to extra low	0.256	19	40	0.95%	24	13	0.62%	19	20
Gastro, high	3.331	20	3	0.07%	23	1	0.05%	29	5
Gastro, medium	1.271	16	10	0.24%	15	5	0.24%	15	25
Gastro, low	0.340	4	139	3.29%	6	54	2.56%	6	309
Genital, extra low	0.472	22	20	0.47%	25	7	0.33%	23	24
Hematological, extra high	3.863	39	0	0.00%	37	0	0.00%	22	31
Hematological, very high	3.011	39	0	0.00%	37	0	0.00%	35	0
Hematological, low to medium	0.381	18	28	0.66%	22	9	0.43%	25	53
Infectious, high to very high	0.682	27	9	0.21%	28	3	0.14%	28	18
Infectious, medium	0.176	37	7	0.17%	35	3	0.14%	33	8
Metabolic, high	0.754	17	15	0.36%	11	11	0.52%	18	13
Metabolic, medium	0.391	32	9	0.21%	30	5	0.24%	26	15
Pregnancy, complete	0.277	31	14	0.33%	32	6	0.28%	31	7
Pregnancy, incomplete	3.124	10	8	0.19%	27	1	0.05%	13	5
Psychiatric, high	3.507	26	2	0.05%	37	0	0.00%	35	0
Psychiatric, medium	1.859	7	16	0.38%	7	9	0.43%	7	19
Psychiatric, low	0.930	1	751	17.80%	1	327	15.50%	1	753
Pulmonary, very high	1.975	25	4	0.09%	29	1	0.05%	30	1
Pulmonary, medium to high	0.457	23	19	0.45%	19	8	0.38%	20	18
Pulmonary, low	0.321	3	385	9.12%	3	167	7.92%	3	348
Rare Diseases	7.505	15	2	0.05%	13	1	0.05%	35	0
Renal, extra high	15.124	39	0	0.00%	37	0	0.00%	35	0
Renal, medium	1.178	33	2	0.05%	20	3	0.14%	34	1
Renal, low	0.277	21	36	0.85%	17	18	0.85%	17	39
Skeletal, very low to medium	0.319	2	618	14.64%	2	259	12.28%	2	595
Skin, high	0.773	36	2	0.05%	34	1	0.05%	32	2
Skin, low	0.487	38	2	0.05%	36	1	0.05%	35	0
Skin, very low	0.190	9	134	3.18%	8	62	2.94%	8	142
Substance abuse, very low to low	1.082	28	5	0.12%	18	4	0.19%	14	13
Population Statistics									
No Classified Disease Categories	N/A	N/A	2,287	54.19%	N/A	1,183	56.09%	N/A	5,764

	Risk Weight	Unscored Members							
		Magnolia			Molina			United	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Total Member Months
Demographic Categories									
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0
Age 5 to 14 Male	0.957	N/A	35	33.02%	N/A	25	37.88%	N/A	96
Age 5 to 14 Female	0.953	N/A	35	33.02%	N/A	29	43.94%	N/A	101
Age 15 to 18 Male	0.944	N/A	18	16.98%	N/A	6	9.09%	N/A	37
Age 15 to 18 Female	1.321	N/A	18	16.98%	N/A	6	9.09%	N/A	30

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		4,220	2,109	4,179
Unadjusted Plan Factor		1.021	0.959	1.012
Budget Neutral Plan Factor		1.016	0.954	1.007
Unscored Members				
Member Months		106	66	92
Unadjusted Plan Factor		1.015	0.987	0.977
Budget Neutral Plan Factor		1.020	0.992	0.982
Total Members				
Member Months		4,326	2,175	4,271
Unadjusted Plan Factor		1.021	0.960	1.011
Budget Neutral Plan Factor		1.016	0.955	1.007

Exhibit 3L

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - South Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,208	100.00%	N/A	1,930	100.00%	N/A	3,663	100.00%	N/A	8,801	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,092	34.04%	N/A	685	35.49%	N/A	1,282	35.00%	N/A	3,059	34.76%
Age 5 to 14 Female	0.112	N/A	1,053	32.82%	N/A	665	34.46%	N/A	1,207	32.95%	N/A	2,925	33.23%
Age 15 to 18 Male	0.000	N/A	540	16.83%	N/A	291	15.08%	N/A	626	17.09%	N/A	1,457	16.55%
Age 15 to 18 Female	0.257	N/A	523	16.30%	N/A	289	14.97%	N/A	548	14.96%	N/A	1,360	15.45%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	8	0.25%	N/A	27	1.40%	N/A	24	0.66%	N/A	59	0.67%
Diagnosis Period Duration, 7 Months	0.098	N/A	15	0.47%	N/A	14	0.73%	N/A	15	0.41%	N/A	44	0.50%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,185	99.29%	N/A	1,889	97.88%	N/A	3,624	98.94%	N/A	8,698	98.83%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	186	5.80%	N/A	148	7.67%	N/A	181	4.94%	N/A	515	5.85%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	1	0.03%	N/A	1	0.01%
Disease Categories													
Cancer, medium to very high	2.895	7	10	0.31%	18	2	0.10%	13	5	0.14%	10	17	0.19%
Cardiovascular, very high	1.724	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Cardiovascular, medium	0.733	21	9	0.28%	10	12	0.62%	18	15	0.41%	18	36	0.41%
Cardiovascular, low	0.450	13	33	1.03%	14	16	0.83%	14	32	0.87%	12	81	0.92%
Cardiovascular, extra low	0.412	10	53	1.65%	11	21	1.09%	9	56	1.53%	9	130	1.48%
Cerebrovascular, medium	2.021	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
CNS, high	2.129	30	1	0.03%	9	5	0.26%	12	7	0.19%	17	13	0.15%
CNS, medium	1.173	15	10	0.31%	17	5	0.26%	16	10	0.27%	16	25	0.28%
CNS, low	0.751	8	35	1.09%	6	20	1.04%	7	44	1.20%	7	99	1.12%
DD, low	1.630	16	7	0.22%	30	1	0.05%	11	12	0.33%	13	20	0.23%
DD, medium	6.081	35	0	0.00%	16	1	0.05%	35	0	0.00%	31	1	0.01%
Diabetes, type 1	3.867	4	17	0.53%	5	6	0.31%	4	24	0.66%	4	47	0.53%
Diabetes, type 2	0.479	25	10	0.31%	32	3	0.16%	29	7	0.19%	28	20	0.23%
Eye, very low to extra low	0.256	26	18	0.56%	23	14	0.73%	25	26	0.71%	25	58	0.66%
Gastro, high	3.331	11	5	0.16%	24	1	0.05%	20	3	0.08%	15	9	0.10%
Gastro, medium	1.271	14	10	0.31%	21	3	0.16%	27	3	0.08%	23	16	0.18%
Gastro, low	0.340	5	142	4.43%	4	83	4.30%	5	156	4.26%	5	281	4.33%
Genital, extra low	0.472	20	16	0.50%	22	8	0.41%	26	13	0.35%	24	37	0.42%
Hematological, extra high	3.863	35	0	0.00%	20	1	0.05%	35	0	0.00%	34	1	0.01%
Hematological, very high	3.011	35	0	0.00%	26	1	0.05%	35	0	0.00%	37	1	0.01%
Hematological, low to medium	0.381	24	13	0.41%	29	6	0.31%	28	9	0.25%	27	28	0.32%
Infectious, high to very high	0.682	31	3	0.09%	27	4	0.21%	33	2	0.05%	32	9	0.10%
Infectious, medium	0.176	33	6	0.19%	34	4	0.21%	32	11	0.30%	35	21	0.24%
Metabolic, high	0.754	17	14	0.44%	25	4	0.21%	15	16	0.44%	20	34	0.39%
Metabolic, medium	0.391	23	14	0.44%	31	4	0.21%	24	18	0.49%	26	36	0.41%
Pregnancy, complete	0.277	32	6	0.19%	33	3	0.16%	34	3	0.08%	36	12	0.14%
Pregnancy, incomplete	3.124	29	1	0.03%	8	4	0.21%	10	7	0.19%	11	12	0.14%
Psychiatric, high	3.507	18	3	0.09%	35	0	0.00%	19	3	0.08%	22	6	0.07%
Psychiatric, medium	1.859	6	19	0.59%	13	4	0.21%	6	21	0.57%	6	44	0.50%
Psychiatric, low	0.930	1	700	21.82%	1	430	22.28%	1	909	24.82%	1	2,039	23.17%
Pulmonary, very high	1.975	27	2	0.06%	35	0	0.00%	31	1	0.03%	33	3	0.03%
Pulmonary, medium to high	0.457	22	13	0.41%	19	9	0.47%	17	25	0.68%	21	47	0.53%
Pulmonary, low	0.321	3	236	7.36%	3	140	7.25%	3	311	8.49%	3	687	7.81%
Rare Diseases	7.505	35	0	0.00%	35	0	0.00%	23	1	0.03%	30	1	0.01%
Renal, extra high	15.124	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Renal, medium	1.178	28	3	0.09%	28	2	0.10%	30	2	0.05%	29	7	0.08%
Renal, low	0.277	19	35	1.09%	15	22	1.14%	21	36	0.98%	19	93	1.06%
Skeletal, very low to medium	0.319	2	392	12.22%	2	195	10.10%	2	423	11.55%	2	1,010	11.48%
Skin, high	0.773	34	1	0.03%	35	0	0.00%	35	0	0.00%	38	1	0.01%
Skin, low	0.487	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Skin, very low	0.190	9	117	3.65%	7	74	3.83%	8	158	4.31%	8	349	3.97%
Substance abuse, very low to low	1.082	12	14	0.44%	12	7	0.36%	22	7	0.19%	14	28	0.32%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,689	52.65%	N/A	1,004	52.02%	N/A	1,842	50.29%	N/A	4,535	51.53%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	26	33.33%	N/A	27	38.03%	N/A	41	39.81%	N/A	94	37.30%
Age 5 to 14 Female	0.953	N/A	31	39.74%	N/A	25	35.21%	N/A	30	29.13%	N/A	86	34.13%
Age 15 to 18 Male	0.944	N/A	7	8.97%	N/A	9	12.68%	N/A	18	17.48%	N/A	34	13.49%
Age 15 to 18 Female	1.321	N/A	14	17.95%	N/A	10	14.08%	N/A	14	13.59%	N/A	38	15.08%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia			Molina			United	
Scored Members									
Member Months		3,208			1,930			3,663	
Unadjusted Plan Factor		1.059			1.027			1.092	
Budget Neutral Plan Factor		0.994			0.963			1.025	
Unscored Members									
Member Months		78			71			103	
Unadjusted Plan Factor		1.019			1.005			1.003	
Budget Neutral Plan Factor		1.011			0.996			0.994	
Total Members									
Member Months		3,286			2,001			3,766	
Unadjusted Plan Factor		1.058			1.026			1.090	
Budget Neutral Plan Factor		0.994			0.965			1.024	

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
June 2024 Snapshot Period

North Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	278	18.30%	64	25.50%	101	19.57%	443 19.38%
Money Code 3	Receiving IV-E Assistance	0.938	249	16.39%	41	16.33%	91	17.64%	381 16.67%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	927	61.03%	135	53.78%	288	55.81%	1,350 59.06%
Other	All other Money Codes	0.000	65	4.28%	11	4.38%	36	6.98%	112 4.90%
Unadjusted Plan Factor			0.941		1.033		0.964		0.956
Member Months			1,519		251		516		2,286
Budget Neutral Plan Factor			0.984		1.080		1.007		1.000

Central Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	316	20.13%	97	30.79%	99	21.57%	512 21.84%
Money Code 3	Receiving IV-E Assistance	0.938	345	21.97%	89	28.25%	112	24.40%	546 23.29%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	858	54.65%	118	37.46%	219	47.71%	1,195 50.98%
Other	All other Money Codes	0.000	51	3.25%	11	3.49%	29	6.32%	91 3.88%
Unadjusted Plan Factor			1.011		1.197		1.044		1.042
Member Months			1,570		315		459		2,344
Budget Neutral Plan Factor			0.970		1.149		1.002		1.000

South Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	318	14.76%	112	25.17%	116	17.34%	546 16.70%
Money Code 3	Receiving IV-E Assistance	0.938	400	18.56%	107	24.04%	121	18.09%	628 19.21%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	1,339	62.13%	211	47.42%	376	56.20%	1,926 58.92%
Other	All other Money Codes	0.000	98	4.55%	15	3.37%	56	8.37%	169 5.17%
Unadjusted Plan Factor			0.912		1.092		0.936		0.942
Member Months			2,155		445		669		3,269
Budget Neutral Plan Factor			0.969		1.159		0.994		1.000

Exhibit 4A
Mississippi Division of Medicaid
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024
Custom Risk Weights - Non-Newborn SSI / Disabled Rate Cell

Model R-Squared: 29.5%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	686,830	0.113	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	27,989	0.470	4.1%	N/A	1.364	1.364
Age 5 to 14 Male	82,498	0.184	12.0%	N/A	0.701	0.701
Age 5 to 14 Female	37,790	0.265	5.5%	N/A	0.872	0.872
Age 15 to 24 Male	64,121	0.000	9.3%	N/A	0.522	0.522
Age 15 to 24 Female	34,985	0.187	5.1%	N/A	0.831	0.831
Age 25 to 44 Male	80,695	0.003	11.7%	N/A	0.797	0.797
Age 25 to 44 Female	71,681	0.133	10.4%	N/A	1.120	1.120
Age 45 and Older Male	127,940	0.107	18.6%	N/A	1.188	1.188
Age 45 and Older Female	159,131	0.027	23.2%	N/A	1.249	1.249
Duration						
Diagnosis Period Duration, 6 to 7 Months	4,733	0.382	0.7%	0.000	1.320	N/A
Diagnosis Period Duration, 8 Months	2,773	0.320	0.4%	0.001	1.271	N/A
Diagnosis Period Duration, 9 to 11 Months	7,851	0.167	1.1%	0.004	1.340	N/A
Diagnosis Period Duration, 12 Months	671,473	0.000	97.8%	N/A	0.993	N/A
Homelessness						
Homelessness	5,632	0.931	0.8%	0.000	2.921	N/A
Disease Categories						
Cancer, very high	3,864	3.067	0.6%	0.000	5.033	N/A
Cancer, high	8,697	0.816	1.3%	0.000	2.519	N/A
Cancer, medium	12,472	0.611	1.8%	0.000	2.343	N/A
Cancer, low	7,519	0.318	1.1%	0.000	1.794	N/A
Cardiovascular, very high	4,821	1.460	0.7%	0.000	5.286	N/A
Cardiovascular, medium	78,617	0.584	11.4%	0.000	2.228	N/A
Cardiovascular, extra low to low	226,545	0.081	33.0%	0.000	1.115	N/A
Cerebrovascular, medium	11,081	0.115	1.6%	0.022	1.965	N/A
CNS, high	7,154	0.781	1.0%	0.000	2.878	N/A
CNS, medium	18,733	0.479	2.7%	0.000	1.839	N/A
CNS, low	123,627	0.243	18.0%	0.000	1.574	N/A
DD, low to medium	30,775	0.174	4.5%	0.000	1.252	N/A
Diabetes, type 1	10,180	0.862	1.5%	0.000	2.596	N/A
Diabetes, type 2	100,327	0.199	14.6%	0.000	1.596	N/A
Gastro, high	11,125	0.320	1.6%	0.000	3.363	N/A
Gastro, medium	29,419	0.268	4.3%	0.000	2.041	N/A
Gastro, low	124,224	0.135	18.1%	0.000	1.528	N/A
Hematological, extra high	12	4.752	0.0%	0.001	9.015	N/A
Hematological, medium to very high	13,267	0.931	1.9%	0.000	3.061	N/A
Hematological, low	10,527	0.370	1.5%	0.000	3.024	N/A
Infectious, high to very high	21,565	0.300	3.1%	0.000	2.374	N/A
Infectious, low to medium	25,862	0.188	3.8%	0.000	2.260	N/A
Metabolic, high	18,367	0.468	2.7%	0.000	2.576	N/A
Metabolic, medium	47,448	0.239	6.9%	0.000	2.349	N/A
Pregnancy, complete	5,329	0.173	0.8%	0.016	1.203	N/A
Pregnancy, incomplete	1,736	0.841	0.3%	0.000	1.941	N/A
Psychiatric, high	53,414	0.643	7.8%	0.000	1.568	N/A
Psychiatric, low to medium	282,160	0.225	41.1%	0.000	1.126	N/A
Pulmonary, very high	13,937	0.816	2.0%	0.000	3.257	N/A
Pulmonary, high	1,817	0.481	0.3%	0.000	2.577	N/A
Pulmonary, medium	32,635	0.472	4.8%	0.000	2.534	N/A
Pulmonary, low	105,596	0.131	15.4%	0.000	1.273	N/A
Rare Diseases	723	2.664	0.1%	0.000	4.594	N/A
Renal, extra high	4,153	4.191	0.6%	0.000	6.896	N/A
Renal, medium	27,425	0.362	4.0%	0.000	2.168	N/A
Renal, low	29,489	0.277	4.3%	0.000	1.870	N/A
Skeletal, medium	166,182	0.254	24.2%	0.000	1.595	N/A
Skeletal, very low to low	62,828	0.070	9.1%	0.002	1.374	N/A
Skin, low to high	11,851	0.624	1.7%	0.000	2.976	N/A
Skin, very low	47,331	0.169	6.9%	0.000	1.592	N/A
Substance abuse, low	45,757	0.324	6.7%	0.000	1.972	N/A
Substance abuse, very low	15,131	0.202	2.2%	0.000	1.694	N/A
Disabled Children Add-On						
Disabled Children Add-On - CNS, high	1,830	1.388	0.3%	0.000	4.287	N/A
Disabled Children Add-On - Gastro, high	5,933	1.508	0.9%	0.000	3.911	N/A
Disabled Children Add-On - Pulmonary, very high	2,933	0.419	0.4%	0.000	3.866	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4B			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - Non-Newborn SSI / Disabled Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	3.067
CANH	Cancer, high	Cancer, high	0.816
CANM	Cancer, medium	Cancer, medium	0.611
CANL	Cancer, low	Cancer, low	0.318
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.460
CARM	Cardiovascular, medium	Cardiovascular, medium	0.584
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.081
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.081
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.115
CNSH	CNS, high	CNS, high	0.781
CNSM	CNS, medium	CNS, medium	0.479
CNSL	CNS, low	CNS, low	0.243
DDM	DD, medium	DD, low to medium	0.174
DDL	DD, low	DD, low to medium	0.174
DIA1	Diabetes, type 1	Diabetes, type 1	0.862
DIA2	Diabetes, type 2	Diabetes, type 2	0.199
EYEL	Eye, low	Not Used	Not Used
EYEVL	Eye, very low	Not Used	Not Used
GIH	Gastro, high	Gastro, high	0.320
GIM	Gastro, medium	Gastro, medium	0.268
GIL	Gastro, low	Gastro, low	0.135
GENEL	Genital, extra low	Not Used	Not Used
HEMEH	Hematological, extra high	Hematological, extra high	4.752
HEMVH	Hematological, very high	Hematological, medium to very high	0.931
HEMM	Hematological, medium	Hematological, medium to very high	0.931
HEML	Hematological, low	Hematological, low	0.370
INFVH	Infectious, very high	Infectious, high to very high	0.300
INFH	Infectious, high	Infectious, high to very high	0.300
INFM	Infectious, medium	Infectious, low to medium	0.188
INFL	Infectious, low	Infectious, low to medium	0.188
METH	Metabolic, high	Metabolic, high	0.468
METM	Metabolic, medium	Metabolic, medium	0.239
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.173
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.841
PSYH	Psychiatric, high	Psychiatric, high	0.643
PSYM	Psychiatric, medium	Psychiatric, low to medium	0.225
PSYL	Psychiatric, low	Psychiatric, low to medium	0.225
PULVH	Pulmonary, very high	Pulmonary, very high	0.816
PULH	Pulmonary, high	Pulmonary, high	0.481
PULM	Pulmonary, medium	Pulmonary, medium	0.472
PULL	Pulmonary, low	Pulmonary, low	0.131
RENEH	Renal, extra high	Renal, extra high	4.191
RENM	Renal, medium	Renal, medium	0.362
RENL	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, medium	0.254
SKCL	Skeletal, low	Skeletal, very low to low	0.070
SKCVL	Skeletal, very low	Skeletal, very low to low	0.070
SKNH	Skin, high	Skin, low to high	0.624
SKNL	Skin, low	Skin, low to high	0.624
SKNVL	Skin, very low	Skin, very low	0.169
SUBL	Substance abuse, low	Substance abuse, low	0.324
SUBVL	Substance abuse, very low	Substance abuse, very low	0.202
CCARVH	Disabled Children Add-On - Cardiovascular, very high	Not Used	Not Used
CCARM	Disabled Children Add-On - Cardiovascular, medium	Not Used	Not Used
CCNSH	Disabled Children Add-On - CNS, high	Disabled Children Add-On - CNS, high	1.388
CDDM	Disabled Children Add-On - DD, medium	Not Used	Not Used
CDIA1	Disabled Children Add-On - Diabetes, type 1	Not Used	Not Used
CGIH	Disabled Children Add-On - Gastro, high	Disabled Children Add-On - Gastro, high	1.508
CHEMEH	Disabled Children Add-On - Hematological, extra high	Not Used	Not Used
CHEMVH	Disabled Children Add-On - Hematological, very high	Not Used	Not Used
CINFVH	Disabled Children Add-On - Infectious, very high	Not Used	Not Used
CINFH	Disabled Children Add-On - Infectious, high	Not Used	Not Used
CINFM	Disabled Children Add-On - Infectious, medium	Not Used	Not Used
CMETH	Disabled Children Add-On - Metabolic, high	Not Used	Not Used
CMETM	Disabled Children Add-On - Metabolic, medium	Not Used	Not Used
CPSYH	Disabled Children Add-On - Psychiatric, high	Not Used	Not Used
CPSYM	Disabled Children Add-On - Psychiatric, medium	Not Used	Not Used
CPULVH	Disabled Children Add-On - Pulmonary, very high	Disabled Children Add-On - Pulmonary, very high	0.419
CRENEH	Disabled Children Add-On - Renal, extra high	Not Used	Not Used
CSUBL	Disabled Children Add-On - Substance abuse, low	Not Used	Not Used
CSUBVL	Disabled Children Add-On - Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.584
MRX2	Cardiac	Cardiovascular, extra low to low	0.081
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low to medium	0.225
MRX4	Diabetes	Diabetes, type 2	0.199
MRX5	Hemophilia/von Willebrands	Hematological, extra high	4.752
MRX6	Hepatitis	Infectious, low to medium	0.188
MRX7	HIV	Infectious, low to medium	0.188
MRX8	Infections, high	Infectious, high to very high	0.300
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.254
MRX10	Malignancies	Cancer, medium	0.611
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.781
MRX12	Parkinsons / Tremor	CNS, low	0.243
MRX13	Rare Diseases	Rare Diseases	2.664
MRX14	Seizure disorders	CNS, low	0.243
MRX15	Tuberculosis	Infectious, low to medium	0.188

Exhibit 4C
Mississippi Division of Medicaid
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024
Custom Risk Weights - MA Adult Rate Cell

Model R-Squared: 35.6%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	439,404	0.126	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 19 to 24 Male	1,191	0.000	0.3%	N/A	0.331	0.331
Age 19 to 24 Female	33,669	0.460	7.7%	N/A	1.115	1.115
Age 25 to 44 Male	29,458	0.111	6.7%	N/A	0.639	0.639
Age 25 to 44 Female	320,071	0.305	72.8%	N/A	0.993	0.993
Age 45 and Older Male	11,689	0.127	2.7%	N/A	0.943	0.943
Age 45 and Older Female	43,326	0.326	9.9%	N/A	1.245	1.245
Non-Utilizer Category						
No Base Period Medical Utilization	35,780	(0.126)	8.1%	0.000	0.284	N/A
Duration						
Diagnosis Period Duration, 6 Months	4,681	0.448	1.1%	0.000	1.255	N/A
Diagnosis Period Duration, 7 to 12 Months	434,723	0.000	98.9%	N/A	0.997	N/A
Homelessness						
Homelessness	699	0.472	0.2%	0.025	2.273	N/A
Disease Categories						
Cancer, high to very high	1,485	2.607	0.3%	0.000	4.707	N/A
Cancer, low to medium	5,126	0.394	1.2%	0.000	1.864	N/A
Cardiovascular, very high	501	2.004	0.1%	0.000	4.770	N/A
Cardiovascular, medium	20,731	0.547	4.7%	0.000	2.145	N/A
Cardiovascular, low	16,476	0.442	3.7%	0.000	1.827	N/A
Cardiovascular, extra low	115,484	0.118	26.3%	0.000	1.220	N/A
Cerebrovascular, medium	632	0.456	0.1%	0.038	2.523	N/A
CNS, high	1,927	0.552	0.4%	0.000	2.343	N/A
CNS, medium	2,919	0.544	0.7%	0.000	2.330	N/A
CNS, low	28,055	0.425	6.4%	0.000	1.946	N/A
Diabetes, type 1	3,825	1.366	0.9%	0.000	2.939	N/A
Diabetes, type 2	30,601	0.241	7.0%	0.000	1.660	N/A
Eye, very low to extra low	9,330	0.271	2.1%	0.000	1.694	N/A
Gastro, high	1,193	0.864	0.3%	0.000	3.034	N/A
Gastro, medium	11,530	0.585	2.6%	0.000	2.187	N/A
Gastro, low	60,114	0.278	13.7%	0.000	1.602	N/A
Genital, extra low	28,771	0.232	6.5%	0.000	1.659	N/A
Infectious, very high	101	1.355	0.0%	0.013	3.451	N/A
Infectious, high	6,403	0.426	1.5%	0.000	2.269	N/A
Infectious, low to medium	10,381	0.196	2.4%	0.000	1.874	N/A
Metabolic, high	5,493	0.528	1.3%	0.000	2.286	N/A
Metabolic, medium	15,886	0.296	3.6%	0.000	2.077	N/A
Pregnancy, complete	47,226	0.295	10.7%	0.000	1.212	N/A
Pregnancy, incomplete	14,968	1.430	3.4%	0.000	2.252	N/A
Psychiatric, high	4,060	0.665	0.9%	0.000	2.039	N/A
Psychiatric, medium	5,861	0.490	1.3%	0.000	1.858	N/A
Psychiatric, low	127,229	0.200	29.0%	0.000	1.384	N/A
Pulmonary, medium to very high	9,517	0.499	2.2%	0.000	2.412	N/A
Pulmonary, low	37,305	0.271	8.5%	0.000	1.620	N/A
Rare Diseases	66	6.883	0.0%	0.000	9.430	N/A
Renal, extra high	128	2.600	0.0%	0.000	6.574	N/A
Renal, medium	3,760	0.539	0.9%	0.000	2.478	N/A
Renal, low	8,726	0.472	2.0%	0.000	2.097	N/A
Skeletal, medium	115,794	0.270	26.4%	0.000	1.436	N/A
Skeletal, low	15,336	0.251	3.5%	0.000	1.437	N/A
Skeletal, very low	11,243	0.189	2.6%	0.000	1.335	N/A
Skin, high	371	1.732	0.1%	0.000	4.561	N/A
Skin, low	1,151	0.891	0.3%	0.000	3.004	N/A
Skin, very low	29,277	0.178	6.7%	0.000	1.483	N/A
Substance abuse, very low to low	31,117	0.299	7.1%	0.000	1.675	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4D Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024 CDPS+Rx Mapping to Custom Risk Weight Categories - MA Adult Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, high to very high	2.607
CANH	Cancer, high	Cancer, high to very high	2.607
CANM	Cancer, medium	Cancer, low to medium	0.394
CANL	Cancer, low	Cancer, low to medium	0.394
CARVH	Cardiovascular, very high	Cardiovascular, very high	2.004
CARM	Cardiovascular, medium	Cardiovascular, medium	0.547
CARL	Cardiovascular, low	Cardiovascular, low	0.442
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.118
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.456
CNSH	CNS, high	CNS, high	0.552
CNSM	CNS, medium	CNS, medium	0.544
CNSL	CNS, low	CNS, low	0.425
DDM	DD, medium	Not Used	Not Used
DDL	DD, low	Not Used	Not Used
DIA1	Diabetes, type 1	Diabetes, type 1	1.366
DIA2	Diabetes, type 2	Diabetes, type 2	0.241
EYEL	Eye, low	Eye, very low to extra low	0.271
EYEVL	Eye, very low	Eye, very low to extra low	0.271
GIH	Gastro, high	Gastro, high	0.864
GIM	Gastro, medium	Gastro, medium	0.585
GIL	Gastro, low	Gastro, low	0.278
GENEL	Genital, extra low	Genital, extra low	0.232
HEMEH	Hematological, extra high	Not Used	Not Used
HEMVH	Hematological, very high	Not Used	Not Used
HEMM	Hematological, medium	Not Used	Not Used
HEML	Hematological, low	Not Used	Not Used
INFVH	Infectious, very high	Infectious, very high	1.355
INFH	Infectious, high	Infectious, high	0.426
INFM	Infectious, medium	Infectious, low to medium	0.196
INFL	Infectious, low	Infectious, low to medium	0.196
METH	Metabolic, high	Metabolic, high	0.528
METM	Metabolic, medium	Metabolic, medium	0.296
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.295
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	1.430
PSYH	Psychiatric, high	Psychiatric, high	0.665
PSYM	Psychiatric, medium	Psychiatric, medium	0.490
PSYL	Psychiatric, low	Psychiatric, low	0.200
PULVH	Pulmonary, very high	Pulmonary, medium to very high	0.499
PULH	Pulmonary, high	Pulmonary, medium to very high	0.499
PULM	Pulmonary, medium	Pulmonary, medium to very high	0.499
PULL	Pulmonary, low	Pulmonary, low	0.271
RENEH	Renal, extra high	Renal, extra high	2.600
RENM	Renal, medium	Renal, medium	0.539
RENL	Renal, low	Renal, low	0.472
SKCM	Skeletal, medium	Skeletal, medium	0.270
SKCL	Skeletal, low	Skeletal, low	0.251
SKCVL	Skeletal, very low	Skeletal, very low	0.189
SKNH	Skin, high	Skin, high	1.732
SKNL	Skin, low	Skin, low	0.891
SKNVL	Skin, very low	Skin, very low	0.178
SUBL	Substance abuse, low	Substance abuse, very low to low	0.299
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.299
MRX1	Anti-coagulants	Cardiovascular, medium	0.547
MRX2	Cardiac	Cardiovascular, extra low	0.118
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.200
MRX4	Diabetes	Diabetes, type 2	0.241
MRX5	Hemophilia/von Willebrands	Not Used	Not Used
MRX6	Hepatitis	Infectious, low to medium	0.196
MRX7	HIV	Infectious, low to medium	0.196
MRX8	Infections, high	Infectious, high	0.426
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.270
MRX10	Malignancies	Cancer, low to medium	0.394
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.552
MRX12	Parkinsons / Tremor	CNS, low	0.425
MRX13	Rare Diseases	Rare Diseases	6.883
MRX14	Seizure disorders	CNS, low	0.425
MRX15	Tuberculosis	Infectious, low to medium	0.196

Exhibit 4E Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024 Custom Risk Weights - CHIP & MississippiCAN Children Rate Cells						
Model R-Squared: 10.2%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			
			Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	3,309,147	0.595	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	731,984	0.168	22.1%	N/A	0.976	0.976
Age 5 to 14 Male	909,713	0.038	27.5%	N/A	0.957	0.957
Age 5 to 14 Female	918,920	0.112	27.8%	N/A	0.953	0.953
Age 15 to 18 Male	371,291	0.000	11.2%	N/A	0.944	0.944
Age 15 to 18 Female	377,239	0.257	11.4%	N/A	1.321	1.321
Non-Utilizer Category						
No Base Period Medical Utilization	182,980	(0.410)	5.5%	0.000	0.282	N/A
Duration						
Diagnosis Period Duration, 6 Months	14,570	0.108	0.4%	0.037	0.886	N/A
Diagnosis Period Duration, 7 Months	26,037	0.098	0.8%	0.011	1.006	N/A
Diagnosis Period Duration, 8 to 12 Months	3,268,540	0.000	98.8%	N/A	1.000	N/A
Homelessness						
Homelessness	234	1.243	0.0%	0.002	3.173	N/A
Disease Categories						
Cancer, medium to very high	4,462	2.895	0.1%	0.000	5.020	N/A
Cardiovascular, very high	366	1.724	0.0%	0.000	7.166	N/A
Cardiovascular, medium	16,247	0.733	0.5%	0.000	2.440	N/A
Cardiovascular, low	43,787	0.450	1.3%	0.000	1.902	N/A
Cardiovascular, extra low	33,091	0.412	1.0%	0.000	2.102	N/A
Cerebrovascular, medium	265	2.021	0.0%	0.000	5.904	N/A
CNS, high	1,577	2.129	0.0%	0.000	4.449	N/A
CNS, medium	4,645	1.173	0.1%	0.000	3.149	N/A
CNS, low	50,373	0.751	1.5%	0.000	2.303	N/A
DD, medium	36	6.081	0.0%	0.000	9.047	N/A
DD, low	4,791	1.630	0.1%	0.000	3.800	N/A
Diabetes, type 1	8,130	3.867	0.2%	0.000	5.181	N/A
Diabetes, type 2	5,941	0.479	0.2%	0.000	2.127	N/A
Eye, very low to extra low	20,748	0.256	0.6%	0.000	1.548	N/A
Gastro, high	2,475	3.331	0.1%	0.000	5.923	N/A
Gastro, medium	6,128	1.271	0.2%	0.000	3.044	N/A
Gastro, low	166,443	0.340	5.0%	0.000	1.603	N/A
Genital, extra low	18,564	0.472	0.6%	0.000	1.940	N/A
Hematological, extra high	48	3.863	0.0%	0.000	4.657	N/A
Hematological, very high	557	3.011	0.0%	0.000	7.302	N/A
Hematological, low to medium	21,443	0.381	0.6%	0.000	1.974	N/A
Infectious, high to very high	4,543	0.662	0.1%	0.000	2.646	N/A
Infectious, medium	38,038	0.176	1.1%	0.000	1.436	N/A
Metabolic, high	12,930	0.754	0.4%	0.000	2.841	N/A
Metabolic, medium	10,153	0.391	0.3%	0.000	2.402	N/A
Pregnancy, complete	6,712	0.277	0.2%	0.000	1.750	N/A
Pregnancy, incomplete	3,714	3.124	0.1%	0.000	4.510	N/A
Psychiatric, high	1,066	3.507	0.0%	0.000	5.081	N/A
Psychiatric, medium	12,361	1.859	0.4%	0.000	3.079	N/A
Psychiatric, low	495,629	0.930	15.0%	0.000	1.883	N/A
Pulmonary, very high	2,702	1.975	0.1%	0.000	4.489	N/A
Pulmonary, medium to high	25,507	0.457	0.8%	0.000	1.941	N/A
Pulmonary, low	273,757	0.321	8.3%	0.000	1.456	N/A
Rare Diseases	287	7.506	0.0%	0.000	9.572	N/A
Renal, extra high	69	15.124	0.0%	0.000	19.997	N/A
Renal, medium	1,834	1.178	0.1%	0.000	3.242	N/A
Renal, low	25,902	0.277	0.8%	0.000	1.702	N/A
Skeletal, very low to medium	432,135	0.319	13.1%	0.000	1.490	N/A
Skin, high	306	0.773	0.0%	0.030	3.114	N/A
Skin, low	819	0.487	0.0%	0.025	2.125	N/A
Skin, very low	119,701	0.190	3.6%	0.000	1.366	N/A
Substance abuse, very low to low	6,264	1.082	0.2%	0.000	3.154	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4F			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - CHIP & MississippiCAN Children Rate Cells			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, medium to very high	2.895
CANH	Cancer, high	Cancer, medium to very high	2.895
CANM	Cancer, medium	Cancer, medium to very high	2.895
CANL	Cancer, low	Not Used	Not Used
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.724
CARM	Cardiovascular, medium	Cardiovascular, medium	0.733
CARL	Cardiovascular, low	Cardiovascular, low	0.450
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.412
CERM	Cerebrovascular, medium	Cerebrovascular, medium	2.021
CNSH	CNS, high	CNS, high	2.129
CNSM	CNS, medium	CNS, medium	1.173
CNSL	CNS, low	CNS, low	0.751
DDM	DD, medium	DD, medium	6.081
DDL	DD, low	DD, low	1.630
DIA1	Diabetes, type 1	Diabetes, type 1	3.867
DIA2	Diabetes, type 2	Diabetes, type 2	0.479
EYEL	Eye, low	Eye, very low to extra low	0.256
EYEVH	Eye, very low	Eye, very low to extra low	0.256
GIH	Gastro, high	Gastro, high	3.331
GIM	Gastro, medium	Gastro, medium	1.271
GIL	Gastro, low	Gastro, low	0.340
GENEL	Genital, extra low	Genital, extra low	0.472
HEMEH	Hematological, extra high	Hematological, extra high	3.863
HEMVH	Hematological, very high	Hematological, very high	3.011
HEMM	Hematological, medium	Hematological, low to medium	0.381
HEML	Hematological, low	Hematological, low to medium	0.381
INFVH	Infectious, very high	Infectious, high to very high	0.662
INFH	Infectious, high	Infectious, high to very high	0.662
INFM	Infectious, medium	Infectious, medium	0.176
INFL	Infectious, low	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.754
METM	Metabolic, medium	Metabolic, medium	0.391
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.277
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	3.124
PSYH	Psychiatric, high	Psychiatric, high	3.507
PSYM	Psychiatric, medium	Psychiatric, medium	1.859
PSYL	Psychiatric, low	Psychiatric, low	0.930
PULVH	Pulmonary, very high	Pulmonary, very high	1.975
PULH	Pulmonary, high	Pulmonary, medium to high	0.457
PULM	Pulmonary, medium	Pulmonary, medium to high	0.457
PULL	Pulmonary, low	Pulmonary, low	0.321
RENEH	Renal, extra high	Renal, extra high	15.124
RENM	Renal, medium	Renal, medium	1.178
RENH	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, very low to medium	0.319
SKCL	Skeletal, low	Skeletal, very low to medium	0.319
SKCVL	Skeletal, very low	Skeletal, very low to medium	0.319
SKNH	Skin, high	Skin, high	0.773
SKNL	Skin, low	Skin, low	0.487
SKNVL	Skin, very low	Skin, very low	0.190
SUBL	Substance abuse, low	Substance abuse, very low to low	1.082
SUBVL	Substance abuse, very low	Substance abuse, very low to low	1.082
MRX1	Anti-coagulants	Cardiovascular, medium	0.733
MRX2	Cardiac	Cardiovascular, extra low	0.412
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.930
MRX4	Diabetes	Diabetes, type 2	0.479
MRX5	Hemophilia/von Willebrands	Hematological, extra high	3.863
MRX6	Hepatitis	Infectious, medium	0.176
MRX7	HIV	Infectious, medium	0.176
MRX8	Infections, high	Infectious, high to very high	0.662
MRX9	Inflammatory /Autoimmune	Skeletal, very low to medium	0.319
MRX10	Malignancies	Cancer, medium to very high	2.895
MRX11	Multiple Sclerosis / Paralysis	CNS, high	2.129
MRX12	Parkinsons / Tremor	CNS, low	0.751
MRX13	Rare Diseases	Rare Diseases	7.506
MRX14	Seizure disorders	CNS, low	0.751
MRX15	Tuberculosis	Not Used	Not Used

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:	North								
	(a)	(b)	(c) = (a) × (b)	(d)	(e)	(f)	(g)	(h) = (d) + (e) + (f) + (g)	(i) = (c) + (h)
	Budget Neutral Risk Score	Unadjusted Capitation Rate PMPM¹	Risk Adjusted Capitation Payment PMPM	MHAP FSA Payment PMPM²	MHAP QIPP Payment PMPM²	MAPS Payment PMPM²	TREAT Payment PMPM²	Total Payments Outside of Rates	Total Payments (Capitation Rates Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	0.9979	\$760.00	\$758.40	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,213.40
Molina	0.9935	\$760.00	\$755.03	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,210.03
United	1.0047	\$760.00	\$763.57	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,218.57
MA Adult									
Magnolia	1.0103	\$360.00	\$363.69	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$658.69
Molina	0.9731	\$360.00	\$350.32	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$645.32
United	1.0082	\$360.00	\$362.95	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$657.95
MA Children									
Magnolia	1.0034	\$210.00	\$210.72	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$415.72
Molina	0.9673	\$210.00	\$203.13	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$408.13
United	1.0161	\$210.00	\$213.38	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$418.38
Quasi-CHIP									
Magnolia	1.0017	\$200.00	\$200.35	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$405.35
Molina	0.9727	\$200.00	\$194.55	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$399.55
United	1.0121	\$200.00	\$202.42	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$407.42
Foster Care									
Magnolia	0.9830	\$630.00	\$619.27	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,094.27
Molina	1.1098	\$630.00	\$699.16	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,174.16
United	0.9956	\$630.00	\$627.21	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,102.21

¹ Capitation rates reflect the removal of the quality withhold
² Includes associated premium tax

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:		Central								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0083	\$900.00	\$907.43	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,422.43
Molina		0.9982	\$900.00	\$898.34	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,413.34
United		0.9904	\$900.00	\$891.34	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,406.34
MA Adult										
Magnolia		1.0192	\$370.00	\$377.09	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$682.09
Molina		0.9697	\$370.00	\$358.80	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$663.80
United		1.0031	\$370.00	\$371.13	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$676.13
MA Children										
Magnolia		1.0116	\$220.00	\$222.55	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$437.55
Molina		0.9605	\$220.00	\$211.32	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$426.32
United		1.0124	\$220.00	\$222.73	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$437.73
Quasi-CHIP										
Magnolia		1.0162	\$210.00	\$213.40	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$418.40
Molina		0.9549	\$210.00	\$200.54	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$405.54
United		1.0065	\$210.00	\$211.37	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$416.37
Foster Care										
Magnolia		0.9592	\$660.00	\$633.04	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,238.04
Molina		1.1722	\$660.00	\$773.66	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,378.66
United		1.0238	\$660.00	\$675.68	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,280.68

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:		South								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0167	\$950.00	\$965.87	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,510.87
Molina		0.9998	\$950.00	\$949.84	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,494.84
United		0.9841	\$950.00	\$934.88	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,479.88
MA Adult										
Magnolia		1.0195	\$350.00	\$356.83	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$661.83
Molina		0.9619	\$350.00	\$336.68	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$641.68
United		1.0098	\$350.00	\$353.43	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$658.43
MA Children										
Magnolia		1.0022	\$190.00	\$190.41	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$395.41
Molina		0.9611	\$190.00	\$182.62	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$387.62
United		1.0213	\$190.00	\$194.05	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$399.05
Quasi-CHIP										
Magnolia		0.9944	\$180.00	\$178.99	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$383.99
Molina		0.9645	\$180.00	\$173.62	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$378.62
United		1.0238	\$180.00	\$184.28	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$389.28
Foster Care										
Magnolia		0.9611	\$560.00	\$538.22	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$943.22
Molina		1.1759	\$560.00	\$658.48	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$1,063.48
United		1.0068	\$560.00	\$563.82	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$968.82

¹ Capitation rates reflect the removal of the quality withhold
² Includes associated premium tax

Caveats and Limitations
Mississippi Division of Medicaid
Q3 to Q4 2024 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q3 to Q4 2023 Foster Care risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO eligibility data from June 2024 to December 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q3 to Q4 2024 for MississippiCAN eligible Foster Care members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We, Jill Bruckert and Katarina Lorenz, are consulting actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Exhibit 1
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
July 2024 to December 2024 Enrollment Period

North Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.433	1,772	19.34%	331	21.35%	537	18.13%	2,640	19.31%
Money Code 3	Receiving IV-E Assistance	0.938	1,482	16.18%	323	20.84%	481	16.24%	2,286	16.72%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	5,547	60.54%	841	54.26%	1,742	58.81%	8,130	59.46%
Other	All other Money Codes	0.000	361	3.94%	55	3.55%	202	6.82%	618	4.52%
Unadjusted Plan Factor			0.953		1.017		0.934		0.956	
Member Months			9,162		1,550		2,962		13,674	
Budget Neutral Plan Factor			0.997		1.063		0.977		1.000	

Central Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.433	1,811	19.27%	489	26.36%	459	17.54%	2,759	19.89%
Money Code 3	Receiving IV-E Assistance	0.938	2,086	22.20%	519	27.98%	690	26.37%	3,295	23.76%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	5,210	55.44%	789	42.53%	1,296	49.52%	7,295	52.60%
Other	All other Money Codes	0.000	291	3.10%	58	3.13%	172	6.57%	521	3.76%
Unadjusted Plan Factor			1.002		1.139		1.007		1.021	
Member Months			9,398		1,855		2,617		13,870	
Budget Neutral Plan Factor			0.981		1.115		0.987		1.000	

South Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	1.433	1,883	14.57%	532	20.14%	628	15.74%	3,043	15.56%
Money Code 3	Receiving IV-E Assistance	0.938	2,278	17.63%	637	24.12%	724	18.14%	3,639	18.61%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	8,200	63.46%	1,387	52.52%	2,320	58.13%	11,907	60.90%
Other	All other Money Codes	0.000	560	4.33%	85	3.22%	319	7.99%	964	4.93%
Unadjusted Plan Factor			0.903		1.028		0.917		0.923	
Member Months			12,921		2,641		3,991		19,553	
Budget Neutral Plan Factor			0.979		1.114		0.994		1.000	

Exhibit 2
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024 Foster Care Capitation

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) MOMS Payment PMPM ²	(i) = (d) + (e) + (f) + (g) + (h) Total Payments Outside of Rates	(j) = (c) + (i) Total Payments (Capitation Rates + Other Payments)
North Region										
Magnolia	0.997	\$630.00	\$628.01	\$310.00	\$160.00	\$10.00	\$10.00	\$1.00	\$491.00	\$1,119.01
Molina	1.063	\$630.00	\$669.82	\$310.00	\$160.00	\$10.00	\$10.00	\$1.00	\$491.00	\$1,160.82
United	0.977	\$630.00	\$615.32	\$310.00	\$160.00	\$10.00	\$10.00	\$1.00	\$491.00	\$1,106.32
Central Region										
Magnolia	0.981	\$670.00	\$657.26	\$440.00	\$160.00	\$10.00	\$10.00	\$1.00	\$621.00	\$1,278.26
Molina	1.115	\$670.00	\$747.22	\$440.00	\$160.00	\$10.00	\$10.00	\$1.00	\$621.00	\$1,368.22
United	0.987	\$670.00	\$661.02	\$440.00	\$160.00	\$10.00	\$10.00	\$1.00	\$621.00	\$1,282.02
South Region										
Magnolia	0.979	\$560.00	\$548.07	\$250.00	\$160.00	\$10.00	\$10.00	\$1.00	\$431.00	\$979.07
Molina	1.114	\$560.00	\$623.81	\$250.00	\$160.00	\$10.00	\$10.00	\$1.00	\$431.00	\$1,054.81
United	0.994	\$560.00	\$556.38	\$250.00	\$160.00	\$10.00	\$10.00	\$1.00	\$431.00	\$987.38

¹ Capitation rates reflect the removal of the quality withhold.

² Includes associated premium tax.



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December 4, 2024

Jennifer Wentworth
Deputy Executive Director, Finance
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Report17 State Fiscal Year 2025 MississippiCAN Preliminary Rate Calculation and Certification - Update

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) has retained Milliman to develop actuarially sound capitation rates for state fiscal year (SFY) 2025 for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for Medicaid beneficiaries.

This report updates the preliminary capitation rates for all populations enrolled in MississippiCAN from the prior iteration dated September 6, 2024.¹ Overall, the SFY 2025 capitation rates in this report are 0.4% lower than the previous version (when compositing rates using calendar year (CY) 2022 membership). This report assumes ultimate approval of the preprints submitted to CMS for directed payments and directed fee schedules.

This report updates our preliminary SFY 2025 capitation rates; the following changes were made in this report relative to the prior certification:

- Updated projected SFY 2025 enrollment, using more recent membership data available. The rate changes shown below in Table 1 are composited using CY 2022 enrollment, and therefore, are not impacted by this update.
- Seasonal virus adjustments were updated to incorporate additional runout and feedback provided by the coordinated care organizations (CCOs).
- Fee schedule updates effective October 1, 2024 for home health (HH) services were incorporated, but had a very minor impact.
- Corrected an issue that was discovered in the application of the intended unit cost trends for physician administered drugs (PADs).
- Updated charge trends for outpatient and certain physician services provided by DOM's payment methodology development vendor, Myers and Stauffer. This modeling included the impact of fee schedule updates effective July 1, 2023 and July 1, 2024. The impact of each service category is shown separately below in Table 1.

Table 1 summarizes the overall impact on capitation rates resulting from the changes noted above. The impact in Table 1 is based upon the membership distribution across rate cells in calendar year (CY) 2022. Each of these changes are described in more detail within the capitation report.

¹ "Report12 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification - Secured Copy.pdf" dated September 6, 2024.



Table 1 SFY 2025 Capitation Rate Development Summary of SFY 2025 Rate Change Components	
Assumption Change	Change from September 6, 2024 Preliminary Rates
Seasonal Virus Adjustment	1.003
HH Fee Schedule Adjustment	1.000
PAD Unit Cost Trend Fix Impact	0.996
Physician Unit Cost Trend Impact	0.993
Outpatient Unit Cost Trend Impact	1.004
Total SFY 2025 Rate Change	0.996

In addition, all rate change comparisons to SFY 2024 capitation rates were updated to the most recent rate certification for SFY 2024 dated October 22, 2024. This does not have an impact on the SFY 2025 capitation rates, but does result in changes in the impact of changes between SFY 2024 and SFY 2025 as outlined in Section I of the report.

Rates will be retroactively adjusted and recertified for the following items:

- Payments for the Mississippi Hospital Access Program (MHAP) Quality Incentive Payment Program (QIPP).
- Payments for the MHAP fee schedule adjustment (FSA) amounts.
- Payments for the Mississippi Medicaid Access to Physician Services (MAPS) program.
- Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program.
- Payments for the ambulatory payment classification (APC) opt out program.

This recertification will be done at one time for capitation rates for the entire SFY 2025 period. This recertification is anticipated to happen two quarters following the end of SFY 2025.

There are many considerations taken in the development of SFY 2025 capitation rates to reflect impacts of COVID-19 and the unwinding of the continuous coverage requirement (CCR) in the Families First Coronavirus Act (FFCRA). Explicit adjustments for COVID-19 are made in the rate development for the following:

- **Base Period Data:** The SFY 2025 capitation rates use CY 2022 data as the basis for projections. Under normal circumstances, SFY 2025 capitation rates would be based on CY 2022 and CY 2021 experience for smaller rate cells. However, given the large population and member behavior changes in CY 2021, we do not find this experience to be a credible basis for SFY 2025 projections. Therefore, we use a single year of experience data for all populations as the basis for our SFY 2025 projections.
- **Acuity Adjustments:** MississippiCAN enrollment fluctuated significantly throughout CY 2022 due to the CCR and DOM policies shifting members between MississippiCAN and fee-for-service (FFS). Under the continuous coverage requirement DOM could not disenroll members who would normally lose eligibility during the public health emergency (PHE), as declared by the Department of Health and Human Services (HHS). However, beginning in June 2021, and continuing through late CY 2022, DOM transitioned individuals for whom Medicaid eligibility would have lapsed absent the CCR from coordinated care organizations (CCOs) into FFS Medicaid.

Per the Consolidated Appropriations Act, 2023 (CAA), the continuous coverage requirement, which was previously tied to the federal PHE ended on March 31, 2023. Additional guidance from the Centers for Medicare and Medicaid Services (CMS) indicated that states had 14 months after this date to complete redeterminations for affected enrollees. Within the options outlined by CMS, DOM began eligibility redeterminations starting in April 2023 and began disenrolling Mississippi Medicaid recipients who were no longer eligible in July 2023 and throughout the following year. We have been monitoring membership and population acuity changes as a result of the end of the continuous coverage requirements and have applied an acuity adjustment in preliminary SFY 2025 capitation rates for certain populations based on the most recent data available as of March 2024.



Jennifer Wentworth
Mississippi Division of Medicaid
December 4, 2024
Page 3 of 3

- **COVID-19 / Influenza / RSV Adjustment:** We developed an adjustment for the estimated difference in costs included in the CY 2022 base period data and projected SFY 2025 costs for testing, vaccination, and treatment for influenza, respiratory syncytial virus (RSV), and COVID-19. These population specific adjustments reflect an expected decrease in COVID-19, influenza, and RSV costs from CY 2022 to SFY 2025.



Jennifer, please call us at 262 784 2250 if you have questions. We look forward to discussing this report with you and the CCOs.

Sincerely,

A handwritten signature in black ink, appearing to read "Jill Bruckert".

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

JAB/KNL/mb

Attachments

A handwritten signature in black ink, appearing to read "Katarina Lorenz".

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

MILLIMAN REPORT

State of Mississippi Division of Medicaid

State Fiscal Year 2025 MississippiCAN Preliminary Rate Calculation and Certification

December 4, 2024

[Jill A. Bruckert](#), FSA, MAAA
Principal and Consulting Actuary

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APPENDICES

Supporting Documentation

APPENDIX A	SFY 2025 Rate Cell Definitions
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I. SUMMARY AND DISCUSSION OF RESULTS

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify to capitation rates for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for targeted Medicaid beneficiaries, effective for state fiscal year (SFY) 2025. This report provides preliminary SFY 2025 capitation rates and documents their development. This report is structured as follows:

- Section I includes a high-level overview of the change in capitation rates relative to the July 1, 2023 to June 30, 2024 (SFY 2024) capitation rates.
- Section II provides a short background of the MississippiCAN program.
- Section III documents the development of the base data.
- Section IV documents the rate setting process for SFY 2025 capitation rates.
- Appendices A and B contain additional details on the SFY 2025 rate cell definitions and base period data sources and processing.
- Appendix C provides responses to the CMS managed care rate setting guide for all rate cells.
- Appendix D contains an Actuarial Certification for all MississippiCAN rate cells.
- Appendix E documents our reliance on DOM for data and other assumptions in the development of the capitation rates.

SFY 2025 CAPITATION RATES

Table 1 includes per member per month (PMPM) preliminary capitation rates effective for SFY 2025 that will be paid to the Coordinated Care Organizations (CCOs) on a monthly basis (excluding all directed payments and any payments earned through the new value-based payment (VBP) incentive program) to provide medical and certain pharmacy services to their enrolled beneficiaries. Each CCO will be paid based on the distribution of members enrolled in each rate cell. In addition, CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions: North, Central, or South, as shown in Appendix A.

Table 1 Mississippi Division of Medicaid MississippiCAN Capitation Rates Per Member Per Month (PMPM) ¹ Effective SFY 2025			
Rate Cell	North	Central	South
Non-Newborn SSI / Disabled	\$756.04	\$896.04	\$943.32
Breast and Cervical Cancer	\$2,763.68	\$3,275.43	\$3,448.27
MA Adult	\$362.51	\$374.04	\$357.31
Pregnant Women	\$621.91	\$641.70	\$613.01
SSI / Disabled Newborn	\$6,799.70	\$7,186.55	\$6,062.19
Non-SSI Newborns 0 to 2 Months	\$2,372.77	\$2,507.77	\$2,115.42
Non-SSI Newborns 3 to 12 Months	\$313.50	\$331.34	\$279.50
Foster Care	\$634.72	\$670.83	\$565.87
MYPAC	\$3,440.38	\$3,636.12	\$3,067.23
MA Children	\$209.71	\$221.65	\$186.97
Quasi-CHIP	\$205.82	\$217.53	\$183.50

¹ Capitation rates in Table 1 exclude MHAP, MAPS, TREAT, and are prior to the application of the quality withhold or VBP.

In addition, there are multiple directed payments that are paid outside of the monthly capitation rates and excluded from Table 1. The estimated cost for each directed payment is included as a PMPM amount in the preliminary SFY 2025 capitation rates. These PMPM amounts will be retrospectively adjusted on a CCO-specific basis to reflect final payments made for each program.

- The Mississippi Hospital Access Program (MHAP) hospital fee schedule adjustment (FSA) payments are paid outside of the capitation rates on a monthly basis. This amount varies by rate cell on a PMPM basis based on projected utilization of inpatient and outpatient services and actual membership. The MHAP FSA payments are projected to be \$719.7 million in SFY 2025. Please see Section IV of this report for additional details on the MHAP FSA.
- Payments for the MHAP quality incentive payment program (QIPP) are paid outside of the capitation rates on a quarterly basis. The MHAP QIPP payments are projected to be \$820.7 million in SFY 2025. Please see Section IV of this report for additional details on the MHAP QIPP.
- The Mississippi Medicaid Access to Physician Services (MAPS) program in MississippiCAN enhances payments to physicians who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The MAPS payments are estimated to be \$29.5 million in SFY 2025. Please see Section IV of this report for additional details on the MAPS program.
- The Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program in MississippiCAN for SFY 2025 enhances payments to eligible emergency ambulance providers. The TREAT payments are estimated to be \$25.3 million in SFY 2025. Please see Section IV of this report for additional details on the TREAT program.

In addition, we expect that DOM will be filing a preprint with CMS for payments made to providers that opt out of the ambulatory payment classification (APC) payment model for outpatient services. The amount and structure of those payments are still under development at this time, but we will update the rate certification with the appropriate information once available.

In addition, the capitation rates will be adjusted on a CCO-specific basis for the following rate adjustments:

- **Quality Withhold:** As in SFY 2024 rates, DOM will apply a quality withhold to MississippiCAN payments in SFY 2025 based on metrics reported by the CCOs. The PMPM capitation rates in Table 1 are prior to the application of this quality withhold. Please see Section IV for more information on the quality withhold for SFY 2025.
- **Value-Based Payment Program (VBP):** Starting in SFY 2025, DOM is implementing a value-based payment program where CCOs can earn up to a 0.5% incentive payment. Please see Section IV for more information on this program.
- **Risk Adjustment:** The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be risk adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO and will be budget-neutral to DOM. The CDPS + Rx demographic and disease category weights will be calculated using Mississippi FFS and encounter data for the populations enrolled and services provided during SFY 2025.

The capitation rates for the Foster Care rate cell will be risk adjusted using a custom risk adjustment model developed for this population. This custom model uses a member's eligibility for either state or federal financial assistance to assign a risk score. The risk adjustment for the Foster Care rate cell will be applied on a concurrent basis.

Please see Section IV for more information on the application of risk adjustment to the applicable rate cells.

- **High-Cost Pharmacy Risk Corridor:** Similar to SFY 2024, a high-cost pharmacy risk corridor will be applied to recognize the uncertainty in determining rate setting assumptions for the impact of current and anticipated high-cost medications.

Please see Section IV for more information on how the High-Cost Pharmacy Risk Corridor settlement will be calculated.

Our Actuarial Certification of the SFY 2025 MississippiCAN capitation rates is included as Appendix D. It should be emphasized that capitation rates are a projection of future costs based on a set of starting data and assumptions. Actual costs will be dependent on each contracted CCO's situation, experience, and enrolled population.

SELECTION OF BASE DATA

Under normal circumstances, data from calendar year (CY) 2022 would be used as the primary base data for SFY 2025 capitation rates with data from CY 2021 used to supplement CY 2022 data for rate cells with fewer than 150,000 member months. Due to the emergence of COVID-19 in early 2020, and related enrollment changes occurring throughout CY 2021, the CY 2021 encounter data shows different utilization and cost patterns when compared with more recent time periods. We expect claims and member behavior in SFY 2025 to be more similar to adjusted CY 2022, rather than earlier time periods. Therefore, we did not incorporate CY 2021 data for the lower membership rate cells and CY 2022 data was used as our sole base data source for all rate cells in development of the SFY 2025 capitation rates, regardless of membership.

While CY 2022 encounter data is the primary data source for SFY 2025 capitation rates, emerging data from CY 2023 is also used in the development of several rate adjustments, such as seasonal virus impacts, population acuity adjustments, and trend assumptions.

In October 2022 a new MMIS vendor began processing all data for the Mississippi Medicaid and CHIP programs. In order to have consistency in the data for all months, the CY 2022 encounter data that serves as the basis for SFY 2025 capitation rates is supplied by DOM's new MMIS vendor, including restated months of data prior to October 2022. Milliman has worked closely with DOM and their MMIS vendor to refine our data process and validate the CY 2022 data.

CATEGORIES OF SERVICE

For SFY 2025 capitation rate development, the CY 2022 base data was categorized using a more granular category of service methodology in which inpatient, outpatient, and physician services are further subset into more specific sub-categories of service. We believe that these additional breakouts will allow for greater transparency when developing the SFY 2025 capitation rates. Table 2 below shows the comparison between the categories of service for the SFY 2024 and the SFY 2025 capitation rates.

The SFY 2024 capitation rate exhibits displayed costs for the MA Adult and Pregnant Women rate cells separately for delivery and non-delivery related costs. With the addition of maternity and delivery category of service breakouts for inpatient and physician services, we have adjusted our exhibits to show the MA Adult and Pregnant Women costs without this additional breakout as any delivery-specific adjustments will now be reflected in those categories of service.

Starting in July 2024, DOM entered into an arrangement with their Pharmacy Benefits Administrator (PBA) in which certain pharmacy claims are paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. Please see Appendix B for a further description of the associated pharmacy services.

Table 2	
Mississippi Division of Medicaid	
SFY 2024 & SFY 2025 Categories of Service	
SFY 2024 Category	SFY 2025 Category
Inpatient Hospital	Inpatient Hospital Services - Maternity / Deliveries
	Inpatient Hospital Services - Psychiatric / Substance Abuse
	Inpatient Hospital Services - All Other
Outpatient Hospital	Outpatient Hospital Services - Emergency Room
	Outpatient Hospital Services - Pharmacy
	Outpatient Hospital Services - All Other
Physician	Physician Services - Maternity / Deliveries
	Physician Services - Psychiatric / Substance Abuse
	Physician Services - All Other
Pharmacy	N/A
Dental	Dental - All Services
Other	All Other Services

PHE UNWIND AND COVID-19 CONSIDERATIONS IN SFY 2025 RATE DEVELOPMENT

Several adjustments were made in the SFY 2025 capitation rates to reflect changes as a result of COVID-19 and the unwinding impacts of the associated CCR, including:

- Acuity adjustments: Enrollment information through March 2024 was utilized as part of a risk score analysis to estimate changes in population acuity between the base period (CY 2022) and SFY 2025 for certain populations. Please see Section IV (Step 2) for more information on this adjustment.
- Seasonal virus adjustments: Adjustments are made in the rate development to account for estimated changes in seasonal virus loads (including COVID-19, RSV, and influenza) between CY 2022 and SFY 2025. Please see Section IV (Step 1) for more information on this adjustment.

CAPITATION RATE CHANGE SUMMARY

Table 3 summarizes the change in capitation rates from SFY 2024² to SFY 2025. This comparison is shown excluding the impact of directed payments, the quality withhold, and any payments earned through the VBP program, and is composited across all rate cells using CY 2022 membership. Table 3 also summarizes changes excluding the impact of program changes (noted by footnote 2 in Table 3), which increase or decrease total program costs concurrently with revenue for the CCOs and excluding the impact of COVID-19 adjustments (noted by footnote 3 in Table 3).

² “Report 14 – SFY 2024 Preliminary MississippiCAN Rate Calculation and Certification.pdf” dated October 22, 2024.

Table 3
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of SFY 2025 Rate Change Components¹

	Aggregated with CY 2022 Membership
SFY 2024 Capitation Rate - Including Pharmacy Services	\$517.87
Remove Non-Physician Administered Pharmacy Services	0.760
SFY 2024 Capitation Rate - Excluding Pharmacy Services	\$393.39
Shift CGT Estimates from Pharmacy to Physician	1.040
SFY 2024 Capitation Rate - Excluding Pharmacy Services with CGT Shift	\$409.13
Base Period Data Update	0.982
Restate CY 2022 to SFY 2024 Trends	0.999
Restate SFY 2024 Cell / Gene Therapy Coverage ²	0.982
Remove SFY 2024 Population Acuity Adjustment ³	0.970
Other Restated SFY 2024 Assumptions	0.998
Updates Relative to SFY 2024 Assumptions	0.933
SFY 2024 to SFY 2025 Utilization Trends	1.027
SFY 2024 to SFY 2025 Unit Cost Trends	1.004
SFY 2025 Population Acuity Adjustment ³	1.006
SFY 2025 Seasonal Virus Adjustment ³	1.010
SFY 2025 Hemophilia Population Carve-In ²	1.001
SFY 2025 Postpartum Coverage Extension ²	0.997
SFY 2024 to SFY 2025 Restorative Dental Reimbursement Change ²	1.001
Update SFY 2025 Admin	0.997
Remove SFY 2025 PBA Pharmacy Admin ²	0.993
Preliminary SFY 2025 Rate Change	0.965
SFY 2025 Rate Change - Excluding Program Changes²	0.992
SFY 2025 Rate Change - Excluding COVID-19 Adjustments³	0.980

¹ Rate changes exclude MHAP, MAPS, TREAT, the quality withhold, and the VBP.

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

³ COVID-19 adjustments include the population acuity adjustments and seasonal virus adjustment.

The values quoted below are all based on the program wide impact using CY 2022 membership to composite the rate cells. **The rate change components are based on SFY 2024 rates excluding pharmacy services and adjusted to show cell and gene therapy (CGT) costs as part of the physician service category (rather than pharmacy as originally projected in SFY 2024 rate development).**

- As discussed previously, SFY 2024 capitation rates were developed to project total medical and pharmacy costs, including those that will be covered by DOM's PBA for SFY 2025. For comparison purposes, we include the SFY 2024 rates with and without the PBA-eligible pharmacy services. The impact of removing estimated pharmacy category of service from the SFY 2024 rates decreases overall costs by about 24.0%.

The estimated SFY 2024 pharmacy category of service costs were developed using CY 2021 base period experience and trended to SFY 2024, including adding cost estimates for new CGT treatments to the pharmacy category of service. Based on our current understanding of how these claims will be paid in SFY 2025, these services will be paid in physician category of services. Therefore, we restated the SFY 2024 rates with CGT costs included in the physician service category for a more direct comparison to the SFY 2025 capitation rates. This change increases the SFY 2024 rates without PBA-eligible pharmacy services by 4.0%. The net impact of these two adjustments for the removal of PBA eligible pharmacy services (excluding CGTs) is a decrease of about 21.0%.

- The development of SFY 2025 capitation rates is a ground-up approach where the base data and each assumption is evaluated separate from the SFY 2024 capitation rates. However, for the purposes of explaining the rate change from SFY 2024 to SFY 2025, we isolate the impact of rebasing the data and assumptions that we updated relative to the data or assumptions used to develop the SFY 2024 values. Overall, this rebasing decreased the projection of SFY 2024 costs by 6.7% from costs projected in the SFY 2024 capitation rates. This change contains the following sub-components:

- As stated above, SFY 2024 rates used CY 2021 data as the basis for capitation rate development. For SFY 2025, we rely on CY 2022 encounter data as the basis for rate development. The impact of changing our base data (including the associated impact of restating IBNR, TPL, missing data, and non-covered services) decreased projected costs by 1.8%.
 - Milliman restated CY 2022 to SFY 2024 trend assumptions. This included the recalculation of annual trend assumptions based on reviewing restated data, and the recalculation of fee schedule impacts based on base data for CY 2022 (rather than CY 2021); all topics are discussed in Section IV. Overall, this trend restatement resulted in a 0.1% decrease to capitation rates.
 - Several high-cost gene therapies are currently available or will become available during SFY 2025. Restating anticipated medical and non-PBA eligible pharmacy costs associated with these treatments, as well as the carve-in of Zolgensma from FFS, decreased rates by 1.8%. To date, the actual utilization of these high-cost gene therapies has been very low and the SFY 2025 estimates reflect this reduction in anticipated utilization for SFY 2025. Ultimate utilization levels are likely to be greater than or less than the estimates included in the SFY 2025 capitation rates. Therefore, a high-cost drug risk corridor has been implemented for SFY 2025 to mitigate the uncertainty in the estimation of utilization of these therapies and other high-cost pharmaceuticals.
 - The population acuity adjustments previously applied to reflect the impact of eligibility redeterminations from CY 2021 to SFY 2024 were removed to put the capitation rates on a 1.0 basis. A separate adjustment is applied to reflect population acuity changes between CY 2022 and SFY 2025. This reduces capitation rates by 3.0% overall.
 - Various other assumptions were restated, most notably the application of the preventative and diagnostic dental reimbursement increases occurring on July 1, 2021 and July 1, 2022. Now that we are utilizing CY 2022 base period data (instead of CY 2021), we no longer need to apply an adjustment for the July 1, 2021 change, and the July 1, 2022 adjustment is dampened to only apply to half the year. Relying on actual data vs. our prior assumptions reduced overall rates by approximately 0.2% across all rate cells.
- Composite utilization trend assumptions from SFY 2024 to SFY 2025 increased projected costs 2.7%. Please see Section IV for more information on trend assumptions included in SFY 2025 capitation rates.
 - Composite unit cost trend assumptions from SFY 2024 to SFY 2025 increased projected costs 0.4%. This change includes physician administered drug (PAD) trends and any fee schedule changes not modeled by DOM's payment methodology development (PMD) vendor. Please see Section IV for more information on the fee schedule changes currently modeled.
 - Throughout CY 2022, DOM transitioned individuals for whom Medicaid eligibility would have lapsed absent the CCR from the CCOs into FFS Medicaid. In addition, the continuous coverage requirement ended on March 31, 2023 and DOM started redeterminations in April 2023, with disenrollments of ineligible recipients starting in July 2023. During the official redetermination for individuals, there were multiple beneficiaries that had been moved from the CCOs into FFS initially that maintained Medicaid eligibility and subsequently were moved back into MississippiCAN, resulting in steady CCO enrollment increases throughout CY 2023 and into CY 2024. Given the changes in historical enrollment, Milliman developed a population acuity adjustment based on population risk scores to estimate the relative acuity of the base period to the projected SFY 2025 population. Across all rate cells, this population acuity adjustment increased capitation rates by 0.6%. Please see Section IV for a further description of the population acuity adjustment.
 - SFY 2024 capitation rates included an adjustment reflecting estimated changes in testing, treatment, and vaccination costs for COVID-19, influenza, and RSV. We performed a similar analysis for SFY 2025 capitation rates reviewing actual experience during CY 2023 to inform our new baseline costs for COVID-19, influenza, and RSV. The change to use these new adjustments increased the overall rate by 1.0%, as shown in Table 3.

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- Starting January 1, 2024, eligible members with Hemophilia or Von Willebrand disease transitioned from FFS into MississippiCAN. Historically this population was carved-out of MississippiCAN due to the relatively high medical costs associated with these conditions, as well as the infrequent and non-uniform distribution of members across the CCOs. Milliman updated the analysis supporting this adjustment to use CY 2022 data and new projections of CGT usage for these members. Across all rate cells, this restatement increased capitation rates by approximately 0.1%.
- Per SB 2212, postpartum coverage extended from 60 days to 12 months for members who gave birth on or after April 1, 2023, such that the first enrollment month under the coverage extension was July 2023. An adjustment to account for the estimated cost differential between the prior coverage and the additional 10 months of postpartum coverage was included in the SFY 2024 capitation rates. Milliman updated this analysis for SFY 2025 and this resulted in an overall decrease in SFY 2025 capitation rates by 0.3% on a PMPM basis across all rate cells due to a higher percentage of membership in SFY 2025 in these newly covered postpartum months compared to SFY 2024 when this additional coverage was ramping up throughout the year.
- Per HB657, SFY 2025 MississippiCAN restorative dental services will be reimbursed at a rate 5.0% greater than in SFY 2024. Across all rate cells, this amounts to a slight increase to capitation rates.
- Changes to administrative expenses on a PMPM basis result in a decrease to the rate of approximately 0.3%, based upon CCO administrative expenses for CY 2022 trended to SFY 2025. A positive rate change in Table 3 indicates that the administrative costs increased as a percentage of the overall rate (i.e., administrative costs trended at a higher percentage than the overall rate). The overall PMPM for administrative expenses decreased 3.3% from the SFY 2024 allowance, comprised of a fixed administrative expense decrease from \$11.17 PMPM in the SFY 2024 rate to \$10.81 PMPM in the SFY 2025 rate, and a variable administrative expense decrease from \$26.07 in the SFY 2024 rate to \$25.21 in the SFY 2025 rate.
- As mentioned above, certain pharmacy expenses are expected to be paid by DOM's PBA rather than the CCOs. As these services will not be administered by the CCOs, Milliman reduced the SFY 2025 administrative cost levels to account for this change, based on splits of PBM related costs provided by DOM and the CCOs, which show that approximately 15% of prior PBM costs are related to duties that will be retained by the CCOs in SFY 2025. The change decreased overall capitation rates by 0.7% or an additional 7.5% (\$2.72) on a PMPM basis when aggregated using CY 2022 member months.

The rate change included in Table 3 does not include the impact of changes in directed payments from SFY 2024 to SFY 2025. The following changes in directed payments are expected for SFY 2025:

- The total MHAP payment across all MississippiCAN members increases from \$1.522 billion in SFY 2024 to \$1.540 billion in SFY 2025.
- The total MAPS payment decreases from \$39.4 million in SFY 2024 to \$29.5 million in SFY 2025.
- The TREAT payment amount increases from \$20.6 million in SFY 2024 to \$25.3 million in SFY 2025.

Please see Section IV of this report for more information on changes to the directed payments for SFY 2025.

CAPITATION RATE CHANGE BY RATE CELL

Rate changes vary by capitation rate cell as shown in Table 4, which compares SFY 2025 capitation rates to SFY 2024 capitation rates, on a similar basis as Table 3. The level of detail for the rate change included in Table 3 above is shown by rate cell in Exhibit 5.

Table 4
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of Statewide SFY 2025 Rate Change¹

Rate Cell	Overall Rate Change	Excluding Program Changes²	Excluding COVID-19 Adjustments³
Non-Newborn SSI / Disabled	-7.0%	-0.1%	-6.5%
Breast and Cervical Cancer	11.8%	12.4%	12.4%
MA Adult	-11.2%	-10.5%	-4.5%
Pregnant Women	-12.4%	-5.0%	-15.5%
SSI / Disabled Newborn	-13.6%	-13.1%	-15.4%
Non-SSI Newborns 0 to 2 Months	2.0%	2.5%	0.0%
Non-SSI Newborns 3 to 12 Months	10.4%	7.6%	9.9%
Foster Care	-0.7%	-0.1%	-4.0%
MYPAC	-10.1%	-9.7%	-13.6%
MA Children	2.2%	1.6%	5.7%
Quasi-CHIP	0.6%	1.3%	4.5%
Total - Aggregated with CY 2022 MMs	-3.5%	-0.8%	-2.0%

¹ Rate changes exclude MHAP, MAPS, TREAT, and are prior to the application of the quality withhold or VBP.

² Population acuity adjustment and seasonal virus adjustment changes have been excluded from this calculation.

³ COVID-19 adjustments include the acuity adjustments and seasonal virus impact.

DATA RELIANCE AND IMPORTANT CAVEATS

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate SFY 2025 capitation rates. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOPs).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting for January 2022 to December 2022 with runout through June 2023, historical and projected reimbursement information, fee schedules, and other information from DOM, MississippiCAN CCOs, Gainwell Technologies, Myers and Stauffer, and CMS to calculate the preliminary MississippiCAN capitation rates shown in this report. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2025 base data.

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

Our report is intended for the internal use of DOM to review the preliminary MississippiCAN capitation rates for SFY 2025. The report and the models used to develop the values in this report may not be appropriate for other purposes. We anticipate the report will be shared with contracted CCOs and other interested parties. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

Jill Bruckert and Katarina Lorenz are consulting actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

II. MISSISSIPPICAN BACKGROUND

MississippiCAN, a Coordinated Care Program for Mississippi Medicaid beneficiaries, was designed to address the following goals:

- Improve access to needed medical services – This goal is accomplished by connecting the targeted beneficiaries with a medical home, increasing access to providers, and improving beneficiaries' use of primary and preventive care services.
- Improve quality of care – This goal is accomplished by providing systems and supportive services, including disease state management and other programs that will allow beneficiaries to take increased responsibility for their health care.
- Improve efficiencies and cost effectiveness – This goal is accomplished by contracting with CCOs on a capitated basis to provide services through an efficient, cost-effective system of care.

TARGET POPULATION

MississippiCAN was implemented in all 82 counties in the State of Mississippi for all eligible beneficiaries beginning January 1, 2011 for targeted, high-cost Medicaid beneficiaries defined by these categories of eligibility (COEs):

- COE001 – SSI via SDX
- COE019 – Disabled children at home
- COE025 – Working Disabled
- COE026 – DHS CWS Foster Care
- COE027 – Breast-Cervical

On December 1, 2012 the eligible population of MississippiCAN was expanded to include all Foster Care children, Non-SSI Newborns 0 to 12 months, MA Adults, and Pregnant Women, as defined by the following categories of eligibility and age requirements:

- COE003 – DHS-IV-E-Medicaid
 - COE075 – Parents / Caretakers of minor children
 - COE088 – Pregnant Women, 185% FPL – Ages 8+
 - Non-SSI Newborns – Ages 0 to 12 months
- COE003 – DHS IV-E Medicaid
 - COE026 – DHS Foster Care
 - COE071 – Newborn age 0 to 1 with income at or below 185% FPL
 - COE088 – Pregnant Women, 185% FPL

Effective December 1, 2012, all MississippiCAN populations were mandatory enrolled except SSI children, disabled children at home, Foster Care children, and members of the Mississippi Band of Choctaw Indians.

Between December 2014 and July 2015, the eligible population of MississippiCAN was expanded again to include children as defined by the following categories of eligibility, age, and income requirements:

- COE072 – Children age 1 to 5 with income at or below 133% FPL
- COE073 – Children age 6 to 19 with income at or below 100% FPL
- COE074 – Children age 6 to 19 with income between 100% and 133% FPL who would have qualified for CHIP under pre-Affordable Care Act rules

Effective January 1, 2014, COE074 children previously eligible for CHIP with income eligibility between 100% and 133% FPL became Medicaid eligible rather than CHIP eligible due to income eligibility outlined in the Affordable Care Act. These children were moved into MississippiCAN effective December 1, 2014 and referred to as "Quasi-CHIP" children.

The children covered under the above COEs previously covered in the Medicaid program are called “MA Children.” DOM phased in enrollment from FFS into MississippiCAN by July 2015, with most children transitioned between May 2015 and July 2015.

Effective December 1, 2015, in conjunction with the movement of inpatient services into MississippiCAN, enrollment procedures were changed to enroll newborns in MississippiCAN on the day of their birth. Previously, newborns were not enrolled until, on average, their second month of life due to a delay in assigning a Medicaid identification number and the process to enroll them in a CCO.

Starting October 1, 2018, Severely Emotionally Disturbed (SED) Children were covered by MississippiCAN. These children are identified with the lock-in code of “SED,” which is effective for one year after determination. To receive Mississippi Youth Program Around the Clock (MYPAC) services, a child must have an SED lock-in code. This population was referred to as “SED Children” prior to SFY 2021. Starting in SFY 2021, this population is referred to as the “MYPAC” rate cell.

Effective July 1, 2023, postpartum coverage extends from 60 days to 12 months. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. After July 1, 2023 this redetermination will not occur until the end of the 12 months of postpartum coverage.

Throughout this report, we frequently apply the same adjustments to rate cells with similar demographics. The rate cell groups summarized in Table 5 identify the rate cells contained within each grouping referenced throughout this report.

Table 5 Mississippi Division of Medicaid MississippiCAN Capitation Rates Rate Cell Groupings	
Rate Cells	Rate Cell Grouping
Non-Newborn SSI / Disabled	SSI
Breast and Cervical Cancer	SSI
MA Adult	Adults
Pregnant Women	Adults
SSI / Disabled Newborn	Children
Non-SSI Newborns 0 to 2 Months	Children
Non-SSI Newborns 3 to 12 Months	Children
Foster Care	Children
MYPAC	Children
MA Children	Children
Quasi-CHIP	Children

COVERED SERVICES

When MississippiCAN was first established in January 2011, three key services were initially excluded from the program. Over time, each has been moved from being covered by FFS to MississippiCAN as follows:

- Behavioral health services – Rolled into MississippiCAN effective December 1, 2012
- Non-emergent transportation services – Rolled into MississippiCAN effective July 1, 2014
- Inpatient services – Rolled into MississippiCAN effective December 1, 2015

Effective October 1, 2018, MississippiCAN included costs for psychiatric residential treatment facility (PRTF) stays. Historically, these costs were carved out of MississippiCAN, although members were not dis-enrolled from MississippiCAN.

Starting July 1, 2019, services provided at institutions for mental disease (IMD) are covered as part of the MississippiCAN program.

Effective January 1, 2024, members diagnosed with Hemophilia or Von Willebrand disease are included in the MississippiCAN program. These members were previously carved out to the FFS program.

Effective July 1, 2023, Zolgensma will be included as a covered treatment for members with spinal muscular atrophy. Previously this drug was carved out and CCOs were reimbursed for any incurred costs.

Effective July 1, 2024, pharmacy services will no longer be paid by the CCOs and will instead be paid through DOM's PBA.

CCOs historically have not provided services not covered under MississippiCAN "in lieu of" covered services.

ENROLLMENT PERIOD

All beneficiaries have the ability to choose the CCO in which to enroll. Enrolled beneficiaries will have an open enrollment period during the 90 days following their initial enrollment in a CCO, during which they can enroll in a different CCO "without cause" and an open enrollment period from October to December of each year. During this time period, beneficiaries may choose to change their CCO.

Various "for cause" reasons for disenrollment at other times incorporate federal requirements, such as: providers that do not (for religious or moral reasons) offer needed services; not all related services are available in the plan's network; or the plan lacks providers experienced in dealing with the enrollee's health care needs.

Eligibility criteria for MississippiCAN are the same as the eligibility criteria for Mississippi Medicaid. To receive enhanced federal funding during the COVID-19 PHE, DOM paused disenrollment of members from the Mississippi Medicaid program who normally would no longer be eligible for Medicaid services. Where readily identifiable (e.g., individuals aging out of the program eligibility requirements or pregnant women reaching 60 days postpartum), individuals who would have lost normal Medicaid eligibility in the MississippiCAN program were transitioned to FFS for the remainder of the CCR. Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from CCOs into FFS Medicaid. Following the end of the CCR, these members Medicaid eligibility will be redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely. These redeterminations began in SFY 2023 and continue through SFY 2024.

The CCOs do not have the ability to directly market to targeted beneficiaries. DOM provides information about choice of CCOs and enrolls the beneficiaries into their chosen CCO. The Medicaid Fiscal Agent provides some specific services of an enrollment broker to accomplish these tasks.

III. BASE DATA DEVELOPMENT

This section of the report describes the development of the base data used for the preliminary SFY 2025 MississippiCAN capitation rates.

METHODOLOGY OVERVIEW

The base data for the SFY 2025 capitation rates was developed by summarizing eligibility, encounter claims, and financial claim data for CY 2022 MississippiCAN enrollees. Exhibit 9 contains databooks summarizing encounter data for CY 2022 for all rate cells. Please note, the total and PMPM costs shown in the 2022 databook include missing data. The total and PMPM costs in the 2022 databooks tie to the starting totals on Exhibit 1 if missing data is removed from the databook.

The remainder of this section is a high-level description of the processing for eligibility, encounter claim data, and financial claim data for CY 2022 MississippiCAN enrollees. In addition, any adjustments made to the raw data are discussed in this section and shown in Exhibit 1. Please refer to Appendices A and B of this report for additional information on the validation and processing of these data sources.

Membership

Member months by rate cell and region in CY 2022 were summarized from the detailed Medicaid eligibility data, excluding populations not covered by MississippiCAN and individuals that opted out of the program (where applicable). These enrollment counts were validated against enrollment information provided by the CCOs. In total, the enrollment in the eligibility files is 0.4% lower than reported by the CCOs.

Adjustments are applied to the starting enrollment records to reflect changes resulting from several adjustments described below, including:

- **IMD removal:** Per CMS guidelines, eligibility and claims are removed for members with IMD stays of over 15 days in a given month.
- **MYPAC membership reallocation:** Some members were not correctly assigned a 'SED' lock-in code during CY 2022. Although this does not impact overall enrollment, membership is shifted from other children rate cells to the MYPAC rate cell.
- **SSI Children Formerly Moved to FFS Due to PRTF Stay:** Membership and claims information for these members was pulled from FFS data and added to the CY 2022 MississippiCAN eligibility and encounter claims data.

Row (a) of Exhibit 1 includes the adjusted CY 2022 member months included in base data development.

Claim Data

DOM and Milliman go through extensive data validation processes to review CCO submitted encounter data. DOM regularly monitors encounter claims compared to cash disbursement journals (CDJs) to ensure the timeliness and completeness of submitted encounters and works with Myers and Stauffer to identify the correct original or final claim to keep in each claim string. Milliman relied on this claim status identification process to remove duplicates and identify denied claims that are anticipated to be resubmitted and accepted, as described in Appendix B.

As part of rate development, Milliman requests financial reporting data from each CCO. This financial reporting data was reconciled to each CCO's 2022 audited NAIC financial statement. After several rounds of questions to clarify, adjust, and confirm understanding of the reported financial information, Milliman compared the encounter data to the financial reporting data, for paid claims and subcapitated claims. This comparison excludes estimates for incurred but not reported (IBNR) claims and adjusts for any claims that were identified as missing from the processed encounter data. To align the financial templates and encounter data on a comparable basis, we performed this reconciliation exercise using CY 2022 data with run-out through June 2023.

As discussed above, DOM transitioned to a new data vendor during CY 2022. In the process of reviewing the CY 2022 data from the new data vendor, Gainwell, we noted several issues, including duplicate claims. We are still working with DOM and Gainwell to determine a possible resolution for this issue. Therefore, this base data report includes an adjustment to calibrate encounters to CCO reported financial levels at a high-level service category level. This adjustment is discussed in more detail below.

Additionally, starting on July 1, 2024, DOM entered into an arrangement with their PBA in which certain pharmacy claims are paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. Please see Appendix B for a further description of the associated pharmacy services.

MYPAC Member Identification Adjustment

Beginning in July 2021, the assignment of the “SED” lock-in flag was applied inconsistently for some members. The lock-in flag is the primary means of identifying members in the MYPAC rate cell, and as such, using our current rate cell methodology, as outlined in Appendix A, some members were not assigned to the MYPAC rate cell and instead assigned to other children rate cells. We queried our enrollment records and claims data to identify members who should have been identified via the “SED” lock-in flag, but were not and reassigned them accordingly. We reassigned membership and corresponding claims amounts for 3,819 member months totaling approximately \$9.7 million from other children rate cells to the MYPAC rate cell.

The member months shown in row (a) of Exhibit 1 reflects the reassignment of these member months.

The adjustment to reassign the costs between rate cells is shown in Exhibit 1 in row (d).

Encounter to Financial Adjustment

In the development of the base data the following items are noted:

- As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we compared financial to encounter data utilizing the SFY 2024 level of granularity, and the following notes reflect this classification.
- Overall, the paid amounts in the encounters reconcile reasonably well to the paid amounts shown in the CCO financial reporting for the MississippiCAN populations, particularly for inpatient, outpatient, physician, and other services. As Table 6 shows, in total encounter data was 0.32% higher than financial data.
- At a category of service and rate cell level, there was a greater variance between encounter data and financial reporting, particularly for the inpatient and dental categories of service, which may be most impacted by the duplicate claim issues noted above. Therefore, when calculating and applying the financial to encounter data adjustments we applied separate adjustments for inpatient and dental services. All other service categories receive the same adjustment.

Table 6	
Mississippi Division of Medicaid	
SFY 2025 MississippiCAN Capitation Rate Development	
Comparison of Financial and Encounter Data	
Difference of Encounters and Financials (% of Encounters)	
OP / Physician / Other Services	0.69%
IP Services	-2.13%
Dental Services	-2.92%
All Services	-0.32%

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Encounter data for all three CCOs is combined to summarize CY 2022 claim experience for MississippiCAN enrollees. The financial reporting expenditures for all CCOs were combined to perform the encounter validation outlined above, as well as to develop the following adjustments to apply to the encounter data:

- Removal of costs that would be paid or recouped through a third party.
- Addition of IBNR expenses not yet included in encounters.
- Addition of claims paid by the CCOs that are not yet reflected in the encounter system.

All experience used to develop the base period data for the SFY 2025 capitation rates is on a net basis and excludes any member cost sharing.

Row (b) of Exhibit 1 includes the CY 2022 total service costs from the encounter data. Row (c) converts the total service costs to a PMPM basis. To reflect the differences between claims in the financial reporting and the encounter data, the financial to encounter data adjustments are applied on row (e) of Exhibit 1. Given duplicate claims and other encounter data issues noted by Gainwell and DOM, this adjustment calibrates overall encounter claims to levels reported in the financial templates.

Missing Data Adjustment

A separate adjustment was made to account for payments made by the CCOs that are not reflected in the detailed encounter data or cannot be reasonably applied to a specific claim (e.g., provider bonuses or settlements). These claim amounts are not included in the detailed encounter data after the processing outlined in Appendix B. Each CCO provided separate financial reporting to support and validate the amounts reported for claims not appearing in encounters. As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we developed the adjustments utilizing the financial data at the SFY 2024 level of granularity and applied the resulting adjustment factors to all corresponding breakout categories of service. The detailed financial reporting provided by the CCOs included splits by region and rate cell, which were used to allocate missing data on Exhibit 1.

Overall, the base data is increased 0.5% on a PMPM basis for missing data.

The aggregate adjustment for all missing data described above is shown in Exhibit 1 in row (f).

IBNR Adjustment

The adjustment for IBNR claims as of June 30, 2023 uses the best estimate IBNR claims provided by each of the CCOs in their financial reporting. As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we developed the adjustments utilizing the financial data at the SFY 2024 level of granularity and applied the resulting adjustment factors to all corresponding breakout categories of service.

We performed the following high-level reasonability checks to validate these estimates:

- Data, including IBNR estimates, was reported on a quarterly basis by each CCO. We reviewed the reported IBNR by quarter to determine that there was a reasonable pattern throughout the year (i.e., IBNR amounts held for Q1 2022 were significantly lower than Q4 2022).
- IBNR estimates among the CCOs were reviewed to validate that they were approximately the same as a percentage of total claims, where appropriate.
- IBNR estimates by category of service are approximately the same as a percentage of total claims as IBNR adjustments applied to the MississippiCAN data in prior years after accounting for differences in runout period between years.

Overall, the base data increased by 0.7% on a PMPM basis for IBNR claims.

This adjustment is shown in Exhibit 1 in row (g).

Non-Covered Services

As noted above, Milliman is aware of a known data issue related to identifying some non-covered physician services.

Due to this known issue, we developed an estimate for CY 2022 non-covered physician services using percentages from the CY 2021 encounter data.

Additionally, Milliman summarized the costs of home health services exceeding CY 2022 service limits in the encounter data using the definitions provided by DOM, as detailed in Appendix B.

The combined amount for physician and home health services estimated to exceed CY 2022 service limits, which totaled approximately 0.2% of CY 2022 MississippiCAN service costs, were removed from CY 2022 base data at the rate cell level of detail. Service limits do not apply up to age 21, thus, base period costs were not adjusted for these members.

The adjustment to remove estimated non-covered services in CY 2022 is shown in Exhibit 1 in row (h).

Zolgensma Removal

In CY 2022, Zolgensma, a gene therapy used to treat Spinal Muscular Atrophy, was carved-out of managed care and reimbursed separately by DOM on a case-by-case basis. We removed three Zolgensma claims totaling approximately \$6.5 million from the CY 2022 base data as the CCOs were not at-risk for these claims in CY 2022. Across all rate cells, this reduced base data by 0.4%.

The adjustment to remove Zolgensma treatments in CY 2022 is shown in Exhibit 1 in row (i).

Note, starting on July 1, 2023, the Zolgensma carve-out was reversed and CCOs are at-risk for these treatments, subject to the High-Cost Pharmacy Risk Corridor. We include estimates of projected Zolgensma treatments as part of the gene therapy drug coverage adjustment in Exhibit 2, which is detailed in Section IV of this report.

Third-Party Liability (TPL) Recoveries

The CCOs provided Milliman with a summary of recoveries for TPL payments related to claims incurred in CY 2022 and recovered through December 2022. Using CY 2019 through CY 2021 data, Milliman reviewed the portion of total CY 2019 through CY 2021 recoveries recovered after the end of each year. The recovery patterns looked noticeably different in CY 2020 and CY 2021, possibly because of the COVID-19 pandemic. Therefore, we relied on CY 2019 data to estimate total claim recoveries for services incurred in CY 2022, but not yet reflected in the CY 2022 base data. It is assumed that these outstanding TPL recoveries will reduce ultimate CY 2022 paid totals.

We removed the total TPL amounts as a percentage of total paid claims across all rate cells and categories of services from the CY 2022 base data. Across all rate cells, these TPL recoveries amounted to a 0.2% reduction to CY 2022 base data. We do not have information to apply this estimate at either a rate cell or category of service level, and therefore apply a uniform adjustment for the estimate of TPL recoveries.

This adjustment is shown in Exhibit 1 in row (j).

IMD (Institution for Mental Disease) Stays Beyond 15 Days

Per CMS regulations, services rendered at an IMD beyond 15 days in a given month for individuals aged 21 to 64 cannot be covered by Medicaid. CMS requires all claims (not just IMD claims) incurred by members and the enrollment records for those same months be removed from base data for the month with the IMD stay exceeding 15 days. The enrollment shown in row (a) of Exhibit 1 is after the removal of these 93 member months. An additional adjustment was made to remove all claims for these members in the impacted months, resulting in approximately a 0.1% reduction to the CY 2022 encounter data.

This adjustment is shown in Exhibit 1 in row (k).

IMD Unit Cost Adjustment

Some IMD stays for 15 days or fewer for individuals aged 21 to 64 will be covered under MississippiCAN. We adjusted the unit cost for similar claims in the CY 2022 experience to use DOM's fee schedule for these services. These unit cost adjustments resulted in a cost increase of approximately \$700 in total.

This adjustment is shown in Exhibit 1 in row (l).

[SSI Children Formerly Moved to FFS Due to PRTF Stay](#)

From October 2018 through May 2022, DOM moved certain SSI children from COE 001 to COE 005, which is not a MississippiCAN covered population, due to a psychiatric residential treatment facility (PRTF) stay. In SFY 2025, these members will remain in COE 001 during their PRTF stay, and MississippiCAN CCOs will be responsible for expenses incurred during these stays.

We reviewed the encounter data along with a supplemental enrollment extract provided by DOM identifying the members impacted during CY 2022 and found 63 members totaling 316 member months that were moved to COE 005 from January to May 2022. The enrollment shown in row (a) of Exhibit 1 reflects the inclusion of these member months. An additional adjustment was made to add claims for these members in the impacted months to the Non-Newborn SSI / Disabled rate cell. Overall, the base data increased by 0.3% on a PMPM basis for this adjustment.

This adjustment is shown in Exhibit 1 in row (m).

[Adjusted CY 2022 PMPM Costs](#)

Total 2022 base period PMPM costs by rate cell are shown in the final row of Exhibit 1.

IV. PROJECTED SFY 2025 CAPITATION RATES

Many adjustments must be applied to the base period data to develop SFY 2025 capitation rates. This section describes the adjustments applied to the base period data described in Section III to develop SFY 2025 capitation rates. These adjustments are applied in eight steps:

1. Trend costs from base period to SFY 2025.
2. Apply adjustments for population, program, and reimbursement methodology changes.
3. Include an allowance for CCO non-service expenses.
4. Adjust rates to reflect differences in geographic area by rate cell.
5. Apply quality withhold.
6. Adjust for CCO specific risk scores (if applicable).
7. Retrospectively adjust for directed payments.
8. Calculate risk corridor settlements.

STEP 1: TREND COSTS FROM BASE PERIOD TO SFY 2025

Starting with the blended base data developed in Section III, we apply trend adjustments to project the base period to SFY 2025. Below, we describe each trend adjustment shown on Exhibit 2. The adjustments for non-pharmacy and pharmacy services for which the CCOs are responsible (physician administered drugs) are developed using differing methodologies, and therefore, described separately in this section.

Non-Pharmacy Trend Overview

Our general approach to trend development for non-pharmacy categories of service is to consider known recent changes in provider reimbursement, along with historical PMPM trend values. We then develop utilization / service mix trends that produce targeted PMPM trends. We utilize this approach because it is frequently difficult to directly measure changes in utilization for services other than inpatient hospital and pharmacy over time due to differences in counting utilization “units.”

Exhibits 7A to 7E include a historical trend summary of PMPM costs from January 2019 through September 2023 for each high-level population type and in total for the MississippiCAN program. This data has been normalized for the following to put it on a consistent basis across time:

- IBNR from the financial templates was added to the encounter data to review PMPM trends on a completed basis.
- Estimates of the impact of the following material program or reimbursement changes were removed for the applicable time periods. These changes are accounted for in separate adjustments in this report, and therefore, should not be included in data analyzed for trends.
 - Removal of Zolgensma claims
 - 5% assessment removal for OPPS services
 - Implementation of 5% assessment on non-OPPS services
 - OPPS reimbursement changes not related to the 5% assessment
 - PAD reimbursement changes
 - PRTF services
 - OP dental reimbursement change
 - GME carve out
 - NET reimbursement adjustment
 - Provider settlements
 - Financial to encounter adjustments
 - Emergency ambulance reimbursement increases
- PMPMs at a rate cell level were aggregated using September 2023 membership into higher level population groupings and MississippiCAN in total. This removes the impact of membership mix changes across rate cells over time on the aggregate PMPMs.

- No adjustments were made to account for population acuity changes over time.

Table 7 below shows the annualized utilization trends assumed in SFY 2025 capitation rates. Please see Exhibit 12 for a summary of unit cost changes for each service category and rate cell. For the MYPAC rate cell, utilization trends for physician services are dampened relative to the trends shown for other children rate cells to reflect the high proportion of physician services obtained through the MYPAC providers, for which flat utilization trends were assumed. The impact of MYPAC reimbursement changes is reflected through a separate MYPAC fee schedule adjustment, shown on Exhibit 12.

Table 7
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
CY 2022 to SFY 2025 Utilization Trends (Annualized)

Service Category	Population				
	SSI	BCCP	Adults	Children	Newborn
Inpatient Hospital – Maternity / Deliveries	1.0%	1.0%	1.0%	1.0%	1.0%
Inpatient Hospital – Psychiatric / Substance Abuse	5.0%	3.0%	2.0%	3.0%	0.0%
Inpatient Hospital – Other	5.0%	3.0%	2.0%	3.0%	0.0%
Outpatient Hospital – Emergency Room	0.0%	0.0%	0.0%	0.0%	0.0%
Outpatient Hospital – Pharmacy	2.0%	2.0%	1.5%	2.5%	2.5%
Outpatient Hospital – Other	5.0%	3.0%	2.0%	3.0%	3.0%
Physician – Maternity / Deliveries	1.0%	1.0%	1.0%	1.0%	1.0%
Physician – Psychiatric / Substance Abuse	6.0%	3.0%	2.0%	3.0%	3.0%
Physician – Other	5.5%	4.0%	2.0%	3.0%	2.0%
Dental	4.0%	4.0%	4.0%	4.0%	4.0%
Other	3.0%	3.0%	3.0%	3.0%	3.0%

The development of the utilization and unit cost trend assumptions is described below.

Utilization Trend for Non-Pharmacy Costs

Utilization trend reflects expected changes in:

- Demand for medical services
- Intensity or mix of medical services
- Provider practice patterns
- Provider coding changes

The following data sources were used to develop the utilization trend assumptions:

- Historical MississippiCAN specific trends as shown in Exhibits 7A through 7E, with limited credibility applied to trends during the COVID-19 pandemic.
- Emerging Q1 through Q3 2023 experience as reported by the CCOs was additionally summarized to review recent claim trend patterns by population. We adjusted the emerging experience for the following:
 - Acuity changes between Q1 through Q3 2023 and the final acuity projected for SFY 2025 (based on enrollment as of March 2024) for the MA Adult, MA Children, and Quasi-CHIP rate cells.
 - Reimbursement changes effective July 1, 2023 and projected reimbursement changes effective July 1, 2024 were applied to put reimbursement on a SFY 2025 basis.
- Experience from similar programs in other states.

Table 8 below shows the adjusted Q1 through Q3 2023 PMPM costs for the largest population groups, as reported by the CCOs in their emerging CY 2023 financial template data. As described above, this data was adjusted to reflect the expected acuity of the population currently enrolled (as of March 2024) and adjusted to be on a SFY 2025 reimbursement basis. To help assess the reasonability of the trend assumptions selected above, we compared the adjusted Q1 to Q3 2023 PMPM costs for the largest populations to the projected service costs in SFY 2025 and the implied PMPM trend on an annualized basis between the emerging CY 2023 experience and projected SFY 2025 costs. The results are summarized below in Table 8.

Table 8 Mississippi Division of Medicaid CY 2023 Emerging Experience							
Rate Cell	Q1 2023 PMPM¹	Q2 2023 PMPM¹	Q3 2023 PMPM¹	SFY 2025 PMPM^{2,3}	Implied Annualized Trend From Q1 2023	Implied Annualized Trend From Q2 2023	Implied Annualized Trend From Q3 2023
Non-Newborn SSI / Disabled	\$679.06	\$716.68	\$715.22	\$730.00	3.9%	1.1%	1.5%
MA Adult	\$301.28	\$303.38	\$305.45	\$315.11	2.4%	2.4%	2.3%
MA Children / Quasi-CHIP	\$164.30	\$155.51	\$165.77	\$169.18	1.6%	5.3%	1.5%

¹ Adjusted for acuity, reimbursement, and program changes.

² Adjusted to remove estimated CGT costs and the impact of extended postpartum coverage for pregnant women.

³ SFY 2025 PMPMs include estimated reimbursement changes from CY 2022 to SFY 2024, but do not include reimbursement changes from SFY 2024 to SFY 2025 in these preliminary rates.

The adjustment resulting from the selected utilization trends is shown in Exhibit 2 in row (b).

Unit Charge Trends for Non-Pharmacy Costs

The hospital inpatient, hospital outpatient, physician, and dental Medicaid FFS fee schedules are updated each year consistent with the following sources. DOM does not mandate provider reimbursement levels other than to require that reimbursement be at least as great as FFS for network providers. We assume that CCO reimbursement levels will move in tandem with changes to FFS reimbursement. Pursuant to SB2799 that was passed into Mississippi law on April 19, 2021, changes in reimbursement after July 1, 2021 will require legislative notification. HB657 was subsequently signed into law on April 19, 2022, allowing for changes in reimbursement rates as long as the payment methodology remains consistent. Based on direction from DOM we are modeling fee schedule changes for each service category as noted below. Coverage for new codes and prohibition for billing on discontinued codes is allowed. We assumed the net impact of these latter two issues will be budget neutral, but will reevaluate once data is available and adjust capitation rates, if needed. Unless otherwise noted, the fee schedule changes for prior years remained unchanged.

- **Inpatient:** DOM reimburses hospital inpatient claims using an APR-DRG methodology based upon the 3M grouper. Due to issues with the detailed CY 2022 inpatient data as a result of the MMIS vendor transition, the unit cost trends continue to rely on the simulations provided by Conduent for SFY 2024 capitation rates showing the estimated impact of payment rate changes effective July 1, 2023 using an underlying mix of CY 2021 claims. No changes were made to the APR-DRG payment methodology for July 1, 2024.

Table 9 below shows the assumed annualized inpatient charge trends from CY 2022 to SFY 2025 by rate cell grouping including a 0% change for July 1, 2024.

Table 9 Mississippi Division of Medicaid Inpatient Unit Cost Trends for CY 2022 to SFY 2025	
Population	Inpatient
SSI	-1.83%
Adult	1.54%
Newborn ¹	3.34%
Children ²	-1.04%

¹ Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

² Children include all other children rate cells.

PRTFs are not paid using the APR-DRG methodology and instead rely on a separate fee schedule with per diem payment rates for each facility. To calculate the impact of payment rate changes between the base period and SFY 2025 we applied the increased payment rates for each facility to the applicable time periods. Please see Exhibit 12 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

- **Outpatient:** DOM reimburses hospital outpatient claims using the Medicare APC methodology updated on July 1 of each year. We received the simulation of reimbursement changes for OPPS services effective July 1, 2024 from Myers and Stauffer, and these are used to develop our unit cost trends for SFY 2025 capitation rates. The simulations utilize a CY 2022 claims base data set, with separate projections for July 1, 2023 fee schedule changes and July 1, 2024 fee schedule updates.

Not all services included in our outpatient service category are billed using the OPPS payment methodology, and therefore, we dampened the impact of the OPPS reimbursement changes to apply to applicable services only. Fee schedule changes for home health and some ambulatory surgical center (ASC) services are also included in the outpatient service category.

Table 10 shows the assumed annualized outpatient charge trends for non-pharmacy services from CY 2022 to SFY 2025 by rate cell grouping. These trends reflect the combined impacts of fee schedule changes effective on July 1, 2023, and July 1, 2024. Similar to the process described above for PRTF, fee schedule changes for these services are reflected as a charge trend calculated by comparing the fee schedules in place during the base period and projection periods, weighted by the applicable procedure codes. Please see Exhibit 12 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

Table 10 Mississippi Division of Medicaid Outpatient Unit Cost Trends for CY 2022 to SFY 2025	
Population	Outpatient
SSI	2.30%
Adult	2.55%
Newborn ¹	4.84%
Children ²	3.18%

¹Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

²Children include all other children rate cells.

- **Physician:** DOM generally reimburses physician services as a percentage of Mississippi Medicare fee schedules and updates the FFS fee schedules on July 1 of each year for the Medicare fee schedule changes from January 1 of the given year. We received the simulated impact of fee schedule changes between CY 2022 and SFY 2025 from Myers and Stauffer, and these updated values have been incorporated into the SFY 2025 capitation rates.

The simulations utilize a base data set of CY 2022 claims with separate projections for July 1, 2023 fee schedule changes and July 1, 2024 fee schedule updates. These finalized simulations are reflected in the SFY 2025 capitation rates.

The per-encounter FQHC and RHC reimbursement is included in the MississippiCAN capitation rates to provide a steadier cash flow to the RHCs and FQHCs that serve the MississippiCAN population. The CCOs are expected to reimburse FQHCs and RHCs at DOM's per-encounter rates. DOM will monitor the utilization of services at FQHCs and RHCs under MississippiCAN to ensure services are not diverted from FQHCs and RHCs to other providers. Approximately 13.5% of costs in the high-level physician category of service are for FQHCs and RHCs. Rate increases of 3.8%, and 4.6% were applied to FQHC and RHC per-encounter rates effective January 1, 2023 and January 1, 2024, respectively. We assumed the per-encounter increase for FQHCs and RHCs to be 4.2% for January 1, 2025, the average of the prior two years.

The Myers and Stauffer simulations excluded early and periodic screening, diagnostic, and treatment (EPSDT) claims. Therefore, we applied the same increase we observed for simulated claims for similar populations, to these claims. We assumed that reimbursement for all other services remain flat from CY 2022 to SFY 2025. Additionally, we excluded PAD claims from this analysis given we develop and apply trends separately for those services.

Table 11 below shows the combined physician unit cost trends, excluding PADs, incorporating the Myers and Stauffer simulated changes, assumed EPSDT increases, appropriate FQHC and RHC trends, and flat unit cost trends for services with no anticipated changes. These trends are applied to the physician maternity, psychiatric, and the portion of the other physician trends not related to PADs. The total physician other trend is a blend of these trends and PAD trends.

Table 11 Mississippi Division of Medicaid Physician Unit Cost Trends for CY 2022 to SFY 2025	
Population	Physician
SSI	-0.10%
Adult	0.59%
Newborn ¹	-0.72%
Children ²	0.53%

¹Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.
²Children include all other children rate cells.

In addition to the physician unit costs trends included in Table 11, fee schedule changes for autism spectrum disorder (ASD), prescribed pediatric extended care (PPEC), and some ASC services are also included in the physician service category. These charge trends were calculated by comparing the CY 2022 payment rates with those currently expected to be in place during SFY 2025, composited based on the mix of services during CY 2022. See Exhibit 12 for additional details regarding the base period costs and applied trend.

- **Dental:** Dental reimbursement changes due to SB2799 and HB657 are incorporated as a separate adjustment to rates. A 10% increase effective October 1, 2023 for certain orthodontia services is included in the dental unit cost trends. No additional dental fee schedule changes are anticipated for July 1, 2024.
- **Other:** Certain fee schedules remain unchanged, and thus, no changes were implemented to the fee schedules between CY 2022 and SFY 2025 except for the services noted below:
 - Durable Medical Equipment (DME) / Medical Supplies
 - Audiology / Vision
 - Private Duty Nursing (PDN)

The simulated impact of fee schedule changes for July 1, 2023 and July 1, 2024 for DME, medical supplies, audiology, and vision were provided by Myers and Stauffer along with other professional claims. The additional claim level detail provided in this analysis allowed us to more precisely align the claims we bucket into the “other” service category with the correct fee schedule changes.

To calculate the impact of the PDN fee schedule change we applied the 15.0% fee schedule increase effective October 2022 to all claims with a service data prior to October 2022, assuming that CCO payments will increase alongside FFS payment increases. All claims not included in the Myers and Stauffer simulation or separately adjusted in the PDN analysis are assumed to have a 0.0% unit cost trend from CY 2022 to SFY 2025.

Row (c) in Exhibit 2 includes the aggregate unit cost adjustment factors from CY 2022 to SFY 2025.

Physician Administered Drug Trends

We developed physician administered drug (PAD) trends using the following sources:

- **MississippiCAN-Specific Data** – We analyzed completed January 2022 to December 2023 experience for pharmacy claims administered in a medical setting, also referred to in this report as physician administered drugs (PADs). We analyzed historical experience in CY 2022 and CY 2023 by high level population and drug type.
- **Industry Research** – We reviewed recent drug trend reports from PBMs to benchmark the prospective list price and utilization trends used in our detailed modeling of MississippiCAN-specific data. Additionally, we conducted industry research to adjust trends for anticipated market events, including but not limited to, recent average sales price (ASP) price change, biosimilars, novel brand drugs, expanded treatable population for approved drugs (e.g., new indication or age expansion), and drug mix in MississippiCAN medical experience.
- **FDA Drug Approvals** – When developing prospective PAD trends, we consider the FDA approval of various new therapies. However, building explicit additional trend into capitation rates for these products is difficult due to a lack of information on expected pricing and uptake among the various populations. Therefore, we build in modest additional trend to reflect the expansion of new approvals for each population. We note, the historical experience reviewed in trend development also reflects the impact of FDA approvals that were new during those periods. For select high-cost pharmaceuticals we build explicit adjustments into the capitation rates, as outlined in Step 2, rather than incorporating into the PAD trend assumption.

Based on our analyses, we estimate annualized utilization and unit cost trends from CY 2022 to SFY 2025 shown in Table 12. Difference in aggregate trends by population in Table 12 are due to each population’s historical trends and drug mix.

Table 12 Mississippi Division of Medicaid Pharmacy Trends for CY 2022 to SFY 2025				
	SSI	Adult	Children	Newborn
Annualized Unit Cost Trends	2.00%	1.50%	2.50%	2.50%
Annualized Utilization Trends	2.00%	1.50%	2.50%	2.50%

Seasonal Virus Trend Adjustment

We continue to monitor costs associated with COVID-19 (testing, treatment, and vaccinations), as well as costs associated with influenza and respiratory syncytial virus (RSV). We queried CY 2022 MississippiCAN costs associated with COVID-19, influenza, and RSV by population and compared them to similar costs in emerging CY 2023 data with runout through August 2024. Specific adjustments were made to ensure claims are not counted as both COVID-19 and influenza / RSV. Additionally, we excluded all maternity and delivery claims from being identified as either COVID-19 or influenza / RSV, given we would expect those claims to occur regardless.

We expect that seasonal virus costs in SFY 2025 will be more similar to levels observed in CY 2023, which is further removed from the height of the COVID-19 PHE than the base period experience in CY 2022. We observe material decreases in costs related to COVID-19, influenza, and RSV in CY 2023 compared to CY 2022 levels. Therefore, we applied high-level dampening adjustments to apply to CY 2022 COVID-19, influenza, and RSV costs to decrease them in line with observed CY 2023 levels. These dampening adjustments were calculated separately by population and for COVID-19 vs. influenza and RSV and the final resulting dampened cost is included in Table 13 below. The PMPM cost adjustments are scaled across service categories based on the historical cost distribution.

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

Table 13 Mississippi Division of Medicaid Seasonal Virus Trend Adjustment				
	CY 2022 PMPM Cost	CY 2023 PMPM Cost	Adjustment	CY 2022 Dampened Cost PMPM
SSI				
COVID-19	\$19.03	\$7.86	-55.0%	\$8.56
Flu / RSV	\$5.17	\$4.66	-5.0%	\$4.91
Total	\$24.20	\$12.51		\$13.47
Newborn				
COVID-19	\$18.39	\$12.35	-30.0%	\$12.87
Flu / RSV	\$25.32	\$22.88	-5.0%	\$24.05
Total	\$43.70	\$35.23		\$36.92
Children				
COVID-19	\$8.34	\$4.69	-40.0%	\$5.01
Flu / RSV	\$5.22	\$4.52	-10.0%	\$4.69
Total	\$13.56	\$9.21		\$9.70
Adults				
COVID-19	\$11.82	\$4.69	-60.0%	\$4.73
Flu / RSV	\$2.36	\$2.48	0.0%	\$2.36
Total	\$14.18	\$7.18		\$7.09

Row (d) in Exhibit 2 shows the adjustment for seasonal viruses.

STEP 2: APPLY ADJUSTMENTS FOR POPULATION, PROGRAM, AND REIMBURSEMENT METHODOLOGY CHANGES

The following adjustments are applied to reflect changes in expected costs due to changes between the base period and rating period.

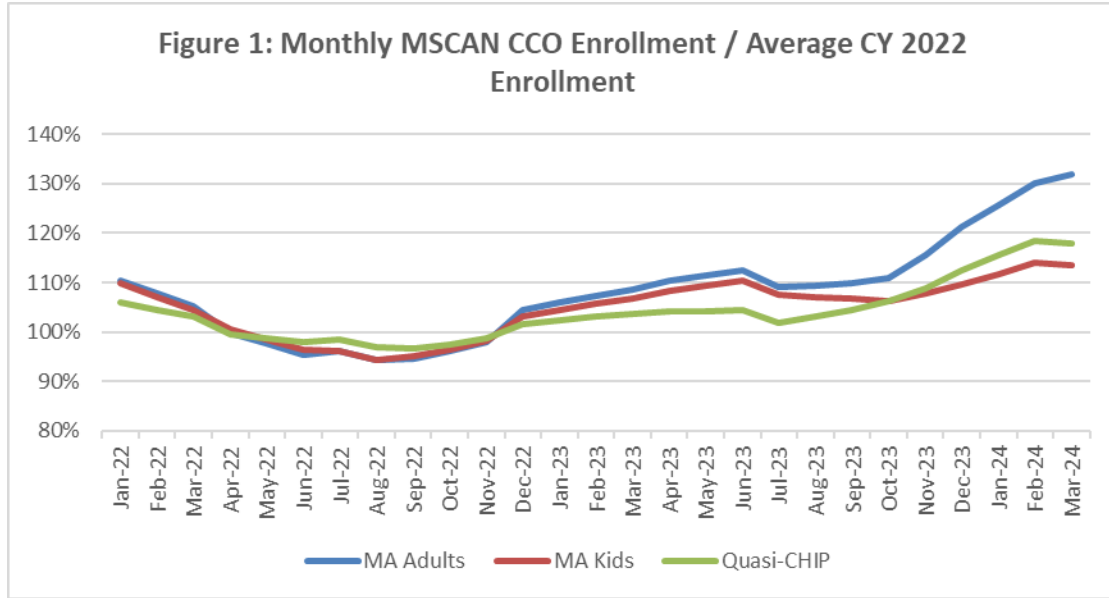
- Population Changes: Change in the mix of individuals already enrolled in MississippiCAN
- Program Changes: Changes to populations and / or services included in MississippiCAN
- Reimbursement Methodology Changes: Updates to Medicaid FFS reimbursement methodologies (assumes a parallel impact on MississippiCAN reimbursement), or changes in CCO reimbursement

Exhibit 10 summarizes the program, population, and reimbursement changes discussed in this section, the impacted rate cells for each change, and where the change is reflected in the rate development.

Population Acuity Adjustment

Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from the CCOs into FFS Medicaid. This transition from the CCOs into FFS Medicaid was concentrated in several populations where members commonly churn in and out of the Medicaid population or transition between rate cells due different income eligibility at different ages, including the MA Adults, MA Children, and Quasi-CHIP children. These transitions continued well into CY 2022, impacting the CY 2022 membership mix included in the base data used to develop SFY 2025 capitation rates.

In addition, the CCR ended on March 31, 2023, and DOM initiated eligibility redeterminations in April 2023, with disenrollments of ineligible recipients starting in July 2023 and continuing over the next 12 months. During the redetermination process, beneficiaries that had been moved from the CCOs into FFS initially that maintained Medicaid eligibility were moved back into MississippiCAN, resulting in steady CCO enrollment increases throughout CY 2023 and into CY 2024. Figure 1 shows this change in monthly enrollment compared to the average enrollment in CY 2022 for each rate cell (e.g., a ratio of 110% indicates that month's enrollment is 10% higher than the average enrollment during the CY 2022 base data).



To estimate the change in acuity due to population changes between the CY 2022 base period data and the population we expect to be enrolled during SFY 2025, we performed a risk score-based acuity analysis. We calculated risk scores for two distinct time frames:

1. CY 2022 (CY 2021 diagnoses and CY 2022 enrollment).
2. March 2024 (CY 2023 diagnoses and March 2024 enrollment used as a proxy for the population enrolled during SFY 2025).

Due to population and programmatic changes occurring in MississippiCAN since we last calculated Mississippi-specific risk scores, we did not use the custom Mississippi risk weights that have been used for risk adjustment in prior capitation rate periods. Instead, we relied on standard CDPS weights from the CDPS + Rx risk score model. We excluded pharmacy claims from the risk score model, as these claims are not included in the capitation rates for SFY 2025. Given the large changes in membership between CY 2022 and March 2024 we only looked at members that were able to be “scored,” meaning they had at least six months of enrollment during the diagnosis period.

To calculate the acuity adjustments, we compared the average risk scores for March 2024 enrollment compared to the average risk score in CY 2022 for each population. The results were very similar for MA Children and Quasi-CHIP, so the same adjustment was applied to both rate cells. The final acuity adjustments applied are a downward adjustment of 1.5% for MA Adults and an upward adjustment of 2.5% for MA Children and Quasi-CHIP, as shown in Table 14.

Table 14 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Population Acuity Adjustment						
Cap Cell	CY 2022 - Scored Members		March 2024 - Scored Members		Risk Score Change	Final Acuity Adjustment
	Member Months	Average Risk Score	Member Months	Average Risk Score		
MA Adult	405,835	1.020	47,891	1.006	0.986	0.985
MA Children	2,462,797	0.947	238,373	0.972	1.027	1.025
Quasi-CHIP	275,824	0.967	27,371	0.986	1.019	1.025

Additional information about the risk scores for members enrolled in MississippiCAN during CY 2022 and March 2024, including additional splits for various time periods are shown in Tables 15 (MA Adult) and 16 (MississippiCAN children) below.

For CY 2022 MississippiCAN scored members, we reviewed the risk scores separately by quarter to assess the impact on risk scores of ongoing member eligibility redeterminations during CY 2022 when members were moved to FFS. This shows that risk scores remain relatively stable during CY 2022 as membership declines.

We similarly reviewed monthly risk scores for each scored population from December 2023 to March 2024 where we saw large membership increases as a result of member eligibility redeterminations related to the unwinding of the PHE. Tables 15 and 16 show a steady increase in membership month over month for all populations, but the impact on risk score varies by population (risk scores decrease for adults and increase for children).

Table 15 Mississippi Division of Medicaid Acuity Adjustment - MA Adult					
CY 2022 Risk Scores by Quarter					
	Q1 2022	Q2 2022	Q3 2022	Q4 2022	CY 2022
Scored Member Months	116,213	101,521	93,607	94,494	405,835
Average Monthly Enrollment	38,738	33,840	31,202	31,498	33,820
Risk Score	1.019	1.025	1.024	1.014	1.020
December 2023 to March 2024 Risk Scores					
	December 2023	January 2024	February 2024	March 2024	
Scored Members	42,388	44,399	46,263	47,891	
Risk Scores	1.019	1.013	1.009	1.006	

Table 16 Mississippi Division of Medicaid Acuity Adjustment - MA Children and Quasi-CHIP					
CY 2022 Risk Scores by Quarter					
	Q1 2022	Q2 2022	Q3 2022	Q4 2022	CY 2022
Scored Member Months	750,429	683,691	649,991	654,510	2,738,621
Average Monthly Enrollment	250,143	227,897	216,664	218,170	228,218
Risk Score	0.941	0.949	0.954	0.949	0.949
December 2023 to March 2024 Risk Scores					
	December 2023	January 2024	February 2024	March 2024	
Scored Members	237,899	247,128	257,521	265,744	
Risk Scores	0.971	0.971	0.973	0.973	

Row (e) in Exhibit 2 shows the population acuity adjustment.

Postpartum Coverage Extension

Per SB 2212, postpartum coverage extended from 60 days to 12 months effective July 1, 2023. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. After July 1, 2023, this redetermination will not occur until the end of the 12 months of postpartum coverage. While this program change has the largest impact on the Pregnant Women rate cell, other rate cells are also expected to have minor increases in enrollment due to extending the time until eligibility redetermination to 12 months postpartum (i.e., if someone would have been disenrolled during their annual redetermination they now will remain for the additional months until 12 months postpartum). We reviewed the impact of the coverage extension on all rate cells in the MississippiCAN program and believe the PMPM impact is minimal and did not include an adjustment for any rate cell except for the Pregnant Women rate cell, given its unique eligibility requirements and historical enrollment patterns. The projected membership in Exhibit 3 includes the impact of extending postpartum coverage for all rate cells.

While this program change will add membership and service costs to the Pregnant Women rate cell, these additional months of coverage are expected to be lower on a PMPM basis than the costs included in the CY 2022 base data. We developed separate adjustments to apply to the non-delivery costs and delivery costs included in Exhibit 2.

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- **Non-Delivery Costs:** The estimated PMPM cost for months 3 through 12 postpartum was developed by reviewing the relativity of the non-pharmacy PMPMs for postpartum months 1 and 2 compared to months 3 through 12 for individuals that had a delivery while in the Pregnant Women rate cell in CY 2023 and were eligible for the extended coverage effective July 1, 2023. Given the limited amount of data available and limitations on claim runout we also compared this to the PMPM relativities used in SFY 2024 capitation rate development, which was calculated based on experience in the MA Adult rate cell during CY 2021. Both data sets showed a cost relativity of roughly 75%. We then applied this relativity to the PMPM cost for postpartum months 1 and 2 for the Pregnant Women rate cell in the CY 2022 base data.
- **Delivery Costs:** Additional delivery costs will not be incurred for the additional months of membership added to the Pregnant Women rate cell. Therefore, we dampen the delivery cost PMPM to spread across the increased membership basis. The adjustment for SFY 2025 is further dampened compared to the adjustment in SFY 2024 capitation rates because the extension of coverage will be in place for a full year at the start of SFY 2025 rather than a ramp-up of additional member months during SFY 2024. Therefore, we expect a higher percentage of non-delivery months in the pregnant women rate cell in SFY 2025 compared to SFY 2024.

Table 17 below demonstrates the development of the population change factors.

Table 17 Mississippi Division of Medicaid SFY 2025 Capitation Rate Development Pregnant Women Rate Cell Postpartum Extension Adjustment			
		Non-Delivery Costs	Delivery Costs
Prior Eligibility: Prenatal through 60 Days Postpartum			
(A)	Member Months	96,821	96,821
(B)	Total Allowed	\$31,518,325	\$56,111,477
(C) = (B) / (A)	CY 2022 Allowed PMPM	\$325.53	\$579.54
New Eligibility: 3 through 12 Months Postpartum			
(D)	Member Months	104,491	104,491
(E)	Total Allowed	\$17,134,718	\$0
(F) = (E) / (D)	Allowed PMPM	\$163.98	\$0.00
Total Population			
(G) = (A) + (D)	Member Months	201,312	201,312
(H) = (B) + (E)	Total Allowed	\$48,653,043	\$56,111,477
(I) = (H) / (G)	Allowed PMPM	\$241.68	\$278.73
(J) = (I) / (C)	Postpartum Population Change Factor	0.742	0.481

Row (f) in Exhibit 2 shows this adjustment.

Hemophilia Population Carve-In

Starting on January 1, 2024, eligible members diagnosed with Hemophilia and Von Willebrand's disease transitioned from FFS to MississippiCAN. Historically this population has been carved-out of MississippiCAN due to the relatively high-cost associated with treatment and the infrequent and non-uniform distribution across the CCOs. DOM provided a list of 168 members with hemophilia that were transitioned from FFS to MississippiCAN on January 1, 2024. We identified 153 members in CY 2022. We included an adjustment to include these members' CY 2022 FFS claims and enrollment to their current rate cell. Additionally, we increased overall costs to reflect the additional 15 members not present in the CY 2022 and assumed these members have the same average PMPM cost as those members reflected in the CY 2022 base period data.

Row (g) in Exhibit 2 shows this adjustment.

Gene Therapy Coverage

There are several high-cost gene therapies that are currently available. We worked closely with our clinical team and the clinical team at DOM to identify eligible members and estimate potential treatment uptake percentages and total costs for treatment for each gene therapy by rate cell. Table 18 below details the assumptions and estimated SFY 2025 impact for each treatment. Additionally, please see Exhibits 14C and 14D for the full development of these amounts by rate cell.

Table 18
Mississippi Division of Medicaid
SFY 2025 Capitation Rate Development
Gene Therapy Estimates

Condition	Therapy	Number of Treatments	Pharmacy Cost per Treatment	Inpatient Cost per Treatment	Total Anticipated Treatment Cost
Beta-Thalassemia	Zynteglo	1	\$2,800,000	\$200,000	\$3,000,000
Duchene Muscular Dystrophy	Elevydis	1	\$3,200,000	\$0	\$3,200,000
Hemophilia A	Roctavian	2	\$2,500,000	\$0	\$5,800,000
Hemophilia B	Hemgenix	1	\$3,500,000	\$0	\$3,500,000
Sickle Cell Disease	Lyfgenia / Casgevy	6	\$2,650,000	\$200,000	\$17,100,000
Spinal Muscular Atrophy	Zolgensma	3	\$2,254,412	\$0	\$6,763,236
Total		14	\$2,711,660	\$100,000	\$39,636,236

Row (h) in Exhibit 2 shows this adjustment.

Gene Therapy Coverage Savings

The gene therapies listed above are assumed to significantly reduce or eliminate symptoms of the underlying condition. We queried CY 2022 claims data for potential utilizers meeting the clinical profile for each gene therapy to analyze what historical costs looked like for these members. We reviewed this information with our clinical team and determined that a majority of costs associated with the underlying condition that are likely to be alleviated by the new gene therapies are related to pharmacy services. Since pharmacy claims not administered as part of the medical benefit are not included in capitation rates for SFY 2025, we have not applied a savings adjustment to the capitation rates reflecting a cost reduction.

Preventative and Diagnostic Dental Reimbursement Change

Per SB2799 signed into law on April 19, 2021, the payment rate for preventative and diagnostic dental services was increased by 5% effective on both July 1, 2022 and July 1, 2023. We determined the proportion of CY 2022 dental claims identified as preventative or diagnostic (defined as procedure codes D0100 through D1999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on preventative and diagnostic dental services with a 0% reimbursement adjustment on other dental services.

The cumulative preventive and diagnostic dental reimbursement change is shown in row (i) in Exhibit 2.

Restorative Dental Reimbursement Change

Per HB657 signed into law on April 19, 2022, DOM increased the payment rate for restorative dental services by 5% on both July 1, 2022 and July 1, 2023 and will increase by another 5% effective on July 1, 2024. We determined the proportion of CY 2022 dental claims identified as restorative (defined as procedure codes D2000 through D2999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the restorative services with a 0% reimbursement adjustment on other dental services, after adjusting for the preventative and diagnostic reimbursement changes discussed above.

The cumulative restorative dental reimbursement change is shown in row (j) in Exhibit 2.

Immaterial Program, Population, and Reimbursement Methodology Changes

There are several program, population, and reimbursement changes between the base period experience and SFY 2025 that we did not build an explicit adjustment into rates for, given the projected budget neutral or immaterial impact. These changes are described below.

- Tobacco Cessation – effective July 1, 2023, coverage for smoking cessation counseling services was expanded to cover up to 12 sessions per year. It is estimated that the impact to capitation rates for this change is negligible, so no adjustment was applied.

STEP 3: NON-SERVICE EXPENSE ALLOWANCE

Administrative Expenses, Premium Tax, and Targeted Margin

The administrative allowance included in the capitation rate is intended to cover administrative costs, including the following:

- Case management
- Utilization management
- Claim processing and other IT functions
- Customer service
- Provider contracting and credentialing
- TPL and program integrity
- Member grievances and appeals
- Financial and other program reporting
- Local overhead costs
- Corporate overhead and business functions (e.g., legal, executive, human resources)

Exhibit 3 shows the build-up of the non-service expenses, comprised of the following components for SFY 2025:

- \$9.99 PMPM for fixed administrative costs
- 5.98% of revenue less directed payments for variable administrative costs
- 1.80% of revenue less directed payments for target underwriting margin and cost of capital
- 3.00% for the Mississippi premium tax

Table 19 displays the non-service expense allowance included in the SFY 2025 rates. All percentages of revenue are shown excluding MHAP, MAPS, and TREAT revenue, which are ultimately not at risk to the CCOs.

Table 19 Mississippi Division of Medicaid SFY 2025 MississippiCAN Non-Benefit Expenses		
	% of Revenue	PMPM
Fixed Costs ¹	2.56%	\$9.99
Variable Costs ²	5.98%	\$23.31
Premium Tax ²	3.00%	\$11.68
Margin ²	1.80%	\$7.01
Total	13.35%	\$51.99

¹ Included in the rate as a PMPM, equivalent % of revenue shown.

² Included in the rate as a % of Revenue, equivalent PMPM is shown.

The administrative expense allowance for SFY 2025 was developed by trending the fixed and variable allowances from CY 2022 financial data provided by the CCOs, combined for MississippiCAN and CHIP. These reported expenses were then adjusted to limit PMPM increases to the employment cost index (ECI) trend of 5.1% between CY 2021 and CY 2022 on a CCO level, if applicable, and to adjust administrative expenses consistent with the administrative expense audits conducted by Myers and Stauffer and related party administrative expense analysis completed by DOM. Applying adjustments consistent with the audit report and related party expenses decreased the CCO reported administrative costs by roughly 3.5% (\$1.24 PMPM) and limiting the PMPM trend to 5.1% for the one CCO with higher trend decreased the reported administrative costs another 8.7% (\$3.03 PMPM). Compared to CY 2021 administrative expenses underlying the SFY 2024 capitation rate, adjusted CY 2022 administrative expenses are down 1.1% on a PMPM basis from \$36.42 to \$36.02 alongside membership decreases for the same time period of 15% to 20%.

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

Adjusted CY 2022 administrative expenses were trended by an annual trend of 3.8% from CY 2022 to SFY 2025. The 3.8% annual trend is a blend of actual employment cost index (ECI) data from CY 2022 through CY 2023 of 4.4% and an assumed 3.4% annual trend from CY 2023 to SFY 2025. The future 3.4% trend assumption is consistent with the average ECI annual change from CY 2018 through CY 2022. The ECI data reflects expected changes in wages and other services that comprise a majority of administrative costs. In addition, we reviewed the CMS Medicare Economic Index (MEI) that includes actual changes through June 2023 and forecasted quarterly changes afterwards. The MEI from CY 2022 through SFY 2025 has an annualized change of 3.8%, similar to our analysis with the ECI data.

Administrative costs for SFY 2025 were also adjusted to reflect the transition of certain pharmacy claims from the CCOs to the DOM contracted PBA. Based on reporting provided by the CCOs and DOM, we estimate that approximately 85% of reported CCO PBM costs incurred during CY 2022 are related to duties that will no longer be performed by the CCOs in SFY 2025 and were therefore removed, resulting in a decrease in administrative costs of roughly \$2.39 PMPM or approximately 7.5%. After the removal of these PBM fees the administrative expenses are projected to decrease by 10.7% on a PMPM basis compared to SFY 2024.

Finally, the administrative expenses are split between the MississippiCAN and CHIP programs, based on the distribution of costs in prior financial template reporting that split MississippiCAN and CHIP expenses. The final overall projected administrative cost PMPM (for fixed and variable expenses) is \$33.30 for the MississippiCAN program in SFY 2025 as shown in columns (c) and (e) of Exhibit 3.

The margin of 1.8% of revenue is applied in column (f) of Exhibit 3 and premium tax of 3.00% of revenue is applied in column (i) of Exhibit 3 for costs included in the capitation rates and Exhibit 13 for state directed payments.

STEP 4: ADJUST FOR GEOGRAPHIC AREA

CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions (as defined in Appendix A): North, Central, or South. Table 20 shows the geographic area factor adjustments that are applied based on a beneficiary's region.

Table 20 Mississippi Division of Medicaid Area Factors			
Region	SSI	Adults and Deliveries	Children
North	0.878	0.995	1.020
Central	1.041	1.026	1.078
South	1.096	0.981	0.909

We developed the geographic area factors on a budget-neutral basis by blending projected claims PMPM across rate cell groupings weighted upon the statewide rate cell distribution for each region and reviewing the relative difference in PMPM cost for each region. We created three different rate cell groups (as shown in Table 5) to aggregate experience for similar rate cells, so that we could adequately reflect area factor differences among rate cells and still maintain credibility.

Exhibit 4 includes the resulting capitation rates for each region using these area factors.

STEP 5: ADJUST FOR QUALITY WITHHOLD

Continuing in SFY 2025, a 1.0% quality withhold will be placed on capitation rates for the MississippiCAN program. The terms of the withhold arrangement are outlined in the contract with the CCOs. To earn back the withhold the CCOs must achieve HEDIS scores for the following conditions that are greater than or equal to 2.0% above the baseline HEDIS scores, with a percentage of the withhold assigned to each category. The benchmarks for SFY 2025 will be set based on the average of all CCO reported scores from calendar years 2021 and 2022 (prorated based on member months).

Each of the following HEDIS measures will be used to earn back one twelfth (approximately 8.33%) of the quality withhold, for approximately 83.33% total across all HEDIS measures:

- Well-Child First 30 months (W15 metrics impact the quality withhold; W30 is reporting only for SFY 2025):
 - Six or more visits for children 15 months of age
 - Two or more visits for children 30 months of age
- Immunization for Adolescents (IMA):
 - Combination 2: Meningococcal, Tdap, and HPV
- Anti-Depressant Management-Acute (AMM-AD):
 - Effective Acute Phase Treatment
- Follow-Up After Hospitalization for Mental Illness:
 - 30 Days – Ages 6 to 17
- Prenatal and Postpartum Care (PPC-AD):
 - Timeliness of Prenatal Care
- Comprehensive Diabetes Care:
 - HbA1c Testing
 - Blood Pressure Control
 - Eye Exams
- Adult and Children Asthma Control – Ages 5 to 64
- Adults Pharmacotherapy Management of COPD Exacerbation: Systemic Corticosteroid

DOM will be monitoring readmission rates reported as part of the QIPP in SFY 2025. For SFY 2025, this will be included as a scored metric for the quality withhold. During SFY 25, CCOs will be required to improve their actual-to-expected (A/E) ratio compared to the baseline years by 2.0% if the baseline A/E ratio is >1.0 or not allow the A/E ratio to be >1.0 for the reporting period if the baseline A/E ratio is <1.0. During SFY 2025, CY 2020 and CY 2021 will serve as the baseline years. This PPHR measure will be used to earn back 8.33% of the quality withhold.

Consistent with SFY 2024, DOM will also be monitoring the cesarean section (C-section) rates among all births paid for by a CCO during the measurement period (CY 2024) and comparing to the baseline period (CY 2021). To earn back the final 8.33% of the withhold a CCO must improve their individual C-section rate by two (2.0) percentage points during the measurement period compared to the baseline period.

If a CCO does not have sufficient data to consider its HEDIS scores credible, DOM will not hold the CCO liable for not meeting the measurement. In this case, the portion of the incentive withheld related to that measurement will be returned to the CCO. DOM will not prorate the results for a CCO based on the outcomes of the measures attained during SFY 2025. After discussions with DOM about the metric development and expectations, we believe that a return of 100% of the withhold is reasonably achievable by the CCOs.

Exhibit 4 includes the resulting capitation rates for each region net of the quality withhold.

STEP 6: ADJUST FOR CCO-SPECIFIC RISK SCORE (IF APPLICABLE)

Risk Adjustment for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP Rate Cells

The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be further adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). Costs for the Breast and Cervical Cancer, Foster Care, and Pregnant Women populations are less variable since they tend to utilize similar services across each population. In addition, some of the population sizes are too small from which to develop custom weights specific to the covered services and MississippiCAN

reimbursement levels. Therefore, we do not risk adjust these populations. Since the risk adjustment is prospective, there is no historical diagnosis information from which to develop a risk score for newborns.

The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

To establish these risk scores, the CDPS + Rx risk adjuster will be run with risk weights consistent with services covered in MississippiCAN for the given time period. These risk weights are calculated using Mississippi FFS and encounter data for the Non-Newborn SSI / Disabled, MA Adult, MA Children, Quasi-CHIP, and CHIP populations. In addition, a beneficiary must have at least six months of eligibility in the data year to be scored. If a beneficiary does not have enough data, they will receive a score based on demographic information, such as age and gender. We will monitor the percentage of CCO enrollees who are not scored and adjust the methodology if necessary.

DOM's MMIS vendor changed in October 2022, and we have been working to evaluate the quality of the membership and encounter claims data after this transition. This evaluation is now complete, allowing us to utilize this data to develop updated population-specific cost weights and risk scores reflecting the populations and services covered during SFY 2025. We updated risk weights and risk scores for the first half of SFY 2025 (July through December 2024) using CY 2023 encounter and FFS data with runout through April 26, 2024, as well as June 2024 enrollment data. We have not calculated the risk scores for the second half of SFY 2025 (January through June 2025), but we plan to complete this work by the end of the year.

Table 21 Mississippi Division of Medicaid CCO Capitation Rate Risk Adjustment Schedule SFY 2025 Capitation Payments			
Rate Cell	Capitation Payments	Diagnosis Source Data	Enrollment Source
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	July 2024 to December 2024	CY 2023 Encounter and FFS claims with runout through April 26, 2024	June 2024
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	January 2025 to June 2025	SFY 2024 Encounter and FFS claims with runout through August 30, 2024	October 2024

Risk Adjustment for the Foster Care Rate Cell

Starting in SFY 2021, the Foster Care rate cell is concurrently risk adjusted after the risk adjustment period ends. The Foster Care rate cell will be risk adjusted using a custom risk adjustment model that does not depend on the CDPS + Rx risk adjuster. After testing the predictive ability of several potential models, we determined the member's eligibility for either state or federal financial assistance was the most accurate indicator of the member's risk score. This status is captured by the money code field on DOM's enrollment records. Updated risk weights for each money code were calculated using more recent data, and reflecting changes to the covered population. These risk weights will be used for calculating foster care risk scores for SFY 2025.

Unlike the other risk-adjusted populations, risk adjustment for the Foster Care rate cell will be applied concurrently after the risk adjustment period ends. Given the small size of the Foster Care rate cell, small fluctuations in membership could have a material impact on risk adjustment if applied prospectively. Therefore, we will continue to concurrently risk adjust the Foster Care rate cell in SFY 2025.

Application of Risk Scores

A CCO's capitation rate will be determined based upon the following formula:

CCO Capitation Rate = Base Capitation Rate x CCO Normalized Risk Factor

The base capitation rates are found in Exhibit 4.

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The CCO normalized risk factor will equal the average risk factor across all beneficiaries that a CCO enrolls divided by the average risk factor for the rate cell’s population. Regional risk scores will be normalized to ensure the risk adjustment process is revenue neutral across all CCOs.

STEP 8: DIRECTED PAYMENTS

DOM will process the capitation rate adjustments for multiple directed payments outside of the monthly capitation rate payment system in the form of payments to the CCOs for the actual amount paid to providers and the associated premium tax impact related to these payments. We will calculate and certify adjusted CCO-specific capitation rates at the conclusion of SFY 2025. This recertification is expected to be completed by June 2026.

MHAP Overview

Concurrent with the inclusion of inpatient hospital services in MississippiCAN capitation rates effective December 1, 2015, MHAP was established. This program helps to ensure sufficient access to inpatient and outpatient hospital services for the Medicaid population by including enhanced hospital reimbursement in the capitation rates.

MHAP is funded through a broad-based hospital assessment for facilities in Mississippi and an intergovernmental transfer (IGT) for a facility in Memphis (located within a county contiguous to Mississippi). This provider assessment is outlined in Miss. Code Ann §43-13-145.

Per CMS’s approval on January 12, 2018, beginning in SFY 2018 MHAP began to transition to directed payments according to the specifications and requirements of 42 CFR 438.6 et seq. Table 22 displays the two components of MHAP (FSA and QIPP) and the total dollars in each component from SFY 2024 to SFY 2025.

Table 22 Mississippi Division of Medicaid MississippiCAN Capitation Rates MHAP Distribution by SFY			
SFY	MHAP FSA	MHAP QIPP	Total MHAP
2024	\$733,317,426	\$788,996,459	\$1,522,313,885
2025	\$719,679,373	\$820,744,321	\$1,540,423,694

The roughly \$18 million in additional funding from SFY 2024 to SFY 2025 is comprised of an increase of roughly \$43.5 million (described in the MHAP QIPP section below) and a decrease of approximately \$25.4 million for the removal of payments to an out of state children’s hospital.

MHAP FSA

For SFY 2025, a payment of \$719.7 million is included as a directed FSA on inpatient and outpatient claims that will be paid monthly outside the capitation rates as a separate payment term.

The preliminary FSA amounts are shown in column (c) of Exhibit 13, consistent with the program design that 60% of the \$719.7 million will be paid for inpatient hospital services, and 40% will be paid for outpatient hospital services using projected SFY 2025 membership. These calculations were performed across all MississippiCAN rate cells with each of the inpatient and outpatient FSA percentage impacts applied uniformly. This results in a larger proportion of the FSA funding included in rate cells with higher inpatient and outpatient utilization.

The estimated FSA PMPM in Exhibit 13 is based on projected SFY 2025 membership and estimated utilization across all CCOs. Due to actual vs. projected CCO-specific MississippiCAN membership and claim utilization, this estimated capitation adjustment may result in an overpayment or underpayment of the FSA in SFY 2025 if no adjustments are made. The final CCO specific FSA amounts will be calculated on a PMPM basis at the end of SFY 2025, and the appropriate documentation will be provided to CMS.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on June 26, 2024 with an amendment submitted to CMS on August 29, 2024. The control name for this preprint is MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630.

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The MHAP FSA additive adjustment is shown in column (c) in Exhibit 13. An additional allowance for premium tax on the MHAP FSA is included in column (d) in Exhibit 13.

MHAP QIPP

Beginning in SFY 2020, a quality incentive payment program (QIPP) was included as a component of MHAP. Consistent with the preprint submitted to CMS, the QIPP will be paid as a uniform payment arrangement for SFY 2025. The goal of the QIPP is to utilize state and federal investments to improve the quality of care and health status of the Mississippi Medicaid population. The introduction of QIPP was a multi-year process with an increasing percentage of the payments linked to performance improvements achieved and maintained by the hospital industry.

For SFY 2025, the QIPP will consist of approximately \$820.7 million, which will be paid outside of the capitation rates on a quarterly basis as a separate payment term. DOM will determine the payments made to facilities based on agreed upon performance measures. Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2025 to include a QIPP PMPM for each CCO, which will include a provision for premium tax.

New for SFY 2025, additional funding of \$43.5 million is included in the expected QIPP payments related to a new VBP arrangement in which hospitals can earn bonus payments for meeting performance levels assigned to a variety of metrics. These payments will only be made to hospitals that meet the prescribed performance levels for each metric.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on June 26, 2024 with an amendment submitted to CMS on August 29, 2024. The control name for this preprint is MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630.

The MHAP QIPP additive adjustment is shown in column (e) in Exhibit 13. An additional allowance for premium tax on the MHAP QIPP is included in column (f) in Exhibit 13.

TREAT Program

Beginning July 1, 2022, emergency ambulance reimbursement are proposed to be increased consistent with a \$438.6(c) directed payment for eligible providers. Subject to CMS approval, payments for the TREAT program are estimated to be \$25.3 million for SFY 2025 and will be paid outside the capitation rate as a uniform payment arrangement.

Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2025 to include a TREAT PMPM for each CCO, which will include a provision for premium tax.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on July 22, 2024. The control name is MS_Fee_Oth_Renewal_20240701-20250630.

The TREAT additive adjustment is shown in column (g) in Exhibit 13. An additional allowance for premium tax on the TREAT payments is included in column (h) in Exhibit 13.

Mississippi MAPS Program

Beginning in SFY 2020, the Mississippi Medicaid Access to Physician Services (MAPS) program enhanced payments to physicians who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The term "qualifying hospital" means a Mississippi state-owned academic health science center with a Level 1 trauma center, Level 4 neonatal intensive care nursery, an organ transplant program, and more than a four hundred (400) physician multispecialty practice group.

DOM will require that CCOs provide the same supplemental percentage increase, equal to 58.63% of Medicare rates, to all qualifying providers. Payments in SFY 2025 are expected to be \$29.5 million. Similar to MHAP, capitation rates will be retroactively adjusted for SFY 2025 to include a MAPS PMPM including a provision for premium tax for each CCO and rate cell based on actual membership and utilization. The appropriate documentation will be submitted to CMS at the time of this retroactive adjustment.

This program is being made under a \$438.6(c) payment arrangement consistent with the preprint that was filed with CMS for SFY 2025 on August 6, 2024. The control name is MS_Fee.VBP_AMC_Renewal_20240701-20250630.

The MAPS additive adjustment is shown in column (i) in Exhibit 13. An additional allowance for premium tax on the MAPS is included in column (j) in Exhibit 13.

Table 23 below shows a summary of the MHAP, MAPS, and TREAT payments for SFY 2024 and SFY 2025.

Table 23 Mississippi Division of Medicaid Summary of Directed Payments by SFY		
	SFY 2024	SFY 2025
Total MHAP	\$1,522,313,885	\$1,540,423,694
MHAP FSA ¹	\$733,317,426	\$719,679,373
MHAP QIPP ¹	\$788,996,459	\$820,744,321
MAPS ²	\$39,420,290	\$29,526,117
TREAT	\$20,616,966	\$25,285,224
Total Directed Payments	\$1,582,351,141	\$1,595,235,035

¹ Amendments for the SFY 2025 MHAP FSA and MHAP QIPP are pending CMS approval.

² The preprint for the SFY 2025 MAPS payment is pending CMS approval.

STEP 9: CALCULATE RISK CORRIDOR SETTLEMENTS

Subject to CMS approval, DOM will implement a symmetrical risk corridor to address the uncertainty around cell and gene therapies (CGTs) and other potential high-cost medications.

High-Cost Pharmacy Risk Corridor

Some Medicaid members have conditions requiring very expensive drug treatments. These members are infrequent and not evenly distributed among the CCOs. To help mitigate the CCO's risk, the state is continuing the high-cost pharmacy risk corridor started in SFY 2024, subject to CMS approval. The risk corridor is applicable to total drug spend and related costs due to administration and monitoring for specified products of \$250,000 or more per year at a member level. Table 24 below, as well as Exhibit 14A, include a PMPM estimate of the costs that will be covered in the high-cost pharmacy risk corridor specific to each rate cell. Please see Exhibits 14C and 14D for the detailed calculations of the high-cost pharmacy targets below. The actual costs from the CCOs will be compared to these estimated costs for the settlement calculations.

Table 24 Mississippi Division of Medicaid SFY 2025 High-Cost Pharmacy Risk Corridor	
Rate Cell	SFY 2025 High-Cost Pharmacy Target PMPM
Non-Newborn SSI / Disabled	\$34.81
Breast and Cervical Cancer	\$0.00
MA Adult	\$0.64
Pregnant Women	\$0.00
SSI / Disabled Newborn	\$0.47
Non-SSI Newborns 0 to 2 Months	\$29.66
Non-SSI Newborns 3 to 12 Months	\$17.24
Foster Care	\$5.05
MYPAC	\$0.00
MA Children	\$4.53
Quasi-CHIP	\$0.00
Total	\$8.69

Table 25 summarizes the share of gains and losses relative to the estimated high-cost pharmacy costs for each party.

Table 25 Mississippi Division of Medicaid Proposed High-Cost Pharmacy Risk Corridor Parameters		
CCO Gain / Loss	CCO Share of Gain / Loss in Corridor	DOM Share of Gain / Loss in Corridor
Less than -6.0%	0%	100%
-6.0% to -3.0%	50%	50%
-3.0% to +3.0%	100%	0%
+3.0% to +6.0%	50%	50%
Greater than +6.0%	0%	100%

The high-cost pharmacy risk corridor will be implemented using the following provisions:

- Estimated high-cost pharmacy costs are calculated separately for each rate cell based on the expected mix of high-cost products.
- Each rate cell’s actual high-cost pharmacy costs will include payments made for the following:
 - All drugs billed as medical claims with a HCPCS code that starts with the letter “J.”
 - Inpatient stays for the administration and monitoring for select gene therapies and other select products. The estimated pharmacy costs included in the high-cost risk corridor include the following; however, DOM will monitor and revise the list of approved products if additional products are covered by DOM for use during SFY 2025.
 - Lyfgenia
 - Casgevy
 - Zynteglo
- The timing of the initial and final high-cost pharmacy risk corridor settlements are outlined below.
 - The initial settlement will occur after the contract year is closed, using six months of runoff.
 - The final settlement will occur once the MLR audit has been completed. MLR audits are usually completed 12 to 18 months after the close of the SFY.
- The 91.3% minimum MLR provision (Federal MLR definition) in the CCO contract will apply after the high-cost pharmacy risk corridor settlement calculation.

STEP 10: OTHER PROGRAM CONSIDERATIONS

Minimum MLR Requirement

The program includes a minimum federal MLR requirement of 91.3% of revenue. The sum of medical expenses and HCQI expenses must meet or exceed 91.3% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 91.3% threshold is not met, CCOs return revenue to DOM until the threshold is met.

Value-Based Payment Incentive Program

Effective July 1, 2024, DOM will implement a value-based payment incentive program (VBP) as part of the MississippiCAN contract. In alignment with DOM’s Comprehensive Quality Strategy the VBP will target three primary focus areas: maternal health, metabolic health, and mental health.

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

- **Maternal Health.** Mississippi has the highest maternal mortality rate in the country with 82 maternal deaths per 100,000 births. Mississippi also has the highest percentage of births by black mothers (42% of all births) in the country, which is significant given that black women have higher mortality rates than any other racial or ethnic group.
- **Metabolic Health.** Nationally, obesity rates have risen, and obesity is a significant contributor to a host of conditions, such as type II diabetes, hypertension, coronary artery disease, stroke, and many others. Mississippi has the sixth highest obesity rate in the country with more than 39% of its residents being obese. Additionally, the percentage of the Mississippi Medicaid population that is considered to be obese is estimated to be higher than the state average with obesity rates being higher among individuals with lower income.
- **Mental Health.** Mental health has an impact on physical health. For example, depression increases the risk for many conditions, such as diabetes, heart disease, and stroke. Mississippi was ranked 47th in the nation for access to mental health services. Additionally, mental health conditions have been shown to contribute to a large proportion of pregnancy-related deaths (23%).

The program will consist of associated quality measures, payment arrangements and amounts, as determined and defined by DOM, which promote quality in the delivery of services. DOM will leverage the Health Care Payment Learning & Action Network (LAN) Framework that characterizes payment models. Within this framework, the progression of payment models is tied to cost and quality and progress from fee-for-service models in Category 1 to population-based payments at Category 4. Similarly, the VBP will be phased in, such that a portion of incentives are tied to pay for reporting on the implementation of redesigned systems and performance measures (Category 2B) and will transition to pay for performance (Category 2C), while a portion of incentives will begin as pay for performance.

While the program launch is July 1, 2024 to align with the CCO contract start date, the first performance period will be based on CY 2024 data and will be reported in July 2025. Each subsequent program year will be based on the calendar year and reported annually in July.

For SFY 2025, the following performance measures are to be assessed and incentivized:

1. Severe Maternal Morbidity Risk Assessment – Part A: Assessment Completion, and Part B: Timely Follow-up.
2. Low-risk Cesarean Delivery (LRCD-CH).
3. Antidepressant Medication Management (AMM-AD).
4. Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD-AD).

Severe Maternal Morbidity (SMM) includes the unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a woman's health. To manage poor outcomes, Mississippi will use diagnostic information to develop a maternal health risk assessment to be used by hospitals at time of discharge. Based upon the Mississippi Outcomes for Maternal Safety (MOMS) score assigned to the beneficiary at the time of discharge, required interventions will be employed to ensure follow-up care within specified timeframes. Incentives will be based initially upon reporting on assessment and follow-up implementation activities (e.g., technology infrastructure), then transition to pay for reporting performance, and in future performance years, transition to pay for performance.

The new VBP program builds upon the current CCO incentive withhold program as a quality-based incentive (i.e., bonus) payment in addition to the CCO's monthly capitation rates. Under the VBP program, each CCO will be eligible to receive additional funds over and above base capitation rates. Monetary incentives will not exceed one-half percent (.5%) above the capitation payment and, as such will not be in excess of 105% of the approved capitation payments in accordance with 42 C.F.R. § 438.6(b). The introduction of the VBP program does not impact how capitation rates were calculated for SFY 2025.

DOM will apply a weighted percentage of the eligible incentive allocation and each measure will be evaluated separately for payment.

Pay for performance incentives will be based on statewide performance targets. Targets will be defined by DOM using nationally available benchmarks where available and align to the CCO incentive withhold program, as applicable. Failure to meet a measure target will result in no incentive being paid for that measure. There will be no partial incentive payments awarded.

The payment model will recognize the contributions of CCOs, hospitals and other providers, through the distribution of incentive payments to the CCOs that are then shared as applicable and in proportions as set by DOM. In exchange for incentives created through the VBP, CCOs, hospitals, and other providers are expected to collaborate with one another, utilizing care management and other available tools to ensure that performance targets set by DOM are met. At DOM's discretion, additional incentives for CCOs may include priority in CCO auto-enrollment, with higher performing CCOs having the potential to be assigned auto-enrolled members at a higher percentage rate.

Upon collection of data in July of each year, DOM will review actual performance to target performance to calculate measure achievement. Based on performance achieved, incentive payment will be calculated. CCOs will receive a performance report indicating performance and payment achieved. CCOs will have an opportunity to review and request information or a reconsideration of payments applied. DOM will then finalize and release incentive payments. The timeline will align with the CCO incentive withhold program and allows six months after the calendar year to gather, review and analyze the applicable data. CCOs are then expected to share incentives with hospitals and other providers based on program requirements.

EXHIBITS 1 THROUGH 15

(Provided in Excel Format Only)

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 4, 2024

APPENDIX A

SFY 2025 Rate Cell Definitions

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

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December 4, 2024

APPENDIX A

SFY 2025 RATE CELL DEFINITIONS

This section of our report outlines the rate cell definitions to be used for SFY 2025 for the populations addressed in this report. These definitions are summarized in Table 1 below. Capitation rate cells for SFY 2025 were kept consistent with the SFY 2024 capitation rate cells. Previously the MA Adult and Pregnant Women rate cells included an additional breakout of delivery service costs in Exhibit 2, which has been removed now that level of detail is provided for delivery costs as part of the service category breakouts.

Table 1 Mississippi Division of Medicaid Rate Cell Definitions			
Rate Cell Grouping for Assumption Development	Rate Cell	Age Requirement	Category of Eligibility (COE)
Children	SSI / Disabled Newborns	Ages 0 to 12 months (13-month duration)	001, 019
Children	Non-SSI Newborns – age 0 to 2 months	Ages 0 to 2 months (3-month duration)	003, 026, 071, 088
Children	Non-SSI Newborns – age 3 to 12 months	Ages 3 to 12 months (10-month duration)	003, 026, 071, 088
Children	MA Children	Ages 1 to 19	072, 073
Children	Quasi-CHIP	Ages 1 to 19	074
Children	MYPAC ¹	Ages 1 to 20	N/A, Lckn_cd = SED
Children	Foster Care	Ages 1+	003, 026
Adult	Pregnant Women	Ages 8 to 64	088
Adult	MA Adult	Ages 19+	075
SSI	Non-Newborn SSI / Disabled	Ages 1+	001, 019, 025
SSI	Breast and Cervical Cancer	N/A	027

¹ MYPAC rate cell is defined using the 'SED' lock-in code along with claims and eligibility information due to issues with the 'SED' lock-in code after July 1, 2021.

All rate cell eligibility excludes the following individuals not enrolled in MississippiCAN:

- Retroactive membership
- Dual eligible members
- Institutionalized beneficiaries in a long-term care facility
- Individuals in the following waiver programs: WAL, WED, WMR, or WTB

Additionally, fee-for-service (FFS) eligibility and claims data will be used to summarize experience for members with hemophilia or Von Willebrand disease in CY 2022 who will be enrolled in MississippiCAN during SFY 2025 and to review acuity differences due to enrollment shifts between FFS and MississippiCAN during the COVID-19 Public Health Emergency (PHE).

GEOGRAPHIC REGIONS

DOM uses regional payments to better reflect enrollment for CCOs that enroll a disproportionate number of members from higher-cost or lower-cost regions of the state. DOM uses the three regions of North, Central, and South based on the county where a beneficiary lives. Table 2 displays the counties included in each region.

APPENDIX A

SFY 2025 RATE CELL DEFINITIONS

Table 2 Mississippi Division of Medicaid Geographic Regions by County		
North Region	Central Region	South Region
Alcorn	Calhoun	Adams
Attala	Chickasaw	Amite
Benton	Choctaw	Covington
Bolivar	Claiborne	Forrest
Carroll	Clarke	Franklin
Coahoma	Clay	George
DeSoto	Copiah	Greene
Grenada	Hinds	Hancock
Holmes	Issaquena	Harrison
Humphreys	Jasper	Jackson
Itawamba	Kemper	Jefferson
Lafayette	Lauderdale	Jefferson Davis
Lee	Leake	Jones
LeFlore	Lowndes	Lamar
Marshall	Madison	Lawrence
Montgomery	Monroe	Lincoln
Panola	Neshoba	Marion
Pontotoc	Newton	Pearl River
Prentiss	Noxubee	Perry
Quitman	Okitbbeh	Pike
Sunflower	Rankin	Stone
Tallahatchie	Scott	Walthall
Tate	Sharkey	Wayne
Tippah	Simpson	Wilkinson
Tishomingo	Smith	
Tunica	Warren	
Union	Webster	
Washington	Winston	
Yalobusha	Yazoo	

To determine a beneficiary's county, we used the following approach:

- County code included on a beneficiary's enrollment record in a given month.
- Absent (a), we mapped zip codes in the enrollment file to counties. In cases where a zip code is present in more than one county, we assumed that a zip code maps to a given county if:
 - The zip code shows up most frequently for a given county in the enrollment file (assuming a minimum of five occurrences).
 - Census information indicating the portion of a zip code's population that resides in each county. County is assigned to a zip code based on the county that includes the largest portion of a zip code's population.

If a beneficiary could not be assigned to a region, we excluded their eligibility and claim experience from the base data. This accounts for less than 0.4% of all current MississippiCAN eligible members in CY 2022.

APPENDIX B

Data Sources and Processing

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

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December 4, 2024

APPENDIX B

DATA SOURCES AND PROCESSING

A number of data sources are used to develop the base data for the SFY 2025 MississippiCAN capitation rates.

- Medicaid eligibility data
- FFS claim data
- CCO encounter data
- CCO financial data

CY 2022 experience forms the primary base data for the SFY 2025 capitation rates.

This section of the report outlines each data source and steps to process the data.

MEDICAID ELIGIBILITY

DOM's MMIS vendor provided detailed Medicaid eligibility data for CY 2022. Before analyzing claims, we pared down the eligibility data to groups that are eligible to enroll in MississippiCAN, as defined in Appendix A of our report. In order to isolate data only for this group, we applied various filters as described in the rest of this appendix.

We relied upon the 'CAN' lock-in code for each eligibility span to include individuals enrolled in MississippiCAN in the base period. This assumes that MMIS-calculated enrollment criteria in the base period is consistent with how it will be applied for SFY 2025 capitation rate payments. In addition, this removes opt-outs from voluntary populations (SSI children and Mississippi Band of Choctaw Indians) from the base data used to develop capitation rates.

In addition, adjustments were made for the removal of retroactive eligibility periods and records not able to map to a geographic area.

Removal of Retroactive Eligibility Periods

Beneficiary enrollment in the FFS program can occur retroactively. When some individuals apply and qualify for Medicaid coverage, DOM reimburses claims, which occurred during the retroactive qualification period prior to their application. DOM backdates the eligibility of the individual to accommodate the retroactive coverage.

There is also a lag between the first date of eligibility and the date of enrollment in a CCO because Medicaid eligibility begins on the first day of the month in which the application was received. Once a Medicaid beneficiary signs up for a CCO, they will be enrolled on the first day of the subsequent month. The retroactive enrollment period is not covered by the CCO, so we removed retroactive eligibility included in the data provided to us using the following criteria:

- Eligibility months prior to the date that a beneficiary was added to the Medicaid enrollment file were removed. For example, if a beneficiary is active January 15, 2022, but they were added to the enrollment file February 1, 2022, we only included data on or after February 1, 2022 to exclude any retroactivity that may have occurred.

As of December 2015, newborns are enrolled in MississippiCAN at the time of their birth. Therefore, the retroactive eligibility exclusion is not applicable to these populations.

Geographic Area

If a beneficiary could not be assigned to a region, we excluded them from the base data. This accounts for less than 0.4% of all current MississippiCAN eligible member months in CY 2022. See Appendix A for additional information on the assignment of a geographic region.

FFS DATA

FFS claims are provided by DOM's MMIS vendor. These claims include any populations and / or services not included in MississippiCAN. We reviewed the FFS data for reasonability for several considerations, including the following, and verified it was consistent with monthly DOM cost reporting:

- Monthly claim counts per member
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Monthly units and payments by rate cell

APPENDIX B

DATA SOURCES AND PROCESSING

ENCOUNTER DATA

Encounter claims are included in the data provided by DOM's MMIS vendor. This data represents the actual amounts paid to the provider, so no repricing was done as part of the development of capitation rates. A claim processed by a CCO and submitted to DOM can be identified in the data based on the `cde_claim_ffs_enc` field. A value of 'E' in this field denotes an encounter claim. Please note, field names may vary from those provided in the encounter data submission from the CCOs.

For all service categories we used CY 2022 encounter data with runout through June 2023.

Only encounter claims for members flagged as a MississippiCAN enrollee in the eligibility data were included in the base data. Encounter claims which failed to be mapped to a MississippiCAN CCO enrollee were removed.

CCO encounters are rigorously vetted by Myers and Stauffer as part of their reconciliation of encounters against CCOs' cash disbursement journals (CDJs). As part of this reconciliation, Myers and Stauffer identifies encounter claims that are duplicates, voids, or replacements for other encounter claims. Myers and Stauffer shares these findings with CCOs at a claim level to ensure they are accurately determining the final, non-duplicated version of each paid claim. As a result of their analysis, Myers and Stauffer are able to reconcile closely to the CCOs' CDJs (historically within 0.5% on a paid basis). We use summaries provided by Myers and Stauffer to identify final, non-duplicative claims consistent with their CDJ reconciliation.

Lastly, the encounter data is run through Milliman's *Health Cost Guidelines*TM (HCGs) grouper to map the encounter data into detailed categories of service. These categories of service are then rolled up into eleven high level categories of service used for rate development. This mapping from detailed category of service to broad category of service is included as Exhibit 2.

After processing the data, we review the encounter data for several considerations, including:

- Monthly encounter counts per member (including and excluding \$0 payments)
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Quarterly units and payments relative to financials by COS
- Frequency of diagnosis completion by COS

Removal of Pharmacy Benefit Administered Claims

Starting in July 2024, DOM expects to enter into an arrangement with their Pharmacy Benefits Administrator (PBA) in which certain pharmacy claims will be paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. These claims were identified and removed using the follow logic:

- Claim Type equal to "P" or "Q"

FINANCIAL REPORTING DATA

For base data development, each CCO submitted a financial report reconciled to their organization's audited CY 2022 financial statements for Mississippi. Reports were submitted for CY 2022 including earned premium, claim experience with run out through June 2023 for CY 2022 data, best estimate IBNR claim amounts, subcapitated arrangements, non-service expenses, and membership. The reported membership was close in total to the MMIS enrollment, so we utilized the MMIS enrollment for rate development.

We worked with each CCO to validate that their reports were filled out consistently with the category of service and non-medical definitions used in the capitation rate development. Adjustments were made to the original submissions to help align these definitions.

CLAIMS ABOVE STATE-PLAN COVERED SERVICE LIMITS

When processing encounter data, we identify claims above Mississippi's state-plan covered service limits. These services are provided by some CCOs as an expanded benefit. However, as they are not state-plan-covered, these services are excluded from the base data when setting capitation rates. We identified three types of benefits offered by

APPENDIX B

DATA SOURCES AND PROCESSING

CCOs that are above state-plan covered service limits, described below. Children receiving EPSDT services, identified as individuals under the age of 21, are exempt from the service limits described below.

- **Physician Visits** – Members are limited to 16 physician visits within a state fiscal year. This limit is applied separately for psychiatric and non-psychiatric visits.

To identify physician visits, claims are required to have a claim type of “M” (Professional). Additionally, the claim must have one of a list of specific procedure codes. Exhibits 15A and 15B show the required procedure codes for non-psychiatric and psychiatric physician visits, respectively. Due to issues identifying claims at this level of detail within the CY 2022 data we are estimating the value of physician visits above the limit based on percentages from the CY 2021 data used for SFY 2024 capitation rate development.

- **Home Health Visits** – Up to 36 home health visits per state fiscal year are covered under Mississippi’s state plan. Home health visits are identified as claims with a claim type of “H” (Home Health) and a revenue code of 421, 441, 551, 571, or 589.

APPENDIX C

CMS Managed Care Rate Setting Guide Response

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 4, 2024

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Responses to 2024-2025 CMS Managed Care Rate Development Guide

I. RESPONSES TO 2024-2025 CMS MANAGED CARE RATE DEVELOPMENT GUIDE

SECTION I. MEDICAID MANAGED CARE RATES

1. General Information

- Rate period – This report documents and certifies capitation rates in effect from July 1, 2024 to June 30, 2025 (SFY 2025).
- Actuarial rate certification – See Appendix D.
- Final capitation rates – See Exhibit 4.
- Program descriptions – Please refer to the following sections:
 - Section II – MississippiCAN program background
 - Appendix A – Rate cell definitions
 - Section IV: Step 5 – Background on the quality withhold applied in SFY 2025
- Medical Loss Ratio (MLR) – The program includes a minimum MLR requirement of 91.3% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses must meet or exceed 91.3% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 91.3% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices. Please see Section IV Step 10 for more information about the minimum MLR requirement. Prior MLR experience is considered when developing trends for the capitation rates. Please see Section IV Step 1 for information on trend setting.
- Federal Medical Assistance Percentage (FMAP) – DOM receives an enhanced FMAP for COVID-19 vaccination administration fees (through September 30, 2024), family planning services, breast and cervical cancer services, Indian health services, home health services, rehabilitation services, private duty nursing services, and Quasi-CHIP members that prior to the Affordable Care Act were covered under the CHIP program. Any differences in capitation rates according to covered populations are based on valid rate development standards and not based on the FMAP associated with the covered populations.
- Cross-subsidies – Rate cells do not cross-subsidize other rate cells.
- Rate change from SFY 2024 capitation rates – See Section I.
- Known rate amendments – The capitation rates included in this report will require recertification to account for the following:
 - CCO specific MHAP, MAPS, and TREAT payments made to providers. This initial certification includes a PMPM estimate of these amounts across all CCOs in Exhibit 13. We anticipate that this adjustment will be submitted by February 2026.
 - Final charge trends for inpatient, outpatient, and certain physician services as calculated by DOM's payment methodology development vendor.
 - Population adjustments related to procedural changes in presumptive eligibility or passive enrollment starting in SFY 2025.
- Impact of COVID-19 – See Section I.

2. Data

- Service and enrollment data sources – See Appendix B.
- Validation and quality adjustments – See Section III for encounter data and financial reporting validation.

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

- Changes in data sources – SFY 2025 capitation rates use CY 2022 CCO encounter and financial data as the base period data sources. SFY 2024 capitation rates used CY 2021 CCO encounter and financial as the base period data sources. Please see section III.
- Potential Future Data improvements – We anticipate no major enhancements to data collection in the future.
- Other data adjustments – None.
- Data reliance – See Appendix E.

3. Projected Benefit Costs and Trends

- Assumptions used to project benefit costs do not vary based on the rate of federal financial participation associated with the covered populations. A summary of program, population, and reimbursement changes is included in Exhibit 10. No changes were determined to be immaterial and separate rating adjustments are applied to estimate the impact of the changes between the base data and rating period.
- Overpayments to providers – Section III summarizes recoveries for overpayments to providers by CCOs and how these recoveries are accounted for when summarizing the base data used to develop SFY 2025 capitation rates.
- Projected benefit cost trends:
 - Annual trend assumptions – Section IV: Step 1 outlines the trend assumptions from CY 2022 to the rating period. Please refer to Exhibits 7A to 7E for more information. Negative unit cost trends for CY 2022 to the rating period for inpatient hospital services shown in Table 9 are due to decreases in fee schedules over time.
 - Reimbursement changes – Section IV: Step 2 describes the reimbursement changes between the base period and rating period.
- Mental Health Parity and Addiction Equity Act – No additional services were necessary to add to the program to achieve compliance with the act.
- In-lieu-of services – CCOs do not provide any material amounts of in-lieu-of services.
- Retrospective eligibility periods – No consideration for retroactive eligibility periods is included in the base data or rate development, because such services are covered under FFS.
- Changes in covered services and benefits: There are four benefit changes between the base period and the rate year:
 - Expansion of postpartum coverage for pregnant women from 60 days to 12 months (described in Section IV, Step 2).
 - Members diagnosed with Hemophilia or Von Willebrand disease are now covered as part of the MississippiCAN program (described in Section IV, Step 2).
 - Zolgensma is included as a covered therapy after carved out prior to SFY 2024 (described in Section IV, Step 2).
 - Effective July 1, 2024 pharmacy services will be paid by DOM's pharmacy benefit administrator (PBA) (removed from base data as described in Section III).
- Other adjustments:
 - A population change adjustment was applied to reflect that some children in the Non-Newborn SSI / Disabled rate cell were historically moved into FFS after a PRTF stay. Starting in SFY 2022, these individuals will remain in the MississippiCAN program. This adjustment was applied in Section III.

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Responses to 2024-2025 CMS Managed Care Rate Development Guide

- Area relativity factors – Please see Section IV: Step 4 for a discussion of the area factor development for the North, Central, and South regions.
- Final projected benefit costs – See Exhibit 4.
- Conditions of any litigation to which the state is subjected – Not applicable; no impact on rates.

4. Special Contract Provisions Related to Payment

- Incentive Arrangements – In SFY 2025, CCOs will have the opportunity to earn up to 0.5% of revenue based on performance in the Value Base Payment (VBP) program. Payments to CCOs will be based on their performance across three primary focus areas: maternal health, metabolic health, and mental health. Please see Section IV Step 10 for more information.
- Withhold Arrangements – A quality withhold will be implemented for the SFY 2025 capitation rates. Please see Section IV: Step 5 for a description of the quality withhold.
- Risk sharing.
 - The program includes a minimum MLR requirement of 91.3% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses, must meet or exceed 91.3% of revenue. Revenue for premium taxes are excluded from the MLR calculation. If the 91.3% threshold is not met, MCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices. Please see Section IV Step 10 for more information on the minimum MLR requirement.
 - For SFY 2025 the program is subject to a high-cost pharmacy risk corridor. Please see Section IV: Step 10 for details of the implementation of this risk corridor.
 - Any risk-sharing arrangements are consistent with pricing assumptions and no remittance / payment is calculated using pricing assumptions.
- Delivery System and Provider Payment Initiatives – Not applicable.
- State Directed Payments.

The SFY 2025 capitation rates included in this certification reflect three directed payment arrangements that will be in effect for SFY 2025 as described in Section IV, Step 8. The necessary information for the three state directed payment arrangements included in these preliminary capitation rates is summarized below.

Summary of All State Directed Payments			
Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?
MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630	Uniform dollar or percentage increase	Enhanced hospital reimbursement for inpatient and outpatient hospital services for qualifying facilities	Separate payment term
MS_Fee.VBP_AMC_Renewal_20240701-20250630	Uniform dollar or percentage increase	Enhanced payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital	Separate payment term
MS_Fee_Oth_Renewal_20240701-20250630	Uniform dollar or percentage increase	Enhanced reimbursement for ambulance providers	Separate payment term

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Responses to 2024-2025 CMS Managed Care
Rate Development Guide

Summary of State Directed Payments Included as a Separate Payment Term					
Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	The Magnitude on a PMPM Basis	Confirmation the Rate Development is Consistent with the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period
MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630	FSA component of MHAP: \$719.7 million QIPP component of MHAP: \$820.7 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 16	Confirmed	Confirmed
			FSA component of MHAP: allocated across rate cells based on projected IP / OP spend. 60% is allocated based on projected IP spend and 40% is allocated based on projected OP spend. Ranges from \$42.20 to \$4,892.93 PMPM.		
			QIPP component of MHAP: allocated as a fixed PMPM of \$158.91 across all rate cells.		
MS_Fee.VBP_AMC_Renewal_20240701-20250630	\$29.5 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 16 Allocated as a fixed PMPM of \$5.72 across all rate cells	Confirmed	Confirmed
MS_Fee_Oth_Renewal_20240701-20250630	\$25.3 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 16 Allocated as a fixed PMPM of \$4.90 across all rate cells	Confirmed	Confirmed

All services covered under the MississippiCAN program are subject to a minimum fee schedule of the FFS rate. This minimum fee schedule is set in accordance with the provisions of §438.6(c). It is our understanding that this type of minimum fee schedule does not necessitate prior approval from CMS and no preprint is required.

DOM has confirmed that there are no additional directed payments in the program that are not addressed in the certification.

DOM has also confirmed that there are no requirements regarding the reimbursement rates the managed care plans must pay to any providers unless specifically specified in the certification as a state directed payment or authorized under applicable law, regulation, or waiver.

- Pass Through Payments – Not applicable.

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Responses to 2024-2025 CMS Managed Care Rate Development Guide

5. Projected Non-Benefit Costs

- Assumptions used to project non-benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Administrative cost data, projected costs, premium tax and margin – See Section IV: Step 3.
- Historical non-benefit costs – CY 2022 administrative costs for the three CCOs were \$34.70 PMPM, as reported on the audited financial templates. Please see Section IV: Step 3 for a description of adjustments applied to this base data to project the SFY 2022 administrative allowance.

6. Risk Adjustment and Acuity Adjustments

- Risk adjustment – See Section IV: Step 6. A custom risk adjustment model will be developed for the MA Children, Quasi-CHIP, MA Adult, and Non-Newborn SSI / Disabled rate cells using the Chronic Disability Payment System (CDPS) model.

A custom risk adjustment model will be developed for the Foster Care rate cell using information from members' enrollment information.

- Acuity Adjustments – See Section IV: Step 2 for a description of the acuity adjustment applied to reflect changes in member acuity from CY 2022 to SFY 2025.

SECTION II. MEDICAID MANAGED CARE RATES WITH LONG-TERM SERVICES

This section does not apply as MississippiCAN is not a long-term care service program.

SECTION III. NEW ADULT POPULATION CAPITATION RATES

This section does not apply as the state of Mississippi has not expanded coverage as a result of the Affordable Care Act.

APPENDIX D

Actuarial Certification of SFY 2025 MississippiCAN Capitation Rates

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 4, 2024



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

jill.bruckert@milliman.com

December 4, 2024

**Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2025 MississippiCAN Capitation Rates - Update**

I, Jill A. Bruckert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the Mississippi Division of Medicaid (DOM) to perform an actuarial certification of the Mississippi Coordinated Access Network (MississippiCAN) coordinated care capitation rates for July 1, 2024 to June 30, 2025 (SFY 2025) for filing with the Centers for Medicare and Medicaid Services (CMS). This certification is an update to the SFY 2025 certification dated September 6, 2024.

I reviewed the capitation rate development and am familiar with the following regulation and guidance:

- The requirements of 42 CFR §438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7
- CMS "Appendix A, PAHP, PIHP, and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting dated November 10, 2014"
- 2024 to 2025 Medicaid Managed Care Rate Development Guide
- Actuarial Standard of Practice 49 and other applicable standards of practice

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2025 dated December 4, 2024 and accompanying this certification.

To the best of my information, knowledge, and belief, for the SFY 2025 period, the capitation rates offered by DOM are in compliance with the relevant requirements of 42 CFR 438.4. The attached actuarial report describes the capitation rate setting methodology. Please note, as outlined in the cover letter of the report, there are a number of outstanding program changes that will be incorporated into an update to SFY 2025 capitation rates.

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

In making my opinion, I relied upon the accuracy of the underlying claim and eligibility data records and other information prepared by DOM and participating CCOs. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary. The reliance letter from DOM is included in Appendix E of the rate report issued on December 4, 2024.

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

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



Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2025 MississippiCAN Capitation Rates
December 4, 2024
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This Opinion assumes the reader is familiar with the MississippiCAN program, Medicaid coordinated care programs, and actuarial rating techniques. The Opinion is intended for the State of Mississippi and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

A handwritten signature in black ink, reading 'Jill A. Bruckert', positioned above a horizontal line.

Jill A. Bruckert
Member, American Academy of Actuaries
Principal and Consulting Actuary
December 4, 2024

APPENDIX E

Data Reliance Letter

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

December 4, 2024

OFFICE OF THE GOVERNOR

Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201



MISSISSIPPI DIVISION OF
MEDICAID

November 21, 2024

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

Re: Data Reliance for Actuarial Certification of SFY 2025 MississippiCAN Capitation Rates

Dear Jill:

I, Jennifer Wentworth, Chief of Staff for the Mississippi Division of Medicaid (DOM), hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying MississippiCAN capitation rates was prepared under my direction and, to the best of my knowledge and belief, is accurate, complete, and consistent with the data used to develop the capitation rates. Capitation rates are effective July 1, 2024 to June 30, 2025.

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

1. Data from DOM's Medicaid Management Information Systems (MMIS) vendor (Gainwell):
 - a. Encounter claims through June 2023.
 - b. Medicaid eligibility through June 2023.
2. Data from DOM's vendor Myers and Stauffer:
 - a. Detailed encounter claim status reports, including identification of duplicative or voided claims through August 30, 2024.
3. Supporting documentation provided by DOM:
 - a. Data identification logic:
 - i. Logic for identifying members eligible for the MYPAC rate cell.
 - ii. Logic for identifying members with hemophilia.
 - iii. Logic for identifying Institution for Mental Disease (IMD) facilities.

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November 21, 2024
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iv. Logic for identifying claims above state plan covered service limits.

b. Reimbursement and / or program changes:

i. SB 2799 passed April 19, 2021.

1. Preventative and diagnostic dental reimbursement increases of 5% effective July 1, 2022 and July 1, 2023.
2. Fee schedules frozen effective July 1, 2021.

ii. HB 657 signed into law on April 19, 2022.

1. Restorative dental reimbursement increases of 5% effective July 1, 2022, July 1, 2023, and July 1, 2024.
2. Ability to change fee schedules with legislative review. DOM will update reimbursement for the following provider types.
 - a. Physician fee schedules effective July 1, 2022.
 - b. Inpatient and outpatient fee schedules effective July 1, 2023.

iii. SB 2212 signed into law on March 16, 2023.

1. Postpartum coverage for eligible members extended from 60 days to 12 months.

iv. Professional, inpatient DRG, and outpatient APC fee re-pricing impacts for July 2022 and July 2023 prepared by Conduent.

v. Professional, inpatient DRG, and outpatient APC fee re-pricing impacts for July 2023 and July 2024 prepared by Myers & Stauffer.

vi. Estimates of uptake rates of certain gene therapies used to treat Hemophilia A, Hemophilia B, Sickle Cell Disease, Beta-Thalassemia, and Duchene Muscular Dystrophy.

vii. Confirmation that Zolgensma will be included in the capitation rate for SFY 2025.

viii. Fee schedule updates for the following categories of service:

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1. Psychiatric Residential Treatment Facilities (PRTF) – January 2023 and January 2024
 2. Ambulatory Surgical Center (ASC) – October 2023 and January 2024
 3. Autism Spectrum Disorder (ASD) – January 2023
 4. Orthodontia Services – October 2023
 5. Behavioral Health Services – July 2023
 6. MYPAC Services – November 2023
 7. Home Health Agency (HHA) Services – October 2024
 8. Prescribed Pediatric Extended Care (PPEC) Services – October 2022
 9. Private Duty Nursing (PDN) Services – October 2022 and July 2023
- ix. CY 2022 fee schedules for the following categories of service:
1. Psychiatric Residential Treatment Facilities (PRTF)
 2. Ambulatory Surgical Center (ASC)
 3. Autism Spectrum Disorder (ASD)
 4. Orthodontia Services
 5. Behavioral Health Services
 6. MYPAC Services
 7. Home Health Agency (HHA) Services
 8. Prescribed Pediatric Extended Care (PPEC)
 9. Private Duty Nursing (PDN)
- c. Directed payments:
- i. SFY 2025 Mississippi Hospital Access Program (MHAP) total funding amount of \$1,540,423,694 along with splits for a quality incentive payment pool (QIPP) amount of \$820,744,321, the inpatient fee schedule adjustment (FSA)

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amount of \$431,807,624, and the outpatient FSA amount of \$287,871,749 to be used in capitation rate development.

- ii. SFY 2025 Mississippi Medicaid Access to Physician Services (MAPS) funding amount of \$29,526,177.
- iii. SFY 2025 Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) funding amount of \$25,285,224.
- d. Historical data:
 - i. Files summarizing individuals in the Non-Newborn SSI / Disabled rate cell moved to FFS due to a PRTF stay in CY 2022.
 - ii. MLR reports through December 2023.
- e. Other data:
 - i. Quality withhold parameters for SFY 2025.
 - ii. Value-based payment program parameters for SFY 2025.
 - iii. High-cost drug risk corridor parameters for SFY 2025.
 - iv. Other computer files and clarifying correspondence.

Milliman relied on DOM and their MMIS vendor for the collection and processing of the CCO encounter data. Milliman relied on Myers and Stauffer's review of encounter data for duplicative or voided claims. Milliman relied on the CCOs to provide accurate CY 2022 financial data as certified by each CCO. Milliman did not audit the CCO financial data, or the encounter data, but did assess the data for reasonableness as documented in the capitation rate report.

Jennifer Westworth

Name
Chief of Staff

Title
November 21, 2024

Date

For more information about Milliman,
please visit us at:

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Milliman is among the world's largest providers of actuarial and related products and services. The firm has consulting practices in life insurance and financial services, property & casualty insurance, healthcare, and employee benefits. Founded in 1947, Milliman is an independent firm with offices in major cities around the globe.

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Caveats and Limitations
Mississippi Division of Medicaid
READ BEFORE PROCEEDING

Milliman has developed certain models to estimate the values included in these exhibits and appendices. The intent of the models was to estimate SFY 2025 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting for January 2022 to December 2022 with runout through June 2023, historical and projected reimbursement information, fee schedules, and other information from DOM, MississippiCAN CCOs, Change Healthcare, Myers and Stauffer, and CMS to calculate the preliminary MississippiCAN base data shown in exhibits and appendices. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2025 capitation rates.

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

Our exhibits and appendices are intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2025. The exhibits and appendices and the models used to develop the values in these exhibits and appendices may not be appropriate for other purposes. We anticipate the exhibits and appendices will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

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

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2022 Encounter Data													
Non-Newborn SSI / Disabled Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	720,708	720,708	720,708	720,708	720,708	720,708	720,708	720,708	720,708	720,708	720,708	720,708
b	Total Allowed Dollars	\$1,746,132	\$23,624,663	\$91,947,622	\$22,938,424	\$36,344,710	\$84,770,345	\$381,828	\$32,332,756	\$123,713,195	\$6,641,841	\$42,483,559	\$466,925,075
c = b / a	CY 2022 PMPM Costs	\$2.42	\$32.78	\$127.58	\$31.83	\$50.43	\$117.62	\$0.53	\$44.86	\$171.66	\$9.22	\$58.95	\$647.87
d	MYPAC Member Identification Change	0.991	0.990	1.000	0.999	1.000	1.000	0.992	0.959	0.998	0.997	0.999	0.996
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	0.999
f	Missing Data	1.002	0.999	1.001	1.000	1.002	1.000	1.002	0.999	1.000	0.998	0.994	1.000
g	IBNR Adjustment	1.028	1.026	1.030	1.002	1.002	1.002	1.001	1.001	1.001	1.000	1.006	1.009
h	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.981	1.000	1.000	0.995
i	Remove Zolgensma Claims	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1.000	0.976	0.995	0.999	1.000	1.000	1.000	0.998	1.000	1.000	0.999	0.997
l	IMD Repricing	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.148	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.000	1.008
Product of c through m	Adjusted CY 2022 PMPM Costs	\$2.42	\$36.43	\$127.78	\$31.99	\$50.89	\$118.39	\$0.53	\$43.16	\$169.12	\$8.91	\$59.16	\$648.77

Breast and Cervical Cancer Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	961	961	961	961	961	961	961	961	961	961	961	961
b	Total Allowed Dollars	\$0	\$0	\$145,031	\$20,144	\$806,433	\$534,634	\$0	\$6,341	\$842,707	\$8,370	\$38,704	\$2,402,364
c = b / a	CY 2022 PMPM Costs	\$0.00	\$0.00	\$150.92	\$20.96	\$839.16	\$556.33	\$0.00	\$6.60	\$876.91	\$8.71	\$40.28	\$2,498.86
d	MYPAC Member Identification Change	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
e	Encounter to Financial Adjustment	N/A	N/A	0.979	1.007	1.007	1.007	N/A	1.007	1.007	0.971	1.007	1.005
f	Missing Data	N/A	N/A	1.002	1.003	1.002	1.002	N/A	1.003	1.003	0.987	0.995	1.002
g	IBNR Adjustment	N/A	N/A	1.009	1.003	1.003	1.003	N/A	1.002	1.002	1.000	1.003	1.003
h	Non-Covered Services	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	0.993	1.000	1.000	0.998
i	Remove Zolgensma Claims	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
j	TPL Adjustment	N/A	N/A	0.998	0.998	0.998	0.998	N/A	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
l	IMD Repricing	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$0.00	\$0.00	\$149.06	\$21.21	\$846.91	\$561.98	\$0.00	\$6.66	\$879.12	\$8.34	\$40.39	\$2,513.67

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2022 Encounter Data													
MA Adult Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	451,802	451,802	451,802	451,802	451,802	451,802	451,802	451,802	451,802	451,802	451,802	451,802
b	Total Allowed Dollars	\$12,769,641	\$2,434,397	\$13,322,645	\$11,328,871	\$5,810,283	\$27,306,485	\$3,019,032	\$3,857,983	\$48,037,346	\$2,212,633	\$5,487,761	\$135,587,078
c = b / a	CY 2022 PMPM Costs	\$28.26	\$5.39	\$29.49	\$25.07	\$12.86	\$60.44	\$6.68	\$8.54	\$106.32	\$4.90	\$12.15	\$300.10
d	MYPAC Member Identification Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	1,000
f	Missing Data	1,001	1,003	1,002	1,000	0.987	1,001	1,000	1,000	1,000	0.994	1,129	1,005
g	IBNR Adjustment	1,017	1,016	1,017	1,002	1,002	1,002	1,001	1,001	1,001	1,001	1,005	1,005
h	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.987	1,000	1,000	0.995
i	Remove Zolgensma Claims	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1,000	0.987	1,000	1,000	1,000	1,000	1,000	0.999	1,000	1,000	1,000	1,000
l	IMD Repricing	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
m	SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$28.10	\$5.29	\$29.37	\$25.25	\$12.79	\$60.91	\$6.73	\$8.58	\$105.56	\$4.72	\$13.85	\$301.15

Pregnant Women Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	96,821	96,821	96,821	96,821	96,821	96,821	96,821	96,821	96,821	96,821	96,821	96,821
b	Total Allowed Dollars	\$45,126,085	\$143,665	\$638,264	\$2,982,061	\$1,047,266	\$6,133,717	\$11,332,019	\$280,741	\$18,733,372	\$330,787	\$1,072,067	\$87,820,063
c = b / a	CY 2022 PMPM Costs	\$466.08	\$1.48	\$6.59	\$30.80	\$10.82	\$63.35	\$117.04	\$2.90	\$193.48	\$3.42	\$11.07	\$907.04
d	MYPAC Member Identification Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	0.992
f	Missing Data	0.998	1.004	1.002	0.996	0.988	0.993	0.998	1.001	0.997	0.980	1,130	0.999
g	IBNR Adjustment	1,016	1,014	1,017	1,002	1,002	1,002	1,002	1,001	1,002	1,001	1,006	1,009
h	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	0.998	1,000	1,000	1,000
i	Remove Zolgensma Claims	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1,000	0.858	1,000	1,000	1,000	1,000	1,000	0.991	1,000	1,000	0.999	1,000
l	IMD Repricing	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
m	SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$461.96	\$1.26	\$6.57	\$30.91	\$10.77	\$63.36	\$117.58	\$2.89	\$193.88	\$3.25	\$12.64	\$905.07

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2022 Encounter Data													
SSI / Disabled Newborn Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	5,039	5,039	5,039	5,039	5,039	5,039	5,039	5,039	5,039	5,039	5,039	5,039
b	Total Allowed Dollars	\$14,004,077	\$67,231	\$3,888,917	\$286,736	\$236,674	\$904,274	\$0	\$3,724	\$6,982,000	\$4,653	\$1,010,700	\$27,388,986
c = b / a	CY 2022 PMPM Costs	\$2,779.14	\$13.34	\$771.76	\$56.90	\$46.97	\$179.46	\$0.00	\$0.74	\$1,385.59	\$0.92	\$200.58	\$5,435.40
d	MYPAC Member Identification Change	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	N/A	1.007	1.007	0.971	1.007	0.988
f	Missing Data	1,003	1,000	1,002	1,002	1,000	1,002	N/A	1,001	1,002	1,003	1,000	1,002
g	IBNR Adjustment	1,019	1,017	1,016	1,003	1,003	1,003	N/A	1,002	1,001	1,001	1,004	1,012
h	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
i	Remove Zolgensma Claims	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	N/A	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
l	IMD Repricing	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
m	SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$2,772.61	\$13.26	\$768.04	\$57.47	\$47.35	\$181.25	\$0.00	\$0.74	\$1,396.56	\$0.90	\$202.35	\$5,440.53

Non-SSI Newborns 0 to 2 Months Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	67,578	67,578	67,578	67,578	67,578	67,578	67,578	67,578	67,578	67,578	67,578	67,578
b	Total Allowed Dollars	\$87,571,946	\$0	\$7,532,674	\$1,541,127	\$151,806	\$1,949,311	\$0	\$9,720	\$29,497,384	\$55,359	\$957,872	\$129,267,199
c = b / a	CY 2022 PMPM Costs	\$1,295.86	\$0.00	\$111.47	\$22.81	\$2.25	\$28.85	\$0.00	\$0.14	\$436.49	\$0.82	\$14.17	\$1,912.86
d	MYPAC Member Identification Change	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
e	Encounter to Financial Adjustment	0.979	N/A	0.979	1.007	1.007	1.007	N/A	1.007	1.007	0.971	1.007	0.986
f	Missing Data	1,002	N/A	1,003	1,003	1,003	1,003	N/A	1,004	1,002	1,001	1,104	1,003
g	IBNR Adjustment	1,019	N/A	1,019	1,002	1,002	1,002	N/A	1,002	1,001	1,001	1,006	1,015
h	Non-Covered Services	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
i	Remove Zolgensma Claims	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	0.881	1,000	1,000	0.973
j	TPL Adjustment	0.998	N/A	0.998	0.998	0.998	0.998	N/A	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
l	IMD Repricing	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
m	SSI Children - COE Change	1,000	N/A	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	1,000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$1,293.17	\$0.00	\$111.18	\$23.03	\$2.27	\$29.13	\$0.00	\$0.15	\$388.05	\$0.79	\$15.82	\$1,863.59

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAPitation Rate Development CY 2022 Encounter Data														
Non-SSI Newborns 3 to 12 Months Rate Cell														
		Category of Service												
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total	
Calculation Step	CY 2022 PMPM Cost Development													
a	CY 2022 Member Months	232,493	232,493	232,493	232,493	232,493	232,493	232,493	232,493	232,493	232,493	232,493	232,493	
b	Total Allowed Dollars	\$860,044	\$0	\$8,451,777	\$5,841,876	\$378,487	\$7,349,076	\$0	\$6,433	\$30,767,777	\$290,546	\$1,749,853	\$55,695,868	
c = b / a	CY 2022 PMPM Costs	\$3.70	\$0.00	\$36.35	\$25.13	\$1.63	\$31.61	\$0.00	\$0.03	\$132.34	\$1.25	\$7.53	\$239.56	
d	MYPAC Member Identification Change	1,000	N/A	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
e	Encounter to Financial Adjustment	0.979	N/A	0.979	1.007	1.007	1.007	1.007	N/A	1.007	1.007	0.971	1.007	
f	Missing Data	1.003	N/A	1.002	1.003	1.002	1.003	1.002	N/A	1.003	1.002	1.001	1.180	
g	IBNR Adjustment	1.048	N/A	1.003	1.003	1.003	1.003	1.003	N/A	1.002	1.001	1.001	1.008	
h	Non-Covered Services	1,000	N/A	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	
i	Remove Zolgensma Claims	1,000	N/A	1,000	1,000	1,000	1,000	1,000	N/A	1,000	0.940	1,000	1,000	
j	TPL Adjustment	0.998	N/A	0.998	0.998	0.998	0.998	0.998	N/A	0.998	0.998	0.998	0.998	
k	IMD Removal	1,000	N/A	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	
l	IMD Repricing	1,000	N/A	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	
m	SSI Children - COE Change	1,000	N/A	1,000	1,000	1,000	1,000	1,000	N/A	1,000	1,000	1,000	1,000	
Product of c through m	Adjusted CY 2022 PMPM Costs	\$3.80	\$0.00	\$36.92	\$25.41	\$1.65	\$31.95	\$0.00	\$0.03	\$125.39	\$1.21	\$8.97	\$235.33	
Foster Care Rate Cell														
		Category of Service												
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total	
Calculation Step	CY 2022 PMPM Cost Development													
a	CY 2022 Member Months	82,463	82,463	82,463	82,463	82,463	82,463	82,463	82,463	82,463	82,463	82,463	82,463	
b	Total Allowed Dollars	\$108,566	\$20,828,554	\$649,484	\$663,372	\$19,449	\$3,005,829	\$10,997	\$5,734,540	\$7,660,449	\$2,305,374	\$1,251,589	\$42,408,682	
c = b / a	CY 2022 PMPM Costs¹	\$1.32	\$252.56	\$7.88	\$8.04	\$2.34	\$36.45	\$0.13	\$69.54	\$92.90	\$27.96	\$15.18	\$514.29	
d	MYPAC Member Identification Change	1,000	0.980	1,000	0.974	0.998	0.987	1,000	0.676	0.947	0.975	0.990	0.934	
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	0.990	
f	Missing Data	1,000	1,000	1,001	1,001	1,001	1,001	1,001	1,001	1,001	1,001	0.981	1,000	
g	IBNR Adjustment	1.014	1.027	1.028	1.004	1.003	1.004	1.001	1.001	1.001	1,001	1.010	1.015	
h	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
i	Remove Zolgensma Claims	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	
k	IMD Removal	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
l	IMD Repricing	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
m	SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	
Product of c through m	Adjusted CY 2022 PMPM Costs	\$1.30	\$248.29	\$7.91	\$7.91	\$2.35	\$36.33	\$0.13	\$47.30	\$88.52	\$26.46	\$14.95	\$481.46	

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2022 Encounter Data													
MYPAC Rate Cell													
		Category of Service											
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
Calculation Step	CY 2022 PMPM Cost Development												
a	CY 2022 Member Months	10,612	10,612	10,612	10,612	10,612	10,612	10,612	10,612	10,612	10,612	10,612	10,612
b	Total Allowed Dollars	\$10,786	\$3,303,457	\$21,595	\$144,890	\$21,651	\$300,435	\$4,102	\$7,579,631	\$7,200,922	\$247,887	\$148,947	\$18,964,303
c = b / a	CY 2022 PMPM Costs	\$1.02	\$311.29	\$2.03	\$13.65	\$2.04	\$28.31	\$0.39	\$714.25	\$678.56	\$23.36	\$14.04	\$1,788.95
d	MYPAC Member Identification Change	2,789	1,390	3,550	1,596	1,347	1,568	2,077	1,864	1,179	1,603	1,726	1,512
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	1.002
f	Missing Data	1.000	1.000	1.000	1.004	1.009	1.004	1.000	1.000	1.000	1.003	1.045	1.001
g	IBNR Adjustment	1.011	1.065	1.051	1.015	1.015	1.014	1.001	1.000	1.000	1.001	1.094	1.012
h	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Remove Zolgensma Claims	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Repricing	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$2.80	\$490.26	\$7.41	\$22.33	\$2.83	\$45.43	\$0.81	\$1,338.60	\$804.47	\$36.41	\$27.82	\$2,739.17

MA Children Rate Cell													
		Category of Service											
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
Calculation Step	CY 2022 PMPM Cost Development												
a	CY 2022 Member Months	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562	2,558,562
b	Total Allowed Dollars	\$2,969,914	\$26,477,977	\$15,937,761	\$24,504,299	\$4,333,988	\$57,883,102	\$775,688	\$30,365,208	\$144,247,595	\$63,889,014	\$12,478,645	\$383,863,180
c = b / a	CY 2022 PMPM Costs	\$1.16	\$10.35	\$6.23	\$9.58	\$1.69	\$22.62	\$0.30	\$11.87	\$56.38	\$24.97	\$4.88	\$150.03
d	MYPAC Member Identification Change	0.999	0.979	1.000	0.998	0.999	0.999	0.999	0.899	0.996	0.999	0.996	0.988
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	0.998
f	Missing Data	1.001	1.001	1.001	1.002	1.003	1.003	1.002	1.002	1.002	1.002	1.002	1.014
g	IBNR Adjustment	1.015	1.015	1.015	1.002	1.002	1.002	1.001	1.001	1.001	1.001	1.006	1.003
h	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Remove Zolgensma Claims	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Repricing	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$1.15	\$10.05	\$6.18	\$9.65	\$1.71	\$22.81	\$0.30	\$10.75	\$56.61	\$24.24	\$6.69	\$150.16

Exhibit 1 Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2022 Encounter Data													
Quasi-CHIP Rate Cell													
		Category of Service											
Calculation Step	CY 2022 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient - Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	CY 2022 Member Months	283,644	283,644	283,644	283,644	283,644	283,644	283,644	283,644	283,644	283,644	283,644	283,644
b	Total Allowed Dollars	\$308,447	\$3,685,595	\$1,719,270	\$1,976,198	\$560,878	\$5,288,882	\$81,783	\$3,628,429	\$14,972,700	\$8,897,406	\$1,679,072	\$42,798,661
c = b / a	CY 2022 PMPM Costs	\$1.09	\$12.99	\$6.06	\$6.97	\$1.98	\$18.65	\$0.29	\$12.79	\$52.79	\$31.37	\$5.92	\$150.89
d	MYPAC Member Identification Change	1,000	0.981	0.991	0.997	0.998	0.999	1,000	0.913	0.994	0.999	0.997	0.988
e	Encounter to Financial Adjustment	0.979	0.979	0.979	1.007	1.007	1.007	1.007	1.007	1.007	0.971	1.007	0.996
f	Missing Data	1,001	1,001	1,001	1,003	1,004	1,003	1,002	1,002	1,002	1,002	1,290	1,013
g	IBNR Adjustment	1,015	1,015	1,016	1,003	1,003	1,002	1,001	1,001	1,001	1,001	1,005	1,003
h	Non-Covered Services	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
i	Remove Zolgensma Claims	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
j	TPL Adjustment	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998	0.998
k	IMD Removal	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
l	IMD Repricing	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
m	SSI Children - COE Change	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
Product of c through m	Adjusted CY 2022 PMPM Costs	\$1.08	\$12.64	\$5.96	\$7.01	\$2.00	\$18.81	\$0.29	\$11.78	\$52.89	\$30.45	\$7.69	\$150.61

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
Non-Newborn SSI / Disabled Rate Cell													
Calculation Step		Category of Service											
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
SFY 2025 PMPM Cost Development													
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$2.42	\$36.43	\$127.78	\$31.99	\$50.89	\$118.39	\$0.53	\$43.16	\$169.12	\$8.91	\$59.16	\$648.77
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.130	1.130	1.000	1.051	1.130	1.025	1.157	1.143	1.103	1.077	1.117
c	Change Trend Factors CY 2022 to SFY 2025	0.955	0.976	0.955	1.059	1.051	1.064	0.998	1.062	1.010	1.012	1.045	1.019
d	Seasonal Vius Adjustment	1.000	0.996	0.965	0.975	0.997	0.988	1.000	1.000	0.986	1.000	0.997	0.985
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	0.999	0.999	1.015	1.000	1.000	1.000	0.999	1.000	1.000	1.000	1.003	1.003
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.012	1.000	1.000	1.000	1.000	1.000	1.137	1.000	1.000	1.038
i	Reimbursement Changes												
	Preventative and Diaonostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.028	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.025	1.000	1.000
Product of a through j		\$2.36	\$39.95	\$136.67	\$31.04	\$56.01	\$140.64	\$0.54	\$52.99	\$218.63	\$10.47	\$66.55	\$758.06
Breast and Cervical Cancer Rate Cell													
Calculation Step		Category of Service											
		Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
SFY 2025 PMPM Cost Development													
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$0.00	\$0.00	\$149.06	\$21.21	\$846.91	\$561.98	\$0.00	\$6.66	\$879.12	\$8.34	\$40.39	\$2,513.67
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	N/A	N/A	1.077	1.000	1.051	1.077	N/A	1.077	1.103	1.103	1.077	1.077
c	Change Trend Factors CY 2022 to SFY 2025	N/A	N/A	0.955	1.058	1.051	1.066	N/A	1.050	1.017	1.000	1.038	1.036
d	Seasonal Vius Adjustment	N/A	N/A	0.973	0.996	1.000	0.998	N/A	1.000	0.998	1.000	1.000	0.997
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diaonostic Dental Reimbursement Change	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.024	1.000	1.000
j	Restorative Dental Reimbursement Change	N/A	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
Product of a through j		\$0.00	\$0.00	\$149.09	\$22.35	\$935.10	\$644.25	\$0.00	\$7.54	\$884.66	\$9.42	\$45.18	\$2,797.57

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
MA Adult Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$28.10	\$5.29	\$29.37	\$25.25	\$12.79	\$60.91	\$6.73	\$8.58	\$105.56	\$4.72	\$13.85	\$301.15
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.051	1.051	1.000	1.038	1.051	1.025	1.051	1.051	1.103	1.077	1.045
c	Change Trend Factors CY 2022 to SFY 2025	1.039	1.039	1.039	1.065	1.038	1.068	1.015	1.038	1.016	1.000	1.053	1.038
d	Seasonal Virus Adjustment	1.000	0.988	0.988	0.968	0.992	1.000	1.000	1.000	0.970	1.000	0.996	0.978
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	0.985	0.985	0.985	0.985	0.985	0.985	0.985	0.985	0.985	0.985	0.985	0.985
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.002	0.999	0.999	1.000	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.028	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.002	1.000	1.000
Product of a through j	Projected SFY 2025 PMPM Costs	\$29.53	\$5.42	\$30.56	\$25.64	\$13.47	\$65.80	\$6.90	\$9.22	\$107.71	\$5.28	\$15.40	\$315.11

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
Pregnant Woman Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$461.96	\$1.26	\$6.57	\$30.91	\$10.77	\$63.36	\$117.58	\$2.89	\$193.88	\$3.25	\$12.64	\$905.07
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.051	1.051	1.000	1.038	1.051	1.025	1.051	1.025	1.103	1.077	1.028
c	Change Trend Factors CY 2022 to SFY 2025	1.039	1.039	1.039	1.065	1.038	1.066	1.015	1.035	1.015	1.002	1.053	1.034
d	Seasonal Virus Adjustment	1.000	0.961	0.985	0.966	0.973	0.972	1.000	1.000	0.983	1.000	0.998	0.993
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	0.481	0.742	0.742	0.742	0.742	0.742	0.481	0.742	0.742	0.742	0.742	0.574
g	Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.032	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.012	1.000	1.000
Product of a through j	Projected SFY 2025 PMPM Costs	\$236.54	\$0.88	\$5.24	\$25.69	\$8.38	\$51.22	\$58.82	\$2.53	\$147.23	\$2.78	\$10.62	\$547.76

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
SSI / Disabled Newborn Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$2,772.61	\$13.26	\$768.04	\$57.47	\$47.35	\$181.25	\$0.00	\$0.74	\$1,396.56	\$0.90	\$202.35	\$5,440.53
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.000	1.000	1.000	1.064	1.077	N/A	1.077	1.051	1.103	1.077	1.032
c	Change Trend Factors CY 2022 to SFY 2025	1.086	1.086	1.086	1.125	1.064	1.125	N/A	1.015	0.987	1.000	1.031	1.059
d	Seasonal Virus Adjustment	1.000	1.000	0.994	0.995	1.000	0.988	N/A	1.000	0.999	1.000	0.998	0.999
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.067	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
Product of a through j	Projected SFY 2025 PMPM Costs	\$3,085.93	\$14.39	\$828.92	\$64.35	\$53.56	\$219.09	\$0.00	\$0.81	\$1,447.10	\$1.06	\$224.51	\$5,939.74

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
Non-SSI Newborns 0 to 2 Months Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$1,293.17	\$0.00	\$111.18	\$23.03	\$2.27	\$29.13	\$0.00	\$0.15	\$388.05	\$0.79	\$15.82	\$1,863.59
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	N/A	1.000	1.000	1.064	1.077	N/A	1.077	1.038	1.103	1.077	1.027
c	Change Trend Factors CY 2022 to SFY 2025	1.086	N/A	1.086	1.125	1.064	1.125	N/A	1.015	0.987	1.000	1.015	1.066
d	Seasonal Virus Adjustment	1.000	N/A	0.976	0.970	0.968	0.965	N/A	1.000	0.996	1.000	0.994	0.997
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.080	1.000	1.000	1.016
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.042	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
Product of a through j	Projected SFY 2025 PMPM Costs	\$1,439.31	\$0.00	\$117.86	\$25.13	\$2.49	\$34.07	\$0.00	\$0.16	\$429.09	\$0.91	\$17.17	\$2,066.18

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
Non-SSI Newborns 3 to 12 Months Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$3.80	\$0.00	\$36.92	\$25.41	\$1.65	\$31.95	\$0.00	\$0.03	\$125.39	\$1.21	\$8.97	\$235.33
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	N/A	1.000	1.000	1.064	1.077	N/A	1.077	1.051	1.103	1.077	1.042
c	Change Trend Factors CY 2022 to SFY 2025	0.974	N/A	0.974	1.081	1.064	1.082	N/A	1.024	1.016	1.000	1.061	1.027
d	Seasonal Virus Adjustment	1.000	N/A	0.966	0.964	0.967	0.953	N/A	1.000	0.980	1.000	0.993	0.973
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.146	1.000	1.000	1.078
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.071	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	N/A	1.000	1.000	1.000	1.000	N/A	1.000	1.000	1.001	1.000	1.000
Product of a through j		\$3.79	\$0.00	\$34.73	\$26.48	\$1.80	\$35.49	\$0.00	\$0.03	\$150.38	\$1.43	\$10.18	\$264.32

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
MYPAC Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$2.80	\$450.26	\$7.41	\$22.33	\$2.83	\$45.43	\$0.81	\$1,338.60	\$804.47	\$36.41	\$27.82	\$2,739.17
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.077	1.077	1.000	1.064	1.077	1.025	1.004	1.007	1.103	1.077	1.020
c	Change Trend Factors CY 2022 to SFY 2025	0.974	1.024	0.974	1.081	1.064	1.080	1.013	1.089	1.084	1.022	1.052	1.074
d	Seasonal Vius Adjustment	1.000	0.999	0.986	0.989	0.998	0.984	1.000	1.000	0.997	1.000	1.000	0.999
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diaonostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.027	1.000	1.000
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.036	1.000	1.000
Product of a through j	Projected SFY 2025 PMPM Costs	\$2.79	\$486.06	\$7.67	\$22.89	\$3.19	\$52.01	\$0.84	\$1,463.10	\$875.65	\$43.62	\$31.52	\$3,000.34
MA Children Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$1.15	\$10.05	\$6.18	\$9.65	\$1.71	\$22.81	\$0.30	\$10.75	\$56.61	\$24.24	\$6.69	\$150.16
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.077	1.077	1.000	1.064	1.077	1.025	1.077	1.077	1.103	1.077	1.075
c	Change Trend Factors CY 2022 to SFY 2025	0.974	1.043	0.974	1.082	1.064	1.082	1.013	1.040	1.016	1.019	1.054	1.034
d	Seasonal Vius Adjustment	1.000	0.999	0.976	0.966	0.989	0.968	1.000	1.000	0.960	1.000	0.999	0.977
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Carve-In	1.000	1.000	1.002	1.000	1.005	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.011	1.000	1.000	1.000	1.000	1.000	1.071	1.000	1.000	1.026
i	Reimbursement Changes												
	Preventative and Diaonostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.029	1.000	1.005
j	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.036	1.000	1.006
Product of a through j	Projected SFY 2025 PMPM Costs	\$1.18	\$11.55	\$6.57	\$10.35	\$1.87	\$26.37	\$0.32	\$12.35	\$65.31	\$25.77	\$7.78	\$173.51

Exhibit 2 Mississippi Division of Medicaid All Regions SFY 2025 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions													
Quasi-CHIP Rate Cell													
		Category of Service											
Calculation Step	SFY 2025 PMPM Cost Development	Inpatient Hospital - Maternity / Deliveries	Inpatient Hospital - Psychiatric / Substance Abuse	Inpatient Hospital - Other	Outpatient Hospital - Emergency Room	Outpatient Hospital - Pharmacy	Outpatient Hospital - Other	Physician - Maternity / Deliveries	Physician - Psychiatric / Substance Abuse	Physician - Other	Dental	Other	Total
a	Base Period Summaries												
	CY 2022 PMPM Costs	\$1.08	\$12.64	\$5.96	\$7.01	\$2.00	\$18.81	\$0.29	\$11.78	\$52.89	\$30.45	\$7.69	\$150.61
b	Trends												
	Utilization Trend Factors CY 2022 to SFY 2025	1.025	1.077	1.077	1.000	1.064	1.077	1.025	1.077	1.077	1.103	1.077	1.078
c	Change Trend Factors CY 2022 to SFY 2025	0.974	1.035	0.974	1.081	1.064	1.084	1.030	1.040	1.017	1.025	1.052	1.033
d	Seasonal Virus Adjustment	1.000	0.998	0.990	0.966	0.993	0.971	1.000	1.000	0.951	1.000	0.999	0.977
e	Population Changes												
	SFY 2025 Population Acuity Adjustment	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025	1.025
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	Hemophilia Population Cave-in	1.000	1.000	1.000	1.002	1.011	1.001	1.000	1.000	1.000	1.000	1.000	1.000
h	Program Changes												
	Gene Therapy Drug Coverage	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Reimbursement Changes												
	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.029	1.000	1.006
	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.028	1.000	1.006
Product of a through j		\$1.10	\$14.41	\$6.35	\$7.53	\$2.32	\$21.96	\$0.31	\$13.52	\$66.45	\$37.33	\$8.92	\$170.10

Exhibit 3 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Statewide Non-Service Expense Allocation Development										
	a	b	c	d	e = d × j	f	g = f × j	h	i = h × j	j = (b + c) / (1 - d - f - h)
Rate Cell	Projected SFY 2025 Membership	SFY 2025 PMPM Cost	Fixed Non-Service Expense Load	Non-Service Percentage	Non-Service PMPM	Margin Percentage	Margin PMPM	Premium Tax Percentage	Premium Tax PMPM	Total
Non-Newborn SSI / Disabled	713,294	\$758.06	\$9.99	5.98%	\$51.52	1.80%	\$15.50	3.00%	\$25.83	\$860.89
Breast and Cervical Cancer	823	\$2,797.57	\$9.99	5.98%	\$188.34	1.80%	\$56.65	3.00%	\$94.41	\$3,146.95
MA Adult	614,127	\$315.11	\$9.99	5.98%	\$21.81	1.80%	\$6.56	3.00%	\$10.93	\$364.40
Pregnant Women	201,312	\$547.76	\$9.99	5.98%	\$37.41	1.80%	\$11.25	3.00%	\$18.76	\$625.17
SSI / Disabled Newborn	6,563	\$5,939.74	\$9.99	5.98%	\$399.12	1.80%	\$120.04	3.00%	\$200.07	\$6,668.95
Non-SSI Newborns 0 to 2 Months	70,617	\$2,066.18	\$9.99	5.98%	\$139.27	1.80%	\$41.89	3.00%	\$69.81	\$2,327.15
Non-SSI Newborns 3 to 12 Months	235,151	\$264.32	\$9.99	5.98%	\$18.40	1.80%	\$5.53	3.00%	\$9.22	\$307.47
Foster Care	94,834	\$545.39	\$9.99	5.98%	\$37.26	1.80%	\$11.21	3.00%	\$18.68	\$622.51
MYPAC	13,610	\$3,000.34	\$9.99	5.98%	\$201.94	1.80%	\$60.74	3.00%	\$101.23	\$3,374.23
MA Children	2,871,096	\$173.51	\$9.99	5.98%	\$12.31	1.80%	\$3.70	3.00%	\$6.17	\$205.68
Quasi-CHIP	343,275	\$170.10	\$9.99	5.98%	\$12.08	1.80%	\$3.63	3.00%	\$6.06	\$201.86
Total	5,164,701	\$337.48	\$9.99	5.98%	\$23.31	1.80%	\$7.01	3.00%	\$11.68	\$389.47
		86.65%								

Exhibit 4 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Final SFY 2025 Capitation Rates						
Rate Cell	a SFY 2025 Statewide Capitation Rates	b Area Adjustments	c = a × b SFY 2025 Regional Capitation Rates	d = c × -1.00% Quality Withhold	e = c + d Total Rate at 1.0 Risk Score after Withhold	f Projected SFY 2025 Member Months
Non-Newborn SSI / Disabled	\$860.89			(\$8.61)	\$852.28	713,294
North Region		0.878	\$756.04	(\$7.56)	\$748.48	249,288
Central Region		1.041	896.04	(\$8.96)	\$887.08	257,947
South Region		1.096	943.32	(\$9.43)	\$933.89	206,059
Breast and Cervical Cancer	\$3,146.95			(\$31.47)	\$3,115.48	823
North Region		0.878	\$2,763.68	(\$27.64)	\$2,736.04	168
Central Region		1.041	3,275.43	(\$32.75)	\$3,242.68	271
South Region		1.096	3,448.27	(\$34.48)	\$3,413.79	384
MA Adult	\$364.40			(\$3.64)	\$360.76	614,127
North Region		0.995	\$362.51	(\$3.63)	\$358.88	165,823
Central Region		1.026	374.04	(\$3.74)	\$370.30	191,224
South Region		0.981	357.31	(\$3.57)	\$353.74	257,080
Pregnant Women	\$625.17			(\$6.25)	\$618.92	201,312
North Region		0.995	\$621.91	(\$6.22)	\$615.69	66,481
Central Region		1.026	641.70	(\$6.42)	\$635.28	74,991
South Region		0.981	613.01	(\$6.13)	\$606.88	59,840
SSI / Disabled Newborn	\$6,668.95			(\$66.69)	\$6,602.26	6,563
North Region		1.020	\$6,799.70	(\$68.00)	\$6,731.70	2,058
Central Region		1.078	7,186.55	(\$71.87)	\$7,114.69	2,790
South Region		0.909	6,062.19	(\$60.62)	\$6,001.57	1,715
Non-SSI Newborns 0 to 2 Months	\$2,327.15			(\$23.27)	\$2,303.88	70,617
North Region		1.020	\$2,372.77	(\$23.73)	\$2,349.04	22,231
Central Region		1.078	2,507.77	(\$25.08)	\$2,482.69	25,863
South Region		0.909	2,115.42	(\$21.15)	\$2,094.26	22,523
Non-SSI Newborns 3 to 12 Months	\$307.47			(\$3.07)	\$304.40	235,151
North Region		1.020	\$313.50	(\$3.14)	\$310.37	74,313
Central Region		1.078	331.34	(\$3.31)	\$328.02	85,182
South Region		0.909	279.50	(\$2.79)	\$276.70	75,656
Foster Care	\$622.51			(\$6.23)	\$616.29	94,834
North Region		1.020	\$634.72	(\$6.35)	\$628.37	27,912
Central Region		1.078	670.83	(\$6.71)	\$664.12	28,165
South Region		0.909	565.87	(\$5.66)	\$560.22	38,757
MYPAC	\$3,374.23			(\$33.74)	\$3,340.49	13,610
North Region		1.020	\$3,440.38	(\$34.40)	\$3,405.98	3,986
Central Region		1.078	3,636.12	(\$36.36)	\$3,599.76	4,457
South Region		0.909	3,067.23	(\$30.67)	\$3,036.56	5,167
MA Children	\$205.68			(\$2.06)	\$203.62	2,871,096
North Region		1.020	\$209.71	(\$2.10)	\$207.62	818,722
Central Region		1.078	221.65	(\$2.22)	\$219.43	968,711
South Region		0.909	186.97	(\$1.87)	\$185.10	1,083,662
Quasi-CHIP	\$201.86			(\$2.02)	\$199.85	343,275
North Region		1.020	\$205.82	(\$2.06)	\$203.76	108,416
Central Region		1.078	217.53	(\$2.18)	\$215.36	120,285
South Region		0.909	183.50	(\$1.83)	\$181.66	114,574
Total Capitation Dollars						
Statewide Capitation Rates			\$2,011,493,101			
Regional Capitation Rates			\$2,011,493,101			

Exhibit 5 Mississippi Division of Medicaid SFY 2024 to SFY 2025 Rate Change ¹													
Membership	Non- Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi- CHIP	Total - Aggregated with Actual CY 2022 MMs	Total - Aggregated with Projected SFY 2025 MMs
Actual CY 2022 MMs	720,708	961	451,802	96,821	5,039	67,578	232,493	82,463	10,612	2,558,562	283,644	4,510,683	N/A
Projected SFY 2025 MMs	713,294	823	614,127	201,312	6,563	70,617	235,151	94,834	13,610	2,871,096	343,275	N/A	5,164,701
SFY 2024 Capitation Rate - Including Pharmacy Services	\$1,320.36	\$3,469.71	\$564.73	\$732.35	\$8,360.17	\$2,275.83	\$303.48	\$734.25	\$3,936.78	\$240.10	\$253.27	\$517.87	\$508.33
Remove Non-Physician Administered Pharmacy Services	0.638	0.812	0.728	0.976	0.925	0.988	0.883	0.855	0.955	0.832	0.794	0.761	0.771
SFY 2024 Capitation Rate - Excluding Pharmacy Services	\$841.80	\$2,818.82	\$411.30	\$714.74	\$7,732.34	\$2,248.74	\$268.04	\$627.97	\$3,761.48	\$199.87	\$201.05	\$394.13	\$392.17
Shift CGT Estimates from Pharmacy to Physician	1.100	0.998	0.998	0.998	0.998	1.015	1.039	0.998	0.998	1.007	0.998	1.038	1.033
SFY 2024 Capitation Rate - Excluding Pharmacy Services with CGT Shift	\$825.63	\$2,813.56	\$410.53	\$713.40	\$7,717.90	\$2,281.86	\$278.43	\$626.80	\$3,754.46	\$201.22	\$200.67	\$409.13	\$405.19
Base Period Data Update	0.958	1.104	0.977	0.986	0.855	0.996	1.077	0.902	0.813	1.024	1.020	0.982	0.982
Restate CY 2022 to SFY 2024 Trends	1.016	0.989	0.982	0.942	0.995	0.999	0.960	1.023	1.039	0.993	0.999	0.999	0.997
Restate SFY 2024 Cell / Gene Therapy Coverage ²	0.934	1.000	1.000	1.000	1.000	1.000	1.035	1.000	1.000	1.013	1.000	0.982	0.984
Remove SFY 2024 Population Acuity Adjustment ^{3, 4}	1.000	1.000	0.941	1.000	1.000	1.000	1.000	1.000	1.000	0.929	0.925	0.970	0.969
Other Restated SFY 2024 Assumptions	0.996	1.000	1.000	1.000	1.000	1.000	1.000	0.999	1.000	0.998	0.998	0.998	0.998
Updates Relative to SFY 2024 Assumptions	0.906	1.091	0.902	0.928	0.850	0.995	1.069	0.922	0.845	0.955	0.940	0.933	0.931
SFY 2024 to SFY 2025 Utilization Trends	1.039	1.022	1.017	1.012	1.012	1.011	1.018	1.027	1.007	1.025	1.027	1.027	1.025
SFY 2024 to SFY 2025 Unit Cost Trends	0.998	1.008	1.000	0.996	1.001	0.999	1.012	1.022	1.028	1.011	1.011	1.004	1.004
SFY 2025 Population Acuity Adjustment ¹	1.000	1.000	0.987	1.000	1.000	1.000	1.000	1.000	1.000	1.021	1.022	1.006	1.005
SFY 2025 Seasonal Virus Adjustment ¹	0.995	0.995	1.002	1.037	1.022	1.020	1.005	1.034	1.040	1.019	1.019	1.010	1.011
SFY 2025 Hemophilia Population Carve-In ²	1.002	1.000	1.000	0.999	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.001
SFY 2025 Postpartum Coverage Extension ²	1.000	1.000	1.000	0.929	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.997	0.995
SFY 2024 to SFY 2025 Restorative Dental Reimbursement Change ²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.002	1.001	1.001
Update SFY 2025 Admin	0.999	1.005	0.987	0.979	0.987	1.000	1.006	0.997	0.993	1.000	0.998	0.997	0.996
Remove SFY 2025 PBA Pharmacy Admin ²	0.994	0.995	0.993	0.994	0.995	0.995	0.992	0.994	0.995	0.991	0.991	0.993	0.993
Preliminary SFY 2025 Rate Change	0.930	1.118	0.888	0.876	0.864	1.020	1.104	0.993	0.899	1.022	1.006	0.965	0.961
SFY 2025 Rate Change - Excluding Program Changes ⁴	0.999	1.124	0.895	0.950	0.869	1.025	1.076	0.999	0.903	1.016	1.013	0.992	0.987
SFY 2025 Rate Change - Excluding COVID-19 Adjustments ³	0.935	1.124	0.955	0.845	0.846	1.000	1.099	0.960	0.864	1.057	1.045	0.980	0.975

¹ Rate changes exclude MHAP, MAPS, TREAT, the quality withhold, and the VBP.
² Program change that increases or decreases total program costs outside of the control of the CCOs.
³ COVID-19 adjustments include the population acuity adjustments.

Exhibit 6 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Service Category to Milliman HCGs Group Category Mapping							
Broad Category of Service - SFY 2024 Definition		Broad Category of Service - SFY 2025 Definition		Broad Category of Service - SFY 2024 Definition		Broad Category of Service - SFY 2025 Definition	
MR Line			Description	MR Line			Description
I21a	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Mat Norm Delivery	P37j	Physician	Physician - Other	Miscellaneous Medical - Dermatology
I21b	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Mat Norm Delivery - Mom/Baby Cmbnd	P37k	Physician	Physician - Other	Miscellaneous Medical - Dialysis
I22a	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Mat Csect Delivery	P40a	Physician	Physician - Other	Preventive Other - General
I22b	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Mat Csect Delivery - Mom/Baby Cmbnd	P40b	Physician	Physician - Other	Preventive Other - Colonoscopy
I23a	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Well Newborn - Normal Delivery	P40c	Physician	Physician - Other	Preventive Other - Mammography
I23b	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Well Newborn - Csect Delivery	P40d	Physician	Physician - Other	Preventive Other - Lab
I23c	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Well Newborn - Unknown Delivery	P41	Physician	Physician - Other	Preventive Immunizations
I24	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Other Newborn	P42	Physician	Physician - Other	Preventive Well Baby Exams
I25	Inpatient Hospital	Inpatient Hospital - Maternity / Deliveries	Maternity Non-Delivery	P43	Physician	Physician - Other	Preventive Physical Exams
I13a	Inpatient Hospital	Inpatient Hospital - Psychiatric / Substance Abuse	Psychiatric - Hospital	P44	Physician	Physician - Other	Vision Exams
I13b	Inpatient Hospital	Inpatient Hospital - Psychiatric / Substance Abuse	Psychiatric - Residential	P45	Physician	Physician - Other	Hearing and Speech Exams
I14a	Inpatient Hospital	Inpatient Hospital - Psychiatric / Substance Abuse	Substance Use Disorders - Hospital	P51a	Physician	Physician - Other	ED Visits and Observation Care - Observation Care
I14b	Inpatient Hospital	Inpatient Hospital - Psychiatric / Substance Abuse	Substance Use Disorders - Residential	P51b	Physician	Physician - Other	ED Visits and Observation Care - ED Visits
I11a	Inpatient Hospital	Inpatient Hospital - Other	Medical	P53	Physician	Physician - Other	Physical Therapy
I11b	Inpatient Hospital	Inpatient Hospital - Other	Rehabilitation	P54	Physician	Physician - Other	Cardiovascular
I12	Inpatient Hospital	Inpatient Hospital - Other	Surgical	P55b	Physician	Physician - Other	Radiology IP - CT Scan
I31	Inpatient Hospital	Inpatient Hospital - Other	SNF	P55c	Physician	Physician - Other	Radiology IP - MRI
O10b	Outpatient Hospital	Outpatient Hospital - Emergency Room	Observation - With ED	P55d	Physician	Physician - Other	Radiology IP - PET
O11	Outpatient Hospital	Outpatient Hospital - Emergency Room	Emergency Department	P55e	Physician	Physician - Other	Radiology IP - General - Therapeutic
O16a	Outpatient Hospital	Outpatient Hospital - Pharmacy	Pharmacy - General	P55f	Physician	Physician - Other	Radiology IP - General - Diagnostic
O16b	Outpatient Hospital	Outpatient Hospital - Pharmacy	Pharmacy - Chemotherapy	P56a	Physician	Physician - Other	Radiology OP - General - Therapeutic
O10a	Outpatient Hospital	Outpatient Hospital - Other	Observation - Without ED	P56b	Physician	Physician - Other	Radiology OP - General - Diagnostic
O12a	Outpatient Hospital	Outpatient Hospital - Other	Surgery - Hospital Outpatient	P57a	Physician	Physician - Other	Radiology OP-CT/MRI/PET - CT Scan
O12b	Outpatient Hospital	Outpatient Hospital - Other	Surgery - Ambulatory Surgery Center	P57b	Physician	Physician - Other	Radiology OP-CT/MRI/PET - MRI
O13a	Outpatient Hospital	Outpatient Hospital - Other	Radiology General - Therapeutic	P57c	Physician	Physician - Other	Radiology OP-CT/MRI/PET - PET
O13b	Outpatient Hospital	Outpatient Hospital - Other	Radiology General - Diagnostic	P58c	Physician	Physician - Other	Radiology Office - General - Therapeutic
O14a	Outpatient Hospital	Outpatient Hospital - Other	Radiology - CT/MRI/PET - CT Scan	P58d	Physician	Physician - Other	Radiology Office - General - Diagnostic
O14b	Outpatient Hospital	Outpatient Hospital - Other	Radiology - CT/MRI/PET - MRI	P58e	Physician	Physician - Other	Radiology Office - General - Radiology Center - Therapeutic
O14c	Outpatient Hospital	Outpatient Hospital - Other	Radiology - CT/MRI/PET - PET	P58f	Physician	Physician - Other	Radiology Office - General - Radiology Center - Diagnostic
O15	Outpatient Hospital	Outpatient Hospital - Other	Pathology/Lab	P59a	Physician	Physician - Other	Radiology Office - CT/MRI/PET - CT Scan
O17	Outpatient Hospital	Outpatient Hospital - Other	Cardiovascular	P59b	Physician	Physician - Other	Radiology Office - CT/MRI/PET - MRI
O18	Outpatient Hospital	Outpatient Hospital - Other	PT/OT/ST	P59c	Physician	Physician - Other	Radiology Office - CT/MRI/PET - PET
O31a	Outpatient Hospital	Outpatient Hospital - Other	Psychiatric - Partial Hospitalization	P59d	Physician	Physician - Other	Radiology Office - CT/MRI/PET - CT Scan - Radiology Center
O31b	Outpatient Hospital	Outpatient Hospital - Other	Psychiatric - Intensive Outpatient	P59e	Physician	Physician - Other	Radiology Office - CT/MRI/PET - MRI - Radiology Center
O32a	Outpatient Hospital	Outpatient Hospital - Other	Substance Use Disorders - Partial Hospitalization	P59f	Physician	Physician - Other	Radiology Office - CT/MRI/PET - PET - Radiology Center
O32b	Outpatient Hospital	Outpatient Hospital - Other	Substance Use Disorders - Intensive Outpatient	P61a	Physician	Physician - Other	Pathology/Lab - Inpatient & Outpatient - Inpatient
O41a	Outpatient Hospital	Outpatient Hospital - Other	Other - General	P61b	Physician	Physician - Other	Pathology/Lab - Inpatient & Outpatient - Outpatient
O41b	Outpatient Hospital	Outpatient Hospital - Other	Other - Blood	P63a	Physician	Physician - Other	Pathology/Lab - Office - General
O41d	Outpatient Hospital	Outpatient Hospital - Other	Other - Clinic	P63b	Physician	Physician - Other	Pathology/Lab - Office - Venipuncture
O41e	Outpatient Hospital	Outpatient Hospital - Other	Other - Diagnostic	P63c	Physician	Physician - Other	Pathology/Lab - Office - Independent Lab
O41f	Outpatient Hospital	Outpatient Hospital - Other	Other - Dialysis	P65	Physician	Physician - Other	Chiropractor
O41g	Outpatient Hospital	Outpatient Hospital - Other	Other - DME/Supplies	P99e	Physician	Physician - Other	Benefits Other - Reproductive Medicine
O41h	Outpatient Hospital	Outpatient Hospital - Other	Other - Trmt/Spclty Svcs	P99f	Physician	Physician - Other	Benefits Other - Temporary Codes
O41i	Outpatient Hospital	Outpatient Hospital - Other	Other - Pulmonary	P99g	Physician	Physician - Other	Benefits Other - Documentation
O41j	Outpatient Hospital	Outpatient Hospital - Other	Other - Urgent Care	P99z	Physician	Physician - Other	Benefits Other - Unclassified
O51a	Outpatient Hospital	Outpatient Hospital - Other	Preventive - General	P82a	Other	Other	Home Health Care - HH
O51b	Outpatient Hospital	Outpatient Hospital - Other	Preventive - Colonoscopy	P82b	Other	Other	Home Health Care - Hospice
O51c	Outpatient Hospital	Outpatient Hospital - Other	Preventive - Mammography	P82c	Other	Other	Home Health Care - Home Health (Medicare Covered)
O51d	Outpatient Hospital	Outpatient Hospital - Other	Preventive - Lab	P82d	Other	Other	Home Health Care - Hospice - Home Based
P21a	Physician	Physician - Maternity / Deliveries	Maternity - Normal Deliveries	P82e	Other	Other	Home Health Care - Hospice - Facility Based
P21b	Physician	Physician - Maternity / Deliveries	Maternity - Cesarean Deliveries	P82f	Other	Other	Home Health Care - Home Health (Not Medicare Covered)
P21c	Physician	Physician - Maternity / Deliveries	Maternity - Non-Deliveries	P82g	Other	Other	Home Health Care - Personal/Custodial Care
P21d	Physician	Physician - Maternity / Deliveries	Maternity - Ancillary	P82h	Other	Other	Home Health Care - Adult Day Health Care
P21e	Physician	Physician - Maternity / Deliveries	Maternity - Anesthesia	P82i	Other	Other	Home Health Care - Home Respite Care
P31e	Physician	Physician - Psychiatric / Substance Abuse	Inpatient Visits - Psychiatric	P82j	Other	Other	Home Health Care - Personal Emergency Response System (PERS)
P31f	Physician	Physician - Psychiatric / Substance Abuse	Inpatient Visits - Substance Use Disorders	P82k	Other	Other	Home Health Care - Home Modification
P66	Physician	Physician - Psychiatric / Substance Abuse	Outpatient Psychiatric	P82l	Other	Other	Home Health Care - Home Delivered Meals
P67	Physician	Physician - Psychiatric / Substance Abuse	Outpatient Substance Use Disorders	P82m	Other	Other	Home Health Care - Assisted Living Facility
P11	Physician	Physician - Other	Inpatient Surgerv	P82n	Other	Other	Home Health Care - Ancillary Services Provided in the Home
P13	Physician	Physician - Other	Inpatient Anesthesia	P83	Other	Other	Ambulance
P14	Physician	Physician - Other	Outpatient Surgery	P84	Other	Other	DME and Supplies
P15	Physician	Physician - Other	Office Surgery	P85	Other	Other	Prosthetics
P16	Physician	Physician - Other	Outpatient Anesthesia	P89	Other	Other	Benefits Glasses/Contacts
P31d	Physician	Physician - Other	Inpatient Visits - Medical	P99a	Other	Other	Benefits Other - General
P32c	Physician	Physician - Other	Office/Home Visits - PCP	P99b	Other	Other	Benefits Other - Hearing Aids
P32d	Physician	Physician - Other	Office/Home Visits - Specialist	P99d	Other	Other	Benefits Other - Acupuncture
P33	Physician	Physician - Other	Urgent Care Visits	P99h	Other	Other	Benefits Other - Non-Emergency Transportation
P34a	Physician	Physician - Other	Office Administered Drugs - General	P99c	Dental	Dental	Benefits Other - Dental
P34b	Physician	Physician - Other	Office Administered Drugs - Chemotherapy	R73a	Drug	Drug - Traditional	Prescription Drugs - Preferred Generic
P35	Physician	Physician - Other	Allergy Testing	R73b	Drug	Drug - Traditional	Prescription Drugs - Non-Preferred Generic
P36	Physician	Physician - Other	Allergy Immunotherapy	R74a	Drug	Drug - Traditional	Prescription Drugs - Preferred Brand
P37a	Physician	Physician - Other	Miscellaneous Medical - General	R74b	Drug	Drug - Traditional	Prescription Drugs - Non-Preferred Brand
P37b	Physician	Physician - Other	Miscellaneous Medical - Gastroenterology	R75	Drug	Drug - Specialty	Prescription Drugs - Specialty
P37c	Physician	Physician - Other	Miscellaneous Medical - Ophthalmology	R76	Drug	Drug - Traditional	Prescription Drugs - Preventive
P37d	Physician	Physician - Other	Miscellaneous Medical - Otorhinolaryngology	P81a	Drug	Drug - Traditional	Prescription Drugs - Non-Specialty Generic
P37e	Physician	Physician - Other	Miscellaneous Medical - Vestibular Function Tests	P81b	Drug	Drug - Traditional	Prescription Drugs - Non-Specialty Multi Source Brand
P37f	Physician	Physician - Other	Miscellaneous Medical - Non-Invas. Vasc. Diag. Studies	P81c	Drug	Drug - Traditional	Prescription Drugs - Non-Specialty Single Source Brand
P37g	Physician	Physician - Other	Miscellaneous Medical - Pulmonology	P81e	Drug	Drug - Traditional	Prescription Drugs - OTC
P37h	Physician	Physician - Other	Miscellaneous Medical - Neurology	P81q	Drug	Drug - Specialty	Prescription Drugs - Specialty
P37i	Physician	Physician - Other	Miscellaneous Medical - Central Nervous System Tests				

*Broad Category of Service "Drug" is excluded from base data.

Exhibit 7A Mississippi Division of Medicaid MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends All Populations PMPM Costs by Month¹								
Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total	
January 2019	437,026	\$86.20	\$78.01	\$116.03	\$21.53	\$15.83	\$317.60	
February 2019	435,583	\$80.51	\$75.26	\$111.70	\$18.77	\$14.78	\$301.01	
March 2019	434,251	\$85.38	\$70.36	\$104.88	\$19.18	\$15.42	\$295.21	
April 2019	434,281	\$87.46	\$73.80	\$109.78	\$20.23	\$16.06	\$307.33	
May 2019	435,675	\$89.86	\$72.87	\$104.61	\$17.26	\$15.59	\$300.18	
June 2019	436,565	\$82.39	\$71.61	\$93.13	\$17.96	\$14.70	\$279.79	
July 2019	435,173	\$88.31	\$73.26	\$103.38	\$22.10	\$16.56	\$303.61	
August 2019	432,187	\$85.48	\$70.17	\$112.10	\$21.22	\$17.42	\$306.40	
September 2019	431,636	\$87.31	\$69.42	\$108.57	\$19.77	\$16.54	\$301.61	
October 2019	432,302	\$95.86	\$75.40	\$118.28	\$22.69	\$16.77	\$329.00	
November 2019	433,427	\$81.80	\$67.89	\$105.64	\$18.11	\$16.02	\$289.46	
December 2019	435,721	\$89.91	\$70.62	\$104.84	\$16.16	\$15.88	\$297.41	
CY 2019²⁴	434,486	\$86.71	\$72.39	\$107.74	\$19.58	\$15.96	\$302.39	
January 2020	434,689	\$85.69	\$75.84	\$118.73	\$20.39	\$17.26	\$317.91	
February 2020	431,725	\$76.77	\$70.60	\$110.64	\$18.73	\$15.75	\$292.48	
March 2020	429,908	\$79.10	\$57.79	\$93.69	\$12.03	\$15.73	\$258.34	
April 2020	430,080	\$70.41	\$37.21	\$69.57	\$1.36	\$12.38	\$190.93	
May 2020	434,572	\$78.76	\$50.69	\$80.08	\$10.02	\$13.56	\$233.11	
June 2020	443,044	\$84.08	\$59.77	\$95.09	\$16.13	\$14.80	\$269.86	
July 2020	450,515	\$84.44	\$60.18	\$95.50	\$17.18	\$14.22	\$271.52	
August 2020	456,517	\$81.43	\$57.88	\$95.70	\$16.99	\$14.94	\$266.93	
September 2020	460,496	\$77.13	\$59.82	\$97.66	\$17.11	\$14.84	\$266.56	
October 2020	464,815	\$78.34	\$61.51	\$101.49	\$17.60	\$15.53	\$274.47	
November 2020	470,075	\$72.23	\$57.90	\$91.54	\$15.30	\$14.58	\$251.55	
December 2020	474,757	\$81.09	\$57.44	\$91.85	\$15.14	\$14.94	\$260.48	
CY 2020³⁴	448,433	\$79.12	\$58.88	\$95.13	\$14.83	\$14.88	\$262.84	
January 2021	478,618	\$83.60	\$56.48	\$93.82	\$15.87	\$15.49	\$265.27	
February 2021	481,326	\$77.39	\$50.06	\$83.51	\$13.77	\$13.29	\$238.02	
March 2021	483,763	\$88.55	\$65.11	\$103.32	\$18.83	\$16.46	\$292.27	
April 2021	483,831	\$82.08	\$65.60	\$103.19	\$16.92	\$15.73	\$283.52	
May 2021	486,505	\$89.59	\$66.24	\$97.55	\$14.50	\$15.68	\$283.57	
June 2021	488,764	\$90.27	\$71.77	\$100.83	\$16.31	\$16.45	\$295.64	
July 2021	473,300	\$92.34	\$69.97	\$101.16	\$16.70	\$16.42	\$296.60	
August 2021	452,472	\$94.91	\$66.90	\$119.11	\$16.37	\$16.61	\$313.90	
September 2021	439,660	\$85.91	\$65.64	\$111.00	\$17.65	\$15.90	\$296.09	
October 2021	428,718	\$81.71	\$66.42	\$106.14	\$17.18	\$16.44	\$287.89	
November 2021	419,121	\$78.40	\$64.31	\$105.37	\$17.82	\$15.04	\$280.94	
December 2021	412,166	\$76.92	\$64.95	\$100.14	\$15.54	\$14.76	\$272.31	
CY 2021³⁴	460,687	\$85.14	\$64.46	\$102.10	\$16.45	\$15.69	\$283.84	
January 2022	402,787	\$86.71	\$65.28	\$117.14	\$15.46	\$14.39	\$298.98	
February 2022	395,077	\$76.13	\$60.70	\$103.24	\$16.03	\$13.91	\$270.02	
March 2022	387,921	\$79.78	\$69.96	\$111.88	\$18.11	\$15.55	\$295.27	
April 2022	375,645	\$80.83	\$66.21	\$106.18	\$16.53	\$14.63	\$284.39	
May 2022	370,307	\$87.03	\$68.92	\$107.55	\$15.97	\$15.28	\$294.76	
June 2022	365,108	\$86.92	\$71.41	\$105.17	\$17.63	\$15.26	\$296.38	
July 2022	365,066	\$86.15	\$82.51	\$101.81	\$16.69	\$14.79	\$301.95	
August 2022	360,856	\$83.95	\$77.39	\$131.59	\$20.00	\$16.15	\$329.08	
September 2022	362,119	\$79.80	\$69.59	\$119.70	\$18.97	\$14.80	\$302.87	
October 2022	365,733	\$81.90	\$69.98	\$122.35	\$18.95	\$14.67	\$307.85	
November 2022	368,931	\$80.22	\$72.25	\$123.64	\$17.73	\$14.24	\$308.08	
December 2022	384,117	\$79.43	\$63.32	\$101.14	\$15.60	\$13.83	\$273.32	
CY 2022²	375,306	\$82.41	\$69.79	\$112.62	\$17.31	\$14.79	\$296.91	
January 2023	387,438	\$81.59	\$66.43	\$117.77	\$21.23	\$14.69	\$301.72	
February 2023	391,178	\$76.17	\$64.63	\$109.32	\$19.45	\$13.25	\$282.82	
March 2023	393,792	\$80.52	\$71.65	\$119.92	\$21.29	\$14.95	\$308.34	
April 2023	397,906	\$86.33	\$68.17	\$113.81	\$18.49	\$14.46	\$301.26	
May 2023	400,584	\$92.69	\$72.24	\$117.65	\$19.50	\$15.11	\$317.18	
June 2023	403,351	\$83.48	\$73.71	\$104.63	\$19.77	\$15.53	\$297.12	
July 2023	395,034	\$93.99	\$71.54	\$102.20	\$16.74	\$15.91	\$300.37	
August 2023	395,228	\$95.62	\$83.08	\$131.05	\$18.33	\$16.53	\$344.61	
September 2023	396,242	\$85.03	\$70.70	\$113.26	\$18.52	\$14.61	\$302.11	
Q1-Q3 2023³	395,639	\$86.16	\$71.35	\$114.40	\$19.26	\$15.00	\$306.17	
Annual PMPM Trends								
CY 2017 to CY 2018		4.4%	1.9%	3.8%	-7.1%	3.2%	2.7%	
CY 2018 to CY 2019		6.0%	3.3%	7.1%	-1.3%	7.0%	5.3%	
CY 2019 to CY 2020		-8.7%	-18.7%	-11.7%	-24.3%	-6.8%	-13.1%	
CY 2020 to CY 2021		7.6%	9.5%	7.3%	10.9%	5.5%	8.0%	
CY 2021 to CY 2022		-3.2%	8.3%	10.3%	5.2%	-5.7%	4.6%	
CY 2022 to Q3 2023		5.2%	2.6%	1.8%	13.0%	1.6%	3.6%	
CY 2021 to Q3 2023 (Annualized)		0.6%	5.6%	6.3%	8.8%	-2.4%	4.1%	

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from September 2023 to be directly comparable by month.

² CY 2019 and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021, CY 2022, and Q1-Q3 2023 IBNR as reported by CCOs in financial templates.

⁴ CY 2019, CY 2020, and CY 2021 data is consistent with the data that supported trends in CY 2024 rates. We rely on this data due to known issues with the data vendor transition.

Exhibit 7B
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
SSI+ Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	63,961	\$198.50	\$227.22	\$234.41	\$10.36	\$63.23	\$733.72
February 2019	63,934	\$174.57	\$213.32	\$215.61	\$8.92	\$61.06	\$673.48
March 2019	63,712	\$178.20	\$206.23	\$219.44	\$9.05	\$63.21	\$676.13
April 2019	63,901	\$183.63	\$215.72	\$227.84	\$9.80	\$64.71	\$701.69
May 2019	63,768	\$192.95	\$218.29	\$225.39	\$8.69	\$65.25	\$710.57
June 2019	63,938	\$161.33	\$209.80	\$207.51	\$7.81	\$61.96	\$648.42
July 2019	64,036	\$182.70	\$210.66	\$220.97	\$10.18	\$65.36	\$689.87
August 2019	63,876	\$174.78	\$207.85	\$231.27	\$10.27	\$68.17	\$692.34
September 2019	63,899	\$197.09	\$201.86	\$220.26	\$9.60	\$66.37	\$695.18
October 2019	63,899	\$212.62	\$216.94	\$239.25	\$10.97	\$67.57	\$747.35
November 2019	63,924	\$183.13	\$184.32	\$202.08	\$8.39	\$66.06	\$643.98
December 2019	64,030	\$188.51	\$194.34	\$204.91	\$7.61	\$64.27	\$659.65
CY 2019²⁴	63,907	\$185.67	\$208.88	\$220.74	\$9.30	\$64.77	\$689.36
January 2020	63,847	\$188.73	\$226.90	\$234.82	\$10.35	\$69.68	\$730.49
February 2020	63,841	\$166.78	\$206.18	\$215.37	\$9.39	\$63.40	\$661.11
March 2020	63,589	\$177.93	\$178.56	\$195.64	\$5.45	\$67.58	\$625.17
April 2020	63,509	\$136.50	\$139.25	\$147.50	\$1.42	\$56.27	\$480.95
May 2020	63,644	\$168.37	\$170.55	\$170.16	\$4.78	\$58.84	\$572.69
June 2020	63,879	\$188.05	\$192.44	\$205.15	\$7.49	\$63.46	\$656.59
July 2020	63,809	\$176.38	\$190.78	\$197.71	\$7.89	\$58.05	\$630.81
August 2020	63,777	\$168.70	\$180.01	\$197.94	\$8.44	\$60.01	\$615.10
September 2020	63,769	\$164.88	\$190.01	\$204.15	\$8.48	\$61.31	\$628.84
October 2020	63,695	\$173.83	\$192.72	\$208.37	\$8.84	\$65.03	\$648.78
November 2020	63,697	\$153.15	\$179.97	\$185.51	\$7.20	\$61.32	\$587.16
December 2020	63,532	\$168.66	\$182.73	\$186.36	\$7.42	\$64.29	\$609.46
CY 2020²⁴	63,716	\$169.33	\$185.84	\$195.72	\$7.26	\$62.44	\$620.60
January 2021	63,329	\$164.01	\$175.46	\$192.86	\$7.92	\$67.65	\$607.89
February 2021	63,319	\$164.55	\$160.21	\$172.41	\$6.83	\$57.25	\$561.26
March 2021	62,918	\$191.50	\$201.67	\$223.97	\$9.05	\$69.72	\$695.91
April 2021	62,480	\$167.44	\$200.73	\$210.93	\$8.53	\$67.08	\$654.70
May 2021	62,352	\$190.40	\$202.74	\$203.26	\$8.56	\$66.37	\$671.32
June 2021	62,201	\$175.97	\$219.42	\$214.25	\$8.69	\$69.37	\$687.70
July 2021	62,317	\$211.09	\$208.70	\$203.27	\$7.72	\$68.86	\$699.65
August 2021	62,105	\$200.82	\$188.88	\$211.90	\$8.56	\$70.08	\$680.24
September 2021	61,811	\$185.05	\$196.00	\$212.98	\$9.21	\$67.48	\$670.73
October 2021	61,544	\$163.31	\$196.46	\$209.96	\$8.68	\$69.10	\$647.51
November 2021	61,417	\$164.26	\$192.37	\$200.31	\$8.73	\$63.19	\$628.86
December 2021	61,244	\$156.75	\$186.10	\$187.86	\$7.32	\$61.65	\$599.68
CY 2021²⁴	62,253	\$177.93	\$194.06	\$203.66	\$8.32	\$66.48	\$650.45
January 2022	60,951	\$181.07	\$191.38	\$217.00	\$7.22	\$58.54	\$655.21
February 2022	60,778	\$161.99	\$185.88	\$204.53	\$8.05	\$56.15	\$616.60
March 2022	60,481	\$164.89	\$217.34	\$227.67	\$8.79	\$62.16	\$680.85
April 2022	59,975	\$155.54	\$200.07	\$211.58	\$7.83	\$58.63	\$633.64
May 2022	59,934	\$169.09	\$205.91	\$221.99	\$8.21	\$60.99	\$666.19
June 2022	59,826	\$155.99	\$212.14	\$219.90	\$8.50	\$61.25	\$657.79
July 2022	60,035	\$166.00	\$247.69	\$205.28	\$7.46	\$58.99	\$685.43
August 2022	59,883	\$160.89	\$226.17	\$249.44	\$9.77	\$64.14	\$710.41
September 2022	59,914	\$160.38	\$191.75	\$227.49	\$9.38	\$58.79	\$647.78
October 2022	60,030	\$169.43	\$189.54	\$232.59	\$10.08	\$58.01	\$659.66
November 2022	59,900	\$168.35	\$196.77	\$224.08	\$8.88	\$59.16	\$657.25
December 2022	60,502	\$151.48	\$177.84	\$194.62	\$7.77	\$58.83	\$590.54
CY 2022²³	60,184	\$163.76	\$203.54	\$219.68	\$8.49	\$59.64	\$655.11
January 2023	59,914	\$172.75	\$192.67	\$235.62	\$10.04	\$60.25	\$671.34
February 2023	60,531	\$159.41	\$192.59	\$215.86	\$9.02	\$56.09	\$632.97
March 2023	60,180	\$159.25	\$207.21	\$242.47	\$11.04	\$60.95	\$680.92
April 2023	60,119	\$185.82	\$199.99	\$224.86	\$9.03	\$60.16	\$679.86
May 2023	59,998	\$185.40	\$219.98	\$248.99	\$10.02	\$62.46	\$726.85
June 2023	59,842	\$181.52	\$227.41	\$227.56	\$9.57	\$65.20	\$711.27
July 2023	59,628	\$202.94	\$221.08	\$221.51	\$8.38	\$65.02	\$718.92
August 2023	59,543	\$215.10	\$258.76	\$251.78	\$10.60	\$68.08	\$804.33
September 2023	59,366	\$175.48	\$203.38	\$221.03	\$9.63	\$59.66	\$669.18
Q1-Q3 2023³	59,902	\$181.96	\$213.67	\$232.19	\$9.70	\$61.99	\$699.52
Annual PMPM Trends							
CY 2017 to CY 2018		1.5%	2.7%	5.9%	-9.0%	2.5%	3.1%
CY 2018 to CY 2019		5.5%	4.2%	6.1%	-7.0%	7.1%	5.2%
CY 2019 to CY 2020		-8.8%	-11.0%	-11.3%	-21.9%	-3.6%	-10.0%
CY 2020 to CY 2021		5.1%	4.4%	4.1%	14.5%	6.5%	4.8%
CY 2021 to CY 2022		-8.0%	4.9%	7.9%	2.1%	-10.3%	0.7%
CY 2022 to Q3 2023		12.8%	5.7%	6.5%	16.4%	4.5%	7.8%
CY 2021 to Q3 2023 (Annualized)		1.2%	5.3%	7.2%	8.6%	-3.7%	4.0%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from September 2023 to be directly comparable by month.

² CY 2019 and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021, CY 2022, and Q1-Q3 2023 IBNR as reported by CCOs in financial templates.

⁴ CY 2019, CY 2020, and CY 2021 data is consistent with the data that supported trends in CY 2024 rates. We rely on this data due to known issues with the data vendor transition.

Exhibit 7C
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Adults Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	52,746	\$35.17	\$122.22	\$149.20	\$8.14	\$13.37	\$328.09
February 2019	52,322	\$34.28	\$109.15	\$133.06	\$6.79	\$12.18	\$295.46
March 2019	52,133	\$38.74	\$109.84	\$132.65	\$6.75	\$11.57	\$299.55
April 2019	52,042	\$43.27	\$115.77	\$140.22	\$8.14	\$12.36	\$319.76
May 2019	52,603	\$46.92	\$113.79	\$142.09	\$6.78	\$13.02	\$322.59
June 2019	52,901	\$39.31	\$110.19	\$130.01	\$5.88	\$12.25	\$297.64
July 2019	53,101	\$41.62	\$122.20	\$141.33	\$6.13	\$13.12	\$324.40
August 2019	52,700	\$39.88	\$113.93	\$144.41	\$6.92	\$14.32	\$319.45
September 2019	52,760	\$40.00	\$107.65	\$136.34	\$5.95	\$13.43	\$303.36
October 2019	52,643	\$43.40	\$118.10	\$149.73	\$6.93	\$14.35	\$332.50
November 2019	52,387	\$37.46	\$101.23	\$127.41	\$5.08	\$13.27	\$284.45
December 2019	52,385	\$34.95	\$106.91	\$131.01	\$5.02	\$12.93	\$290.82
CY 2019²⁴	52,560	\$39.58	\$112.58	\$138.12	\$6.54	\$13.01	\$309.84
January 2020	51,740	\$46.76	\$116.12	\$152.50	\$6.43	\$14.45	\$336.27
February 2020	51,070	\$39.79	\$104.78	\$137.17	\$6.10	\$12.99	\$300.84
March 2020	50,820	\$32.06	\$90.14	\$125.38	\$5.57	\$12.10	\$265.24
April 2020	50,697	\$23.82	\$59.34	\$102.21	\$2.81	\$9.82	\$198.00
May 2020	51,903	\$38.25	\$83.47	\$119.69	\$4.68	\$11.79	\$257.88
June 2020	53,590	\$39.61	\$99.65	\$138.33	\$7.03	\$12.01	\$296.63
July 2020	55,460	\$45.42	\$103.07	\$137.30	\$6.49	\$12.33	\$304.60
August 2020	56,368	\$52.45	\$99.13	\$130.62	\$5.98	\$12.28	\$300.46
September 2020	57,006	\$35.66	\$93.48	\$132.01	\$6.16	\$12.12	\$279.43
October 2020	57,418	\$33.25	\$96.70	\$133.68	\$5.89	\$12.74	\$282.26
November 2020	58,070	\$33.78	\$94.80	\$120.37	\$4.99	\$11.68	\$265.63
December 2020	58,626	\$35.31	\$92.34	\$127.51	\$5.03	\$11.46	\$271.65
CY 2020²⁴	54,397	\$38.01	\$94.42	\$129.73	\$5.60	\$12.15	\$279.91
January 2021	59,089	\$39.67	\$91.02	\$122.36	\$5.18	\$11.99	\$270.22
February 2021	59,414	\$28.12	\$79.21	\$105.37	\$4.61	\$9.51	\$226.81
March 2021	59,864	\$35.59	\$101.26	\$131.41	\$5.63	\$11.72	\$285.61
April 2021	60,010	\$32.42	\$99.84	\$128.36	\$6.27	\$10.70	\$277.60
May 2021	60,641	\$38.11	\$97.27	\$120.70	\$4.81	\$11.01	\$271.89
June 2021	61,139	\$41.19	\$102.94	\$131.25	\$5.16	\$11.41	\$291.95
July 2021	59,248	\$47.69	\$97.44	\$124.94	\$4.13	\$11.31	\$285.50
August 2021	56,422	\$66.68	\$98.21	\$140.09	\$4.55	\$12.57	\$322.10
September 2021	55,101	\$48.92	\$97.39	\$134.71	\$4.70	\$11.73	\$297.45
October 2021	53,607	\$39.29	\$98.05	\$124.20	\$4.30	\$11.63	\$277.47
November 2021	52,343	\$44.65	\$89.37	\$124.23	\$4.40	\$11.32	\$273.97
December 2021	51,472	\$40.19	\$97.26	\$123.50	\$4.00	\$11.72	\$276.67
CY 2021²⁴	57,363	\$41.88	\$95.77	\$125.93	\$4.81	\$11.38	\$279.77
January 2022	49,902	\$42.12	\$97.00	\$138.45	\$4.17	\$11.99	\$293.73
February 2022	48,632	\$32.21	\$82.54	\$118.91	\$4.53	\$10.50	\$248.69
March 2022	47,747	\$36.49	\$99.70	\$133.85	\$4.67	\$12.32	\$287.02
April 2022	45,576	\$33.08	\$99.07	\$126.28	\$4.59	\$11.79	\$274.81
May 2022	44,970	\$41.62	\$105.35	\$129.30	\$4.68	\$12.16	\$293.11
June 2022	44,155	\$35.05	\$103.56	\$135.84	\$4.36	\$13.25	\$292.06
July 2022	44,459	\$29.79	\$119.97	\$125.93	\$3.57	\$11.01	\$290.27
August 2022	43,820	\$35.57	\$115.62	\$149.35	\$4.60	\$12.28	\$317.42
September 2022	44,035	\$32.11	\$101.58	\$130.81	\$4.90	\$11.32	\$280.72
October 2022	44,498	\$33.12	\$93.75	\$126.85	\$4.30	\$11.48	\$269.50
November 2022	43,681	\$33.64	\$99.68	\$129.96	\$4.53	\$11.73	\$279.54
December 2022	47,156	\$33.92	\$88.72	\$115.59	\$3.38	\$10.27	\$251.88
CY 2022²³	45,719	\$34.89	\$100.55	\$130.09	\$4.36	\$11.67	\$281.56
January 2023	47,530	\$43.41	\$95.14	\$133.03	\$5.42	\$10.76	\$287.76
February 2023	47,779	\$29.46	\$91.10	\$119.13	\$4.72	\$8.64	\$253.05
March 2023	48,146	\$31.28	\$103.26	\$134.54	\$5.70	\$10.45	\$285.23
April 2023	49,216	\$36.86	\$93.81	\$128.81	\$4.43	\$10.43	\$274.34
May 2023	49,600	\$41.74	\$100.95	\$133.34	\$4.59	\$11.26	\$291.88
June 2023	49,907	\$38.07	\$97.61	\$126.87	\$4.37	\$12.06	\$278.99
July 2023	48,698	\$36.97	\$96.33	\$120.47	\$3.10	\$11.42	\$268.28
August 2023	49,287	\$36.83	\$110.42	\$139.78	\$4.74	\$11.87	\$303.65
September 2023	50,895	\$41.10	\$96.07	\$116.32	\$4.42	\$10.28	\$268.19
Q1-Q3 2023³	49,006	\$37.30	\$98.30	\$128.03	\$4.61	\$10.80	\$279.04
Annual PMPM Trends							
CY 2017 to CY 2018		-6.4%	5.6%	1.2%	-14.4%	4.6%	1.3%
CY 2018 to CY 2019		-5.9%	-1.2%	2.3%	-14.4%	4.9%	-0.4%
CY 2019 to CY 2020		-4.0%	-16.1%	-6.1%	-14.4%	-6.7%	-9.7%
CY 2020 to CY 2021		10.2%	1.4%	-2.9%	-14.0%	-6.3%	0.0%
CY 2021 to CY 2022		-16.7%	5.0%	3.3%	-9.5%	2.5%	0.6%
CY 2022 to Q3 2023		7.9%	-2.5%	-1.8%	6.7%	-8.5%	-1.0%
CY 2021 to Q3 2023 (Annualized)		-6.0%	1.4%	0.9%	-2.2%	-2.8%	-0.1%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from September 2023 to be directly comparable by month.

² CY 2019 and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021, CY 2022, and Q1-Q3 2023 IBNR as reported by CCOs in financial templates.

⁴ CY 2019, CY 2020, and CY 2021 data is consistent with the data that supported trends in CY 2024 rates. We rely on this data due to known issues with the data vendor transition.

Exhibit 7D
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Children Population

PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	320,319	\$57.99	\$39.15	\$81.59	\$26.23	\$6.36	\$211.32
February 2019	319,327	\$55.38	\$40.52	\$82.46	\$22.94	\$5.57	\$206.88
March 2019	318,406	\$60.44	\$35.10	\$72.34	\$23.49	\$6.11	\$197.48
April 2019	318,338	\$61.66	\$36.84	\$76.05	\$24.55	\$6.52	\$205.62
May 2019	319,304	\$61.71	\$35.35	\$68.93	\$20.90	\$5.66	\$192.54
June 2019	319,726	\$59.86	\$36.00	\$59.04	\$22.22	\$5.26	\$182.37
July 2019	318,036	\$63.47	\$35.98	\$68.45	\$27.41	\$6.99	\$202.31
August 2019	315,611	\$61.31	\$33.76	\$77.71	\$26.04	\$7.37	\$206.19
September 2019	314,977	\$59.00	\$35.08	\$76.50	\$24.34	\$6.68	\$201.61
October 2019	315,760	\$66.65	\$38.38	\$83.45	\$27.93	\$6.57	\$222.97
November 2019	317,116	\$54.85	\$37.73	\$77.67	\$22.45	\$6.03	\$198.74
December 2019	319,306	\$64.96	\$38.44	\$75.34	\$19.92	\$6.29	\$204.95
CY 2019²	318,019	\$60.61	\$36.86	\$74.96	\$24.03	\$6.28	\$202.75
January 2020	319,102	\$57.17	\$37.26	\$84.59	\$24.96	\$6.81	\$210.81
February 2020	316,814	\$50.71	\$36.33	\$80.16	\$22.92	\$6.25	\$196.37
March 2020	315,499	\$52.94	\$26.92	\$62.95	\$14.54	\$5.55	\$162.90
April 2020	315,874	\$51.13	\$12.05	\$43.64	\$1.09	\$3.65	\$111.55
May 2020	319,025	\$53.28	\$19.92	\$50.25	\$12.06	\$4.41	\$139.91
June 2020	325,575	\$56.50	\$25.08	\$60.55	\$19.54	\$5.12	\$166.79
July 2020	331,246	\$58.33	\$25.39	\$62.74	\$21.01	\$5.41	\$172.88
August 2020	336,372	\$53.95	\$25.14	\$64.08	\$20.72	\$6.00	\$169.89
September 2020	339,721	\$52.42	\$26.78	\$65.49	\$20.85	\$5.63	\$171.17
October 2020	343,702	\$52.91	\$27.97	\$69.42	\$21.51	\$5.68	\$177.49
November 2020	348,308	\$48.79	\$25.95	\$62.98	\$18.81	\$5.31	\$161.84
December 2020	352,599	\$57.76	\$25.19	\$61.87	\$18.55	\$5.26	\$168.62
CY 2020²	330,320	\$53.83	\$26.16	\$64.06	\$18.05	\$5.42	\$167.52
January 2021	356,200	\$59.75	\$25.59	\$64.16	\$19.42	\$5.23	\$174.15
February 2021	358,593	\$52.85	\$21.98	\$57.28	\$16.84	\$4.78	\$153.74
March 2021	360,981	\$61.81	\$30.30	\$69.44	\$23.20	\$6.18	\$190.93
April 2021	361,341	\$57.93	\$31.42	\$72.35	\$20.56	\$5.91	\$188.16
May 2021	363,512	\$63.04	\$32.35	\$67.63	\$17.46	\$5.92	\$186.41
June 2021	365,424	\$66.20	\$35.53	\$67.98	\$19.88	\$6.29	\$195.88
July 2021	351,735	\$60.19	\$36.25	\$71.82	\$20.81	\$6.40	\$195.48
August 2021	333,945	\$61.91	\$35.97	\$92.21	\$20.09	\$6.16	\$216.33
September 2021	322,748	\$56.35	\$32.91	\$81.58	\$21.70	\$5.88	\$198.42
October 2021	313,567	\$57.07	\$33.77	\$77.52	\$21.24	\$6.33	\$195.93
November 2021	305,361	\$51.40	\$33.23	\$78.44	\$22.09	\$5.65	\$190.81
December 2021	299,450	\$51.68	\$34.01	\$73.94	\$19.30	\$5.50	\$184.43
CY 2021²	341,071	\$58.35	\$31.94	\$72.86	\$20.22	\$5.85	\$189.22
January 2022	291,934	\$60.43	\$33.42	\$88.72	\$19.18	\$5.60	\$207.35
February 2022	285,667	\$51.51	\$30.80	\$75.49	\$19.73	\$5.69	\$183.23
March 2022	279,693	\$55.59	\$34.04	\$79.95	\$22.44	\$6.39	\$198.42
April 2022	270,094	\$59.78	\$32.54	\$76.72	\$20.46	\$5.94	\$195.45
May 2022	265,403	\$63.75	\$33.94	\$76.02	\$19.60	\$6.30	\$199.61
June 2022	261,127	\$67.31	\$36.43	\$71.88	\$21.89	\$6.00	\$203.51
July 2022	260,572	\$64.80	\$41.49	\$72.04	\$20.94	\$6.22	\$205.50
August 2022	257,153	\$62.00	\$39.67	\$99.90	\$24.87	\$6.82	\$233.26
September 2022	258,170	\$57.42	\$38.52	\$91.37	\$23.47	\$6.24	\$217.02
October 2022	261,205	\$58.60	\$40.89	\$94.93	\$23.39	\$6.17	\$223.99
November 2022	265,350	\$56.14	\$41.48	\$97.88	\$21.92	\$5.30	\$222.72
December 2022	276,459	\$58.48	\$34.99	\$75.35	\$19.40	\$5.05	\$193.26
CY 2022³	269,402	\$59.65	\$36.52	\$83.36	\$21.44	\$5.98	\$206.94
January 2023	279,994	\$54.98	\$35.08	\$86.84	\$26.37	\$5.85	\$209.13
February 2023	282,868	\$52.74	\$33.33	\$81.52	\$24.24	\$5.13	\$196.95
March 2023	285,466	\$58.42	\$37.85	\$87.88	\$26.20	\$6.16	\$216.51
April 2023	288,571	\$59.55	\$36.20	\$84.02	\$22.96	\$5.62	\$208.35
May 2023	290,986	\$67.82	\$36.44	\$83.74	\$24.11	\$5.92	\$218.04
June 2023	293,602	\$56.03	\$37.50	\$71.25	\$24.62	\$5.78	\$195.18
July 2023	286,708	\$64.76	\$36.02	\$70.36	\$20.90	\$6.43	\$198.47
August 2023	286,398	\$64.00	\$41.70	\$100.43	\$22.35	\$6.59	\$235.06
September 2023	285,981	\$57.24	\$38.57	\$86.46	\$22.87	\$5.97	\$211.11
Q1-Q3 2023³	286,730	\$59.51	\$36.97	\$83.61	\$23.85	\$5.94	\$209.87
Annual PMPM Trends							
CY 2017 to CY 2018		8.9%	-1.0%	3.9%	-6.5%	3.4%	2.9%
CY 2018 to CY 2019		9.3%	4.9%	10.1%	0.0%	8.3%	7.5%
CY 2019 to CY 2020		-11.2%	-29.0%	-14.5%	-24.9%	-13.7%	-17.4%
CY 2020 to CY 2021		8.4%	22.1%	13.7%	12.0%	7.9%	13.0%
CY 2021 to CY 2022		2.2%	14.3%	14.4%	6.1%	2.1%	9.4%
CY 2022 to Q3 2023		-0.3%	1.4%	0.4%	12.9%	-0.7%	1.6%
CY 2021 to Q3 2023 (Annualized)		1.1%	8.1%	7.6%	9.2%	0.8%	5.7%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from September 2023 to be directly comparable by month.

² CY 2019 and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021, CY 2022, and Q1-Q3 2023 IBNR as reported by CCOs in financial templates.

⁴ CY 2019, CY 2020, and CY 2021 data is consistent with the data that supported trends in CY 2024 rates. We rely on this data due to known issues with the data vendor transition.

Exhibit 7E
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Deliveries
Per-Delivery Costs by Month¹

Month	Deliveries	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2019	1,695	\$3,986.61	\$6.36	\$1,127.91	\$0.05	\$19.20	\$5,140.14
February 2019	1,415	\$3,944.71	\$12.76	\$1,101.04	\$0.04	\$17.57	\$5,076.12
March 2019	1,508	\$3,983.59	\$8.37	\$1,088.77	\$0.00	\$19.28	\$5,100.02
April 2019	1,468	\$3,904.85	\$9.85	\$1,086.34	\$0.08	\$26.65	\$5,027.76
May 2019	1,493	\$4,103.76	\$14.23	\$1,123.88	\$0.00	\$21.75	\$5,263.62
June 2019	1,449	\$3,936.77	\$15.86	\$1,076.32	\$0.00	\$21.09	\$5,050.04
July 2019	1,797	\$3,864.92	\$12.67	\$1,074.26	\$0.00	\$15.48	\$4,967.34
August 2019	1,721	\$3,920.93	\$10.89	\$1,113.94	\$0.03	\$20.65	\$5,066.44
September 2019	1,717	\$3,975.27	\$12.86	\$1,123.17	\$0.17	\$17.94	\$5,129.40
October 2019	1,732	\$4,080.55	\$13.20	\$1,178.12	\$0.00	\$22.64	\$5,294.51
November 2019	1,522	\$3,936.21	\$13.54	\$1,162.09	\$0.00	\$25.46	\$5,137.30
December 2019	1,741	\$4,067.36	\$8.60	\$1,161.10	\$0.00	\$21.76	\$5,258.81
CY 2019²⁴	1,605	\$3,975.46	\$11.60	\$1,118.08	\$0.03	\$20.79	\$5,125.96
January 2020	1,684	\$4,005.61	\$15.08	\$1,148.37	\$0.07	\$16.84	\$5,185.97
February 2020	1,417	\$3,978.15	\$11.18	\$1,144.31	\$0.00	\$26.62	\$5,160.27
March 2020	1,479	\$3,996.25	\$11.88	\$1,122.11	\$0.00	\$20.04	\$5,150.28
April 2020	1,405	\$3,950.93	\$10.50	\$1,125.32	\$0.21	\$19.14	\$5,106.09
May 2020	1,449	\$4,018.44	\$16.20	\$1,162.58	\$0.00	\$19.58	\$5,216.80
June 2020	1,557	\$3,964.22	\$13.32	\$1,141.01	\$0.00	\$19.67	\$5,138.21
July 2020	1,668	\$3,983.33	\$13.39	\$1,168.78	\$0.00	\$14.82	\$5,180.31
August 2020	1,708	\$4,139.11	\$11.13	\$1,193.06	\$0.00	\$17.68	\$5,360.99
September 2020	1,698	\$3,954.77	\$6.72	\$1,125.55	\$0.07	\$15.07	\$5,102.18
October 2020	1,553	\$3,884.76	\$11.65	\$1,184.50	\$0.00	\$18.76	\$5,099.68
November 2020	1,535	\$3,846.04	\$12.77	\$1,120.32	\$0.00	\$22.37	\$5,001.49
December 2020	1,491	\$3,792.28	\$9.23	\$1,147.52	\$0.00	\$17.87	\$4,966.90
CY 2020²⁴	1,554	\$3,959.49	\$11.92	\$1,148.62	\$0.03	\$19.04	\$5,139.10
January 2021	1,407	\$4,269.88	\$12.37	\$1,149.08	\$0.00	\$17.68	\$5,449.00
February 2021	1,314	\$4,338.51	\$7.37	\$1,105.84	\$0.04	\$15.96	\$5,467.73
March 2021	1,459	\$4,219.80	\$9.95	\$1,093.70	\$0.00	\$19.23	\$5,342.69
April 2021	1,218	\$4,353.13	\$10.97	\$1,139.38	\$0.00	\$15.08	\$5,518.56
May 2021	1,331	\$4,216.00	\$10.05	\$1,101.03	\$0.00	\$19.13	\$5,346.21
June 2021	1,424	\$4,281.00	\$12.71	\$1,107.79	\$0.00	\$23.12	\$5,424.63
July 2021	1,356	\$4,403.17	\$9.99	\$1,115.62	\$0.00	\$13.70	\$5,542.48
August 2021	1,480	\$4,574.54	\$11.38	\$1,112.47	\$0.00	\$20.46	\$5,718.86
September 2021	1,398	\$4,436.80	\$7.97	\$1,147.27	\$0.00	\$13.67	\$5,605.71
October 2021	1,354	\$4,347.47	\$6.05	\$1,100.21	\$0.08	\$11.60	\$5,465.42
November 2021	1,193	\$4,330.23	\$11.26	\$1,102.57	\$0.04	\$17.15	\$5,461.26
December 2021	1,258	\$4,335.88	\$11.09	\$1,093.18	\$0.00	\$17.63	\$5,457.78
CY 2021²⁴	1,349	\$4,342.20	\$10.10	\$1,114.01	\$0.01	\$17.04	\$5,483.36
January 2022	1,224	\$4,170.24	\$11.88	\$1,110.57	\$0.00	\$15.46	\$5,308.14
February 2022	1,076	\$4,165.75	\$8.76	\$1,122.41	\$0.00	\$16.47	\$5,313.39
March 2022	1,165	\$4,056.51	\$7.35	\$1,134.45	\$0.00	\$15.91	\$5,214.22
April 2022	985	\$4,004.37	\$10.69	\$1,142.38	\$0.07	\$17.30	\$5,174.81
May 2022	1,037	\$4,085.38	\$16.03	\$1,112.22	\$0.00	\$14.54	\$5,228.18
June 2022	1,097	\$4,134.15	\$10.93	\$1,142.85	\$0.00	\$17.84	\$5,305.77
July 2022	1,154	\$4,219.66	\$15.71	\$1,141.16	\$0.00	\$19.22	\$5,395.75
August 2022	1,316	\$4,159.10	\$7.60	\$1,157.20	\$0.00	\$17.25	\$5,341.15
September 2022	1,127	\$4,033.51	\$4.55	\$1,132.74	\$0.00	\$15.39	\$5,186.20
October 2022	1,022	\$3,939.42	\$10.14	\$1,064.58	\$0.00	\$21.26	\$5,035.39
November 2022	1,069	\$4,014.81	\$9.07	\$1,078.98	\$0.00	\$16.60	\$5,119.46
December 2022	1,142	\$4,019.67	\$11.53	\$1,088.28	\$0.00	\$19.61	\$5,139.09
CY 2022³	1,118	\$4,083.55	\$10.35	\$1,118.99	\$0.01	\$17.24	\$5,230.13
January 2023	1,188	\$4,128.77	\$10.31	\$1,067.62	\$0.00	\$21.55	\$5,228.25
February 2023	936	\$4,123.92	\$7.56	\$1,124.17	\$0.00	\$14.35	\$5,270.00
March 2023	1,003	\$4,142.21	\$10.78	\$1,139.85	\$0.00	\$12.04	\$5,304.88
April 2023	870	\$4,256.60	\$10.99	\$1,161.69	\$0.00	\$19.83	\$5,449.10
May 2023	963	\$4,186.91	\$7.84	\$1,098.70	\$0.09	\$11.76	\$5,305.29
June 2023	984	\$4,328.17	\$14.02	\$1,114.63	\$0.00	\$15.42	\$5,472.23
July 2023	1,003	\$4,776.62	\$19.34	\$1,088.17	\$0.00	\$23.66	\$5,907.78
August 2023	1,083	\$4,928.49	\$12.33	\$1,143.34	\$0.00	\$20.30	\$6,104.47
September 2023	1,003	\$4,797.80	\$20.63	\$1,107.27	\$0.00	\$16.42	\$5,942.12
Q1-Q3 2023³	1,004	\$4,407.72	\$12.64	\$1,116.16	\$0.01	\$17.26	\$5,553.79
Annual PMPM Trends							
CY 2017 to CY 2018		1.7%	6.1%	-2.4%	145.9%	46.1%	1.0%
CY 2018 to CY 2019		0.4%	48.7%	-2.4%	12.8%	-35.8%	-0.3%
CY 2019 to CY 2020		-0.4%	2.8%	2.7%	-3.4%	-8.4%	0.3%
CY 2020 to CY 2021		9.7%	-15.3%	-3.0%	-52.4%	-10.5%	6.7%
CY 2021 to CY 2022		-6.0%	2.5%	0.4%	-57.1%	1.2%	-4.6%
CY 2022 to Q3 2023		9.1%	25.7%	-0.3%	70.6%	0.1%	7.1%
CY 2021 to Q3 2023 (Annualized)		0.8%	12.7%	0.1%	-18.3%	0.7%	0.7%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, pharmacy rate freeze, dental reimbursement, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from September 2023 to be directly comparable by month.

² CY 2019 and CY 2020 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2021, CY 2022, and Q1-Q3 2023 IBNR as reported by CCOs in financial templates.

⁴ CY 2019, CY 2020, and CY 2021 data is consistent with the data that supported trends in CY 2024 rates. We rely on this data due to known issues with the data vendor transition.

Exhibit 8 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Enhanced Match Services								
	Medical Portion of Capitation Rate	COVID-19 Vaccine Administration	Family Planning (Non-waiver)	Breast and Cervical Cancer	Indian Health Services	Home Health Services	Rehab Services	Private Duty Nursing
Non-Newborn SSI / Disabled	\$758.06	\$0.11	\$0.22	\$0.14	\$0.33	\$1.69	\$23.41	\$5.59
North Region	665.73	0.10	0.19	0.12	0.29	1.48	20.56	4.91
Central Region	789.01	0.12	0.23	0.15	0.34	1.76	24.37	5.82
South Region	830.64	0.12	0.24	0.15	0.36	1.85	25.65	6.12
Breast and Cervical Cancer	\$2,797.57	\$0.08	\$0.00	\$2,619.25	\$0.00	\$0.00	\$0.00	\$0.00
North Region	2,456.85	0.07	0.00	2,300.24	0.00	0.00	0.00	0.00
Central Region	2,911.79	0.09	0.00	2,726.18	0.00	0.00	0.00	0.00
South Region	3,065.44	0.09	0.00	2,870.04	0.00	0.00	0.00	0.00
MA Adult	\$315.11	\$0.04	\$1.24	\$0.00	\$0.06	\$0.26	\$0.87	\$0.00
North Region	313.47	0.04	1.24	0.00	0.06	0.26	0.87	0.00
Central Region	323.45	0.04	1.28	0.00	0.06	0.27	0.89	0.00
South Region	308.98	0.03	1.22	0.00	0.06	0.26	0.85	0.00
Pregnant Women	\$547.76	\$0.01	\$5.36	\$0.00	\$0.01	\$0.09	\$0.30	\$0.00
North Region	544.90	0.01	5.33	0.00	0.01	0.08	0.30	0.00
Central Region	562.24	0.02	5.50	0.00	0.01	0.09	0.31	0.00
South Region	537.10	0.01	5.25	0.00	0.01	0.08	0.30	0.00
SSI / Disabled Newborn	\$5,939.74	\$0.02	\$0.00	\$0.00	\$1.09	\$1.43	\$0.10	\$34.58
North Region	6,056.18	0.02	0.00	0.00	1.11	1.45	0.11	35.26
Central Region	6,400.74	0.02	0.00	0.00	1.17	1.54	0.11	37.26
South Region	5,399.32	0.01	0.00	0.00	0.99	1.30	0.09	31.43
Non-SSI Newborns 0 to 2 Months	\$2,066.18	\$0.00	\$0.00	\$0.00	\$0.30	\$0.09	\$0.00	\$0.03
North Region	2,106.69	0.00	0.00	0.00	0.30	0.09	0.00	0.03
Central Region	2,226.55	0.00	0.00	0.00	0.32	0.10	0.00	0.03
South Region	1,878.19	0.00	0.00	0.00	0.27	0.08	0.00	0.03
Non-SSI Newborns 3 to 12 Months	\$264.32	\$0.03	\$0.00	\$0.00	\$0.42	\$0.04	\$0.00	\$0.98
North Region	269.51	0.03	0.00	0.00	0.43	0.04	0.00	1.00
Central Region	284.84	0.03	0.00	0.00	0.45	0.04	0.00	1.06
South Region	240.28	0.02	0.00	0.00	0.38	0.03	0.00	0.89
Foster Care	\$545.39	\$0.18	\$0.32	\$0.00	\$0.00	\$0.00	\$16.91	\$4.42
North Region	556.08	0.19	0.32	0.00	0.00	0.00	17.24	4.51
Central Region	587.72	0.20	0.34	0.00	0.00	0.00	18.22	4.76
South Region	495.77	0.17	0.29	0.00	0.00	0.00	15.37	4.02
MYPAC	\$3,000.34	\$0.35	\$0.22	\$0.00	\$0.00	\$0.00	\$19.15	\$0.00
North Region	3,059.16	0.36	0.22	0.00	0.00	0.00	19.52	0.00
Central Region	3,233.21	0.38	0.23	0.00	0.00	0.00	20.63	0.00
South Region	2,727.36	0.32	0.20	0.00	0.00	0.00	17.40	0.00
MA Children	\$173.51	\$0.14	\$0.22	\$0.00	\$0.19	\$0.01	\$4.67	\$0.18
North Region	176.91	0.14	0.22	0.00	0.19	0.01	4.76	0.19
Central Region	186.98	0.15	0.23	0.00	0.20	0.01	5.03	0.20
South Region	157.72	0.13	0.20	0.00	0.17	0.00	4.24	0.17
Quasi-CHIP	\$170.10	\$0.17	\$0.25	\$0.00	\$0.18	\$0.02	\$3.46	\$0.00
North Region	173.44	0.17	0.26	0.00	0.19	0.02	3.53	0.00
Central Region	183.31	0.18	0.27	0.00	0.20	0.02	3.73	0.00
South Region	154.63	0.15	0.23	0.00	0.17	0.01	3.15	0.00

¹ COVID-19 vaccination costs are only eligible for enhanced funding through September 30, 2024

Exhibit 9A Mississippi Division of Medicaid Summary of CY 2022 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell												
Member Months	720,708	961	451,802	96,821	5,039	67,578	232,493	82,463	10,612	2,558,562	283,644	4,510,683
Total Allowed Cost												
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services												
Medical	\$38,735,708	\$62,223	\$4,649,927	\$233,254	\$1,442,451	\$1,954,611	\$3,358,857	\$240,532	\$8,785	\$5,816,102	\$679,211	\$57,181,662
Surgical	\$53,211,914	\$82,808	\$8,672,717	\$405,010	\$2,446,466	\$5,578,063	\$5,092,920	\$408,952	\$12,809	\$10,121,659	\$1,040,059	\$87,073,377
Maternity / Deliveries	\$1,746,132	\$0	\$12,769,641	\$45,126,085	\$14,004,077	\$87,571,946	\$860,044	\$108,566	\$10,786	\$2,969,914	\$308,447	\$165,475,638
Psychiatric / Substance Abuse	\$23,624,663	\$0	\$2,434,397	\$143,665	\$67,231	\$0	\$0	\$20,826,834	\$3,303,457	\$26,477,977	\$3,685,595	\$80,563,818
Skilled Nursing Facility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Missing Data	\$252,596	\$353	\$67,078	\$115,971	\$47,509	\$216,604	\$21,777	\$1,162	\$410	\$52,478	\$4,711	\$780,647
Inpatient Facility Total	\$117,571,012	\$145,385	\$28,593,761	\$46,023,984	\$18,007,733	\$95,321,223	\$9,333,597	\$21,586,046	\$3,336,247	\$45,438,130	\$5,718,024	\$391,075,143
Outpatient Facility Services												
Emergency Room	\$22,938,424	\$20,144	\$11,328,871	\$2,982,081	\$286,736	\$1,541,127	\$5,841,876	\$663,372	\$144,890	\$24,504,299	\$1,976,198	\$72,228,018
Urgent Care	\$44	\$0	\$543	\$0	\$0	\$88	\$562	\$189	\$0	\$1,296	\$65	\$2,786
Radiology / Pathology	\$23,615,045	\$223,916	\$9,625,199	\$2,785,716	\$174,616	\$799,212	\$3,326,865	\$643,528	\$119,328	\$17,266,523	\$1,685,595	\$60,265,544
Psychiatric / Alcohol & Drug Abuse	\$4,350,667	\$209	\$224,089	\$30,507	\$0	\$0	\$0	\$942,077	\$65,185	\$7,562,627	\$535,774	\$13,711,135
Pharmacy	\$36,344,710	\$806,433	\$5,810,283	\$1,047,266	\$236,674	\$151,806	\$378,487	\$192,649	\$21,651	\$4,333,988	\$560,878	\$49,884,825
Other	\$56,804,590	\$310,509	\$17,456,655	\$3,317,494	\$729,658	\$1,150,012	\$4,021,648	\$1,420,036	\$115,922	\$33,052,656	\$3,067,448	\$121,446,626
Missing Data	\$379,856	\$3,541	\$125,915	\$25,989	\$2,970	\$10,500	\$42,526	\$4,673	\$3,114	\$224,571	\$23,032	\$846,686
Outpatient Facility Total	\$144,433,335	\$1,364,751	\$44,571,555	\$10,189,054	\$1,430,653	\$3,652,744	\$13,611,964	\$3,866,523	\$470,090	\$86,945,960	\$7,848,990	\$318,385,620
Physician Services												
IP Visits	\$9,169,942	\$14,414	\$1,305,271	\$403,870	\$4,992,242	\$12,206,068	\$2,439,382	\$70,947	\$5,378	\$1,427,872	\$142,447	\$32,177,833
IP Surgery	\$3,468,244	\$6,880	\$906,437	\$113,966	\$377,063	\$494,779	\$396,615	\$53,745	\$1,436	\$1,101,643	\$141,914	\$7,062,723
Office / Home Visits	\$34,058,451	\$92,840	\$16,511,448	\$1,158,995	\$383,580	\$2,903,566	\$9,495,209	\$2,566,180	\$294,012	\$61,905,026	\$6,563,730	\$135,933,038
Preventive Exams & Immunizations	\$4,477,324	\$13,065	\$5,763,657	\$9,763,077	\$179,566	\$7,781,313	\$9,233,768	\$723,590	\$65,573	\$18,203,815	\$1,372,423	\$57,577,171
Urgent Care Visits	\$448,428	\$1,093	\$643,782	\$59,655	\$1,122	\$2,549	\$164,050	\$112,965	\$10,207	\$2,916,835	\$338,192	\$4,698,879
ER Visits and Observation Care	\$7,452,354	\$6,664	\$3,748,456	\$1,052,021	\$94,057	\$536,868	\$1,869,894	\$226,182	\$49,173	\$8,210,261	\$655,818	\$23,901,747
OP Surgery	\$11,029,489	\$72,924	\$5,242,191	\$254,930	\$95,178	\$186,899	\$931,115	\$433,939	\$22,027	\$9,874,874	\$948,265	\$29,091,832
Physical Therapy	\$9,015,261	\$6,480	\$1,148,343	\$41,231	\$209,533	\$8,089	\$414,453	\$930,221	\$26,219	\$9,126,457	\$782,777	\$21,709,065
Psychiatric / Substance Abuse	\$32,332,756	\$6,341	\$3,857,983	\$280,741	\$3,724	\$9,720	\$6,433	\$5,734,540	\$7,579,631	\$30,365,208	\$3,628,429	\$83,805,506
Radiology / Pathology	\$12,007,665	\$105,152	\$8,416,017	\$5,438,635	\$159,987	\$630,413	\$2,948,181	\$638,436	\$77,326	\$19,090,547	\$2,000,422	\$51,512,778
Vision, Hearing, and Speech Exams	\$2,324,686	\$5,189	\$1,204,056	\$195,040	\$23,294	\$17,107	\$61,933	\$263,677	\$27,617	\$5,712,834	\$819,530	\$10,654,963
Maternity - Anesthesia	\$103,847	\$0	\$820,843	\$3,358,345	\$0	\$0	\$0	\$3,861	\$1,548	\$240,217	\$21,807	\$4,550,468
Maternity - Non-Anesthesia - Non-Deliveries	\$8,269	\$0	\$47,357	\$25,042	\$0	\$0	\$0	\$622	\$0	\$7,528	\$926	\$89,744
Maternity - Non-Anesthesia - Ancillary	\$11,082	\$0	\$78,927	\$303,051	\$0	\$0	\$0	\$514	\$0	\$18,765	\$2,066	\$414,405
Maternity - Non-Anesthesia - Cesarean Deliv	\$127,502	\$0	\$973,080	\$3,285,998	\$0	\$0	\$0	\$1,548	\$0	\$130,480	\$18,114	\$4,536,722
Maternity - Non-Anesthesia - Normal Deliver	\$131,128	\$0	\$1,098,825	\$4,359,584	\$0	\$0	\$0	\$4,452	\$2,554	\$378,698	\$38,870	\$6,014,110
Other	\$30,261,350	\$518,005	\$3,147,688	\$251,950	\$466,379	\$4,729,734	\$2,813,178	\$1,640,566	\$6,621,955	\$6,677,431	\$1,207,183	\$58,335,418
Missing Data	\$263,863	\$2,417	\$119,070	\$70,507	\$12,424	\$70,330	\$67,036	\$7,275	\$2,691	\$329,842	\$36,828	\$982,283
Physician Total	\$156,691,642	\$851,465	\$55,033,431	\$30,416,639	\$6,998,148	\$29,577,434	\$30,841,247	\$13,413,261	\$14,787,346	\$175,718,332	\$18,719,740	\$533,048,684
Pharmacy Services												
Pharmacy	\$247,823,514	\$603,003	\$58,388,609	\$3,495,061	\$2,051,512	\$677,523	\$5,028,548	\$7,005,678	\$1,627,508	\$85,836,392	\$12,716,117	\$425,253,464
Missing Data	\$691,215	\$1,008	\$163,842	\$11,948	\$4,273	\$2,508	\$14,000	\$14,553	\$6,798	\$271,249	\$39,362	\$1,220,756
Pharmacy Total	\$248,514,728	\$604,011	\$58,552,451	\$3,507,009	\$2,055,785	\$680,030	\$5,042,548	\$7,020,232	\$1,634,306	\$86,107,641	\$12,755,479	\$426,474,220
Dental Services												
Dental	\$6,641,841	\$8,370	\$2,212,633	\$330,787	\$4,653	\$55,359	\$290,546	\$2,305,374	\$247,887	\$63,889,014	\$8,897,406	\$84,883,870
Missing Data	\$17,864	\$23	\$5,869	\$848	\$11	\$43	\$202	\$3,135	\$1,242	\$177,155	\$26,350	\$232,741
Dental Total	\$6,659,705	\$8,393	\$2,218,502	\$331,634	\$4,665	\$55,402	\$290,748	\$2,308,509	\$249,129	\$64,066,168	\$8,923,756	\$85,116,612
Other Services												
Ambulance	\$9,386,077	\$5,192	\$2,091,755	\$531,311	\$143,223	\$814,867	\$680,592	\$169,949	\$78,084	\$3,103,052	\$319,278	\$17,323,381
Non-Emergency Transportation	\$4,492,408	\$18,722	\$511,708	\$116,798	\$54,136	\$24,542	\$70,129	\$29,444	\$14,595	\$555,352	\$25,705	\$5,913,538
DME	\$19,577,731	\$10,000	\$2,155,127	\$309,006	\$511,405	\$105,707	\$750,570	\$522,027	\$27,490	\$4,727,475	\$741,607	\$29,438,144
Glasses / Contacts	\$966,105	\$2,089	\$570,231	\$107,026	\$146	\$58	\$2,299	\$129,092	\$18,741	\$3,033,684	\$486,566	\$5,316,036
Other	\$8,061,239	\$2,701	\$158,939	\$7,925	\$301,790	\$12,698	\$246,264	\$401,077	\$10,037	\$1,059,083	\$105,917	\$10,367,671
Missing Data	-\$140,796	-\$183	\$726,654	\$144,417	\$168	\$100,420	\$316,359	-\$23,984	\$11,553	\$4,546,816	\$489,138	\$6,170,561
Other Total	\$42,342,764	\$38,521	\$6,214,415	\$1,216,484	\$1,010,868	\$1,058,292	\$2,066,212	\$1,227,605	\$160,500	\$17,025,461	\$2,168,210	\$74,529,331
Grand Total w/ PBA pharmacy services	\$716,213,187	\$3,012,525	\$195,184,115	\$91,684,803	\$29,507,853	\$130,345,125	\$61,186,316	\$49,422,175	\$20,637,618	\$475,301,692	\$56,134,199	\$1,828,629,609
Grand Total w/o PBA pharmacy services	\$467,698,458	\$2,408,514	\$136,631,664	\$88,177,794	\$27,452,068	\$129,665,095	\$56,143,768	\$42,401,944	\$19,003,312	\$389,194,051	\$43,378,720	\$1,402,155,389

*Pharmacy services will be excluded from capitation rates for SFY 2025 and are included for display only.

Exhibit 9B
Mississippi Division of Medicaid
Summary of CY 2022 MississippiCAN Encounter Claims
Summary of Allowed PMPM by Rate Cell

Member Months	720,708	961	451,802	96,821	5,039	67,578	232,493	82,463	10,612	2,558,562	283,644	4,510,683
PMPM Allowed Cost												
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services												
Medical	\$53.75	\$64.75	\$10.29	\$2.41	\$286.26	\$28.92	\$14.45	\$2.92	\$0.83	\$2.27	\$2.39	\$12.68
Surgical	\$73.83	\$86.17	\$19.20	\$4.18	\$485.51	\$82.54	\$21.91	\$4.96	\$1.21	\$3.96	\$3.67	\$19.30
Maternity / Deliveries	\$2.42	\$0.00	\$28.26	\$466.08	\$2,779.14	\$1,295.86	\$3.70	\$1.32	\$1.02	\$1.16	\$1.09	\$36.69
Psychiatric / Substance Abuse	\$32.78	\$0.00	\$5.39	\$1.48	\$13.34	\$0.00	\$0.00	\$252.56	\$311.29	\$10.35	\$12.99	\$17.86
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.35	\$0.37	\$0.15	\$1.20	\$9.43	\$3.21	\$0.09	\$0.01	\$0.04	\$0.02	\$0.02	\$0.17
Inpatient Facility Total	\$163.13	\$151.28	\$63.29	\$475.35	\$3,573.67	\$1,410.54	\$40.15	\$261.77	\$314.38	\$17.76	\$20.16	\$86.70
Outpatient Facility Services												
Emergency Room	\$31.83	\$20.96	\$25.07	\$30.80	\$56.90	\$22.81	\$25.13	\$8.04	\$13.65	\$9.58	\$6.97	\$16.01
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$32.77	\$233.00	\$21.30	\$28.77	\$34.65	\$11.83	\$14.31	\$7.80	\$11.24	\$6.75	\$5.94	\$13.36
Psychiatric / Alcohol & Drug Abuse	\$6.04	\$0.22	\$0.50	\$0.32	\$0.00	\$0.00	\$0.00	\$11.42	\$6.14	\$2.96	\$1.89	\$3.04
Pharmacy	\$50.43	\$839.16	\$12.86	\$10.82	\$46.97	\$2.25	\$1.63	\$2.34	\$2.04	\$1.69	\$1.98	\$11.06
Other	\$78.82	\$323.11	\$38.64	\$34.26	\$144.80	\$17.02	\$17.30	\$17.22	\$10.92	\$12.92	\$10.81	\$26.92
Missing Data	\$0.53	\$3.68	\$0.28	\$0.27	\$0.59	\$0.16	\$0.18	\$0.06	\$0.29	\$0.09	\$0.08	\$0.19
Outpatient Facility Total	\$200.40	\$1,420.14	\$98.65	\$105.24	\$283.92	\$54.05	\$58.55	\$46.89	\$44.30	\$33.98	\$27.67	\$70.58
Physician Services												
IP Visits	\$12.72	\$15.00	\$2.89	\$4.17	\$990.72	\$180.62	\$10.49	\$0.86	\$0.51	\$0.56	\$0.50	\$7.13
IP Surgery	\$4.81	\$7.16	\$2.01	\$1.18	\$74.83	\$7.32	\$1.71	\$0.65	\$0.14	\$0.43	\$0.50	\$1.57
Office / Home Visits	\$47.26	\$96.61	\$36.55	\$11.97	\$76.12	\$42.97	\$40.84	\$31.12	\$27.71	\$24.20	\$23.14	\$30.14
Preventive Exams & Immunizations	\$6.21	\$13.60	\$12.76	\$100.84	\$35.64	\$115.15	\$39.72	\$8.77	\$6.18	\$7.11	\$4.84	\$12.76
Urgent Care Visits	\$0.62	\$1.14	\$1.42	\$0.62	\$0.22	\$0.04	\$0.71	\$1.37	\$0.96	\$1.14	\$1.19	\$1.04
ER Visits and Observation Care	\$10.34	\$6.93	\$8.30	\$10.87	\$18.67	\$7.94	\$8.04	\$2.74	\$4.63	\$3.21	\$2.31	\$5.30
OP Surgery	\$15.30	\$75.88	\$11.60	\$2.63	\$18.89	\$2.77	\$4.00	\$5.26	\$2.08	\$3.86	\$3.34	\$6.45
Physical Therapy	\$12.51	\$6.74	\$2.54	\$0.43	\$41.58	\$0.12	\$1.78	\$11.28	\$2.47	\$3.57	\$2.76	\$4.81
Psychiatric / Substance Abuse	\$44.86	\$6.60	\$8.54	\$2.90	\$0.74	\$0.14	\$0.03	\$69.54	\$714.25	\$11.87	\$12.79	\$18.58
Radiology / Pathology	\$16.66	\$109.42	\$18.63	\$56.17	\$31.75	\$9.33	\$12.68	\$7.74	\$7.29	\$7.46	\$7.05	\$11.42
Vision, Hearing, and Speech Exams	\$3.23	\$5.40	\$2.67	\$2.01	\$4.62	\$0.25	\$0.27	\$3.20	\$2.60	\$2.23	\$2.89	\$2.36
Maternity - Anesthesia	\$0.14	\$0.00	\$1.82	\$34.69	\$0.00	\$0.00	\$0.00	\$0.05	\$0.15	\$0.09	\$0.08	\$1.01
Maternity - Non-Anesthesia - Non-Deliveries	\$0.01	\$0.00	\$0.10	\$0.26	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.02
Maternity - Non-Anesthesia - Ancillary	\$0.02	\$0.00	\$0.17	\$3.13	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.01	\$0.01	\$0.09
Maternity - Non-Anesthesia - Cesarean Deliv	\$0.18	\$0.00	\$2.15	\$33.94	\$0.00	\$0.00	\$0.00	\$0.02	\$0.00	\$0.05	\$0.06	\$1.01
Maternity - Non-Anesthesia - Normal Deliver	\$0.18	\$0.00	\$2.43	\$45.03	\$0.00	\$0.00	\$0.00	\$0.05	\$0.24	\$0.15	\$0.14	\$1.33
Other	\$41.99	\$539.03	\$6.97	\$2.60	\$92.55	\$69.99	\$12.10	\$19.89	\$624.01	\$2.61	\$4.26	\$12.93
Missing Data	\$0.37	\$2.51	\$0.26	\$0.73	\$2.47	\$1.04	\$0.29	\$0.09	\$0.25	\$0.13	\$0.13	\$0.22
Physician Total	\$217.41	\$886.02	\$121.81	\$314.15	\$1,388.80	\$437.68	\$132.65	\$162.66	\$1,393.46	\$68.68	\$66.00	\$118.17
Pharmacy Services												
Pharmacy	\$343.86	\$627.47	\$129.23	\$36.10	\$407.13	\$10.03	\$21.63	\$84.96	\$153.36	\$33.55	\$44.83	\$94.28
Missing Data	\$0.96	\$1.05	\$0.36	\$0.12	\$0.85	\$0.04	\$0.06	\$0.18	\$0.64	\$0.11	\$0.14	\$0.27
Pharmacy Total	\$344.82	\$628.52	\$129.60	\$36.22	\$407.97	\$10.06	\$21.69	\$85.13	\$154.01	\$33.65	\$44.97	\$94.55
Dental Services												
Dental	\$9.22	\$8.71	\$4.90	\$3.42	\$0.92	\$0.82	\$1.25	\$27.96	\$23.36	\$24.97	\$31.37	\$18.82
Missing Data	\$0.02	\$0.02	\$0.01	\$0.01	\$0.00	\$0.00	\$0.00	\$0.04	\$0.12	\$0.07	\$0.09	\$0.05
Dental Total	\$9.24	\$8.73	\$4.91	\$3.43	\$0.93	\$0.82	\$1.25	\$27.99	\$23.48	\$25.04	\$31.46	\$18.87
Other Services												
Ambulance	\$13.02	\$5.40	\$4.63	\$5.49	\$28.42	\$12.06	\$2.93	\$2.06	\$7.36	\$1.21	\$1.13	\$3.84
Non-Emergency Transportation	\$6.23	\$19.48	\$1.13	\$1.21	\$10.74	\$0.36	\$0.30	\$0.36	\$1.38	\$0.22	\$0.09	\$1.31
DME	\$27.16	\$10.41	\$4.77	\$3.19	\$101.49	\$1.56	\$3.23	\$6.33	\$2.59	\$1.85	\$2.61	\$6.53
Glasses / Contacts	\$1.34	\$2.17	\$1.26	\$1.11	\$0.03	\$0.00	\$0.01	\$1.57	\$1.77	\$1.19	\$1.72	\$1.18
Other	\$11.19	\$2.81	\$0.35	\$0.08	\$59.89	\$0.19	\$1.06	\$4.86	\$0.95	\$0.41	\$0.37	\$2.30
Missing Data	-\$0.20	-\$0.19	\$1.61	\$1.49	\$0.03	\$1.49	\$1.36	-\$0.29	\$1.09	\$1.78	\$1.72	\$1.37
Other Total	\$58.75	\$40.08	\$13.75	\$12.56	\$200.61	\$15.66	\$8.89	\$14.89	\$15.12	\$6.65	\$7.64	\$16.52
Grand Total w/ PBA pharmacy services	\$993.76	\$3,134.78	\$432.01	\$946.95	\$5,855.89	\$1,928.81	\$263.17	\$599.33	\$1,944.74	\$185.77	\$197.90	\$405.40
Grand Total w/o PBA pharmacy services	\$648.94	\$2,506.26	\$302.41	\$910.73	\$5,447.92	\$1,918.75	\$241.49	\$514.19	\$1,790.74	\$152.11	\$152.93	\$310.85

*Pharmacy services will be excluded from capitation rates for SFY 2025 and are included for display only.

Exhibit 9C Mississippi Division of Medicaid Summary of CY 2022 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell												
Member Months	720,708	961	451,802	96,821	5,039	67,578	232,493	82,463	10,612	2,558,562	283,644	4,510,683
% of Total Allowed Cost												
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services												
Medical	5.4%	2.1%	2.4%	0.3%	4.9%	1.5%	5.5%	0.5%	0.0%	1.2%	1.2%	3.1%
Surgical	7.4%	2.7%	4.4%	0.4%	8.3%	4.3%	8.3%	0.8%	0.1%	2.1%	1.9%	4.8%
Maternity / Deliveries	0.2%	0.0%	6.5%	49.2%	47.5%	67.2%	1.4%	0.2%	0.1%	0.6%	0.5%	9.0%
Psychiatric / Substance Abuse	3.3%	0.0%	1.2%	0.2%	0.2%	0.0%	0.0%	42.1%	16.0%	5.6%	6.6%	4.4%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.1%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Inpatient Facility Total	16.4%	4.8%	14.6%	50.2%	61.0%	73.1%	15.3%	43.7%	16.2%	9.6%	10.2%	21.4%
Outpatient Facility Services												
Emergency Room	3.2%	0.7%	5.8%	3.3%	1.0%	1.2%	9.5%	1.3%	0.7%	5.2%	3.5%	3.9%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.3%	7.4%	4.9%	3.0%	0.6%	0.6%	5.4%	1.3%	0.6%	3.6%	3.0%	3.3%
Psychiatric / Alcohol & Drug Abuse	0.6%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	1.9%	0.3%	1.6%	1.0%	0.7%
Pharmacy	5.1%	26.8%	3.0%	1.1%	0.8%	0.1%	0.6%	0.4%	0.1%	0.9%	1.0%	2.7%
Other	7.9%	10.3%	8.9%	3.6%	2.5%	0.9%	6.6%	2.9%	0.6%	7.0%	5.5%	6.6%
Missing Data	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Outpatient Facility Total	20.2%	45.3%	22.8%	11.1%	4.8%	2.8%	22.2%	7.8%	2.3%	18.3%	14.0%	17.4%
Physician Services												
IP Visits	1.3%	0.5%	0.7%	0.4%	16.9%	9.4%	4.0%	0.1%	0.0%	0.3%	0.3%	1.8%
IP Surgery	0.5%	0.2%	0.5%	0.1%	1.3%	0.4%	0.6%	0.1%	0.0%	0.2%	0.3%	0.4%
Office / Home Visits	4.8%	3.1%	8.5%	1.3%	1.3%	2.2%	15.5%	5.2%	1.4%	13.0%	11.7%	7.4%
Preventive Exams & Immunizations	0.6%	0.4%	3.0%	10.6%	0.6%	6.0%	15.1%	1.5%	0.3%	3.8%	2.4%	3.1%
Urgent Care Visits	0.1%	0.0%	0.3%	0.1%	0.0%	0.0%	0.3%	0.2%	0.0%	0.6%	0.6%	0.3%
ER Visits and Observation Care	1.0%	0.2%	1.9%	1.1%	0.3%	0.4%	3.1%	0.5%	0.2%	1.7%	1.2%	1.3%
OP Surgery	1.5%	2.4%	2.7%	0.3%	0.3%	0.1%	1.5%	0.9%	0.1%	2.1%	1.7%	1.6%
Physical Therapy	1.3%	0.2%	0.6%	0.0%	0.7%	0.0%	0.7%	1.9%	0.1%	1.9%	1.4%	1.2%
Psychiatric / Substance Abuse	4.5%	0.2%	2.0%	0.3%	0.0%	0.0%	0.0%	11.6%	36.7%	6.4%	6.5%	4.6%
Radiology / Pathology	1.7%	3.5%	4.3%	5.9%	0.5%	0.5%	4.8%	1.3%	0.4%	4.0%	3.6%	2.8%
Vision, Hearing, and Speech Exams	0.3%	0.2%	0.6%	0.2%	0.1%	0.0%	0.1%	0.5%	0.1%	1.2%	1.5%	0.6%
Maternity - Anesthesia	0.0%	0.0%	0.4%	3.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.2%
Maternity - Non-Anesthesia - Non-Deliveries	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Maternity - Non-Anesthesia - Ancillary	0.0%	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Maternity - Non-Anesthesia - Cesarean Deliv	0.0%	0.0%	0.5%	3.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%
Maternity - Non-Anesthesia - Normal Deliver	0.0%	0.0%	0.6%	4.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.3%
Other	4.2%	17.2%	1.6%	0.3%	1.6%	3.6%	4.6%	3.3%	32.1%	1.4%	2.2%	3.2%
Missing Data	0.0%	0.1%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%
Physician Total	21.9%	28.3%	28.2%	33.2%	23.7%	22.7%	50.4%	27.1%	71.7%	37.0%	33.3%	29.2%
Pharmacy Services												
Pharmacy	34.6%	20.0%	29.9%	3.8%	7.0%	0.5%	8.2%	14.2%	7.9%	18.1%	22.7%	23.3%
Missing Data	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
Pharmacy Total	34.7%	20.0%	30.0%	3.8%	7.0%	0.5%	8.2%	14.2%	7.9%	18.1%	22.7%	23.3%
Dental Services												
Dental	0.9%	0.3%	1.1%	0.4%	0.0%	0.0%	0.5%	4.7%	1.2%	13.4%	15.9%	4.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dental Total	0.9%	0.3%	1.1%	0.4%	0.0%	0.0%	0.5%	4.7%	1.2%	13.5%	15.9%	4.7%
Other Services												
Ambulance	1.3%	0.2%	1.1%	0.6%	0.5%	0.6%	1.1%	0.3%	0.4%	0.7%	0.6%	0.9%
Non-Emergency Transportation	0.6%	0.6%	0.3%	0.1%	0.2%	0.0%	0.1%	0.1%	0.1%	0.1%	0.0%	0.3%
DME	2.7%	0.3%	1.1%	0.3%	1.7%	0.1%	1.2%	1.1%	0.1%	1.0%	1.3%	1.6%
Glasses / Contacts	0.1%	0.1%	0.3%	0.1%	0.0%	0.0%	0.0%	0.3%	0.1%	0.6%	0.9%	0.3%
Other	1.1%	0.1%	0.1%	0.0%	1.0%	0.0%	0.4%	0.8%	0.0%	0.2%	0.2%	0.6%
Missing Data	0.0%	0.0%	0.4%	0.2%	0.0%	0.1%	0.5%	0.0%	0.1%	1.0%	0.9%	0.3%
Other Total	5.9%	1.3%	3.2%	1.3%	3.4%	0.8%	3.4%	2.5%	0.8%	3.6%	3.9%	4.1%
Grand Total w/ PBA pharmacy services	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Grand Total w/o PBA pharmacy services	65.3%	80.0%	70.0%	96.2%	93.0%	99.5%	91.8%	85.8%	92.1%	81.9%	77.3%	76.7%

*Pharmacy services will be excluded from capitation rates for SFY 2025 and are included for display only.

Exhibit 10
Mississippi Division of Medicaid
Summary of Program, Population, and Reimbursement Changes

Change	Change Type	Effective Date	Impacted Rate Cells	Where Reflected in Rate Development
Hemophilia Population Carve-In	Population	January 1, 2024	All	Exhibit 2
Seasonal Virus Adjustment	Program	N/A	All	Exhibit 2
SFY 2025 Population Acuity Adjustment	Program	N/A	MA Adult, MA Children, Quasi-CHIP	Exhibit 2
SSI Children - COE Change	Program	October 1, 2018 to May 31, 2022	SSI	Exhibit 1
Gene Therapy Drug Coverage	Program	July 1, 2023	All	Exhibit 2
Preventative and Diagnostic Dental Reimbursement Change	Reimbursement	July 1, 2021, July 1, 2022 and July 1, 2023	All	Exhibit 2
Restorative Dental Reimbursement Change	Reimbursement	July 1, 2022, July 1, 2023 and July 1, 2024	All	Exhibit 2
Home Health Agency (HHA) Fee Schedule Update	Reimbursement	October 1, 2022 and October 1, 2024	All	Exhibit 2
Prescribed Pediatric Extended Care (PPEC) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2
Private Duty Nursing Services (PDN) Fee Schedule Update	Reimbursement	October 1, 2022 and July 1, 2023	All	Exhibit 2
Ambulatory Surgical Center (ASC) Fee Schedule Update	Reimbursement	October 1, 2023 and January 1, 2024	All	Exhibit 2
Behavioral Health Services (BHS) Fee Schedule Update	Reimbursement	July 1, 2023 and November 1, 2023	All	Exhibit 2
Autism Spectrum Disorder (ASD) Fee Schedule Update	Reimbursement	January 1, 2023	All	Exhibit 2
Orthodontia Services Fee Schedule Update	Reimbursement	October 1, 2023	All	Exhibit 2
Psychiatric Residential Treatment Facility (PRTF) Fee Schedule Update	Reimbursement	January 1, 2023	All	Exhibit 2
MYPAC Services Fee Schedule Update	Reimbursement	November 1, 2023	All Children's Rate Cells	Exhibit 2
Postpartum Coverage Extension	Reimbursement	July 1, 2023	Pregnant Women	Exhibit 2
MYPAC Member Identification Change		July 1, 2022	Non-Newborn SSI / Disabled, Foster Care, MYPAC, MA Children, Quasi-CHIP	Exhibit 1



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October 31, 2024

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Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth15 - MississippiCAN Capitation Risk Adjustment – Q3 to Q4 2024 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2025, which are documented in a separately provided report¹ As outlined in that report and summarized by Table 1, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 Q3 to Q4 2024 MississippiCAN Risk Scores Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective July 1, 2024 through December 31, 2024 (Q3 to Q4 2024) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2025. Risk scores for January through June 2025 (Q1 to Q2 2025) will be provided in a separate letter.

As described in greater detail below, we develop Q3 to Q4 2024 risk scores using diagnoses from January 2023 to December 2023 (CY 2023) and the enrollment mix for each CCO as of June 2024. In addition, we adjusted the enrollment records to identify MYPAC rate cell members that were incorrectly assigned to other children rate cells.

Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q3 to Q4 2024 were developed using:

- Diagnosis Period: Medical and drug diagnosis information from encounter and FFS claims incurred during CY 2023 with runout through April 26, 2024.
- Enrollment Period: Demographic and enrollment information from June 2024.

¹ "Report12 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification.pdf," dated September 5, 2024.



Table 2
Q3 to Q4 2024 MississippiCAN Risk Scores
Based on CY 2023 Diagnosis Period and June 2024 Enrollment

Rate Cell	CCO	North		Central		South	
		Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,571	0.998	10,165	1.008	7,087	1.017
Non-Newborn SSI / Disabled	Molina	2,747	0.993	2,909	0.998	2,472	1.000
Non-Newborn SSI / Disabled	United	8,097	1.005	8,159	0.990	7,411	0.984
MA Adult	Magnolia	6,030	1.010	6,716	1.019	6,397	1.020
MA Adult	Molina	3,998	0.973	4,891	0.970	5,175	0.962
MA Adult	United	5,575	1.008	6,341	1.003	7,380	1.010
MA Children	Magnolia	29,925	1.003	35,082	1.012	29,290	1.002
MA Children	Molina	16,858	0.967	20,499	0.961	18,911	0.961
MA Children	United	27,931	1.016	32,384	1.012	31,478	1.021
Quasi-CHIP	Magnolia	3,805	1.002	4,326	1.016	3,286	0.994
Quasi-CHIP	Molina	1,949	0.973	2,175	0.955	2,001	0.965
Quasi-CHIP	United	3,842	1.012	4,271	1.007	3,766	1.024
Foster Care	Magnolia	1,519	0.984	1,570	0.970	2,155	0.969
Foster Care	Molina	251	1.080	315	1.149	445	1.159
Foster Care	United	516	1.007	459	1.002	669	0.994

Prior iterations of risk scores relied on actual enrollment during the risk adjustment period, due to data issues and the impact of different enrollment patterns during the COVID-19 pandemic and related public health emergency (PHE). This release of risk scores for July to December 2024 is a return to using a snapshot of enrollment to prospectively set risk scores.

Only MississippiCAN-eligible members enrolled in a CCO during June 2024 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found on the enrollment record, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations a variable based upon the length of enrollment during the diagnostic period is included in the risk score calculation.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment records.

Starting in July 2021, some members in the MYPAC rate cell, which is not risk adjusted, were not correctly assigned a 'SED' lock-in flag and were instead assigned to other children rate cells, including several rate cells that are risk adjusted. We identified members that utilized MYPAC services during the risk adjustment period and recategorized these members to the MYPAC rate cell for the purposes of risk adjustment calculations.

A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members aged 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2025 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.

Risk Score Changes

The last release of risk scores included retrospective budget-neutral risk scores for Q1 to Q2 2024. These risk scores were based on January to June 2024 enrollment and diagnoses from May 2022 through April 2023 with runout through



Jennifer Wentworth
Mississippi Division of Medicaid
October 31, 2024
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April 2024. Changes in budget-neutral plan risk scores between the Q1 to Q2 2024 risk scores and the Q3 to Q4 2024 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes. Additionally, new risk weights were developed for the Q3 to Q4 2024 time period to reflect the removal of certain pharmacy claims that will now be paid through DOM's pharmacy benefits administrator (PBA), effective July 1, 2024. The development of these risk weights is documented in a separate letter.²

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

Table 3 Q3 to Q4 2024 MississippiCAN Risk Scores Changes in Statewide Budget Neutral Risk Scores Q1 to Q2 2024 vs. Q3 to Q4 2024				
	Risk Scores:		Q1 to Q2 2024	Q3 to Q4 2024
	Enrollment:		Jan to Jun 2024	June 2024
Cohort	Diagnosis Period:	May 2022 to April 2023	CY 2023	% Change
Non-Newborn SSI / Disabled	Magnolia	1.012	1.007	-0.49%
Non-Newborn SSI / Disabled	Molina	0.964	0.997	3.39%
Non-Newborn SSI / Disabled	United	0.999	0.993	-0.55%
MA Adult	Magnolia	1.017	1.016	-0.03%
MA Adult	Molina	0.956	0.968	1.20%
MA Adult	United	1.015	1.007	-0.76%
MA Children	Magnolia	1.005	1.006	0.11%
MA Children	Molina	0.956	0.963	0.70%
MA Children	United	1.021	1.017	-0.46%
Quasi-CHIP	Magnolia	0.998	1.005	0.72%
Quasi-CHIP	Molina	0.971	0.964	-0.77%
Quasi-CHIP	United	1.016	1.014	-0.25%
Foster Care	Magnolia	0.970	0.974	0.35%
Foster Care	Molina	1.131	1.136	0.48%
Foster Care	United	1.013	1.000	-1.27%

Exhibit 2 allocates the change in risk scores between the last release and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Updates the risk scores shown in Column A with an updated diagnosis period.
- Column C: Updates the risk scores shown in Column B with enrollment from June 2024, the snapshot enrollment month chosen to represent enrollment for July to December 2024.
- Column D: Updates the risk scores shown in Column C using the new risk weights developed for July to December 2024. This column contains the final risk scores for this release.

Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the last release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.

² "Wentworth15 - July 2024 MSCAN Risk Weight Development.pdf" dated October 31, 2024.



Table 4 Q3 to Q4 2024 MississippiCAN Risk Scores Statewide Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q1 to Q2 2024	97%	93%	96%	96%
Q3 to Q4 2024	98%	96%	98%	98%
MA Adult				
Q1 to Q2 2024	91%	89%	90%	90%
Q3 to Q4 2024	94%	94%	94%	94%
MA Children				
Q1 to Q2 2024	94%	92%	94%	94%
Q3 to Q4 2024	97%	96%	97%	97%
Quasi-CHIP				
Q1 to Q2 2024	96%	93%	95%	95%
Q3 to Q4 2024	97%	96%	97%	97%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 Q3 to Q4 2024 MississippiCAN Risk Scores Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members falling into each durational category
 - Count of members in the non-utilizer category
 - Count of members assigned to the housing insecurity category, for applicable populations
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category
- Unscored Members
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- Risk Adjustment Results
 - Calculation of budget neutral risk score for scored and unscored members and in total



Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6 Q3 to Q4 2024 MississippiCAN Risk Scores Conditions with the Top Five Disease Impacts Statewide Results				
Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, low to medium	Skeletal, medium	Psychiatric, low	Psychiatric, low
2	Cardiovascular, medium	Psychiatric, low	Skeletal, very low to medium	Skeletal, very low to medium
3	Skeletal, medium	Pregnancy, incomplete	Pulmonary, low	Pulmonary, low
4	Psychiatric, high	Gastro, low	Gastro, low	Diabetes, type 1
5	CNS, low	Pregnancy, complete	CNS, low	Gastro, low

Member-Level Risk Scores

Text files providing member-level demographic, duration, diagnosis, and other risk score category information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, diagnostic, and other risk score category information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the letter referenced above that describes the custom risk weight model developed for July to December 2024 for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis.

Exhibits 4A to 4F display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

CCO Capitation Rate = Base Capitation Rate x CCO Budget Neutral Risk Score

The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates after the application of the quality withhold and prior to the following directed payments, all of which are not risk adjusted.



- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2025 and when we anticipate providing each risk score update for the Foster Care rate cell.

Table 7 SFY 2025 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3Q4 2024	November 2024	February 2025
Q1Q2 2025	December 2024	August 2025

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q3 to Q4 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from January 2023 to December 2023 with runout through April 26, 2024, along with eligibility data from June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q3 to Q4 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

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





Jennifer Wentworth
Mississippi Division of Medicaid
October 31, 2024
Page 7 of 7

Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jill Bruckert'.

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

JAB/KNL/zk

Attachments (Provided in Excel)

A handwritten signature in black ink, appearing to read 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

Caveats and Limitations
Mississippi Division of Medicaid
Q3 to Q4 2024 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q3 to Q4 2024 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from January 2023 through December 2023 with runout through April 2024 and eligibility data from June 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q3 to Q4 2024 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2024 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	9,429	0.938	0.998	142	1.041	0.996	0.998
Molina	2,647	0.934	0.994	100	1.027	0.982	0.993
United	7,941	0.944	1.004	156	1.062	1.015	1.005
Total	20,017	0.940	1.000	398	1.046	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	10,033	1.022	1.008	132	1.108	1.034	1.008
Molina	2,815	1.012	0.998	94	1.082	1.010	0.998
United	8,042	1.005	0.991	117	1.022	0.954	0.990
Total	20,890	1.014	1.000	343	1.072	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,944	1.067	1.017	143	1.047	0.981	1.017
Molina	2,364	1.049	1.000	108	1.069	1.001	1.000
United	7,251	1.032	0.983	160	1.085	1.016	0.984
Total	16,559	1.049	1.000	411	1.068	1.000	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	5,678	0.976	1.011	352	0.939	0.997	1.010
Molina	3,710	0.939	0.972	288	0.930	0.988	0.973
United	5,247	0.973	1.008	328	0.954	1.013	1.008
Total	14,635	0.966	1.000	968	0.942	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,354	0.994	1.020	362	0.956	1.000	1.019
Molina	4,607	0.943	0.968	284	0.952	0.995	0.970
United	5,985	0.977	1.003	356	0.960	1.004	1.003
Total	16,946	0.974	1.000	1,002	0.956	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,018	1.030	1.021	379	0.947	0.998	1.020
Molina	4,846	0.968	0.959	329	0.948	0.998	0.962
United	6,989	1.019	1.010	391	0.953	1.004	1.010
Total	17,853	1.009	1.000	1,099	0.949	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	29,017	1.007	1.004	908	0.997	0.996	1.003
Molina	16,168	0.970	0.966	690	0.993	0.992	0.967
United	27,064	1.020	1.016	867	1.011	1.010	1.016
Total	72,249	1.004	1.000	2,465	1.001	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	34,402	1.004	1.012	680	0.994	0.998	1.012
Molina	19,834	0.952	0.959	665	0.994	0.999	0.961
United	31,627	1.005	1.013	757	0.999	1.003	1.012
Total	85,863	0.993	1.000	2,102	0.996	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	28,413	1.026	1.002	877	0.995	0.998	1.002
Molina	18,084	0.982	0.960	827	0.992	0.995	0.961
United	30,615	1.046	1.022	863	1.005	1.007	1.021
Total	77,112	1.023	1.000	2,567	0.997	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,692	1.022	1.002	113	1.005	1.004	1.002
Molina	1,860	0.991	0.972	89	0.995	0.994	0.973
United	3,721	1.033	1.012	121	1.002	1.001	1.012
Total	9,273	1.020	1.000	323	1.001	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	4,220	1.021	1.016	106	1.015	1.020	1.016
Molina	2,109	0.959	0.954	66	0.987	0.992	0.955
United	4,179	1.012	1.007	92	0.977	0.982	1.007
Total	10,508	1.005	1.000	264	0.995	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral		Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,208	1.059	0.994	78	1.019	1.011	0.994
Molina	1,930	1.027	0.963	71	1.005	0.996	0.965
United	3,663	1.092	1.025	103	1.003	0.994	1.024
Total	8,801	1.066	1.000	252	1.009	1.000	1.000

Exhibit 1E

Mississippi Division of Medicaid

Foster Care Risk Score Adjustment Summary - Q3 to Q4 2024 Risk Scores

June 2024 Snapshot Period

North Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	1,519	0.941	0.984
Molina	251	1.033	1.080
United	516	0.964	1.007
Total	2,286	0.956	1.000

Central Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	1,570	1.011	0.970
Molina	315	1.197	1.149
United	459	1.044	1.002
Total	2,344	1.042	1.000

South Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	2,155	0.912	0.969
Molina	445	1.092	1.159
United	669	0.936	0.994
Total	3,269	0.942	1.000

Exhibit 2A Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.943	0.964	0.957	0.938	2.3%	-0.7%	-2.0%	-0.5%
Molina	0.894	0.922	0.907	0.934	3.2%	-1.6%	2.9%	4.5%
United	0.939	0.959	0.951	0.944	2.1%	-0.8%	-0.7%	0.5%
Unscored Members								
Magnolia	1.050	1.034	1.032	1.041	-1.6%	-0.1%	0.9%	-0.8%
Molina	1.007	1.033	1.001	1.027	2.6%	-3.1%	2.6%	2.0%
United	1.056	1.064	1.054	1.062	0.8%	-0.9%	0.7%	0.5%
All Members								
Magnolia	0.947	0.965	0.959	0.940	1.9%	-0.7%	-1.9%	-0.7%
Molina	0.898	0.924	0.909	0.936	2.9%	-1.6%	2.9%	4.2%
United	0.943	0.960	0.953	0.946	1.8%	-0.7%	-0.7%	0.3%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.020	1.045	1.038	1.022	2.4%	-0.7%	-1.5%	0.2%
Molina	0.966	0.980	0.968	1.012	1.5%	-1.2%	4.6%	4.8%
United	1.004	1.028	1.021	1.005	2.4%	-0.7%	-1.6%	0.1%
Unscored Members								
Magnolia	1.056	1.090	1.111	1.108	3.2%	1.9%	-0.2%	4.9%
Molina	1.070	1.090	1.071	1.082	1.8%	-1.8%	1.1%	1.1%
United	1.049	1.037	1.031	1.022	-1.1%	-0.6%	-0.9%	-2.6%
All Members								
Magnolia	1.022	1.046	1.039	1.024	2.4%	-0.7%	-1.5%	0.2%
Molina	0.970	0.982	0.970	1.013	1.2%	-1.2%	4.4%	4.4%
United	1.005	1.028	1.021	1.005	2.3%	-0.7%	-1.5%	0.0%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.046	1.076	1.063	1.067	2.9%	-1.2%	0.4%	2.1%
Molina	1.006	1.030	1.017	1.049	2.3%	-1.2%	3.1%	4.3%
United	1.025	1.045	1.034	1.032	2.0%	-1.1%	-0.3%	0.6%
Unscored Members								
Magnolia	1.075	1.058	1.057	1.047	-1.7%	-0.1%	-0.9%	-2.6%
Molina	1.036	1.061	1.058	1.069	2.4%	-0.3%	1.0%	3.2%
United	1.067	1.072	1.077	1.085	0.5%	0.5%	0.7%	1.7%
All Members								
Magnolia	1.047	1.076	1.063	1.067	2.7%	-1.2%	0.4%	1.9%
Molina	1.007	1.030	1.019	1.049	2.3%	-1.1%	3.0%	4.2%
United	1.027	1.046	1.035	1.033	1.8%	-1.0%	-0.2%	0.6%

Exhibit 2B Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.008	1.008	1.009	0.998	0.0%	0.1%	-1.1%	-1.0%
Molina	0.956	0.964	0.957	0.994	0.9%	-0.8%	3.9%	4.0%
United	1.004	1.002	1.003	1.004	-0.2%	0.1%	0.1%	0.0%
Unscored Members								
Magnolia	1.009	0.990	0.999	0.996	-1.9%	1.0%	-0.4%	-1.3%
Molina	0.967	0.989	0.969	0.982	2.2%	-2.0%	1.3%	1.6%
United	1.014	1.019	1.020	1.015	0.4%	0.2%	-0.5%	0.1%
All Members								
Magnolia	1.008	1.008	1.009	0.998	0.0%	0.1%	-1.1%	-1.0%
Molina	0.957	0.965	0.957	0.993	0.9%	-0.8%	3.8%	3.9%
United	1.005	1.003	1.003	1.005	-0.2%	0.1%	0.1%	0.0%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.014	1.015	1.015	1.008	0.1%	0.1%	-0.7%	-0.6%
Molina	0.959	0.952	0.947	0.998	-0.8%	-0.5%	5.3%	4.0%
United	0.997	0.998	0.999	0.991	0.1%	0.1%	-0.8%	-0.6%
Unscored Members								
Magnolia	0.999	1.017	1.036	1.034	1.8%	1.8%	-0.1%	3.5%
Molina	1.012	1.017	0.998	1.010	0.5%	-1.9%	1.2%	-0.3%
United	0.992	0.968	0.961	0.954	-2.5%	-0.7%	-0.8%	-3.9%
All Members								
Magnolia	1.013	1.015	1.016	1.008	0.2%	0.1%	-0.7%	-0.5%
Molina	0.962	0.953	0.949	0.998	-1.0%	-0.4%	5.2%	3.7%
United	0.997	0.998	0.999	0.990	0.1%	0.1%	-0.8%	-0.6%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.014	1.019	1.018	1.017	0.5%	-0.1%	-0.1%	0.3%
Molina	0.975	0.975	0.974	1.000	-0.1%	-0.1%	2.6%	2.5%
United	0.994	0.990	0.991	0.983	-0.4%	0.1%	-0.7%	-1.1%
Unscored Members								
Magnolia	1.013	0.994	0.992	0.981	-1.9%	-0.1%	-1.2%	-3.2%
Molina	0.976	0.997	0.993	1.001	2.2%	-0.4%	0.8%	2.5%
United	1.005	1.007	1.012	1.016	0.2%	0.4%	0.5%	1.1%
All Members								
Magnolia	1.014	1.019	1.018	1.017	0.4%	-0.1%	-0.1%	0.3%
Molina	0.975	0.976	0.975	1.000	0.0%	0.0%	2.5%	2.5%
United	0.995	0.990	0.991	0.984	-0.4%	0.1%	-0.7%	-1.1%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.987	0.982	0.968	0.976	-0.5%	-1.4%	0.9%	-1.1%
Molina	0.918	0.920	0.914	0.939	0.2%	-0.7%	2.7%	2.2%
United	0.977	0.972	0.963	0.973	-0.4%	-1.0%	1.1%	-0.3%
Unscored Members								
Magnolia	0.976	0.953	0.957	0.939	-2.3%	0.4%	-1.8%	-3.8%
Molina	0.961	0.944	0.944	0.930	-1.8%	0.0%	-1.4%	-3.2%
United	0.970	0.970	0.972	0.954	0.1%	0.2%	-1.8%	-1.6%
All Members								
Magnolia	0.986	0.980	0.967	0.974	-0.6%	-1.3%	0.7%	-1.2%
Molina	0.923	0.922	0.916	0.938	-0.2%	-0.6%	2.5%	1.6%
United	0.976	0.972	0.963	0.972	-0.4%	-0.9%	0.9%	-0.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.988	0.994	0.993	0.994	0.7%	-0.2%	0.1%	0.6%
Molina	0.935	0.926	0.921	0.943	-1.0%	-0.5%	2.4%	0.9%
United	0.983	0.986	0.973	0.977	0.4%	-1.3%	0.4%	-0.6%
Unscored Members								
Magnolia	0.978	0.975	0.972	0.956	-0.3%	-0.3%	-1.6%	-2.2%
Molina	0.966	0.951	0.958	0.952	-1.5%	0.6%	-0.6%	-1.5%
United	0.989	0.982	0.983	0.960	-0.7%	0.1%	-2.4%	-3.0%
All Members								
Magnolia	0.987	0.994	0.992	0.992	0.7%	-0.2%	0.0%	0.5%
Molina	0.938	0.927	0.923	0.944	-1.2%	-0.4%	2.2%	0.6%
United	0.983	0.986	0.974	0.976	0.3%	-1.3%	0.2%	-0.7%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.032	1.036	1.030	1.030	0.4%	-0.6%	0.0%	-0.2%
Molina	0.958	0.960	0.954	0.968	0.1%	-0.6%	1.5%	1.0%
United	1.039	1.037	1.028	1.019	-0.2%	-0.9%	-0.8%	-1.9%
Unscored Members								
Magnolia	0.970	0.959	0.961	0.947	-1.2%	0.2%	-1.5%	-2.4%
Molina	0.964	0.957	0.954	0.948	-0.7%	-0.3%	-0.7%	-1.7%
United	0.968	0.959	0.960	0.953	-1.0%	0.1%	-0.8%	-1.6%
All Members								
Magnolia	1.026	1.033	1.026	1.025	0.7%	-0.7%	-0.1%	-0.1%
Molina	0.960	0.960	0.954	0.967	0.0%	-0.6%	1.4%	0.8%
United	1.032	1.034	1.024	1.016	0.1%	-0.9%	-0.8%	-1.6%

Exhibit 2D Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.022	1.019	1.016	1.011	-0.2%	-0.3%	-0.5%	-1.0%
Molina	0.951	0.956	0.959	0.972	0.5%	0.4%	1.3%	2.3%
United	1.011	1.010	1.011	1.008	-0.1%	0.1%	-0.3%	-0.3%
Unscored Members								
Magnolia	1.007	0.997	0.999	0.997	-1.0%	0.2%	-0.1%	-1.0%
Molina	0.991	0.987	0.985	0.988	-0.4%	-0.2%	0.3%	-0.3%
United	1.000	1.014	1.014	1.013	1.4%	0.0%	-0.1%	1.3%
All Members								
Magnolia	1.020	1.018	1.015	1.010	-0.2%	-0.3%	-0.5%	-1.0%
Molina	0.955	0.957	0.961	0.973	0.2%	0.4%	1.2%	1.8%
United	1.010	1.010	1.011	1.008	0.0%	0.1%	-0.3%	-0.1%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.022	1.027	1.020	0.5%	0.5%	-0.7%	0.4%
Molina	0.962	0.952	0.953	0.968	-1.1%	0.2%	1.6%	0.6%
United	1.011	1.014	1.007	1.003	0.2%	-0.7%	-0.4%	-0.8%
Unscored Members								
Magnolia	0.999	1.004	1.000	1.000	0.5%	-0.4%	0.0%	0.1%
Molina	0.987	0.980	0.985	0.995	-0.7%	0.5%	1.0%	0.8%
United	1.011	1.012	1.012	1.004	0.1%	0.0%	-0.8%	-0.7%
All Members								
Magnolia	1.015	1.021	1.026	1.019	0.6%	0.5%	-0.6%	0.4%
Molina	0.964	0.953	0.955	0.970	-1.2%	0.2%	1.5%	0.5%
United	1.011	1.014	1.007	1.003	0.2%	-0.6%	-0.4%	-0.8%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.020	1.021	1.021	0.3%	0.1%	0.0%	0.4%
Molina	0.944	0.945	0.946	0.959	0.1%	0.1%	1.4%	1.6%
United	1.024	1.021	1.019	1.010	-0.3%	-0.1%	-0.9%	-1.3%
Unscored Members								
Magnolia	1.003	1.000	1.002	0.998	-0.2%	0.2%	-0.5%	-0.5%
Molina	0.996	0.999	0.995	0.998	0.3%	-0.3%	0.3%	0.3%
United	1.001	1.001	1.001	1.004	0.0%	0.1%	0.2%	0.3%
All Members								
Magnolia	1.015	1.019	1.020	1.020	0.4%	0.1%	-0.1%	0.4%
Molina	0.950	0.947	0.949	0.962	-0.3%	0.2%	1.4%	1.3%
United	1.021	1.020	1.018	1.010	-0.1%	-0.2%	-0.8%	-1.1%

Exhibit 2E Mississippi Division of Medicaid Impact Analysis MA Children Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.017	1.028	1.027	1.007	1.1%	0.0%	-2.0%	-0.9%
Molina	0.966	0.973	0.976	0.970	0.7%	0.3%	-0.6%	0.4%
United	1.035	1.042	1.044	1.020	0.6%	0.2%	-2.3%	-1.5%
Unscored Members								
Magnolia	0.975	0.997	0.994	0.997	2.3%	-0.3%	0.4%	2.3%
Molina	0.971	0.994	0.990	0.993	2.4%	-0.4%	0.3%	2.3%
United	0.979	1.011	1.011	1.011	3.2%	0.1%	0.0%	3.3%
All Members								
Magnolia	1.014	1.027	1.026	1.007	1.3%	-0.1%	-1.9%	-0.7%
Molina	0.967	0.974	0.976	0.971	0.7%	0.3%	-0.6%	0.4%
United	1.032	1.041	1.043	1.020	0.9%	0.2%	-2.3%	-1.2%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.011	1.021	1.021	1.004	1.0%	0.0%	-1.7%	-0.7%
Molina	0.947	0.951	0.954	0.952	0.3%	0.4%	-0.2%	0.5%
United	1.018	1.019	1.020	1.005	0.1%	0.0%	-1.4%	-1.3%
Unscored Members								
Magnolia	0.970	0.992	0.988	0.994	2.3%	-0.4%	0.6%	2.4%
Molina	0.964	0.989	0.989	0.994	2.6%	0.0%	0.5%	3.2%
United	0.972	0.997	0.999	0.999	2.6%	0.2%	0.0%	2.8%
All Members								
Magnolia	1.009	1.021	1.021	1.004	1.2%	0.0%	-1.6%	-0.5%
Molina	0.949	0.952	0.956	0.953	0.3%	0.4%	-0.2%	0.5%
United	1.016	1.019	1.019	1.005	0.3%	0.0%	-1.4%	-1.1%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.025	1.041	1.045	1.026	1.5%	0.3%	-1.8%	0.0%
Molina	0.982	0.981	0.994	0.982	0.0%	1.3%	-1.2%	0.0%
United	1.052	1.064	1.070	1.046	1.1%	0.5%	-2.2%	-0.6%
Unscored Members								
Magnolia	0.971	0.991	0.991	0.995	2.0%	0.0%	0.4%	2.5%
Molina	0.970	0.983	0.984	0.992	1.4%	0.2%	0.8%	2.3%
United	0.983	1.004	1.003	1.005	2.2%	-0.2%	0.2%	2.2%
All Members								
Magnolia	1.022	1.040	1.043	1.025	1.8%	0.3%	-1.7%	0.3%
Molina	0.982	0.982	0.994	0.983	0.0%	1.3%	-1.1%	0.1%
United	1.048	1.063	1.067	1.044	1.5%	0.4%	-2.2%	-0.3%

Exhibit 2F Mississippi Division of Medicaid Impact Analysis MA Children Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.004	1.007	1.005	1.004	0.3%	-0.1%	-0.1%	0.0%
Molina	0.954	0.953	0.955	0.966	-0.1%	0.2%	1.2%	1.3%
United	1.022	1.020	1.022	1.016	-0.2%	0.1%	-0.5%	-0.6%
Unscored Members								
Magnolia	1.000	0.996	0.995	0.996	-0.4%	-0.1%	0.1%	-0.3%
Molina	0.996	0.993	0.991	0.992	-0.3%	-0.2%	0.1%	-0.4%
United	1.004	1.010	1.012	1.010	0.6%	0.3%	-0.2%	0.7%
All Members								
Magnolia	1.004	1.006	1.005	1.003	0.3%	-0.2%	-0.1%	0.0%
Molina	0.957	0.954	0.956	0.967	-0.3%	0.2%	1.2%	1.0%
United	1.021	1.020	1.021	1.016	-0.1%	0.1%	-0.5%	-0.5%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.012	1.017	1.016	1.012	0.5%	-0.1%	-0.4%	0.0%
Molina	0.948	0.946	0.949	0.959	-0.2%	0.3%	1.1%	1.2%
United	1.019	1.015	1.014	1.013	-0.4%	-0.1%	-0.2%	-0.6%
Unscored Members								
Magnolia	1.001	0.999	0.996	0.998	-0.2%	-0.4%	0.2%	-0.4%
Molina	0.995	0.996	0.997	0.999	0.1%	0.1%	0.2%	0.4%
United	1.003	1.004	1.007	1.003	0.1%	0.3%	-0.4%	0.0%
All Members								
Magnolia	1.011	1.017	1.016	1.012	0.5%	-0.1%	-0.4%	0.0%
Molina	0.951	0.948	0.951	0.961	-0.4%	0.3%	1.0%	1.0%
United	1.018	1.015	1.014	1.012	-0.3%	-0.1%	-0.2%	-0.6%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.999	1.005	1.002	1.002	0.5%	-0.3%	0.0%	0.3%
Molina	0.957	0.947	0.953	0.960	-1.0%	0.7%	0.7%	0.3%
United	1.026	1.027	1.026	1.022	0.1%	-0.1%	-0.4%	-0.4%
Unscored Members								
Magnolia	0.996	0.998	0.998	0.998	0.2%	0.0%	0.0%	0.2%
Molina	0.995	0.990	0.991	0.995	-0.5%	0.2%	0.3%	0.0%
United	1.008	1.012	1.010	1.007	0.4%	-0.2%	-0.3%	-0.1%
All Members								
Magnolia	0.999	1.004	1.002	1.002	0.5%	-0.3%	0.0%	0.3%
Molina	0.960	0.948	0.955	0.961	-1.2%	0.7%	0.6%	0.1%
United	1.024	1.027	1.025	1.021	0.2%	-0.1%	-0.4%	-0.3%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.052	1.070	1.064	1.022	1.7%	-0.6%	-4.0%	-2.9%
Molina	1.013	1.018	1.016	0.991	0.5%	-0.1%	-2.5%	-2.1%
United	1.070	1.082	1.072	1.033	1.1%	-0.9%	-3.7%	-3.5%
Unscored Members								
Magnolia	1.019	1.015	1.022	1.005	-0.4%	0.7%	-1.6%	-1.3%
Molina	1.023	1.011	1.011	0.995	-1.2%	0.1%	-1.6%	-2.8%
United	1.029	1.017	1.018	1.002	-1.2%	0.1%	-1.6%	-2.6%
All Members								
Magnolia	1.051	1.069	1.062	1.021	1.7%	-0.6%	-3.9%	-2.8%
Molina	1.015	1.018	1.017	0.992	0.3%	-0.1%	-2.4%	-2.3%
United	1.068	1.081	1.070	1.032	1.2%	-1.0%	-3.6%	-3.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.032	1.058	1.059	1.021	2.5%	0.0%	-3.6%	-1.1%
Molina	1.001	1.009	0.993	0.959	0.8%	-1.7%	-3.4%	-4.3%
United	1.034	1.048	1.050	1.012	1.4%	0.1%	-3.6%	-2.1%
Unscored Members								
Magnolia	1.032	1.035	1.037	1.015	0.3%	0.1%	-2.1%	-1.7%
Molina	1.016	1.007	1.001	0.987	-0.9%	-0.6%	-1.4%	-2.9%
United	1.005	0.983	0.992	0.977	-2.2%	0.9%	-1.5%	-2.8%
All Members								
Magnolia	1.032	1.058	1.058	1.021	2.5%	0.0%	-3.5%	-1.1%
Molina	1.002	1.009	0.993	0.960	0.7%	-1.6%	-3.4%	-4.3%
United	1.033	1.047	1.048	1.011	1.4%	0.1%	-3.5%	-2.1%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.065	1.100	1.101	1.059	3.2%	0.1%	-3.7%	-0.6%
Molina	1.047	1.066	1.059	1.027	1.8%	-0.7%	-3.0%	-2.0%
United	1.114	1.151	1.136	1.092	3.3%	-1.2%	-3.9%	-2.0%
Unscored Members								
Magnolia	1.019	1.031	1.038	1.019	1.1%	0.7%	-1.8%	0.0%
Molina	1.031	1.012	1.024	1.005	-1.8%	1.2%	-1.9%	-2.5%
United	1.006	1.024	1.024	1.003	1.8%	0.0%	-2.1%	-0.4%
All Members								
Magnolia	1.063	1.098	1.099	1.058	3.3%	0.0%	-3.7%	-0.4%
Molina	1.048	1.066	1.058	1.026	1.7%	-0.7%	-3.0%	-2.0%
United	1.109	1.148	1.133	1.090	3.5%	-1.3%	-3.9%	-1.7%

Exhibit 2H Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1 to Q2 2024 to Q3 to Q4 2024 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.000	1.005	1.006	1.002	0.5%	0.1%	-0.4%	0.2%
Molina	0.963	0.956	0.961	0.972	-0.7%	0.5%	1.1%	0.9%
United	1.017	1.016	1.014	1.012	-0.1%	-0.3%	-0.1%	-0.5%
Unscored Members								
Magnolia	0.995	1.001	1.004	1.004	0.5%	0.4%	0.0%	0.9%
Molina	0.999	0.996	0.994	0.994	-0.3%	-0.2%	0.0%	-0.6%
United	1.005	1.002	1.000	1.001	-0.3%	-0.2%	0.0%	-0.4%
All Members								
Magnolia	1.000	1.005	1.006	1.002	0.5%	0.1%	-0.4%	0.2%
Molina	0.966	0.957	0.962	0.973	-0.9%	0.6%	1.1%	0.7%
United	1.017	1.016	1.013	1.012	-0.1%	-0.3%	-0.1%	-0.5%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	1.005	1.013	1.016	1.016	0.8%	0.3%	0.0%	1.1%
Molina	0.975	0.966	0.953	0.954	-0.9%	-1.4%	0.1%	-2.2%
United	1.007	1.003	1.007	1.007	-0.3%	0.4%	0.0%	0.0%
Unscored Members								
Magnolia	1.015	1.024	1.024	1.020	0.9%	0.0%	-0.4%	0.6%
Molina	0.999	0.996	0.989	0.992	-0.3%	-0.7%	0.3%	-0.7%
United	0.988	0.973	0.980	0.982	-1.6%	0.8%	0.2%	-0.6%
All Members								
Magnolia	1.006	1.013	1.017	1.016	0.8%	0.3%	0.0%	1.0%
Molina	0.976	0.967	0.954	0.955	-1.0%	-1.4%	0.1%	-2.2%
United	1.006	1.003	1.007	1.007	-0.3%	0.4%	0.0%	0.1%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jan 2024 to Jun 2024	Jan 2024 to Jun 2024	Jun 2024	Jun 2024	% Change Due to New Diagnosis Period	% Change Due to June 2024 Enrollment Change	% Change Due to Updated Cost Weights	Total % Change
Diagnosis Period	May 2022 to Apr 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Prior Risk Weights)	CY 2023 (Updated Risk Weights)				
Scored Members								
Magnolia	0.984	0.987	0.995	0.994	0.3%	0.8%	-0.1%	1.0%
Molina	0.968	0.957	0.957	0.963	-1.1%	0.0%	0.7%	-0.4%
United	1.029	1.032	1.027	1.025	0.3%	-0.5%	-0.3%	-0.5%
Unscored Members								
Magnolia	1.002	1.008	1.009	1.011	0.6%	0.1%	0.1%	0.9%
Molina	1.014	0.990	0.996	0.996	-2.4%	0.6%	0.1%	-1.7%
United	0.990	1.002	0.996	0.994	1.2%	-0.6%	-0.2%	0.5%
All Members								
Magnolia	0.985	0.987	0.995	0.994	0.2%	0.8%	-0.1%	1.0%
Molina	0.971	0.958	0.958	0.965	-1.3%	0.0%	0.7%	-0.6%
United	1.027	1.032	1.026	1.024	0.4%	-0.5%	-0.3%	-0.3%

Exhibit 3A

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - North Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	9,429	100.00%	N/A	2,647	100.00%	N/A	7,941	100.00%	N/A	20,017	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	255	2.70%	N/A	186	7.03%	N/A	249	3.14%	N/A	690	3.45%
Age 5 to 14 Male	0.184	N/A	1,079	11.44%	N/A	359	13.56%	N/A	889	11.20%	N/A	2,327	11.63%
Age 5 to 14 Female	0.265	N/A	479	5.08%	N/A	146	5.52%	N/A	445	5.60%	N/A	1,070	5.35%
Age 15 to 24 Male	0.000	N/A	863	9.15%	N/A	265	10.01%	N/A	776	9.77%	N/A	1,904	9.51%
Age 15 to 24 Female	0.187	N/A	452	4.79%	N/A	144	5.44%	N/A	427	5.38%	N/A	1,023	5.11%
Age 25 to 44 Male	0.003	N/A	1,172	12.43%	N/A	279	10.54%	N/A	1,014	12.77%	N/A	2,465	12.31%
Age 25 to 44 Female	0.133	N/A	1,058	11.22%	N/A	240	9.07%	N/A	856	10.78%	N/A	2,154	10.76%
Age 45 and Older Male	0.107	N/A	1,709	18.12%	N/A	535	20.21%	N/A	1,440	18.13%	N/A	3,684	18.40%
Age 45 and Older Female	0.027	N/A	2,362	25.05%	N/A	493	18.62%	N/A	1,845	23.29%	N/A	4,700	23.48%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	39	0.41%	N/A	27	1.02%	N/A	48	0.60%	N/A	114	0.57%
Diagnosis Period Duration, 8 Months	0.320	N/A	25	0.27%	N/A	19	0.72%	N/A	29	0.37%	N/A	73	0.36%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	87	0.92%	N/A	74	2.80%	N/A	83	1.05%	N/A	244	1.22%
Diagnosis Period Duration, 12 Months	0.000	N/A	9,278	98.40%	N/A	2,527	95.47%	N/A	7,781	97.99%	N/A	19,586	97.85%
Homelessness Category													
Homelessness	0.931	N/A	66	0.70%	N/A	28	1.06%	N/A	41	0.52%	N/A	135	0.67%
Disease Categories													
Cancer, very high	3.067	13	48	0.51%	7	20	0.76%	16	36	0.45%	13	104	0.52%
Cancer, high	0.816	24	111	1.18%	20	35	1.32%	28	81	1.02%	26	227	1.13%
Cancer, medium	0.611	26	146	1.55%	27	35	1.32%	20	159	2.00%	23	340	1.70%
Cancer, low	0.318	38	103	1.09%	38	22	0.83%	37	79	0.99%	37	204	1.02%
Cardiovascular, very high	1.460	29	46	0.49%	30	13	0.49%	24	59	0.74%	27	118	0.59%
Cardiovascular, medium	0.584	3	1,081	11.46%	2	298	11.26%	3	855	10.77%	3	2,234	11.16%
Cardiovascular, extra low to low	0.081	7	3,153	33.44%	8	706	26.67%	7	2,582	32.51%	7	6,441	32.18%
Cerebrovascular, medium	0.115	43	121	1.28%	42	35	1.32%	43	111	1.40%	44	267	1.33%
CNS, high	0.781	32	77	0.82%	31	20	0.76%	33	52	0.65%	32	149	0.74%
CNS, medium	0.479	22	205	2.17%	21	58	2.19%	21	193	2.43%	21	456	2.28%
CNS, low	0.243	5	1,507	15.98%	5	400	15.11%	5	1,333	16.79%	5	3,240	16.19%
DD, low to medium	0.174	30	360	3.82%	32	86	3.25%	30	365	4.60%	30	811	4.05%
Diabetes, type 1	0.862	19	126	1.34%	23	31	1.17%	19	113	1.42%	19	270	1.35%
Diabetes, type 2	0.199	6	1,629	17.28%	6	339	12.77%	6	1,290	16.24%	6	3,257	16.27%
Gastro, high	0.320	36	130	1.38%	36	33	1.25%	36	101	1.27%	36	264	1.32%
Gastro, medium	0.268	27	297	3.15%	29	75	2.83%	27	263	3.31%	28	635	3.17%
Gastro, low	0.135	8	1,876	19.90%	10	402	15.19%	8	1,440	18.13%	8	3,718	18.57%
Hematological, extra high	4.752	42	3	0.03%	45	0	0.00%	39	4	0.05%	41	7	0.03%
Hematological, medium to very high	0.931	12	172	1.82%	14	45	1.70%	10	169	2.13%	11	386	1.91%
Hematological, low	0.370	33	140	1.48%	33	40	1.51%	32	118	1.48%	33	298	1.49%
Infectious, high to very high	0.300	28	261	2.77%	26	76	2.87%	29	216	2.72%	29	553	2.76%
Infectious, low to medium	0.188	31	333	3.53%	28	113	4.27%	31	254	3.20%	31	700	3.50%
Metabolic, high	0.468	21	228	2.42%	18	65	2.46%	18	209	2.63%	18	502	2.51%
Metabolic, medium	0.239	11	677	7.18%	13	187	7.06%	12	563	7.09%	12	1,427	7.13%
Pregnancy, complete	0.173	44	80	0.85%	41	26	0.98%	44	72	0.91%	43	178	0.89%
Pregnancy, incomplete	0.841	39	38	0.40%	37	9	0.34%	40	21	0.26%	38	68	0.34%
Psychiatric, high	0.643	4	584	6.19%	4	162	6.12%	4	535	6.74%	4	1,281	6.40%
Psychiatric, low to medium	0.225	1	3,526	37.40%	1	1,012	38.23%	1	3,126	39.37%	1	7,664	38.29%
Pulmonary, very high	0.816	15	175	1.86%	16	48	1.81%	17	123	1.55%	17	346	1.73%
Pulmonary, high	0.481	45	19	0.20%	44	7	0.26%	45	15	0.19%	45	41	0.20%
Pulmonary, medium	0.472	14	303	3.21%	17	77	2.91%	14	261	3.29%	14	641	3.20%
Pulmonary, low	0.131	9	1,630	17.29%	12	361	13.64%	11	1,196	15.06%	10	3,187	15.92%
Rare Diseases	2.664	40	9	0.10%	40	2	0.08%	38	9	0.11%	40	20	0.10%
Renal, extra high	4.191	10	46	0.49%	9	13	0.49%	9	46	0.58%	9	105	0.52%
Renal, medium	0.362	16	382	4.05%	15	109	4.12%	15	332	4.18%	16	823	4.11%
Renal, low	0.277	23	333	3.53%	25	86	3.25%	26	263	3.31%	25	682	3.41%
Skeletal, medium	0.254	2	2,604	27.62%	3	620	23.42%	2	2,058	25.92%	2	5,282	26.39%
Skeletal, very low to low	0.070	34	685	7.26%	35	152	5.74%	34	545	6.86%	34	1,382	6.90%
Skin, low to high	0.624	25	144	1.53%	19	46	1.74%	22	141	1.78%	24	331	1.65%
Skin, very low	0.169	20	638	6.77%	24	153	5.78%	25	487	6.13%	22	1,278	6.38%
Substance abuse, low	0.324	17	384	4.07%	11	156	5.89%	13	390	4.91%	15	930	4.65%
Substance abuse, very low	0.202	35	211	2.24%	34	60	2.27%	35	167	2.10%	35	438	2.19%
Disabled Children Add-On - CNS, high	1.388	37	26	0.28%	39	4	0.15%	41	11	0.14%	39	41	0.20%
Disabled Children Add-On - Gastro, high	1.508	18	74	0.78%	22	18	0.68%	23	58	0.73%	20	150	0.75%
Disabled Children Add-On - Pulmonary, very hig	0.419	41	36	0.38%	43	9	0.34%	42	34	0.43%	42	79	0.39%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,903	20.18%	N/A	642	24.25%	N/A	1,576	19.85%	N/A	4,121	20.59%

Demographic Categories	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.364	N/A	11	7.75%	N/A	10	10.00%	N/A	11	7.05%	N/A	32	8.04%
Age 5 to 14 Male	0.701	N/A	15	10.56%	N/A	11	11.00%	N/A	15	9.62%	N/A	41	10.30%
Age 5 to 14 Female	0.872	N/A	6	4.23%	N/A	3	3.00%	N/A	8	5.13%	N/A	17	4.27%
Age 15 to 24 Male	0.522	N/A	10	7.04%	N/A	6	6.00%	N/A	6	3.85%	N/A	22	5.53%
Age 15 to 24 Female	0.831	N/A	8	5.63%	N/A	10	10.00%	N/A	4	2.56%	N/A	22	5.53%
Age 25 to 44 Male	0.797	N/A	15	10.56%	N/A	11	11.00%	N/A	18	11.54%	N/A	44	11.06%
Age 25 to 44 Female	1.120	N/A	9	6.34%	N/A	12	12.00%	N/A	23	14.74%	N/A	44	11.06%
Age 45 and Older Male	1.188	N/A	28	19.72%	N/A	19	19.00%	N/A	35	22.44%	N/A	82	20.60%
Age 45 and Older Female	1.249	N/A	40	28.17%	N/A	18	18.00%	N/A	36	23.08%	N/A	94	23.62%

	Risk Adjustment Results			
	Magnolia	Molina	United	Total
Scored Members				
Member Months	9,429	2,647	7,941	20,017
Unadjusted Plan Factor	0.938	0.934	0.944	0.940
Budget Neutral Plan Factor	0.998	0.994	1.004	1.000
Unscored Members				
Member Months	142	100	156	398
Unadjusted Plan Factor	1.041	1.027	1.062	1.046
Budget Neutral Plan Factor	0.996	0.982	1.015	1.000
Total Members				
Member Months	9,571	2,747	8,097	20,415
Unadjusted Plan Factor	0.940	0.936	0.946	0.942
Budget Neutral Plan Factor	0.998	0.993	1.005	1.000

Exhibit 3B

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - Central Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	10,033	100.00%	N/A	2,815	100.00%	N/A	8,042	100.00%	N/A	20,890	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	331	3.30%	N/A	296	10.52%	N/A	290	3.61%	N/A	917	4.39%
Age 5 to 14 Male	0.184	N/A	1,126	11.22%	N/A	374	13.29%	N/A	941	11.70%	N/A	2,441	11.69%
Age 5 to 14 Female	0.265	N/A	523	5.21%	N/A	151	5.36%	N/A	441	5.48%	N/A	1,115	5.34%
Age 15 to 24 Male	0.000	N/A	1,011	10.08%	N/A	295	10.48%	N/A	774	9.62%	N/A	2,080	9.96%
Age 15 to 24 Female	0.187	N/A	532	5.30%	N/A	152	5.40%	N/A	402	5.00%	N/A	1,086	5.20%
Age 25 to 44 Male	0.003	N/A	1,247	12.43%	N/A	298	10.59%	N/A	1,022	12.71%	N/A	2,567	12.29%
Age 25 to 44 Female	0.133	N/A	1,105	11.01%	N/A	217	7.71%	N/A	809	10.06%	N/A	2,131	10.20%
Age 45 and Older Male	0.107	N/A	1,795	17.89%	N/A	583	20.71%	N/A	1,561	19.41%	N/A	3,939	18.86%
Age 45 and Older Female	0.027	N/A	2,363	23.55%	N/A	449	15.95%	N/A	1,802	22.41%	N/A	4,614	22.09%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	37	0.37%	N/A	24	0.85%	N/A	37	0.46%	N/A	98	0.47%
Diagnosis Period Duration, 8 Months	0.320	N/A	18	0.18%	N/A	18	0.64%	N/A	27	0.34%	N/A	63	0.30%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	90	0.90%	N/A	65	2.31%	N/A	111	1.38%	N/A	266	1.27%
Diagnosis Period Duration, 12 Months	0.000	N/A	9,888	98.55%	N/A	2,708	96.20%	N/A	7,867	97.82%	N/A	20,463	97.96%
Homelessness Category													
Homelessness	0.931	N/A	94	0.94%	N/A	40	1.42%	N/A	93	1.16%	N/A	227	1.09%
Disease Categories													
Cancer, very high	3.067	10	71	0.71%	7	25	0.89%	20	35	0.44%	12	131	0.63%
Cancer, high	0.816	25	136	1.36%	24	35	1.24%	27	116	1.44%	26	287	1.37%
Cancer, medium	0.611	28	163	1.62%	27	41	1.46%	18	183	2.28%	25	387	1.85%
Cancer, low	0.318	39	90	0.90%	38	31	1.10%	40	73	0.91%	39	194	0.93%
Cardiovascular, very high	1.460	21	91	0.91%	23	21	0.75%	25	66	0.82%	23	178	0.85%
Cardiovascular, medium	0.584	2	1,091	10.87%	2	317	11.26%	2	850	10.57%	2	2,258	10.81%
Cardiovascular, extra low to low	0.081	8	3,289	32.78%	9	769	27.32%	7	2,598	32.31%	8	6,656	31.86%
Cerebrovascular, medium	0.115	41	167	1.66%	42	56	1.99%	41	144	1.79%	40	367	1.76%
CNS, high	0.781	30	116	1.16%	30	29	1.03%	28	112	1.39%	29	257	1.23%
CNS, medium	0.479	19	282	2.81%	19	77	2.74%	21	223	2.77%	20	582	2.79%
CNS, low	0.243	5	1,776	17.70%	5	491	17.44%	5	1,451	18.04%	5	3,718	17.80%
DD, low to medium	0.174	31	461	4.59%	31	119	4.23%	31	348	4.33%	31	928	4.44%
Diabetes, type 1	0.862	22	147	1.47%	22	37	1.31%	22	123	1.53%	21	307	1.47%
Diabetes, type 2	0.199	7	1,700	16.94%	8	356	12.65%	6	1,269	15.78%	7	3,325	15.92%
Gastro, high	0.320	36	156	1.55%	36	61	2.17%	36	124	1.54%	35	341	1.63%
Gastro, medium	0.268	29	362	3.61%	29	86	3.06%	30	264	3.28%	30	712	3.41%
Gastro, low	0.135	9	1,849	18.43%	13	404	14.35%	9	1,355	16.85%	9	3,608	17.27%
Hematological, extra high	4.752	45	1	0.01%	44	1	0.04%	39	6	0.07%	44	8	0.04%
Hematological, medium to very high	0.931	12	215	2.14%	18	43	1.53%	11	184	2.29%	11	442	2.12%
Hematological, low	0.370	32	185	1.84%	34	45	1.60%	35	111	1.38%	33	341	1.63%
Infectious, high to very high	0.300	26	363	3.62%	28	77	2.74%	26	319	3.97%	27	759	3.63%
Infectious, low to medium	0.188	33	353	3.52%	33	102	3.62%	32	262	3.26%	32	717	3.43%
Metabolic, high	0.468	17	323	3.22%	20	75	2.66%	15	269	3.34%	17	667	3.19%
Metabolic, medium	0.239	14	756	7.54%	15	201	7.14%	14	550	6.84%	15	1,507	7.21%
Pregnancy, complete	0.173	44	81	0.81%	45	23	0.82%	45	54	0.67%	45	158	0.76%
Pregnancy, incomplete	0.841	43	20	0.20%	36	15	0.53%	43	15	0.19%	41	50	0.24%
Psychiatric, high	0.643	4	911	9.08%	4	207	7.35%	4	710	8.83%	4	1,828	8.75%
Psychiatric, low to medium	0.225	1	3,996	39.83%	1	1,080	38.37%	1	3,164	39.34%	1	8,240	39.44%
Pulmonary, very high	0.816	18	180	1.79%	16	52	1.85%	17	138	1.72%	18	370	1.77%
Pulmonary, high	0.481	40	43	0.43%	41	15	0.53%	44	21	0.26%	43	79	0.38%
Pulmonary, medium	0.472	15	378	3.77%	11	125	4.44%	13	289	3.59%	14	792	3.79%
Pulmonary, low	0.131	13	1,492	14.87%	14	376	13.36%	12	1,131	14.06%	13	2,999	14.36%
Rare Diseases	2.664	37	15	0.15%	43	2	0.07%	34	17	0.21%	37	34	0.16%
Renal, extra high	4.191	6	91	0.91%	6	21	0.75%	8	50	0.62%	6	162	0.78%
Renal, medium	0.362	16	422	4.21%	17	113	4.01%	16	336	4.18%	16	871	4.17%
Renal, low	0.277	20	486	4.84%	25	102	3.62%	24	354	4.40%	22	942	4.51%
Skeletal, medium	0.254	3	2,450	24.42%	3	573	20.36%	3	1,932	24.02%	3	4,955	23.72%
Skeletal, very low to low	0.070	34	865	8.62%	35	206	7.32%	33	669	8.32%	34	1,740	8.33%
Skin, low to high	0.624	27	163	1.62%	21	55	1.95%	23	162	2.01%	24	380	1.82%
Skin, very low	0.169	24	675	6.73%	26	154	5.47%	29	508	6.32%	28	1,337	6.40%
Substance abuse, low	0.324	11	658	6.56%	10	184	6.54%	10	538	6.69%	10	1,380	6.61%
Substance abuse, very low	0.202	38	184	1.83%	37	55	1.95%	38	155	1.93%	38	394	1.89%
Disabled Children Add-On - CNS, high	1.388	35	36	0.36%	40	6	0.21%	37	28	0.35%	36	70	0.34%
Disabled Children Add-On - Gastro, high	1.508	23	82	0.82%	12	37	1.31%	19	72	0.90%	19	191	0.91%
Disabled Children Add-On - Pulmonary, very high	0.419	42	43	0.43%	39	22	0.78%	42	32	0.40%	42	97	0.46%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,788	17.82%	N/A	592	21.03%	N/A	1,499	18.64%	N/A	3,879	18.57%

Unscored Members														
Demographic Categories	Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months		
	Age 1 to 4	1.364	N/A	10	7.58%	N/A	7	7.45%	N/A	5	4.27%	N/A	22	6.41%
	Age 5 to 14 Male	0.701	N/A	6	4.55%	N/A	8	8.51%	N/A	11	9.40%	N/A	25	7.29%
	Age 5 to 14 Female	0.872	N/A	2	1.52%	N/A	6	6.38%	N/A	1	0.85%	N/A	9	2.62%
	Age 15 to 24 Male	0.522	N/A	9	6.82%	N/A	1	1.06%	N/A	12	10.26%	N/A	22	6.41%
	Age 15 to 24 Female	0.831	N/A	2	1.52%	N/A	5	5.32%	N/A	4	3.42%	N/A	11	3.21%
	Age 25 to 44 Male	0.797	N/A	9	6.82%	N/A	10	10.64%	N/A	16	13.68%	N/A	35	10.20%
	Age 25 to 44 Female	1.120	N/A	15	11.36%	N/A	8	8.51%	N/A	10	8.55%	N/A	33	9.62%
	Age 45 and Older Male	1.188	N/A	38	28.79%	N/A	24	25.53%	N/A	30	25.64%	N/A	92	26.82%
Age 45 and Older Female	1.249	N/A	41	31.06%	N/A	25	26.60%	N/A	28	23.93%	N/A	94	27.41%	

Risk Adjustment Results													
Magnolia				Molina				United				Total	
Scored Members				Unscored Members				Unscored Members				Unscored Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	
Unscored Members				Unscored Members				Unscored Members				Unscored Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	
Total Members				Total Members				Total Members				Total Members	
Member Months				Member Months				Member Months				Member Months	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor	

Exhibit 3C

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - South Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

		Scored Members												
		Magnolia			Molina			United			Total			
		Disease Impact	Member	% of Member	Disease Impact	Member	% of Member	Disease Impact	Member	% of Member	Disease Impact	Member	% of Member	
Risk Weight		Rank	Months	Months	Rank	Months	Months	Rank	Months	Months	Rank	Months	Months	
Regression Intercept		0.113	N/A	6,944	100.00%	N/A	2,364	100.00%	N/A	7,251	100.00%	N/A	16,559	100.00%
Demographic Categories														
Age 1 to 4		0.470	N/A	224	3.23%	N/A	190	8.04%	N/A	229	3.16%	N/A	643	3.88%
Age 5 to 14 Male		0.184	N/A	894	12.87%	N/A	267	11.29%	N/A	878	12.11%	N/A	2,039	12.31%
Age 5 to 14 Female		0.265	N/A	421	6.06%	N/A	138	5.84%	N/A	538	7.41%	N/A	947	5.72%
Age 15 to 24 Male		0.000	N/A	644	9.27%	N/A	240	10.15%	N/A	665	9.17%	N/A	1,549	9.35%
Age 15 to 24 Female		0.187	N/A	334	4.81%	N/A	129	5.46%	N/A	349	4.81%	N/A	812	4.90%
Age 25 to 44 Male		0.003	N/A	740	10.66%	N/A	231	9.77%	N/A	824	11.36%	N/A	1,795	10.84%
Age 25 to 44 Female		0.133	N/A	671	9.66%	N/A	187	7.91%	N/A	715	9.86%	N/A	1,573	9.50%
Age 45 and Older Male		0.107	N/A	1,285	18.51%	N/A	482	20.39%	N/A	1,433	19.76%	N/A	3,200	19.32%
Age 45 and Older Female		0.027	N/A	1,731	24.93%	N/A	500	21.15%	N/A	1,770	24.41%	N/A	4,001	24.16%
Duration Category														
Diagnosis Period Duration, 6 to 7 Months		0.382	N/A	35	0.50%	N/A	31	1.31%	N/A	43	0.59%	N/A	109	0.66%
Diagnosis Period Duration, 8 Months		0.320	N/A	30	0.43%	N/A	19	0.80%	N/A	37	0.51%	N/A	86	0.52%
Diagnosis Period Duration, 9 to 11 Months		0.167	N/A	88	1.27%	N/A	74	3.13%	N/A	100	1.38%	N/A	262	1.58%
Diagnosis Period Duration, 12 Months		0.000	N/A	6,791	97.80%	N/A	2,240	94.75%	N/A	7,071	97.52%	N/A	16,102	97.24%
Homelessness Category														
Homelessness		0.931	N/A	78	1.12%	N/A	49	2.07%	N/A	67	0.92%	N/A	194	1.17%
Disease Categories														
Cancer, very high		3.067	13	46	0.66%	9	19	0.80%	20	33	0.46%	14	98	0.59%
Cancer, high		0.816	21	124	1.79%	18	41	1.73%	27	100	1.38%	23	265	1.60%
Cancer, medium		0.611	32	89	1.28%	29	33	1.40%	26	134	1.85%	30	256	1.55%
Cancer, low		0.318	38	90	1.30%	38	37	1.57%	36	104	1.43%	36	231	1.40%
Cardiovascular, very high		1.460	27	55	0.79%	27	17	0.72%	30	46	0.63%	28	118	0.71%
Cardiovascular, medium		0.584	2	809	11.65%	2	291	12.31%	2	856	11.81%	2	1,956	11.81%
Cardiovascular, extra low to low		0.081	9	2,207	31.78%	11	647	27.37%	9	2,377	32.78%	9	5,231	31.59%
Cerebrovascular, medium		0.115	42	123	1.77%	41	44	1.86%	41	129	1.78%	41	296	1.79%
CNS, high		0.781	30	71	1.02%	34	20	0.83%	32	76	1.05%	32	169	1.02%
CNS, medium		0.479	17	259	3.73%	24	56	2.37%	16	238	3.28%	17	553	3.34%
CNS, low		0.243	5	1,341	19.31%	5	411	17.39%	5	1,398	19.28%	5	3,150	19.02%
DD, low to medium		0.174	29	400	5.76%	30	108	4.57%	29	400	5.52%	29	908	5.48%
Diabetes, type 1		0.862	18	134	1.93%	33	20	0.85%	17	120	1.65%	20	274	1.65%
Diabetes, type 2		0.199	6	1,130	16.27%	6	319	13.49%	6	1,143	15.76%	6	2,592	15.65%
Gastro, high		0.320	35	137	1.97%	32	55	2.33%	35	127	1.75%	35	319	1.93%
Gastro, medium		0.268	25	330	4.75%	26	96	4.06%	25	326	4.50%	26	752	4.54%
Gastro, low		0.135	8	1,421	20.46%	10	422	17.85%	8	1,444	19.91%	7	3,287	19.85%
Hematological, extra high		4.752	40	4	0.06%	42	1	0.04%	44	2	0.03%	42	7	0.04%
Hematological, medium to very high		0.931	15	147	2.12%	15	44	1.86%	14	129	1.78%	15	320	1.93%
Hematological, low		0.370	33	144	2.07%	31	48	2.03%	34	127	1.75%	34	319	1.93%
Infectious, high to very high		0.300	28	243	3.50%	23	95	4.02%	28	244	3.37%	27	582	3.51%
Infectious, low to medium		0.188	31	293	4.22%	28	117	4.95%	31	320	4.41%	31	730	4.41%
Metabolic, high		0.468	24	192	2.76%	25	56	2.37%	23	204	2.81%	24	452	2.73%
Metabolic, medium		0.239	16	520	7.49%	16	170	7.19%	15	498	6.87%	16	1,188	7.17%
Pregnancy, complete		0.173	44	46	0.66%	45	16	0.68%	45	50	0.69%	45	112	0.68%
Pregnancy, incomplete		0.841	41	17	0.24%	39	8	0.34%	40	22	0.30%	40	47	0.28%
Psychiatric, high		0.643	4	569	8.19%	4	185	7.83%	4	606	8.36%	4	1,360	8.21%
Psychiatric, low to medium		0.225	1	2,997	43.16%	1	927	39.21%	1	3,146	43.39%	1	7,070	42.70%
Pulmonary, very high		0.816	12	176	2.53%	14	54	2.28%	13	161	2.22%	13	391	2.36%
Pulmonary, high		0.481	45	16	0.23%	44	9	0.38%	43	23	0.32%	44	48	0.29%
Pulmonary, medium		0.472	14	292	4.21%	12	110	4.65%	12	317	4.37%	12	719	4.34%
Pulmonary, low		0.131	11	1,168	16.82%	13	360	15.23%	11	1,162	16.03%	11	2,690	16.24%
Rare Diseases		2.664	39	10	0.14%	40	2	0.08%	39	8	0.11%	39	20	0.12%
Renal, extra high		4.191	7	46	0.66%	7	15	0.63%	10	38	0.52%	10	99	0.60%
Renal, medium		0.362	19	314	4.52%	17	108	4.57%	19	280	3.86%	18	702	4.24%
Renal, low		0.277	22	364	5.24%	22	104	4.40%	22	348	4.80%	22	816	4.93%
Skeletal, medium		0.254	3	1,594	22.96%	3	506	21.40%	3	1,655	22.82%	3	3,755	22.68%
Skeletal, very low to low		0.070	34	691	9.95%	35	199	8.42%	33	791	10.91%	33	1,681	10.15%
Skin, low to high		0.624	26	139	2.00%	21	48	2.03%	24	150	2.07%	25	337	2.04%
Skin, very low		0.169	23	592	8.53%	19	188	7.95%	18	606	8.36%	21	1,386	8.37%
Substance abuse, low		0.324	10	543	7.82%	8	193	8.16%	7	629	8.67%	8	1,365	8.24%
Substance abuse, very low		0.202	37	151	2.17%	37	59	2.50%	37	154	2.12%	37	364	2.20%
Disabled Children Add-On - CNS, high		1.388	36	25	0.36%	36	9	0.38%	38	18	0.25%	38	52	0.31%
Disabled Children Add-On - Gastro, high		1.508	20	74	1.07%	20	21	0.89%	21	65	0.90%	19	160	0.97%
Disabled Children Add-On - Pulmonary, very hig		0.419	43	23	0.33%	43	11	0.47%	42	31	0.43%	43	65	0.39%
Population Statistics														
No Classified Disease Categories		N/A	N/A	1,257	18.10%	N/A	507	21.45%	N/A	1,247	17.20%	N/A	3,011	18.18%

		Unscored Members												
		Magnolia			Molina			United			Total			
Risk Weight		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories														
Age 1 to 4		1.364	N/A	6	4.20%	N/A	7	6.48%	N/A	11	6.88%	N/A	24	5.84%
Age 5 to 14 Male		0.701	N/A	14	9.79%	N/A	5	4.63%	N/A	8	5.00%	N/A	27	6.57%
Age 5 to 14 Female		0.872	N/A	3	2.10%	N/A	6	5.56%	N/A	7	4.38%	N/A	16	3.89%
Age 15 to 24 Male		0.522	N/A	9	6.29%	N/A	7	6.48%	N/A	7	4.38%	N/A	23	5.60%
Age 15 to 24 Female		0.831	N/A	6	4.20%	N/A	7	6.48%	N/A	7	4.38%	N/A	20	4.87%
Age 25 to 44 Male		0.797	N/A	17	11.89%	N/A	9	8.33%	N/A	14	8.75%	N/A	40	9.73%
Age 25 to 44 Female		1.120	N/A	17	11.89%	N/A	10	9.26%	N/A	27	16.88%	N/A	54	13.14%
Age 45 and Older Male		1.188	N/A	30	20.98%	N/A	31	28.70%	N/A	43	26.88%	N/A	104	25.30%
Age 45 and Older Female		1.249	N/A	41	28.67%	N/A	26	24.07%	N/A	36	22.50%	N/A	103	25.06%

		Risk Adjustment Results			
		Magnolia	Molina	United	Total
Scored Members					
Member Months		6,944	2,364	7,251	16,559
Unadjusted Plan Factor		1.067	1.049	1.032	1.049
Budget Neutral Plan Factor		1.017	1.000	0.983	1.000
Unscored Members					
Member Months		143	108	160	411
Unadjusted Plan Factor		1.047	1.069	1.085	1.068
Budget Neutral Plan Factor		0.981	1.001	1.016	1.000
Total Members					
Member Months		7,087	2,472	7,411	16,970
Unadjusted Plan Factor		1.067	1.049	1.033	1.050
Budget Neutral Plan Factor		1.017	1.000	0.984	1.000

Exhibit 3D Mississippi Division of Medicaid Risk Adjustment Results MA Adult - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.126	N/A	5,678	100.00%	N/A	3,710	100.00%	N/A	5,247	100.00%	N/A	14,635	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	18	0.32%	N/A	12	0.32%	N/A	20	0.38%	N/A	50	0.34%
Age 19 to 24 Female	0.460	N/A	499	8.79%	N/A	408	11.00%	N/A	523	9.97%	N/A	1,430	9.77%
Age 25 to 44 Male	0.111	N/A	283	4.98%	N/A	175	4.72%	N/A	295	5.62%	N/A	753	5.15%
Age 25 to 44 Female	0.305	N/A	4,263	75.08%	N/A	2,814	75.85%	N/A	3,903	74.39%	N/A	10,980	75.03%
Age 45 and Older Male	0.127	N/A	106	1.87%	N/A	69	1.86%	N/A	89	1.70%	N/A	264	1.80%
Age 45 and Older Female	0.326	N/A	509	8.96%	N/A	232	6.25%	N/A	417	7.95%	N/A	1,158	7.91%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	73	1.29%	N/A	58	1.56%	N/A	58	1.11%	N/A	189	1.29%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	5,605	98.71%	N/A	3,652	98.44%	N/A	5,189	98.89%	N/A	14,446	98.71%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	467	8.22%	N/A	331	8.92%	N/A	451	8.60%	N/A	1,249	8.53%
Homelessness Category													
Homelessness	0.472	N/A	2	0.04%	N/A	5	0.13%	N/A	2	0.04%	N/A	9	0.06%
Disease Categories													
Cancer, high to very high	2.607	11	34	0.60%	17	11	0.30%	17	20	0.38%	15	65	0.44%
Cancer, low to medium	0.394	29	52	0.92%	30	25	0.67%	29	43	0.82%	29	120	0.82%
Cardiovascular, very high	2.004	35	4	0.07%	34	2	0.05%	33	5	0.10%	33	11	0.08%
Cardiovascular, medium	0.547	9	234	4.12%	7	141	3.80%	7	233	4.44%	7	608	4.15%
Cardiovascular, low	0.442	13	176	3.10%	12	105	2.83%	12	151	2.88%	12	432	2.95%
Cardiovascular, extra low	0.118	5	1,567	27.60%	6	890	23.99%	6	1,253	23.88%	6	3,710	25.35%
Cerebrovascular, medium	0.456	37	10	0.18%	36	4	0.11%	37	14	0.27%	38	28	0.19%
CNS, high	0.552	34	16	0.28%	35	5	0.13%	36	12	0.23%	35	33	0.23%
CNS, medium	0.544	30	34	0.60%	32	14	0.38%	31	30	0.57%	31	78	0.53%
CNS, low	0.425	8	302	5.32%	10	155	4.18%	8	269	5.13%	9	726	4.96%
Diabetes, type 1	1.366	17	41	0.72%	16	23	0.62%	13	48	0.91%	17	112	0.77%
Diabetes, type 2	0.241	10	531	9.35%	9	277	7.47%	10	442	8.42%	10	1,250	8.54%
Eye, very low to extra low	0.271	24	112	1.97%	28	53	1.43%	26	93	1.77%	25	258	1.76%
Gastro, high	0.864	33	12	0.21%	37	0	0.00%	38	6	0.11%	37	18	0.12%
Gastro, medium	0.585	18	84	1.48%	18	49	1.32%	18	81	1.54%	18	214	1.46%
Gastro, low	0.278	4	811	14.28%	5	407	10.97%	5	625	11.91%	4	1,843	12.59%
Genital, extra low	0.232	12	351	6.18%	11	214	5.77%	11	332	6.33%	11	897	6.13%
Infectious, very high	1.355	38	2	0.04%	37	0	0.00%	39	1	0.02%	39	3	0.02%
Infectious, high	0.426	20	79	1.39%	22	45	1.21%	23	75	1.43%	22	199	1.36%
Infectious, low to medium	0.196	28	111	1.95%	25	78	2.10%	28	122	2.33%	28	311	2.13%
Metabolic, high	0.528	27	42	0.74%	24	32	0.86%	22	62	1.18%	24	136	0.93%
Metabolic, medium	0.296	14	251	4.42%	14	150	4.04%	16	211	4.02%	14	612	4.18%
Pregnancy, complete	0.295	6	615	10.83%	4	448	12.08%	4	654	12.46%	5	1,717	11.73%
Pregnancy, incomplete	1.430	2	185	3.26%	2	148	3.99%	2	183	3.49%	2	516	3.53%
Psychiatric, high	0.665	22	48	0.85%	23	28	0.75%	27	37	0.71%	23	113	0.77%
Psychiatric, medium	0.490	25	54	0.95%	26	31	0.84%	24	53	1.01%	26	138	0.94%
Psychiatric, low	0.200	3	1,227	21.61%	3	897	24.18%	3	1,306	24.89%	3	3,430	23.44%
Pulmonary, medium to very high	0.499	21	65	1.14%	19	55	1.48%	19	79	1.51%	20	199	1.36%
Pulmonary, low	0.271	7	488	8.59%	8	270	7.28%	9	394	7.51%	8	1,152	7.87%
Rare Diseases	6.883	36	1	0.02%	37	0	0.00%	32	2	0.04%	34	3	0.02%
Renal, extra high	2.600	39	1	0.02%	37	0	0.00%	40	0	0.00%	40	1	0.01%
Renal, medium	0.539	26	46	0.81%	27	27	0.73%	25	47	0.90%	27	120	0.82%
Renal, low	0.472	19	91	1.60%	21	44	1.19%	20	76	1.45%	19	211	1.44%
Skeletal, medium	0.270	1	1,917	33.76%	1	1,132	30.51%	1	1,727	32.91%	1	4,776	32.63%
Skeletal, low	0.251	23	124	2.18%	20	86	2.32%	21	139	2.65%	21	349	2.38%
Skeletal, very low	0.189	31	96	1.69%	29	56	1.51%	30	87	1.66%	30	239	1.63%
Skin, high	1.732	40	1	0.02%	33	3	0.08%	35	5	0.10%	36	9	0.06%
Skin, low	0.891	32	18	0.32%	31	10	0.27%	34	11	0.21%	32	39	0.27%
Skin, very low	0.178	16	352	6.20%	15	228	6.15%	15	352	6.71%	16	932	6.37%
Substance abuse, very low to low	0.299	15	247	4.35%	13	154	4.15%	14	212	4.04%	13	613	4.19%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,071	18.86%	N/A	742	20.00%	N/A	1,029	19.61%	N/A	2,842	19.42%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 19 to 24 Male	0.331	N/A	10	2.84%	N/A	5	1.74%	N/A	6	1.83%	N/A	21	2.17%
Age 19 to 24 Female	1.115	N/A	20	5.68%	N/A	22	7.64%	N/A	15	4.57%	N/A	57	5.89%
Age 25 to 44 Male	0.639	N/A	65	18.47%	N/A	63	21.88%	N/A	50	15.24%	N/A	178	18.39%
Age 25 to 44 Female	0.993	N/A	212	60.23%	N/A	164	56.94%	N/A	215	65.55%	N/A	591	61.05%
Age 45 and Older Male	0.943	N/A	10	2.84%	N/A	12	4.17%	N/A	11	3.35%	N/A	33	3.41%
Age 45 and Older Female	1.245	N/A	35	9.94%	N/A	22	7.64%	N/A	31	9.45%	N/A	88	9.09%
Risk Adjustment Results													
Magnolia				Molina				United				Total	
Scored Members				Scored Members				Scored Members					
Member Months				Member Months				Member Months				14,635	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				0.966	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	
Unscored Members				Unscored Members				Unscored Members					
Member Months				Member Months				Member Months				968	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				0.942	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	
Total Members				Total Members				Total Members					
Member Months				Member Months				Member Months				15,603	
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor				0.964	
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor				1.000	

Exhibit 3E Mississippi Division of Medicaid Risk Adjustment Results MA Adult - Central Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.126	N/A	6,354	100.00%	N/A	4,607	100.00%	N/A	5,985	100.00%	N/A	16,946	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	8	0.13%	N/A	8	0.17%	N/A	10	0.17%	N/A	26	0.15%
Age 19 to 24 Female	0.460	N/A	561	8.83%	N/A	496	10.77%	N/A	564	9.42%	N/A	1,621	9.57%
Age 25 to 44 Male	0.111	N/A	299	4.71%	N/A	219	4.75%	N/A	269	4.49%	N/A	787	4.64%
Age 25 to 44 Female	0.305	N/A	4,775	75.15%	N/A	3,513	76.25%	N/A	4,443	74.24%	N/A	12,731	75.13%
Age 45 and Older Male	0.127	N/A	133	2.09%	N/A	71	1.54%	N/A	123	2.06%	N/A	327	1.93%
Age 45 and Older Female	0.326	N/A	578	9.10%	N/A	300	6.51%	N/A	576	9.62%	N/A	1,454	8.58%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	58	0.91%	N/A	70	1.52%	N/A	75	1.25%	N/A	203	1.20%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	6,296	99.09%	N/A	4,537	98.48%	N/A	5,910	98.75%	N/A	16,743	98.80%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	521	8.20%	N/A	398	8.64%	N/A	488	8.15%	N/A	1,407	8.30%
Duration Categories													
Homelessness	0.472	N/A	15	0.24%	N/A	4	0.09%	N/A	7	0.12%	N/A	26	0.15%
Disease Categories													
Cancer, high to very high	2.607	23	17	0.27%	23	10	0.22%	18	22	0.37%	18	49	0.29%
Cancer, low to medium	0.394	31	57	0.90%	31	37	0.80%	31	55	0.92%	31	149	0.88%
Cardiovascular, very high	2.004	36	4	0.06%	38	0	0.00%	35	6	0.10%	36	10	0.06%
Cardiovascular, medium	0.547	7	274	4.31%	7	173	3.76%	7	247	4.13%	7	694	4.10%
Cardiovascular, low	0.442	13	188	2.96%	16	96	2.08%	15	150	2.51%	13	434	2.56%
Cardiovascular, extra low	0.118	6	1,688	26.57%	6	1,110	24.09%	6	1,560	26.07%	6	4,358	25.72%
Cerebrovascular, medium	0.456	38	10	0.16%	36	5	0.11%	39	7	0.12%	39	22	0.13%
CNS, high	0.552	28	52	0.82%	25	39	0.85%	26	58	0.97%	27	149	0.88%
CNS, medium	0.544	32	39	0.61%	32	24	0.52%	32	29	0.48%	32	92	0.54%
CNS, low	0.425	9	332	5.23%	8	201	4.36%	8	312	5.21%	8	845	4.99%
Diabetes, type 1	1.366	14	55	0.87%	17	27	0.59%	13	50	0.84%	17	132	0.78%
Diabetes, type 2	0.241	8	617	9.71%	9	335	7.27%	9	500	8.35%	9	1,452	8.57%
Eye, very low to extra low	0.271	21	168	2.64%	27	73	1.58%	25	121	2.02%	25	362	2.14%
Gastro, high	0.864	39	4	0.06%	34	11	0.24%	36	12	0.20%	35	27	0.16%
Gastro, medium	0.585	16	122	1.92%	13	83	1.80%	17	107	1.79%	15	312	1.84%
Gastro, low	0.278	5	802	12.62%	5	524	11.37%	4	772	12.90%	5	2,098	12.38%
Genital, extra low	0.232	12	433	6.81%	11	306	6.64%	12	372	6.22%	12	1,111	6.58%
Infectious, very high	1.355	40	0	0.00%	38	0	0.00%	38	5	0.08%	40	5	0.03%
Infectious, high	0.426	24	98	1.54%	19	75	1.63%	19	97	1.59%	21	270	1.59%
Infectious, low to medium	0.196	30	122	1.92%	30	75	1.63%	29	130	2.17%	29	327	1.93%
Metabolic, high	0.528	26	74	1.16%	26	39	0.85%	27	58	0.97%	26	171	1.01%
Metabolic, medium	0.296	15	252	3.97%	15	155	3.36%	14	226	3.78%	14	633	3.74%
Pregnancy, complete	0.295	4	776	12.21%	4	598	12.98%	5	721	12.05%	4	2,095	12.35%
Pregnancy, incomplete	1.430	2	259	4.08%	2	205	4.45%	2	231	3.86%	2	695	4.10%
Psychiatric, high	0.665	20	74	1.16%	22	42	0.91%	23	51	0.85%	22	167	0.99%
Psychiatric, medium	0.490	22	91	1.43%	24	48	1.04%	22	73	1.22%	24	212	1.25%
Psychiatric, low	0.200	3	1,512	23.80%	3	1,037	22.51%	3	1,475	24.64%	3	4,024	24.04%
Pulmonary, medium to very high	0.499	19	102	1.61%	18	72	1.56%	20	79	1.32%	19	253	1.49%
Pulmonary, low	0.271	10	504	7.93%	9	302	6.56%	10	442	7.39%	10	1,248	7.36%
Rare Diseases	6.883	34	2	0.03%	38	0	0.00%	34	2	0.03%	34	4	0.02%
Renal, extra high	2.600	37	3	0.05%	35	2	0.04%	40	1	0.02%	38	6	0.04%
Renal, medium	0.539	27	64	1.01%	28	30	0.65%	28	51	0.85%	28	145	0.86%
Renal, low	0.472	18	118	1.86%	21	61	1.32%	24	71	1.19%	20	250	1.48%
Skeletal, medium	0.270	1	1,792	28.20%	1	1,198	26.00%	1	1,704	28.47%	1	4,694	27.70%
Skeletal, low	0.251	25	165	2.60%	20	127	2.76%	21	146	2.44%	23	438	2.58%
Skeletal, very low	0.189	29	127	2.00%	29	79	1.71%	30	125	2.09%	30	331	1.95%
Skin, high	1.732	35	5	0.08%	37	1	0.02%	37	4	0.07%	37	10	0.06%
Skin, low	0.891	33	23	0.36%	33	12	0.26%	33	17	0.28%	33	52	0.31%
Skin, very low	0.178	17	392	6.17%	14	266	5.77%	16	362	6.05%	16	1,020	6.02%
Substance abuse, very low to low	0.299	11	352	5.54%	12	236	5.12%	11	321	5.36%	11	909	5.36%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,236	19.45%	N/A	1,026	22.27%	N/A	1,243	20.77%	N/A	3,505	20.68%
Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 19 to 24 Male	0.331	N/A	7	1.93%	N/A	6	2.11%	N/A	8	2.25%	N/A	21	2.10%
Age 19 to 24 Female	1.115	N/A	19	5.25%	N/A	22	7.75%	N/A	16	4.49%	N/A	57	5.69%
Age 25 to 44 Male	0.639	N/A	55	15.19%	N/A	39	13.73%	N/A	42	11.80%	N/A	136	13.57%
Age 25 to 44 Female	0.993	N/A	234	64.64%	N/A	189	66.55%	N/A	231	64.89%	N/A	654	65.27%
Age 45 and Older Male	0.943	N/A	11	3.04%	N/A	12	4.23%	N/A	28	7.87%	N/A	51	5.09%
Age 45 and Older Female	1.245	N/A	36	9.94%	N/A	16	5.63%	N/A	31	8.71%	N/A	83	8.28%
Risk Adjustment Results													
Magnolia			Molina			United			Total				
Scored Members			Scored Members			Scored Members			Scored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Unscored Members			Unscored Members			Unscored Members			Unscored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Total Members			Total Members			Total Members			Total Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				

Exhibit 3F Mississippi Division of Medicaid Risk Adjustment Results MA Adult - South Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.126	N/A	6,018	100.00%	N/A	4,846	100.00%	N/A	6,989	100.00%	N/A	17,853	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	13	0.22%	N/A	22	0.45%	N/A	14	0.20%	N/A	49	0.27%
Age 19 to 24 Female	0.460	N/A	526	8.74%	N/A	443	9.14%	N/A	584	8.36%	N/A	1,553	8.70%
Age 25 to 44 Male	0.111	N/A	384	6.38%	N/A	314	6.48%	N/A	471	6.74%	N/A	1,169	6.55%
Age 25 to 44 Female	0.305	N/A	4,368	72.58%	N/A	3,556	73.38%	N/A	5,020	71.83%	N/A	12,944	72.50%
Age 45 and Older Male	0.127	N/A	155	2.58%	N/A	129	2.66%	N/A	211	3.02%	N/A	495	2.77%
Age 45 and Older Female	0.326	N/A	572	9.50%	N/A	382	7.88%	N/A	689	9.86%	N/A	1,643	9.20%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	76	1.26%	N/A	69	1.42%	N/A	82	1.17%	N/A	227	1.27%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	5,942	98.74%	N/A	4,777	98.58%	N/A	6,907	98.83%	N/A	17,626	98.73%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	506	8.41%	N/A	495	10.21%	N/A	581	8.31%	N/A	1,582	8.86%
Duration Categories													
Homelessness	0.472	N/A	11	0.18%	N/A	6	0.12%	N/A	13	0.19%	N/A	30	0.17%
Disease Categories													
Cancer, high to very high	2.607	19	22	0.37%	19	16	0.33%	18	28	0.40%	19	66	0.37%
Cancer, low to medium	0.394	30	62	1.03%	29	80	1.61%	30	80	1.14%	30	191	1.07%
Cardiovascular, very high	2.004	37	6	0.10%	34	5	0.10%	38	2	0.03%	36	13	0.07%
Cardiovascular, medium	0.547	9	268	4.45%	9	185	3.82%	8	325	4.65%	8	778	4.36%
Cardiovascular, low	0.442	13	227	3.77%	12	175	3.61%	12	288	4.12%	12	690	3.86%
Cardiovascular, extra low	0.118	7	1,473	24.48%	6	1,032	21.30%	7	1,736	24.84%	7	4,241	23.76%
Cerebrovascular, medium	0.456	40	5	0.08%	38	7	0.14%	39	8	0.11%	40	20	0.11%
CNS, high	0.552	35	22	0.37%	33	22	0.45%	35	26	0.37%	35	70	0.39%
CNS, medium	0.544	31	42	0.70%	28	38	0.78%	31	54	0.75%	31	134	0.74%
CNS, low	0.425	6	432	7.18%	7	277	5.72%	5	527	7.54%	6	1,236	6.92%
Diabetes, type 1	1.366	12	80	1.33%	17	34	0.70%	16	60	0.86%	16	174	0.97%
Diabetes, type 2	0.241	10	536	8.91%	10	363	7.49%	10	638	9.13%	11	1,537	8.51%
Eye, very low to extra low	0.271	23	168	2.79%	25	102	2.10%	27	153	2.19%	25	423	2.37%
Gastro, high	0.864	32	20	0.33%	36	9	0.19%	33	24	0.34%	33	53	0.30%
Gastro, medium	0.585	15	167	2.78%	14	122	2.52%	13	209	2.99%	13	498	2.79%
Gastro, low	0.278	4	882	14.66%	5	608	12.55%	4	957	13.69%	4	2,447	13.71%
Genital, extra low	0.232	14	427	7.10%	13	313	6.46%	14	431	6.17%	14	1,171	6.58%
Infectious, very high	1.355	38	4	0.07%	39	2	0.04%	40	2	0.03%	39	8	0.04%
Infectious, high	0.426	26	89	1.48%	26	60	1.24%	26	108	1.55%	26	257	1.44%
Infectious, low to medium	0.196	28	154	2.56%	27	110	2.27%	28	186	2.66%	28	450	2.52%
Metabolic, high	0.528	22	90	1.50%	22	61	1.26%	22	96	1.37%	22	247	1.38%
Metabolic, medium	0.296	18	221	3.67%	16	161	3.32%	17	274	3.92%	17	656	3.67%
Pregnancy, complete	0.295	5	691	11.48%	4	604	12.46%	6	722	10.33%	5	2,017	11.30%
Pregnancy, incomplete	1.430	3	192	3.19%	3	178	3.67%	3	189	2.70%	3	559	3.13%
Psychiatric, high	0.665	25	62	1.03%	24	44	0.91%	23	75	1.07%	24	181	1.01%
Psychiatric, medium	0.490	24	92	1.53%	23	61	1.26%	24	97	1.39%	23	250	1.40%
Psychiatric, low	0.200	2	1,775	29.49%	2	1,423	29.36%	2	2,318	33.17%	2	5,516	30.90%
Pulmonary, medium to very high	0.499	21	99	1.65%	20	78	1.61%	19	140	2.00%	20	317	1.78%
Pulmonary, low	0.271	8	549	9.12%	8	375	7.74%	11	549	7.86%	9	1,473	8.25%
Rare Diseases	6.883	33	2	0.03%	32	2	0.04%	32	4	0.06%	32	8	0.04%
Renal, extra high	2.600	39	2	0.03%	40	1	0.02%	37	2	0.03%	38	5	0.03%
Renal, medium	0.539	29	47	0.78%	29	63	0.68%	29	63	0.90%	29	143	0.80%
Renal, low	0.472	17	141	2.34%	21	78	1.61%	20	146	2.09%	18	365	2.04%
Skeletal, medium	0.270	1	1,583	26.30%	1	1,122	23.15%	1	1,845	26.40%	1	4,550	25.49%
Skeletal, low	0.251	20	215	3.57%	18	169	3.49%	21	236	3.38%	21	620	3.47%
Skeletal, very low	0.189	27	189	3.14%	30	102	2.10%	25	247	3.53%	27	538	3.01%
Skin, high	1.732	36	7	0.12%	37	2	0.04%	36	5	0.07%	37	14	0.08%
Skin, low	0.891	34	15	0.25%	35	10	0.21%	34	21	0.30%	34	46	0.26%
Skin, very low	0.178	16	456	7.58%	15	342	7.06%	15	539	7.71%	15	1,337	7.49%
Substance abuse, very low to low	0.299	11	432	7.18%	11	287	5.92%	9	522	7.47%	10	1,241	6.95%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,082	17.98%	N/A	992	20.47%	N/A	1,271	18.19%	N/A	3,345	18.74%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 19 to 24 Male	0.331	N/A	3	0.79%	N/A	7	2.13%	N/A	6	1.53%	N/A	16	1.46%
Age 19 to 24 Female	1.115	N/A	26	6.86%	N/A	34	10.33%	N/A	38	9.72%	N/A	98	8.92%
Age 25 to 44 Male	0.639	N/A	72	19.00%	N/A	55	16.72%	N/A	68	17.39%	N/A	195	17.74%
Age 25 to 44 Female	0.993	N/A	229	60.42%	N/A	191	58.05%	N/A	228	58.31%	N/A	648	58.96%
Age 45 and Older Male	0.943	N/A	18	4.75%	N/A	18	5.47%	N/A	17	4.35%	N/A	53	4.82%
Age 45 and Older Female	1.245	N/A	31	8.18%	N/A	24	7.29%	N/A	34	8.70%	N/A	89	8.10%
Risk Adjustment Results													
		Magnolia			Molina			United			Total		
Scored Members													
Member Months		6,018			4,846			6,989			17,853		
Unadjusted Plan Factor		1.030			0.968			1.019			1.009		
Budget Neutral Plan Factor		1.021			0.959			1.010			1.000		
Unscored Members													
Member Months		379			329			391			1,099		
Unadjusted Plan Factor		0.947			0.948			0.953			0.949		
Budget Neutral Plan Factor		0.998			0.998			1.004			1.000		
Total Members													
Member Months		0.000			0.000			0.000			0.000		
Unadjusted Plan Factor		6.397			5.175			7.380			18.922		
Budget Neutral Plan Factor		1.025			0.967			1.016			1.006		
		1.020			0.962			1.010			1.000		

Exhibit 3G

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - North Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members										Total	
		Magnolia			Molina			United					
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	29,017	100.00%	N/A	16,168	100.00%	N/A	27,064	100.00%	N/A	72,249	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	6,696	23.08%	N/A	5,302	32.79%	N/A	6,619	24.46%	N/A	18,617	25.77%
Age 5 to 14 Male	0.038	N/A	7,852	27.06%	N/A	4,065	25.14%	N/A	7,140	26.38%	N/A	19,057	26.38%
Age 5 to 14 Female	0.112	N/A	8,132	28.02%	N/A	4,180	26.85%	N/A	7,408	27.37%	N/A	19,720	27.29%
Age 15 to 18 Male	0.000	N/A	3,100	10.68%	N/A	1,276	7.89%	N/A	2,884	10.66%	N/A	7,260	10.05%
Age 15 to 18 Female	0.257	N/A	3,237	11.16%	N/A	1,345	8.32%	N/A	3,013	11.13%	N/A	7,595	10.51%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	188	0.65%	N/A	132	0.82%	N/A	191	0.71%	N/A	511	0.71%
Diagnosis Period Duration, 7 Months	0.098	N/A	194	0.67%	N/A	154	0.95%	N/A	175	0.65%	N/A	523	0.72%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	28,635	98.68%	N/A	15,882	98.23%	N/A	26,698	98.65%	N/A	71,215	98.57%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	1,633	5.63%	N/A	1,121	6.93%	N/A	1,465	5.41%	N/A	4,219	5.84%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	13	32	0.11%	14	16	0.10%	11	43	0.16%	12	91	0.13%
Cardiovascular, very high	1.724	39	3	0.01%	39	2	0.01%	37	4	0.01%	37	9	0.01%
Cardiovascular, medium	0.733	11	159	0.55%	10	80	0.49%	12	137	0.51%	11	376	0.52%
Cardiovascular, low	0.450	9	297	1.02%	8	191	1.18%	9	306	1.13%	9	794	1.10%
Cardiovascular, extra low	0.412	12	254	0.88%	17	104	0.64%	13	229	0.85%	13	587	0.81%
Cerebrovascular, medium	2.021	36	5	0.02%	41	1	0.01%	39	1	0.00%	39	7	0.01%
CNS, high	2.129	37	3	0.01%	34	4	0.02%	36	6	0.02%	36	13	0.02%
CNS, medium	1.173	27	29	0.10%	28	16	0.10%	27	36	0.13%	26	81	0.11%
CNS, low	0.751	5	478	1.65%	5	226	1.40%	5	447	1.65%	5	1,151	1.59%
DD, low	1.630	14	53	0.18%	12	32	0.20%	17	45	0.17%	14	130	0.18%
DD, medium	6.081	41	0	0.00%	31	2	0.01%	41	0	0.00%	41	2	0.00%
Diabetes, type 1	3.867	6	60	0.21%	9	19	0.12%	6	70	0.26%	6	149	0.21%
Diabetes, type 2	0.479	30	60	0.21%	32	24	0.15%	33	49	0.18%	31	133	0.18%
Eye, very low to extra low	0.256	25	153	0.53%	25	88	0.54%	26	166	0.61%	25	407	0.56%
Gastro, high	3.331	24	14	0.05%	22	9	0.06%	22	17	0.06%	24	40	0.06%
Gastro, medium	1.271	20	48	0.17%	21	26	0.16%	23	42	0.16%	21	116	0.16%
Gastro, low	0.340	4	1,265	4.36%	4	719	4.45%	4	1,259	4.65%	4	3,243	4.49%
Genital, extra low	0.472	18	153	0.53%	11	118	0.73%	16	170	0.63%	15	441	0.61%
Hematological, extra high	3.863	35	3	0.01%	38	1	0.01%	30	7	0.03%	34	11	0.02%
Hematological, very high	3.011	34	5	0.02%	37	2	0.01%	35	5	0.02%	35	12	0.02%
Hematological, low to medium	0.381	16	199	0.69%	15	115	0.71%	18	190	0.70%	18	504	0.70%
Infectious, high to very high	0.682	26	57	0.20%	27	31	0.19%	31	39	0.14%	28	127	0.18%
Infectious, medium	0.176	21	345	1.19%	18	233	1.44%	21	324	1.20%	19	902	1.25%
Metabolic, high	0.754	15	103	0.35%	20	44	0.27%	15	110	0.41%	17	257	0.36%
Metabolic, medium	0.391	29	76	0.26%	29	24	0.15%	28	74	0.27%	29	206	0.29%
Pregnancy, complete	0.277	31	86	0.30%	33	41	0.25%	32	85	0.31%	32	212	0.29%
Pregnancy, incomplete	3.124	10	41	0.14%	16	14	0.09%	10	43	0.16%	10	98	0.14%
Psychiatric, high	3.507	28	9	0.03%	36	2	0.01%	24	14	0.05%	27	25	0.03%
Psychiatric, medium	1.859	7	124	0.43%	6	67	0.41%	8	103	0.38%	7	294	0.41%
Psychiatric, low	0.930	1	4,356	15.01%	1	1,980	12.25%	1	4,058	14.99%	1	10,394	14.39%
Pulmonary, very high	1.975	23	24	0.08%	19	19	0.12%	19	34	0.13%	20	77	0.11%
Pulmonary, medium to high	0.457	17	159	0.55%	13	110	0.68%	14	183	0.68%	16	452	0.63%
Pulmonary, low	0.321	3	2,554	8.80%	3	1,224	7.57%	3	2,272	8.39%	3	6,050	8.37%
Rare Diseases	7.505	32	3	0.01%	35	1	0.01%	34	3	0.01%	33	7	0.01%
Renal, extra high	15.124	41	0	0.00%	30	1	0.01%	41	0	0.00%	38	1	0.00%
Renal, medium	1.178	33	19	0.07%	29	13	0.08%	29	24	0.09%	30	56	0.08%
Renal, low	0.277	19	238	0.82%	23	107	0.66%	25	164	0.61%	22	509	0.70%
Skeletal, very low to medium	0.319	2	4,684	16.14%	2	2,433	15.05%	2	4,613	17.04%	2	11,730	16.24%
Skin, high	0.773	38	7	0.02%	40	3	0.02%	38	7	0.03%	40	17	0.02%
Skin, low	0.487	40	8	0.03%	42	2	0.01%	40	2	0.01%	42	12	0.02%
Skin, very low	0.190	8	1,081	3.73%	7	612	3.79%	7	1,057	3.91%	8	2,750	3.81%
Substance abuse, very low to low	1.082	22	45	0.16%	24	21	0.13%	20	61	0.23%	23	127	0.18%
Population Statistics													
No Classified Disease Categories	N/A	N/A	15,348	52.89%	N/A	8,836	54.65%	N/A	14,189	52.43%	N/A	38,373	53.11%

	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	244	26.87%	N/A	189	27.39%	N/A	224	25.84%	N/A	657	26.65%
Age 5 to 14 Male	0.957	N/A	233	25.66%	N/A	188	27.25%	N/A	239	27.57%	N/A	660	26.77%
Age 5 to 14 Female	0.953	N/A	265	29.19%	N/A	183	26.52%	N/A	218	25.14%	N/A	666	27.02%
Age 15 to 18 Male	0.944	N/A	72	7.93%	N/A	67	9.71%	N/A	63	7.27%	N/A	202	8.19%
Age 15 to 18 Female	1.321	N/A	94	10.35%	N/A	63	9.13%	N/A	123	14.19%	N/A	280	11.36%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		29,017	16,168	27,064
Unadjusted Plan Factor		1.007	0.970	1.020
Budget Neutral Plan Factor		1.004	0.966	1.016
Unscored Members				
Member Months		908	690	867
Unadjusted Plan Factor		0.997	0.993	1.011
Budget Neutral Plan Factor		0.996	0.992	1.010
Total Members				
Member Months		29,925	16,858	27,931
Unadjusted Plan Factor		1.007	0.971	1.020
Budget Neutral Plan Factor		1.003	0.967	1.016

Exhibit 3H

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - Central Region - 03 to 04 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	34,402	100.00%	N/A	19,834	100.00%	N/A	31,627	100.00%	N/A	85,863	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	7,760	22.56%	N/A	6,491	32.73%	N/A	8,046	25.44%	N/A	22,297	25.97%
Age 5 to 14 Male	0.038	N/A	9,226	26.82%	N/A	4,902	24.72%	N/A	8,271	26.15%	N/A	22,399	26.09%
Age 5 to 14 Female	0.112	N/A	9,565	27.80%	N/A	5,107	25.75%	N/A	8,479	26.81%	N/A	23,151	26.96%
Age 15 to 18 Male	0.000	N/A	3,805	11.06%	N/A	1,674	8.44%	N/A	3,300	10.43%	N/A	8,779	10.22%
Age 15 to 18 Female	0.257	N/A	4,046	11.76%	N/A	1,660	8.37%	N/A	3,531	11.16%	N/A	9,237	10.76%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	180	0.52%	N/A	165	0.83%	N/A	203	0.64%	N/A	548	0.64%
Diagnosis Period Duration, 7 Months	0.098	N/A	195	0.57%	N/A	156	0.79%	N/A	172	0.54%	N/A	523	0.61%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	34,027	98.91%	N/A	19,513	98.39%	N/A	31,252	98.81%	N/A	84,792	98.75%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	2,047	5.95%	N/A	1,467	7.40%	N/A	1,866	5.90%	N/A	5,380	6.27%
Homelessness Category													
Homelessness Category	1.243	N/A	3	0.01%	N/A	2	0.01%	N/A	5	0.02%	N/A	10	0.01%
Disease Categories													
Cancer, medium to very high	2.895	12	43	0.12%	11	23	0.12%	12	40	0.13%	12	106	0.12%
Cardiovascular, very high	1.724	37	5	0.01%	38	1	0.01%	39	5	0.02%	38	11	0.01%
Cardiovascular, medium	0.733	16	133	0.39%	12	90	0.45%	14	143	0.45%	15	366	0.43%
Cardiovascular, low	0.450	9	404	1.17%	9	202	1.02%	9	372	1.18%	9	978	1.14%
Cardiovascular, extra low	0.412	10	328	0.95%	14	147	0.74%	11	301	0.95%	11	776	0.90%
Cerebrovascular, medium	2.021	40	3	0.01%	37	1	0.01%	41	3	0.01%	40	7	0.01%
CNS, high	2.129	28	20	0.06%	32	6	0.03%	26	20	0.06%	28	46	0.05%
CNS, medium	1.173	25	53	0.15%	25	19	0.10%	27	35	0.11%	26	107	0.12%
CNS, low	0.751	5	578	1.68%	5	318	1.60%	5	549	1.74%	5	1,445	1.68%
DD, low	1.630	14	67	0.19%	18	32	0.16%	13	69	0.22%	14	168	0.20%
DD, medium	6.081	39	1	0.00%	40	0	0.00%	40	1	0.00%	41	2	0.00%
Diabetes, type 1	3.867	7	75	0.22%	8	31	0.16%	6	79	0.25%	7	185	0.22%
Diabetes, type 2	0.479	30	72	0.21%	31	31	0.16%	29	67	0.21%	30	170	0.20%
Eye, very low to extra low	0.256	24	280	0.81%	23	111	0.56%	23	224	0.71%	23	615	0.72%
Gastro, high	3.331	23	22	0.06%	27	6	0.03%	24	17	0.05%	24	45	0.05%
Gastro, medium	1.271	18	68	0.20%	22	27	0.14%	22	47	0.15%	22	142	0.17%
Gastro, low	0.340	4	1,499	4.36%	4	952	4.80%	4	1,487	4.70%	4	3,938	4.59%
Genital, extra low	0.472	17	202	0.59%	13	134	0.68%	16	179	0.57%	17	515	0.60%
Hematological, extra high	3.863	38	2	0.01%	33	3	0.02%	36	3	0.01%	35	8	0.01%
Hematological, very high	3.011	41	2	0.01%	36	1	0.01%	38	3	0.01%	39	6	0.01%
Hematological, low to medium	0.381	15	263	0.76%	15	156	0.79%	18	221	0.70%	16	640	0.75%
Infectious, high to very high	0.682	33	43	0.12%	29	25	0.13%	31	36	0.11%	31	104	0.12%
Infectious, medium	0.176	21	448	1.30%	17	310	1.56%	20	412	1.30%	19	1,170	1.36%
Metabolic, high	0.754	20	110	0.32%	20	55	0.28%	19	103	0.33%	20	268	0.31%
Metabolic, medium	0.391	27	116	0.34%	28	51	0.26%	28	91	0.29%	27	258	0.30%
Pregnancy, complete	0.277	32	107	0.31%	30	54	0.27%	32	83	0.26%	32	244	0.28%
Pregnancy, incomplete	3.124	11	43	0.12%	16	19	0.10%	10	42	0.13%	10	104	0.12%
Psychiatric, high	3.507	26	16	0.05%	26	6	0.03%	25	14	0.04%	25	36	0.04%
Psychiatric, medium	1.859	6	162	0.47%	6	86	0.43%	7	143	0.45%	6	391	0.46%
Psychiatric, low	0.930	1	5,184	15.07%	1	2,190	11.04%	1	4,552	14.39%	1	11,926	13.89%
Pulmonary, very high	1.975	29	20	0.06%	24	13	0.07%	30	15	0.05%	29	48	0.06%
Pulmonary, medium to high	0.457	13	251	0.73%	10	170	0.86%	15	216	0.68%	13	637	0.74%
Pulmonary, low	0.321	3	2,919	8.48%	3	1,441	7.27%	3	2,713	8.58%	3	7,073	8.24%
Rare Diseases	7.505	31	4	0.01%	40	0	0.00%	35	2	0.01%	34	6	0.01%
Renal, extra high	15.124	35	1	0.00%	40	0	0.00%	34	1	0.00%	36	2	0.00%
Renal, medium	1.178	34	18	0.05%	34	7	0.04%	33	15	0.05%	33	40	0.05%
Renal, low	0.277	19	301	0.87%	21	147	0.74%	21	249	0.79%	21	697	0.81%
Skeletal, very low to medium	0.319	2	4,719	13.72%	2	2,699	13.61%	2	4,686	14.82%	2	12,104	14.10%
Skin, high	0.773	42	3	0.01%	39	2	0.01%	42	2	0.01%	42	7	0.01%
Skin, low	0.487	36	21	0.06%	35	16	0.08%	37	19	0.06%	37	56	0.07%
Skin, very low	0.190	8	1,221	3.55%	7	703	3.54%	8	1,126	3.56%	8	3,050	3.55%
Substance abuse, very low to low	1.082	22	71	0.21%	19	42	0.21%	17	78	0.25%	18	191	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	18,545	53.91%	N/A	11,065	55.79%	N/A	17,141	54.20%	N/A	46,751	54.45%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	198	29.12%	N/A	200	30.08%	N/A	177	23.38%	N/A	575	27.35%
Age 5 to 14 Male	0.957	N/A	180	26.47%	N/A	184	27.67%	N/A	215	28.40%	N/A	579	27.55%
Age 5 to 14 Female	0.953	N/A	189	27.79%	N/A	164	24.66%	N/A	209	27.61%	N/A	562	26.74%
Age 15 to 18 Male	0.944	N/A	51	7.50%	N/A	55	8.27%	N/A	73	9.64%	N/A	179	8.52%
Age 15 to 18 Female	1.321	N/A	62	9.12%	N/A	62	9.32%	N/A	83	10.96%	N/A	207	9.85%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia		Molina		United		Total	
Scored Members									
Member Months		34,402		19,834		31,627		85,863	
Unadjusted Plan Factor		1.004		0.952		1.005		0.993	
Budget Neutral Plan Factor		1.012		0.959		1.013		1.000	
Unscored Members									
Member Months		680		665		757		2,102	
Unadjusted Plan Factor		0.994		0.994		0.999		0.996	
Budget Neutral Plan Factor		0.998		0.999		1.003		1.000	
Total Members									
Member Months		35,082		20,499		32,384		87,965	
Unadjusted Plan Factor		1.004		0.953		1.005		0.993	
Budget Neutral Plan Factor		1.012		0.961		1.012		1.000	

Exhibit 3I
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - South Region - Q3 to Q4 2024 Prospective Risk Scores
CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	28,413	100.00%	N/A	18,084	100.00%	N/A	30,615	100.00%	N/A	77,112	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	6,126	21.56%	N/A	5,852	32.36%	N/A	6,849	22.37%	N/A	18,827	24.42%
Age 5 to 14 Male	0.038	N/A	7,881	27.74%	N/A	4,555	25.19%	N/A	8,273	27.02%	N/A	20,709	26.86%
Age 5 to 14 Female	0.112	N/A	8,069	28.40%	N/A	4,541	25.11%	N/A	8,517	27.82%	N/A	21,127	27.40%
Age 15 to 18 Male	0.000	N/A	3,068	10.80%	N/A	1,553	8.59%	N/A	3,412	11.14%	N/A	8,033	10.42%
Age 15 to 18 Female	0.257	N/A	3,269	11.51%	N/A	1,583	8.75%	N/A	3,564	11.64%	N/A	8,416	10.91%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	199	0.70%	N/A	139	0.77%	N/A	201	0.66%	N/A	539	0.70%
Diagnosis Period Duration, 7 Months	0.098	N/A	160	0.56%	N/A	151	0.83%	N/A	181	0.59%	N/A	492	0.64%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	28,054	98.74%	N/A	17,794	98.40%	N/A	30,233	98.75%	N/A	76,081	98.66%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	1,614	5.68%	N/A	1,324	7.32%	N/A	1,691	5.52%	N/A	4,629	6.00%
Homelessness Category													
Homelessness Cases	1.243	N/A	1	0.00%	N/A	1	0.01%	N/A	2	0.01%	N/A	4	0.01%
Disease Categories													
Cancer, medium to very high	2.895	15	31	0.11%	9	26	0.14%	12	41	0.13%	11	98	0.13%
Cardiovascular, very high	1.724	41	0	0.00%	37	3	0.02%	39	4	0.01%	39	7	0.01%
Cardiovascular, medium	0.733	13	130	0.46%	15	67	0.37%	19	119	0.39%	15	316	0.41%
Cardiovascular, low	0.450	10	271	0.95%	10	164	0.91%	9	324	1.06%	9	759	0.98%
Cardiovascular, extra low	0.412	12	248	0.87%	16	114	0.63%	10	300	0.98%	13	662	0.86%
Cerebrovascular, medium	2.021	39	1	0.00%	41	0	0.00%	36	6	0.02%	38	7	0.01%
CNS, high	2.129	30	9	0.03%	36	4	0.02%	38	5	0.02%	35	18	0.02%
CNS, medium	1.173	21	50	0.18%	27	23	0.13%	24	54	0.18%	25	127	0.16%
CNS, low	0.751	6	403	1.42%	6	277	1.53%	6	447	1.46%	6	1,127	1.46%
DD, low	1.630	24	34	0.12%	19	27	0.15%	14	61	0.20%	18	122	0.16%
DD, medium	6.081	37	1	0.00%	41	0	0.00%	42	0	0.00%	41	1	0.00%
Diabetes, type 1	3.867	5	108	0.38%	5	54	0.30%	5	145	0.47%	5	307	0.40%
Diabetes, type 2	0.479	32	37	0.13%	34	23	0.13%	33	44	0.14%	32	104	0.13%
Eye, very low to extra low	0.256	27	184	0.65%	25	130	0.72%	26	225	0.73%	26	539	0.70%
Gastro, high	3.331	25	16	0.06%	24	11	0.06%	18	27	0.09%	21	54	0.07%
Gastro, medium	1.271	20	48	0.17%	23	31	0.17%	21	58	0.19%	22	137	0.18%
Gastro, low	0.340	4	1,580	5.56%	4	1,046	5.78%	4	1,831	5.88%	4	4,457	5.78%
Genital, extra low	0.472	16	156	0.55%	12	111	0.61%	16	199	0.65%	16	466	0.60%
Hematological, extra high	3.863	36	2	0.01%	32	4	0.02%	37	3	0.01%	36	9	0.01%
Hematological, very high	3.011	31	6	0.02%	30	7	0.04%	32	7	0.02%	31	20	0.03%
Hematological, low to medium	0.381	19	182	0.64%	18	121	0.67%	22	183	0.60%	20	486	0.63%
Infectious, high to very high	0.682	29	37	0.13%	29	32	0.18%	28	66	0.22%	29	135	0.18%
Infectious, medium	0.176	22	322	1.13%	20	241	1.33%	23	361	1.18%	24	924	1.20%
Metabolic, high	0.754	18	94	0.33%	13	69	0.38%	17	123	0.40%	17	286	0.37%
Metabolic, medium	0.391	26	134	0.47%	14	128	0.71%	25	157	0.51%	23	419	0.54%
Pregnancy, complete	0.277	33	55	0.19%	35	39	0.22%	34	75	0.24%	33	169	0.22%
Pregnancy, incomplete	3.124	9	46	0.16%	17	15	0.08%	11	39	0.13%	10	100	0.13%
Psychiatric, high	3.507	23	16	0.06%	31	5	0.03%	29	11	0.04%	27	32	0.04%
Psychiatric, medium	1.859	7	148	0.52%	7	93	0.51%	7	164	0.54%	7	405	0.53%
Psychiatric, low	0.930	1	4,962	17.46%	1	2,490	13.77%	1	5,518	18.02%	1	12,970	16.82%
Pulmonary, very high	1.975	28	15	0.05%	28	12	0.07%	27	25	0.08%	28	52	0.07%
Pulmonary, medium to high	0.457	11	249	0.88%	11	154	0.85%	15	212	0.69%	12	615	0.80%
Pulmonary, low	0.321	3	2,284	8.04%	3	1,251	6.92%	3	2,508	8.19%	3	6,043	7.84%
Rare Diseases	7.505	34	2	0.01%	26	4	0.02%	30	4	0.01%	30	10	0.01%
Renal, extra high	15.124	41	0	0.00%	33	1	0.01%	35	1	0.00%	37	2	0.00%
Renal, medium	1.178	35	11	0.04%	38	3	0.02%	31	21	0.07%	34	35	0.05%
Renal, low	0.277	17	264	0.93%	21	149	0.82%	20	281	0.92%	19	694	0.90%
Skeletal, very low to medium	0.319	2	3,232	11.38%	2	1,857	10.27%	2	3,628	11.85%	2	8,717	11.30%
Skin, high	0.773	38	3	0.01%	39	4	0.02%	40	6	0.02%	40	13	0.02%
Skin, low	0.487	40	3	0.01%	40	2	0.01%	41	6	0.02%	42	11	0.01%
Skin, very low	0.190	8	1,228	4.32%	8	727	4.02%	8	1,345	4.39%	8	3,300	4.28%
Substance abuse, very low to low	1.082	14	86	0.30%	22	37	0.20%	13	95	0.31%	14	218	0.28%
Population Statistics													
No Classified Disease Categories	N/A	N/A	15,172	53.40%	N/A	10,137	56.06%	N/A	16,212	52.95%	N/A	41,521	53.85%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia		Molina		United		Total		Total		Total	
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	248	28.28%	N/A	272	32.89%	N/A	236	27.35%	N/A	756	29.45%
Age 5 to 14 Male	0.957	N/A	260	29.65%	N/A	195	23.58%	N/A	226	26.19%	N/A	681	26.53%
Age 5 to 14 Female	0.953	N/A	229	26.11%	N/A	210	25.39%	N/A	215	24.91%	N/A	654	25.48%
Age 15 to 18 Male	0.944	N/A	56	6.39%	N/A	79	9.55%	N/A	80	9.27%	N/A	215	8.38%
Age 15 to 18 Female	1.321	N/A	84	9.58%	N/A	71	8.59%	N/A	106	12.28%	N/A	261	10.17%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia		Molina		United		Total	
Scored Members									
Member Months		28,413		18,084		30,615		77,112	
Unadjusted Plan Factor		1.026		0.982		1.046		1.023	
Budget Neutral Plan Factor		1.002		0.960		1.022		1.000	
Unscored Members									
Member Months		877		827		863		2,567	
Unadjusted Plan Factor		0.995		0.992		1.005		0.997	
Budget Neutral Plan Factor		0.998		0.995		1.007		1.000	
Total Members									
Member Months		29,290		18,911		31,478		79,679	
Unadjusted Plan Factor		1.025		0.983		1.044		1.023	
Budget Neutral Plan Factor		1.002		0.961		1.021		1.000	

Exhibit 3J Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - North Region - Q3 to Q4 2024 Prospective Risk Scores CY 2023 Diagnosis Period - June 2024 Enrollment Period													
Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,692	100.00%	N/A	1,860	100.00%	N/A	3,721	100.00%	N/A	9,273	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,206	32.67%	N/A	648	34.84%	N/A	1,296	34.84%	N/A	3,150	33.97%
Age 5 to 14 Female	0.112	N/A	1,275	34.53%	N/A	633	34.03%	N/A	1,228	33.00%	N/A	3,136	33.82%
Age 15 to 18 Male	0.000	N/A	617	16.71%	N/A	274	14.73%	N/A	585	15.72%	N/A	1,476	15.92%
Age 15 to 18 Female	0.257	N/A	594	16.09%	N/A	305	16.40%	N/A	612	16.45%	N/A	1,511	16.29%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	15	0.41%	N/A	28	1.51%	N/A	29	0.78%	N/A	72	0.78%
Diagnosis Period Duration, 7 Months	0.098	N/A	17	0.46%	N/A	21	1.13%	N/A	16	0.43%	N/A	54	0.58%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,660	99.13%	N/A	1,811	97.37%	N/A	3,676	98.79%	N/A	9,147	98.64%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	166	4.50%	N/A	117	6.29%	N/A	189	5.08%	N/A	472	5.09%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	22	2	0.05%	14	2	0.11%	16	3	0.08%	18	7	0.08%
Cardiovascular, very high	1.724	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Cardiovascular, medium	0.733	14	17	0.46%	23	4	0.22%	14	13	0.35%	13	34	0.37%
Cardiovascular, low	0.450	9	42	1.14%	10	21	1.13%	10	35	0.94%	10	98	1.06%
Cardiovascular, extra low	0.412	10	45	1.22%	9	27	1.45%	9	45	1.21%	9	117	1.26%
Cerebrovascular, medium	2.021	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
CNS, high	2.129	32	1	0.03%	24	1	0.05%	29	2	0.05%	31	4	0.04%
CNS, medium	1.173	19	7	0.19%	17	4	0.22%	25	4	0.11%	20	15	0.16%
CNS, low	0.751	6	37	1.00%	5	21	1.13%	6	51	1.37%	6	118	1.18%
DD, low	1.630	13	9	0.24%	16	3	0.16%	23	3	0.08%	14	15	0.16%
DD, medium	6.081	36	0	0.00%	12	1	0.05%	36	0	0.01%	33	1	0.01%
Diabetes, type 1	3.867	5	9	0.24%	6	4	0.22%	4	11	0.30%	5	24	0.26%
Diabetes, type 2	0.479	30	8	0.22%	26	4	0.22%	31	6	0.16%	30	18	0.19%
Eye, very low to extra low	0.256	18	34	0.92%	30	5	0.27%	28	17	0.46%	23	56	0.60%
Gastro, high	3.331	21	2	0.05%	20	1	0.05%	12	3	0.08%	19	6	0.06%
Gastro, medium	1.271	12	13	0.35%	15	4	0.22%	33	2	0.05%	15	19	0.20%
Gastro, low	0.340	4	111	3.01%	4	55	2.96%	5	117	3.14%	4	283	3.05%
Genital, extra low	0.472	24	10	0.27%	21	7	0.38%	24	10	0.29%	24	27	0.29%
Hematological, extra high	3.863	29	1	0.03%	33	0	0.00%	30	1	0.03%	32	2	0.02%
Hematological, very high	3.011	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Hematological, low to medium	0.381	23	15	0.41%	19	9	0.48%	18	21	0.56%	22	45	0.49%
Infectious, high to very high	0.682	25	7	0.19%	25	3	0.16%	27	7	0.19%	26	17	0.18%
Infectious, medium	0.176	33	12	0.33%	32	4	0.22%	32	16	0.43%	34	32	0.35%
Metabolic, high	0.754	11	24	0.65%	13	8	0.43%	17	11	0.30%	12	43	0.46%
Metabolic, medium	0.391	26	11	0.30%	28	4	0.22%	26	12	0.32%	27	27	0.29%
Pregnancy, complete	0.277	34	3	0.08%	27	6	0.32%	34	5	0.13%	35	14	0.15%
Pregnancy, incomplete	3.124	8	7	0.19%	11	2	0.11%	15	3	0.08%	11	12	0.13%
Psychiatric, high	3.507	20	2	0.05%	18	1	0.05%	21	2	0.05%	21	5	0.05%
Psychiatric, medium	1.859	15	6	0.16%	7	8	0.43%	7	18	0.48%	8	32	0.35%
Psychiatric, low	0.930	1	663	17.96%	1	320	17.20%	1	736	19.78%	1	1,719	18.54%
Pulmonary, very high	1.975	28	2	0.05%	33	0	0.00%	19	4	0.11%	25	6	0.06%
Pulmonary, medium to high	0.457	27	9	0.24%	29	3	0.16%	22	11	0.30%	28	23	0.25%
Pulmonary, low	0.321	3	346	9.37%	3	146	7.85%	3	313	8.41%	3	805	8.68%
Rare Diseases	7.505	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Renal, extra high	15.124	36	0	0.00%	33	0	0.00%	36	0	0.00%	38	0	0.00%
Renal, medium	1.178	31	2	0.05%	33	0	0.00%	20	6	0.16%	29	8	0.09%
Renal, low	0.277	17	32	0.87%	22	11	0.59%	13	36	0.97%	16	79	0.85%
Skeletal, very low to medium	0.319	2	678	18.36%	2	286	15.38%	2	660	17.74%	2	1,624	17.51%
Skin, high	0.773	35	1	0.03%	33	0	0.00%	36	0	0.00%	37	1	0.01%
Skin, low	0.487	36	0	0.00%	33	0	0.00%	35	1	0.03%	36	1	0.01%
Skin, very low	0.190	7	140	3.79%	8	74	3.98%	8	149	4.00%	7	363	3.91%
Substance abuse, very low to low	1.082	16	9	0.24%	31	1	0.05%	11	10	0.27%	17	20	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,901	51.49%	N/A	1,012	54.41%	N/A	1,899	51.03%	N/A	4,812	51.89%
Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	38	33.63%	N/A	33	37.08%	N/A	38	31.40%	N/A	109	33.75%
Age 5 to 14 Female	0.953	N/A	48	42.48%	N/A	35	39.33%	N/A	53	43.80%	N/A	136	42.11%
Age 15 to 18 Male	0.944	N/A	11	9.73%	N/A	11	12.36%	N/A	14	11.57%	N/A	36	11.15%
Age 15 to 18 Female	1.321	N/A	16	14.16%	N/A	10	11.24%	N/A	16	13.22%	N/A	42	13.00%
Risk Adjustment Results													
		Magnolia			Molina			United			Total		
Scored Members													
Member Months		3,692			1,860			3,721			9,273		
Unadjusted Plan Factor		1.022			0.991			1.033			1.020		
Budget Neutral Plan Factor		1.002			0.972			1.012			1.000		
Unscored Members													
Member Months		113			89			121			323		
Unadjusted Plan Factor		1.005			0.995			1.002			1.001		
Budget Neutral Plan Factor		1.004			0.994			1.001			1.000		
Total Members													
Member Months		3,805			1,949			3,842			9,596		
Unadjusted Plan Factor		1.021			0.992			1.032			1.019		
Budget Neutral Plan Factor		1.002			0.973			1.012			1.000		

Exhibit 3K

Mississippi Division of Medicaid

Risk Adjustment Results

Ouasi-CHIP - Central Region - 03 to 04 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Total					
		Magnolia			Molina			United		Total			
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	4,220	100.00%	N/A	2,109	100.00%	N/A	4,179	100.00%	N/A	10,508	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,446	34.27%	N/A	740	35.09%	N/A	1,401	33.52%	N/A	3,587	34.45%
Age 5 to 14 Female	0.112	N/A	1,375	32.58%	N/A	736	34.90%	N/A	1,401	33.52%	N/A	3,512	33.42%
Age 15 to 18 Male	0.000	N/A	684	16.21%	N/A	325	15.41%	N/A	705	16.87%	N/A	1,714	16.31%
Age 15 to 18 Female	0.257	N/A	715	16.94%	N/A	308	14.60%	N/A	672	16.08%	N/A	1,695	16.13%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	22	0.52%	N/A	10	0.47%	N/A	16	0.38%	N/A	48	0.46%
Diagnosis Period Duration, 7 Months	0.098	N/A	17	0.40%	N/A	13	0.62%	N/A	26	0.62%	N/A	56	0.53%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	4,181	99.08%	N/A	2,086	98.91%	N/A	4,137	98.99%	N/A	10,404	99.01%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	187	4.43%	N/A	180	8.53%	N/A	203	4.86%	N/A	570	5.42%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	8	10	0.24%	9	4	0.19%	9	9	0.22%	8	23	0.22%
Cardiovascular, very high	1.724	35	1	0.02%	31	1	0.05%	35	0	0.00%	37	2	0.02%
Cardiovascular, medium	0.733	13	21	0.50%	16	7	0.33%	16	17	0.41%	14	45	0.43%
Cardiovascular, low	0.450	12	38	0.90%	10	20	0.95%	10	53	1.27%	10	111	1.06%
Cardiovascular, extra low	0.412	11	53	1.26%	12	19	0.90%	12	53	1.27%	10	125	1.19%
Cerebrovascular, medium	2.021	30	2	0.05%	37	0	0.00%	35	0	0.00%	35	2	0.02%
CNS, high	2.129	34	1	0.02%	14	3	0.14%	24	3	0.07%	26	7	0.07%
CNS, medium	1.173	14	13	0.31%	21	3	0.14%	21	7	0.17%	17	23	0.22%
CNS, low	0.751	5	62	1.47%	5	29	1.38%	4	63	1.47%	4	154	1.47%
DD, low	1.630	24	5	0.12%	26	2	0.09%	11	14	0.34%	13	21	0.20%
DD, medium	6.081	39	0	0.00%	37	0	0.00%	35	0	0.00%	40	0	0.00%
Diabetes, type 1	3.867	6	8	0.19%	4	7	0.33%	5	11	0.26%	6	26	0.25%
Diabetes, type 2	0.479	29	10	0.24%	33	2	0.09%	27	9	0.22%	30	21	0.20%
Eye, very low to extra low	0.256	19	40	0.95%	24	13	0.62%	19	37	0.89%	20	90	0.86%
Gastro, high	3.331	20	3	0.07%	23	1	0.05%	29	1	0.02%	25	5	0.05%
Gastro, medium	1.271	16	10	0.24%	15	5	0.24%	15	10	0.24%	15	25	0.24%
Gastro, low	0.340	4	139	3.29%	6	54	2.56%	6	116	2.78%	5	309	2.94%
Genital, extra low	0.472	22	20	0.47%	25	7	0.33%	23	15	0.36%	24	42	0.40%
Hematological, extra high	3.863	39	0	0.00%	37	0	0.00%	22	2	0.05%	31	2	0.02%
Hematological, very high	3.011	39	0	0.00%	37	0	0.00%	35	0	0.00%	40	0	0.00%
Hematological, low to medium	0.381	18	28	0.66%	22	9	0.43%	25	16	0.38%	23	53	0.50%
Infectious, high to very high	0.682	27	9	0.21%	28	3	0.14%	28	6	0.14%	27	18	0.17%
Infectious, medium	0.176	37	7	0.17%	35	3	0.14%	33	8	0.19%	38	18	0.17%
Metabolic, high	0.754	17	15	0.36%	11	11	0.52%	18	13	0.31%	16	39	0.37%
Metabolic, medium	0.391	32	9	0.21%	30	5	0.24%	26	15	0.36%	29	29	0.28%
Pregnancy, complete	0.277	31	14	0.33%	32	7	0.28%	31	6	0.17%	32	17	0.20%
Pregnancy, incomplete	3.124	10	8	0.19%	27	1	0.05%	13	5	0.12%	12	24	0.13%
Psychiatric, high	3.507	26	2	0.05%	37	0	0.00%	35	0	0.00%	34	2	0.02%
Psychiatric, medium	1.859	7	16	0.38%	7	9	0.43%	7	19	0.45%	7	44	0.42%
Psychiatric, low	0.930	1	751	17.80%	1	327	15.50%	1	753	18.02%	1	1,831	17.42%
Pulmonary, very high	1.975	25	4	0.09%	29	1	0.05%	30	1	0.02%	28	6	0.06%
Pulmonary, medium to high	0.457	23	19	0.45%	19	8	0.38%	20	18	0.43%	22	45	0.43%
Pulmonary, low	0.321	3	385	9.12%	3	167	7.92%	3	348	8.33%	3	900	8.56%
Rare Diseases	7.505	15	2	0.05%	13	1	0.05%	35	0	0.00%	21	3	0.03%
Renal, extra high	15.124	39	0	0.00%	37	0	0.00%	35	0	0.00%	40	0	0.00%
Renal, medium	1.178	33	2	0.05%	20	3	0.14%	34	1	0.02%	33	6	0.06%
Renal, low	0.277	21	36	0.85%	17	18	0.85%	17	39	0.93%	18	93	0.89%
Skeletal, very low to medium	0.319	2	618	14.64%	2	259	12.28%	2	595	14.24%	2	1,472	14.01%
Skin, high	0.773	36	2	0.05%	34	1	0.05%	32	2	0.05%	36	5	0.05%
Skin, low	0.487	38	2	0.05%	36	1	0.05%	35	0	0.00%	39	3	0.03%
Skin, very low	0.190	9	134	3.18%	8	62	2.94%	8	142	3.40%	9	338	3.22%
Substance abuse, very low to low	1.082	28	5	0.12%	18	4	0.19%	14	13	0.31%	19	22	0.21%
Population Statistics													
No Classified Disease Categories	N/A	N/A	2,287	54.19%	N/A	1,183	56.09%	N/A	2,294	54.89%	N/A	5,764	54.85%

	Risk Weight	Unscored Members									Total		
		Magnolia			Molina			United					
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	35	33.02%	N/A	25	37.88%	N/A	36	39.13%	N/A	96	36.8%
Age 5 to 14 Female	0.953	N/A	35	33.02%	N/A	29	43.94%	N/A	37	40.22%	N/A	101	38.2%
Age 15 to 18 Male	0.944	N/A	18	16.98%	N/A	6	9.09%	N/A	13	14.13%	N/A	37	14.02%
Age 15 to 18 Female	1.321	N/A	18	16.98%	N/A	6	9.09%	N/A	6	6.52%	N/A	30	11.36%

Risk Adjustment Results				
Scored Members	Magnolia			Total
	Member Months	4,220	2,109	
	Unadjusted Plan Factor	1.021	0.959	
	Budget Neutral Plan Factor	1.016	0.954	
Unscored Members	Molina			Total
	Member Months	106	66	
	Unadjusted Plan Factor	1.015	0.987	
	Budget Neutral Plan Factor	1.020	0.992	
Total Members	United			Total
	Member Months	4,326	2,175	
	Unadjusted Plan Factor	1.021	0.960	
	Budget Neutral Plan Factor	1.016	0.955	

Exhibit 3L

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - South Region - Q3 to Q4 2024 Prospective Risk Scores

CY 2023 Diagnosis Period - June 2024 Enrollment Period

	Risk Weight	Scored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,208	100.00%	N/A	1,930	100.00%	N/A	3,663	100.00%	N/A	8,801	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,092	34.04%	N/A	685	35.49%	N/A	1,282	35.00%	N/A	3,059	34.76%
Age 5 to 14 Female	0.112	N/A	1,053	32.82%	N/A	665	34.46%	N/A	1,207	32.95%	N/A	2,925	33.23%
Age 15 to 18 Male	0.000	N/A	540	16.83%	N/A	291	15.08%	N/A	626	17.09%	N/A	1,457	16.55%
Age 15 to 18 Female	0.257	N/A	523	16.30%	N/A	289	14.97%	N/A	548	14.96%	N/A	1,360	15.45%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	8	0.25%	N/A	27	1.40%	N/A	24	0.66%	N/A	59	0.67%
Diagnosis Period Duration, 7 Months	0.098	N/A	15	0.47%	N/A	14	0.73%	N/A	15	0.41%	N/A	44	0.50%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,185	99.29%	N/A	1,889	97.88%	N/A	3,624	98.94%	N/A	8,698	98.83%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	186	5.80%	N/A	148	7.67%	N/A	181	4.94%	N/A	515	5.85%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	1	0.03%	N/A	1	0.01%
Disease Categories													
Cancer, medium to very high	2.895	7	10	0.31%	18	2	0.10%	13	5	0.14%	10	17	0.19%
Cardiovascular, very high	1.724	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Cardiovascular, medium	0.733	21	9	0.28%	10	12	0.62%	18	15	0.41%	18	36	0.41%
Cardiovascular, low	0.450	13	33	1.03%	14	16	0.83%	14	32	0.87%	12	81	0.92%
Cardiovascular, extra low	0.412	10	53	1.65%	11	21	1.09%	9	56	1.53%	9	130	1.48%
Cerebrovascular, medium	2.021	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
CNS, high	2.129	30	1	0.03%	9	5	0.26%	12	7	0.19%	17	13	0.15%
CNS, medium	1.173	15	10	0.31%	17	5	0.26%	16	10	0.27%	16	25	0.28%
CNS, low	0.751	8	35	1.09%	6	20	1.04%	7	44	1.20%	7	99	1.12%
DD, low	1.630	16	7	0.22%	30	1	0.05%	11	12	0.33%	13	20	0.23%
DD, medium	6.081	35	0	0.00%	16	1	0.05%	35	0	0.00%	31	1	0.01%
Diabetes, type 1	3.867	4	17	0.53%	5	6	0.31%	4	24	0.66%	4	47	0.53%
Diabetes, type 2	0.479	25	10	0.31%	32	3	0.16%	29	7	0.19%	28	20	0.23%
Eye, very low to extra low	0.256	26	18	0.56%	23	14	0.73%	25	26	0.71%	25	58	0.66%
Gastro, high	3.331	11	5	0.16%	24	1	0.05%	20	3	0.08%	15	9	0.10%
Gastro, medium	1.271	14	10	0.31%	21	3	0.16%	27	3	0.08%	23	16	0.18%
Gastro, low	0.340	5	142	4.43%	4	83	4.30%	5	156	4.26%	5	381	4.33%
Genital, extra low	0.472	20	16	0.50%	22	8	0.41%	26	13	0.35%	24	37	0.42%
Hematological, extra high	3.863	35	0	0.00%	20	1	0.05%	35	0	0.00%	34	1	0.01%
Hematological, very high	3.011	35	0	0.00%	26	1	0.05%	35	0	0.00%	37	1	0.01%
Hematological, low to medium	0.381	24	13	0.41%	29	6	0.31%	28	9	0.25%	27	28	0.32%
Infectious, high to very high	0.682	31	3	0.09%	27	4	0.21%	33	2	0.05%	32	9	0.10%
Infectious, medium	0.176	33	6	0.19%	34	4	0.21%	32	11	0.30%	35	21	0.24%
Metabolic, high	0.754	17	14	0.44%	25	4	0.21%	15	16	0.44%	20	34	0.39%
Metabolic, medium	0.391	23	14	0.44%	31	4	0.21%	24	18	0.49%	26	36	0.41%
Pregnancy, complete	0.277	32	6	0.19%	33	3	0.16%	34	3	0.08%	36	12	0.14%
Pregnancy, incomplete	3.124	29	1	0.03%	8	4	0.21%	10	7	0.19%	11	12	0.14%
Psychiatric, high	3.507	18	3	0.09%	35	0	0.00%	19	3	0.08%	22	6	0.07%
Psychiatric, medium	1.859	6	19	0.59%	13	4	0.21%	6	21	0.57%	6	44	0.50%
Psychiatric, low	0.930	1	700	21.82%	1	430	22.28%	1	909	24.82%	1	2,039	23.17%
Pulmonary, very high	1.975	27	2	0.06%	35	0	0.00%	31	1	0.03%	33	3	0.03%
Pulmonary, medium to high	0.457	22	13	0.41%	19	9	0.47%	17	25	0.68%	21	47	0.53%
Pulmonary, low	0.321	3	236	7.36%	3	140	7.25%	3	311	8.49%	3	687	7.81%
Rare Diseases	7.505	35	0	0.00%	35	0	0.00%	23	1	0.03%	30	1	0.01%
Renal, extra high	15.124	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Renal, medium	1.178	28	3	0.09%	28	2	0.10%	30	2	0.05%	29	7	0.08%
Renal, low	0.277	19	35	1.09%	15	22	1.14%	21	36	0.98%	19	93	1.06%
Skeletal, very low to medium	0.319	2	392	12.22%	2	195	10.10%	2	423	11.55%	2	1,010	11.48%
Skin, high	0.773	34	1	0.03%	35	0	0.00%	35	0	0.00%	38	1	0.01%
Skin, low	0.487	35	0	0.00%	35	0	0.00%	35	0	0.00%	39	0	0.00%
Skin, very low	0.190	9	117	3.65%	7	74	3.83%	8	158	4.31%	8	349	3.97%
Substance abuse, very low to low	1.082	12	14	0.44%	12	7	0.36%	22	7	0.19%	14	28	0.32%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,689	52.65%	N/A	1,004	52.02%	N/A	1,842	50.29%	N/A	4,535	51.53%

	Risk Weight	Unscored Members						Unscored Members					
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	26	33.33%	N/A	27	38.03%	N/A	41	39.81%	N/A	94	37.30%
Age 5 to 14 Female	0.953	N/A	31	39.74%	N/A	25	35.21%	N/A	30	29.13%	N/A	86	34.13%
Age 15 to 18 Male	0.944	N/A	7	8.97%	N/A	9	12.68%	N/A	18	17.48%	N/A	34	13.49%
Age 15 to 18 Female	1.321	N/A	14	17.95%	N/A	10	14.08%	N/A	14	13.59%	N/A	38	15.08%

Risk Adjustment Results					Risk Adjustment Results				
		Magnolia			Molina			United	
Scored Members									
Member Months		3,208			1,930			3,663	
Unadjusted Plan Factor		1.059			1.027			1.092	
Budget Neutral Plan Factor		0.994			0.963			1.025	
Unscored Members									
Member Months		78			71			103	
Unadjusted Plan Factor		1.019			1.005			1.003	
Budget Neutral Plan Factor		1.011			0.996			0.994	
Total Members									
Member Months		3,286			2,001			3,766	
Unadjusted Plan Factor		1.058			1.026			1.090	
Budget Neutral Plan Factor		0.994			0.965			1.024	

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
June 2024 Snapshot Period

North Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	278	18.30%	64	25.50%	101	19.57%	443 19.38%
Money Code 3	Receiving IV-E Assistance	0.938	249	16.39%	41	16.33%	91	17.64%	381 16.67%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	927	61.03%	135	53.78%	288	55.81%	1,350 59.06%
Other	All other Money Codes	0.000	65	4.28%	11	4.38%	36	6.98%	112 4.90%
Unadjusted Plan Factor			0.941		1.033		0.964		0.956
Member Months			1,519		251		516		2,286
Budget Neutral Plan Factor			0.984		1.080		1.007		1.000

Central Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	316	20.13%	97	30.79%	99	21.57%	512 21.84%
Money Code 3	Receiving IV-E Assistance	0.938	345	21.97%	89	28.25%	112	24.40%	546 23.29%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	858	54.65%	118	37.46%	219	47.71%	1,195 50.98%
Other	All other Money Codes	0.000	51	3.25%	11	3.49%	29	6.32%	91 3.88%
Unadjusted Plan Factor			1.011		1.197		1.044		1.042
Member Months			1,570		315		459		2,344
Budget Neutral Plan Factor			0.970		1.149		1.002		1.000

South Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	318	14.76%	112	25.17%	116	17.34%	546 16.70%
Money Code 3	Receiving IV-E Assistance	0.938	400	18.56%	107	24.04%	121	18.09%	628 19.21%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	1,339	62.13%	211	47.42%	376	56.20%	1,926 58.92%
Other	All other Money Codes	0.000	98	4.55%	15	3.37%	56	8.37%	169 5.17%
Unadjusted Plan Factor			0.912		1.092		0.936		0.942
Member Months			2,155		445		669		3,269
Budget Neutral Plan Factor			0.969		1.159		0.994		1.000

Exhibit 4A
Mississippi Division of Medicaid
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024
Custom Risk Weights - Non-Newborn SSI / Disabled Rate Cell

Model R-Squared: 29.5%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	686,830	0.113	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	27,989	0.470	4.1%	N/A	1.364	1.364
Age 5 to 14 Male	82,498	0.184	12.0%	N/A	0.701	0.701
Age 5 to 14 Female	37,790	0.265	5.5%	N/A	0.872	0.872
Age 15 to 24 Male	64,121	0.000	9.3%	N/A	0.522	0.522
Age 15 to 24 Female	34,985	0.187	5.1%	N/A	0.831	0.831
Age 25 to 44 Male	80,695	0.003	11.7%	N/A	0.797	0.797
Age 25 to 44 Female	71,681	0.133	10.4%	N/A	1.120	1.120
Age 45 and Older Male	127,940	0.107	18.6%	N/A	1.188	1.188
Age 45 and Older Female	159,131	0.027	23.2%	N/A	1.249	1.249
Duration						
Diagnosis Period Duration, 6 to 7 Months	4,733	0.382	0.7%	0.000	1.320	N/A
Diagnosis Period Duration, 8 Months	2,773	0.320	0.4%	0.001	1.271	N/A
Diagnosis Period Duration, 9 to 11 Months	7,851	0.167	1.1%	0.004	1.340	N/A
Diagnosis Period Duration, 12 Months	671,473	0.000	97.8%	N/A	0.993	N/A
Homelessness						
Homelessness	5,632	0.931	0.8%	0.000	2.921	N/A
Disease Categories						
Cancer, very high	3,864	3.067	0.6%	0.000	5.033	N/A
Cancer, high	8,697	0.816	1.3%	0.000	2.519	N/A
Cancer, medium	12,472	0.611	1.8%	0.000	2.343	N/A
Cancer, low	7,519	0.318	1.1%	0.000	1.794	N/A
Cardiovascular, very high	4,821	1.460	0.7%	0.000	5.286	N/A
Cardiovascular, medium	78,617	0.584	11.4%	0.000	2.228	N/A
Cardiovascular, extra low to low	226,545	0.081	33.0%	0.000	1.115	N/A
Cerebrovascular, medium	11,081	0.115	1.6%	0.022	1.965	N/A
CNS, high	7,154	0.781	1.0%	0.000	2.878	N/A
CNS, medium	18,733	0.479	2.7%	0.000	1.839	N/A
CNS, low	123,627	0.243	18.0%	0.000	1.574	N/A
DD, low to medium	30,775	0.174	4.5%	0.000	1.252	N/A
Diabetes, type 1	10,180	0.862	1.5%	0.000	2.596	N/A
Diabetes, type 2	100,327	0.199	14.6%	0.000	1.596	N/A
Gastro, high	11,125	0.320	1.6%	0.000	3.363	N/A
Gastro, medium	29,419	0.268	4.3%	0.000	2.041	N/A
Gastro, low	124,224	0.135	18.1%	0.000	1.528	N/A
Hematological, extra high	12	4.752	0.0%	0.001	9.015	N/A
Hematological, medium to very high	13,267	0.931	1.9%	0.000	3.061	N/A
Hematological, low	10,527	0.370	1.5%	0.000	3.024	N/A
Infectious, high to very high	21,565	0.300	3.1%	0.000	2.374	N/A
Infectious, low to medium	25,862	0.188	3.8%	0.000	2.260	N/A
Metabolic, high	18,367	0.468	2.7%	0.000	2.576	N/A
Metabolic, medium	47,448	0.239	6.9%	0.000	2.349	N/A
Pregnancy, complete	5,329	0.173	0.8%	0.016	1.203	N/A
Pregnancy, incomplete	1,736	0.841	0.3%	0.000	1.941	N/A
Psychiatric, high	53,414	0.643	7.8%	0.000	1.568	N/A
Psychiatric, low to medium	282,160	0.225	41.1%	0.000	1.126	N/A
Pulmonary, very high	13,937	0.816	2.0%	0.000	3.257	N/A
Pulmonary, high	1,817	0.481	0.3%	0.000	2.577	N/A
Pulmonary, medium	32,635	0.472	4.8%	0.000	2.534	N/A
Pulmonary, low	105,596	0.131	15.4%	0.000	1.273	N/A
Rare Diseases	723	2.664	0.1%	0.000	4.594	N/A
Renal, extra high	4,153	4.191	0.6%	0.000	6.896	N/A
Renal, medium	27,425	0.362	4.0%	0.000	2.168	N/A
Renal, low	29,489	0.277	4.3%	0.000	1.870	N/A
Skeletal, medium	166,182	0.254	24.2%	0.000	1.595	N/A
Skeletal, very low to low	62,828	0.070	9.1%	0.002	1.374	N/A
Skin, low to high	11,851	0.624	1.7%	0.000	2.976	N/A
Skin, very low	47,331	0.169	6.9%	0.000	1.592	N/A
Substance abuse, low	45,757	0.324	6.7%	0.000	1.972	N/A
Substance abuse, very low	15,131	0.202	2.2%	0.000	1.694	N/A
Disabled Children Add-On						
Disabled Children Add-On - CNS, high	1,830	1.388	0.3%	0.000	4.287	N/A
Disabled Children Add-On - Gastro, high	5,933	1.508	0.9%	0.000	3.911	N/A
Disabled Children Add-On - Pulmonary, very high	2,933	0.419	0.4%	0.000	3.866	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4B			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - Non-Newborn SSI / Disabled Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	3.067
CANH	Cancer, high	Cancer, high	0.816
CANM	Cancer, medium	Cancer, medium	0.611
CANL	Cancer, low	Cancer, low	0.318
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.460
CARM	Cardiovascular, medium	Cardiovascular, medium	0.584
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.081
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.081
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.115
CNSH	CNS, high	CNS, high	0.781
CNSM	CNS, medium	CNS, medium	0.479
CNSL	CNS, low	CNS, low	0.243
DDM	DD, medium	DD, low to medium	0.174
DDL	DD, low	DD, low to medium	0.174
DIA1	Diabetes, type 1	Diabetes, type 1	0.862
DIA2	Diabetes, type 2	Diabetes, type 2	0.199
EYEL	Eye, low	Not Used	Not Used
EYEVL	Eye, very low	Not Used	Not Used
GIH	Gastro, high	Gastro, high	0.320
GIM	Gastro, medium	Gastro, medium	0.268
GIL	Gastro, low	Gastro, low	0.135
GENEL	Genital, extra low	Not Used	Not Used
HEMEH	Hematological, extra high	Hematological, extra high	4.752
HEMVH	Hematological, very high	Hematological, medium to very high	0.931
HEMM	Hematological, medium	Hematological, medium to very high	0.931
HEML	Hematological, low	Hematological, low	0.370
INFVH	Infectious, very high	Infectious, high to very high	0.300
INFH	Infectious, high	Infectious, high to very high	0.300
INFM	Infectious, medium	Infectious, low to medium	0.188
INFL	Infectious, low	Infectious, low to medium	0.188
METH	Metabolic, high	Metabolic, high	0.468
METM	Metabolic, medium	Metabolic, medium	0.239
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.173
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.841
PSYH	Psychiatric, high	Psychiatric, high	0.643
PSYM	Psychiatric, medium	Psychiatric, low to medium	0.225
PSYL	Psychiatric, low	Psychiatric, low to medium	0.225
PULVH	Pulmonary, very high	Pulmonary, very high	0.816
PULH	Pulmonary, high	Pulmonary, high	0.481
PULM	Pulmonary, medium	Pulmonary, medium	0.472
PULL	Pulmonary, low	Pulmonary, low	0.131
RENEH	Renal, extra high	Renal, extra high	4.191
RENM	Renal, medium	Renal, medium	0.362
RENL	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, medium	0.254
SKCL	Skeletal, low	Skeletal, very low to low	0.070
SKCVL	Skeletal, very low	Skeletal, very low to low	0.070
SKNH	Skin, high	Skin, low to high	0.624
SKNL	Skin, low	Skin, low to high	0.624
SKNVL	Skin, very low	Skin, very low	0.169
SUBL	Substance abuse, low	Substance abuse, low	0.324
SUBVL	Substance abuse, very low	Substance abuse, very low	0.202
CCARVH	Disabled Children Add-On - Cardiovascular, very high	Not Used	Not Used
CCARM	Disabled Children Add-On - Cardiovascular, medium	Not Used	Not Used
CCNSH	Disabled Children Add-On - CNS, high	Disabled Children Add-On - CNS, high	1.388
CDDM	Disabled Children Add-On - DD, medium	Not Used	Not Used
CDIA1	Disabled Children Add-On - Diabetes, type 1	Not Used	Not Used
CGIH	Disabled Children Add-On - Gastro, high	Disabled Children Add-On - Gastro, high	1.508
CHEMEH	Disabled Children Add-On - Hematological, extra high	Not Used	Not Used
CHEMVH	Disabled Children Add-On - Hematological, very high	Not Used	Not Used
CINFVH	Disabled Children Add-On - Infectious, very high	Not Used	Not Used
CINFH	Disabled Children Add-On - Infectious, high	Not Used	Not Used
CINFM	Disabled Children Add-On - Infectious, medium	Not Used	Not Used
CMETH	Disabled Children Add-On - Metabolic, high	Not Used	Not Used
CMETM	Disabled Children Add-On - Metabolic, medium	Not Used	Not Used
CPSYH	Disabled Children Add-On - Psychiatric, high	Not Used	Not Used
CPSYM	Disabled Children Add-On - Psychiatric, medium	Not Used	Not Used
CPULVH	Disabled Children Add-On - Pulmonary, very high	Disabled Children Add-On - Pulmonary, very high	0.419
CRENEH	Disabled Children Add-On - Renal, extra high	Not Used	Not Used
CSUBL	Disabled Children Add-On - Substance abuse, low	Not Used	Not Used
CSUBVL	Disabled Children Add-On - Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.584
MRX2	Cardiac	Cardiovascular, extra low to low	0.081
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low to medium	0.225
MRX4	Diabetes	Diabetes, type 2	0.199
MRX5	Hemophilia/von Willebrands	Hematological, extra high	4.752
MRX6	Hepatitis	Infectious, low to medium	0.188
MRX7	HIV	Infectious, low to medium	0.188
MRX8	Infections, high	Infectious, high to very high	0.300
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.254
MRX10	Malignancies	Cancer, medium	0.611
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.781
MRX12	Parkinsons / Tremor	CNS, low	0.243
MRX13	Rare Diseases	Rare Diseases	2.664
MRX14	Seizure disorders	CNS, low	0.243
MRX15	Tuberculosis	Infectious, low to medium	0.188

Exhibit 4C

Mississippi Division of Medicaid

SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024

Custom Risk Weights - MA Adult Rate Cell

Model R-Squared: 35.6%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	439,404	0.126	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 19 to 24 Male	1,191	0.000	0.3%	N/A	0.331	0.331
Age 19 to 24 Female	33,669	0.460	7.7%	N/A	1.115	1.115
Age 25 to 44 Male	29,458	0.111	6.7%	N/A	0.639	0.639
Age 25 to 44 Female	320,071	0.305	72.8%	N/A	0.993	0.993
Age 45 and Older Male	11,689	0.127	2.7%	N/A	0.943	0.943
Age 45 and Older Female	43,326	0.326	9.9%	N/A	1.245	1.245
Non-Utilizer Category						
No Base Period Medical Utilization	35,780	(0.126)	8.1%	0.000	0.284	N/A
Duration						
Diagnosis Period Duration, 6 Months	4,681	0.448	1.1%	0.000	1.255	N/A
Diagnosis Period Duration, 7 to 12 Months	434,723	0.000	98.9%	N/A	0.997	N/A
Homelessness						
Homelessness	699	0.472	0.2%	0.025	2.273	N/A
Disease Categories						
Cancer, high to very high	1,485	2.607	0.3%	0.000	4.707	N/A
Cancer, low to medium	5,126	0.394	1.2%	0.000	1.864	N/A
Cardiovascular, very high	501	2.004	0.1%	0.000	4.770	N/A
Cardiovascular, medium	20,731	0.547	4.7%	0.000	2.145	N/A
Cardiovascular, low	16,476	0.442	3.7%	0.000	1.827	N/A
Cardiovascular, extra low	115,484	0.118	26.3%	0.000	1.220	N/A
Cerebrovascular, medium	632	0.456	0.1%	0.038	2.523	N/A
CNS, high	1,927	0.552	0.4%	0.000	2.343	N/A
CNS, medium	2,919	0.544	0.7%	0.000	2.330	N/A
CNS, low	28,055	0.425	6.4%	0.000	1.946	N/A
Diabetes, type 1	3,825	1.366	0.9%	0.000	2.939	N/A
Diabetes, type 2	30,601	0.241	7.0%	0.000	1.660	N/A
Eye, very low to extra low	9,330	0.271	2.1%	0.000	1.694	N/A
Gastro, high	1,193	0.864	0.3%	0.000	3.034	N/A
Gastro, medium	11,530	0.585	2.6%	0.000	2.187	N/A
Gastro, low	60,114	0.278	13.7%	0.000	1.602	N/A
Genital, extra low	28,771	0.232	6.5%	0.000	1.659	N/A
Infectious, very high	101	1.355	0.0%	0.013	3.451	N/A
Infectious, high	6,403	0.426	1.5%	0.000	2.269	N/A
Infectious, low to medium	10,381	0.196	2.4%	0.000	1.874	N/A
Metabolic, high	5,493	0.528	1.3%	0.000	2.286	N/A
Metabolic, medium	15,886	0.296	3.6%	0.000	2.077	N/A
Pregnancy, complete	47,226	0.295	10.7%	0.000	1.212	N/A
Pregnancy, incomplete	14,968	1.430	3.4%	0.000	2.252	N/A
Psychiatric, high	4,060	0.665	0.9%	0.000	2.039	N/A
Psychiatric, medium	5,861	0.490	1.3%	0.000	1.858	N/A
Psychiatric, low	127,229	0.200	29.0%	0.000	1.384	N/A
Pulmonary, medium to very high	9,517	0.499	2.2%	0.000	2.412	N/A
Pulmonary, low	37,305	0.271	8.5%	0.000	1.620	N/A
Rare Diseases	66	6.883	0.0%	0.000	9.430	N/A
Renal, extra high	128	2.600	0.0%	0.000	6.574	N/A
Renal, medium	3,760	0.539	0.9%	0.000	2.478	N/A
Renal, low	8,726	0.472	2.0%	0.000	2.097	N/A
Skeletal, medium	115,794	0.270	26.4%	0.000	1.436	N/A
Skeletal, low	15,336	0.251	3.5%	0.000	1.437	N/A
Skeletal, very low	11,243	0.189	2.6%	0.000	1.335	N/A
Skin, high	371	1.732	0.1%	0.000	4.561	N/A
Skin, low	1,151	0.891	0.3%	0.000	3.004	N/A
Skin, very low	29,277	0.178	6.7%	0.000	1.483	N/A
Substance abuse, very low to low	31,117	0.299	7.1%	0.000	1.675	N/A

¹ CY 2023 member months satisfying the regression criteria.

² Reflects the average total risk score for all members associated with the given variable.

³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4D Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024 CDPS+Rx Mapping to Custom Risk Weight Categories - MA Adult Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, high to very high	2.607
CANH	Cancer, high	Cancer, high to very high	2.607
CANM	Cancer, medium	Cancer, low to medium	0.394
CANL	Cancer, low	Cancer, low to medium	0.394
CARVH	Cardiovascular, very high	Cardiovascular, very high	2.004
CARM	Cardiovascular, medium	Cardiovascular, medium	0.547
CARL	Cardiovascular, low	Cardiovascular, low	0.442
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.118
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.456
CNSH	CNS, high	CNS, high	0.552
CNSM	CNS, medium	CNS, medium	0.544
CNSL	CNS, low	CNS, low	0.425
DDM	DD, medium	Not Used	Not Used
DDL	DD, low	Not Used	Not Used
DIA1	Diabetes, type 1	Diabetes, type 1	1.366
DIA2	Diabetes, type 2	Diabetes, type 2	0.241
EYEL	Eye, low	Eye, very low to extra low	0.271
EYEVL	Eye, very low	Eye, very low to extra low	0.271
GIH	Gastro, high	Gastro, high	0.864
GIM	Gastro, medium	Gastro, medium	0.585
GIL	Gastro, low	Gastro, low	0.278
GENEL	Genital, extra low	Genital, extra low	0.232
HEMEH	Hematological, extra high	Not Used	Not Used
HEMVH	Hematological, very high	Not Used	Not Used
HEMM	Hematological, medium	Not Used	Not Used
HEML	Hematological, low	Not Used	Not Used
INFVH	Infectious, very high	Infectious, very high	1.355
INFH	Infectious, high	Infectious, high	0.426
INFM	Infectious, medium	Infectious, low to medium	0.196
INFL	Infectious, low	Infectious, low to medium	0.196
METH	Metabolic, high	Metabolic, high	0.528
METM	Metabolic, medium	Metabolic, medium	0.296
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.295
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	1.430
PSYH	Psychiatric, high	Psychiatric, high	0.665
PSYM	Psychiatric, medium	Psychiatric, medium	0.490
PSYL	Psychiatric, low	Psychiatric, low	0.200
PULVH	Pulmonary, very high	Pulmonary, medium to very high	0.499
PULH	Pulmonary, high	Pulmonary, medium to very high	0.499
PULM	Pulmonary, medium	Pulmonary, medium to very high	0.499
PULL	Pulmonary, low	Pulmonary, low	0.271
RENEH	Renal, extra high	Renal, extra high	2.600
RENM	Renal, medium	Renal, medium	0.539
RENL	Renal, low	Renal, low	0.472
SKCM	Skeletal, medium	Skeletal, medium	0.270
SKCL	Skeletal, low	Skeletal, low	0.251
SKCVL	Skeletal, very low	Skeletal, very low	0.189
SKNH	Skin, high	Skin, high	1.732
SKNL	Skin, low	Skin, low	0.891
SKNVL	Skin, very low	Skin, very low	0.178
SUBL	Substance abuse, low	Substance abuse, very low to low	0.299
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.299
MRX1	Anti-coagulants	Cardiovascular, medium	0.547
MRX2	Cardiac	Cardiovascular, extra low	0.118
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.200
MRX4	Diabetes	Diabetes, type 2	0.241
MRX5	Hemophilia/von Willebrands	Not Used	Not Used
MRX6	Hepatitis	Infectious, low to medium	0.196
MRX7	HIV	Infectious, low to medium	0.196
MRX8	Infections, high	Infectious, high	0.426
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.270
MRX10	Malignancies	Cancer, low to medium	0.394
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.552
MRX12	Parkinsons / Tremor	CNS, low	0.425
MRX13	Rare Diseases	Rare Diseases	6.883
MRX14	Seizure disorders	CNS, low	0.425
MRX15	Tuberculosis	Infectious, low to medium	0.196

Exhibit 4E Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024 Custom Risk Weights - CHIP & MississippiCAN Children Rate Cells						
Model R-Squared: 10.2%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			
			Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	3,309,147	0.595	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	731,984	0.168	22.1%	N/A	0.976	0.976
Age 5 to 14 Male	909,713	0.038	27.5%	N/A	0.957	0.957
Age 5 to 14 Female	918,920	0.112	27.8%	N/A	0.953	0.953
Age 15 to 18 Male	371,291	0.000	11.2%	N/A	0.944	0.944
Age 15 to 18 Female	377,239	0.257	11.4%	N/A	1.321	1.321
Non-Utilizer Category						
No Base Period Medical Utilization	182,980	(0.410)	5.5%	0.000	0.282	N/A
Duration						
Diagnosis Period Duration, 6 Months	14,570	0.108	0.4%	0.037	0.886	N/A
Diagnosis Period Duration, 7 Months	26,037	0.098	0.8%	0.011	1.006	N/A
Diagnosis Period Duration, 8 to 12 Months	3,268,540	0.000	98.8%	N/A	1.000	N/A
Homelessness						
Homelessness	234	1.243	0.0%	0.002	3.173	N/A
Disease Categories						
Cancer, medium to very high	4,462	2.895	0.1%	0.000	5.020	N/A
Cardiovascular, very high	366	1.724	0.0%	0.000	7.166	N/A
Cardiovascular, medium	16,247	0.733	0.5%	0.000	2.440	N/A
Cardiovascular, low	43,787	0.450	1.3%	0.000	1.902	N/A
Cardiovascular, extra low	33,091	0.412	1.0%	0.000	2.102	N/A
Cerebrovascular, medium	265	2.021	0.0%	0.000	5.904	N/A
CNS, high	1,577	2.129	0.0%	0.000	4.449	N/A
CNS, medium	4,645	1.173	0.1%	0.000	3.149	N/A
CNS, low	50,373	0.751	1.5%	0.000	2.303	N/A
DD, medium	36	6.081	0.0%	0.000	9.047	N/A
DD, low	4,791	1.630	0.1%	0.000	3.800	N/A
Diabetes, type 1	8,130	3.867	0.2%	0.000	5.181	N/A
Diabetes, type 2	5,941	0.479	0.2%	0.000	2.127	N/A
Eye, very low to extra low	20,748	0.256	0.6%	0.000	1.548	N/A
Gastro, high	2,475	3.331	0.1%	0.000	5.923	N/A
Gastro, medium	6,128	1.271	0.2%	0.000	3.044	N/A
Gastro, low	166,443	0.340	5.0%	0.000	1.603	N/A
Genital, extra low	18,564	0.472	0.6%	0.000	1.940	N/A
Hematological, extra high	48	3.863	0.0%	0.000	4.657	N/A
Hematological, very high	557	3.011	0.0%	0.000	7.302	N/A
Hematological, low to medium	21,443	0.381	0.6%	0.000	1.974	N/A
Infectious, high to very high	4,543	0.662	0.1%	0.000	2.646	N/A
Infectious, medium	38,038	0.176	1.1%	0.000	1.436	N/A
Metabolic, high	12,930	0.754	0.4%	0.000	2.841	N/A
Metabolic, medium	10,153	0.391	0.3%	0.000	2.402	N/A
Pregnancy, complete	6,712	0.277	0.2%	0.000	1.750	N/A
Pregnancy, incomplete	3,714	3.124	0.1%	0.000	4.510	N/A
Psychiatric, high	1,066	3.507	0.0%	0.000	5.081	N/A
Psychiatric, medium	12,361	1.859	0.4%	0.000	3.079	N/A
Psychiatric, low	495,629	0.930	15.0%	0.000	1.883	N/A
Pulmonary, very high	2,702	1.975	0.1%	0.000	4.489	N/A
Pulmonary, medium to high	25,507	0.457	0.8%	0.000	1.941	N/A
Pulmonary, low	273,757	0.321	8.3%	0.000	1.456	N/A
Rare Diseases	287	7.506	0.0%	0.000	9.572	N/A
Renal, extra high	69	15.124	0.0%	0.000	19.997	N/A
Renal, medium	1,834	1.178	0.1%	0.000	3.242	N/A
Renal, low	25,902	0.277	0.8%	0.000	1.702	N/A
Skeletal, very low to medium	432,135	0.319	13.1%	0.000	1.490	N/A
Skin, high	306	0.773	0.0%	0.030	3.114	N/A
Skin, low	819	0.487	0.0%	0.025	2.125	N/A
Skin, very low	119,701	0.190	3.6%	0.000	1.366	N/A
Substance abuse, very low to low	6,264	1.082	0.2%	0.000	3.154	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4F			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - CHIP & MississippiCAN Children Rate Cells			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, medium to very high	2.895
CANH	Cancer, high	Cancer, medium to very high	2.895
CANM	Cancer, medium	Cancer, medium to very high	2.895
CANL	Cancer, low	Not Used	Not Used
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.724
CARM	Cardiovascular, medium	Cardiovascular, medium	0.733
CARL	Cardiovascular, low	Cardiovascular, low	0.450
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.412
CERM	Cerebrovascular, medium	Cerebrovascular, medium	2.021
CNSH	CNS, high	CNS, high	2.129
CNSM	CNS, medium	CNS, medium	1.173
CNSL	CNS, low	CNS, low	0.751
DDM	DD, medium	DD, medium	6.081
DDL	DD, low	DD, low	1.630
DIA1	Diabetes, type 1	Diabetes, type 1	3.867
DIA2	Diabetes, type 2	Diabetes, type 2	0.479
EYEL	Eye, low	Eye, very low to extra low	0.256
EYEVL	Eye, very low	Eye, very low to extra low	0.256
GIH	Gastro, high	Gastro, high	3.331
GIM	Gastro, medium	Gastro, medium	1.271
GIL	Gastro, low	Gastro, low	0.340
GENEL	Genital, extra low	Genital, extra low	0.472
HEMEH	Hematological, extra high	Hematological, extra high	3.863
HEMVH	Hematological, very high	Hematological, very high	3.011
HEMM	Hematological, medium	Hematological, low to medium	0.381
HEML	Hematological, low	Hematological, low to medium	0.381
INFVH	Infectious, very high	Infectious, high to very high	0.662
INFH	Infectious, high	Infectious, high to very high	0.662
INFM	Infectious, medium	Infectious, medium	0.176
INFL	Infectious, low	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.754
METM	Metabolic, medium	Metabolic, medium	0.391
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.277
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	3.124
PSYH	Psychiatric, high	Psychiatric, high	3.507
PSYM	Psychiatric, medium	Psychiatric, medium	1.859
PSYL	Psychiatric, low	Psychiatric, low	0.930
PULVH	Pulmonary, very high	Pulmonary, very high	1.975
PULH	Pulmonary, high	Pulmonary, medium to high	0.457
PULM	Pulmonary, medium	Pulmonary, medium to high	0.457
PULL	Pulmonary, low	Pulmonary, low	0.321
RENEH	Renal, extra high	Renal, extra high	15.124
RENM	Renal, medium	Renal, medium	1.178
RENL	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, very low to medium	0.319
SKCL	Skeletal, low	Skeletal, very low to medium	0.319
SKCVL	Skeletal, very low	Skeletal, very low to medium	0.319
SKNH	Skin, high	Skin, high	0.773
SKNL	Skin, low	Skin, low	0.487
SKNVL	Skin, very low	Skin, very low	0.190
SUBL	Substance abuse, low	Substance abuse, very low to low	1.082
SUBVL	Substance abuse, very low	Substance abuse, very low to low	1.082
MRX1	Anti-coagulants	Cardiovascular, medium	0.733
MRX2	Cardiac	Cardiovascular, extra low	0.412
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.930
MRX4	Diabetes	Diabetes, type 2	0.479
MRX5	Hemophilia/von Willebrands	Hematological, extra high	3.863
MRX6	Hepatitis	Infectious, medium	0.176
MRX7	HIV	Infectious, medium	0.176
MRX8	Infections, high	Infectious, high to very high	0.662
MRX9	Inflammatory /Autoimmune	Skeletal, very low to medium	0.319
MRX10	Malignancies	Cancer, medium to very high	2.895
MRX11	Multiple Sclerosis / Paralysis	CNS, high	2.129
MRX12	Parkinsons / Tremor	CNS, low	0.751
MRX13	Rare Diseases	Rare Diseases	7.506
MRX14	Seizure disorders	CNS, low	0.751
MRX15	Tuberculosis	Not Used	Not Used

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:	North								
	(a)	(b)	(c) = (a) × (b)	(d)	(e)	(f)	(g)	(h) = (d) + (e) + (f) + (g)	(i) = (c) + (h)
	Budget Neutral Risk Score	Unadjusted Capitation Rate PMPM¹	Risk Adjusted Capitation Payment PMPM	MHAP FSA Payment PMPM²	MHAP QIPP Payment PMPM²	MAPS Payment PMPM²	TREAT Payment PMPM²	Total Payments Outside of Rates	Total Payments (Capitation Rates Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	0.9979	\$760.00	\$758.40	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,213.40
Molina	0.9935	\$760.00	\$755.03	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,210.03
United	1.0047	\$760.00	\$763.57	\$290.00	\$150.00	\$10.00	\$5.00	\$455.00	\$1,218.57
MA Adult									
Magnolia	1.0103	\$360.00	\$363.69	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$658.69
Molina	0.9731	\$360.00	\$350.32	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$645.32
United	1.0082	\$360.00	\$362.95	\$130.00	\$150.00	\$10.00	\$5.00	\$295.00	\$657.95
MA Children									
Magnolia	1.0034	\$210.00	\$210.72	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$415.72
Molina	0.9673	\$210.00	\$203.13	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$408.13
United	1.0161	\$210.00	\$213.38	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$418.38
Quasi-CHIP									
Magnolia	1.0017	\$200.00	\$200.35	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$405.35
Molina	0.9727	\$200.00	\$194.55	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$399.55
United	1.0121	\$200.00	\$202.42	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$407.42
Foster Care									
Magnolia	0.9830	\$630.00	\$619.27	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,094.27
Molina	1.1098	\$630.00	\$699.16	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,174.16
United	0.9956	\$630.00	\$627.21	\$310.00	\$150.00	\$10.00	\$5.00	\$475.00	\$1,102.21

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:		Central								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0083	\$900.00	\$907.43	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,422.43
Molina		0.9982	\$900.00	\$898.34	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,413.34
United		0.9904	\$900.00	\$891.34	\$350.00	\$150.00	\$10.00	\$5.00	\$515.00	\$1,406.34
MA Adult										
Magnolia		1.0192	\$370.00	\$377.09	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$682.09
Molina		0.9697	\$370.00	\$358.80	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$663.80
United		1.0031	\$370.00	\$371.13	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$676.13
MA Children										
Magnolia		1.0116	\$220.00	\$222.55	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$437.55
Molina		0.9605	\$220.00	\$211.32	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$426.32
United		1.0124	\$220.00	\$222.73	\$50.00	\$150.00	\$10.00	\$5.00	\$215.00	\$437.73
Quasi-CHIP										
Magnolia		1.0162	\$210.00	\$213.40	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$418.40
Molina		0.9549	\$210.00	\$200.54	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$405.54
United		1.0065	\$210.00	\$211.37	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$416.37
Foster Care										
Magnolia		0.9592	\$660.00	\$633.04	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,238.04
Molina		1.1722	\$660.00	\$773.66	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,378.66
United		1.0238	\$660.00	\$675.68	\$440.00	\$150.00	\$10.00	\$5.00	\$605.00	\$1,280.68

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2024

Region:		South								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0167	\$950.00	\$965.87	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,510.87
Molina		0.9998	\$950.00	\$949.84	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,494.84
United		0.9841	\$950.00	\$934.88	\$380.00	\$150.00	\$10.00	\$5.00	\$545.00	\$1,479.88
MA Adult										
Magnolia		1.0195	\$350.00	\$356.83	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$661.83
Molina		0.9619	\$350.00	\$336.68	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$641.68
United		1.0098	\$350.00	\$353.43	\$140.00	\$150.00	\$10.00	\$5.00	\$305.00	\$658.43
MA Children										
Magnolia		1.0022	\$190.00	\$190.41	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$395.41
Molina		0.9611	\$190.00	\$182.62	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$387.62
United		1.0213	\$190.00	\$194.05	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$399.05
Quasi-CHIP										
Magnolia		0.9944	\$180.00	\$178.99	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$383.99
Molina		0.9645	\$180.00	\$173.62	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$378.62
United		1.0238	\$180.00	\$184.28	\$40.00	\$150.00	\$10.00	\$5.00	\$205.00	\$389.28
Foster Care										
Magnolia		0.9611	\$560.00	\$538.22	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$943.22
Molina		1.1759	\$560.00	\$658.48	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$1,063.48
United		1.0068	\$560.00	\$563.82	\$240.00	\$150.00	\$10.00	\$5.00	\$405.00	\$968.82

¹ Capitation rates reflect the removal of the quality withhold
² Includes associated premium tax



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December 13, 2024

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550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth17 - MississippiCAN Capitation Risk Adjustment – Q1 to Q2 2025 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2025, which are documented in a separately provided report.¹ As outlined in that report and summarized in Table 1 below, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective January 1, 2025 through June 30, 2025 (Q1 to Q2 2025) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2025.

As described in greater detail below, we develop Q1 to Q2 2025 risk scores using diagnoses from July 2023 to June 2024 (SFY 2024) and the enrollment mix for each CCO as of October 2024. In addition, we adjusted the enrollment records to identify MYPAC rate cell members that were incorrectly assigned to other children rate cells.

Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q1 to Q2 2025 were developed using:

¹ "Report18 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification.pdf," dated December 4, 2024.



- **Diagnosis Period:** Medical and drug diagnosis information from encounter and FFS claims incurred during SFY 2024 with runout through August 30, 2024. Pharmacy claims data was excluded from this analysis for July to September 2023, given issues with the pharmacy data during that time period.
- **Enrollment Period:** Demographic and enrollment information from October 2024.

Table 2 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Based on SFY 2024 Diagnosis Period and October 2024 Enrollment							
		North		Central		South	
Rate Cell	CCO	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,513	1.001	10,051	1.013	7,078	1.022
Non-Newborn SSI / Disabled	Molina	2,813	0.981	2,976	0.979	2,550	0.993
Non-Newborn SSI / Disabled	United	8,051	1.005	8,069	0.991	7,351	0.981
MA Adult	Magnolia	6,049	1.005	6,678	1.018	6,114	1.020
MA Adult	Molina	4,001	0.991	4,876	0.961	5,017	0.964
MA Adult	United	5,583	1.001	6,159	1.011	6,899	1.009
MA Children	Magnolia	30,731	1.008	35,409	1.012	29,328	1.006
MA Children	Molina	17,636	0.967	21,052	0.961	19,243	0.956
MA Children	United	28,593	1.012	32,266	1.012	31,076	1.022
Quasi-CHIP	Magnolia	3,842	1.004	4,409	1.018	3,305	1.010
Quasi-CHIP	Molina	2,030	0.963	2,177	0.966	2,025	0.942
Quasi-CHIP	United	3,834	1.016	4,192	0.999	3,693	1.023
Foster Care	Magnolia	1,522	0.996	1,552	0.982	2,154	0.976
Foster Care	Molina	244	1.047	299	1.101	450	1.118
Foster Care	United	490	0.988	434	0.994	677	0.997

Only MississippiCAN-eligible members enrolled in a CCO during October 2024 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- **Foster Care:** Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found on the enrollment record, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- **All other rate cells:**
 - **Scored Individuals:** For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations additional variables based upon utilizer status, housing insecurity indicators, and the length of enrollment during the diagnostic period are included in the risk score calculation.
 - **Unscored Individuals:** For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment records.

Starting in July 2021, some members in the MYPAC rate cell, which is not risk adjusted, were not correctly assigned a 'SED' lock-in flag and were instead assigned to other children rate cells, including several rate cells that are risk adjusted. We identified members that utilized MYPAC services during the risk adjustment period and recategorized these members to the MYPAC rate cell for the purposes of risk adjustment calculations.

A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members aged 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2025 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.



Risk Score Changes

The last release of risk scores included prospective budget-neutral risk scores for Q3 to Q4 2024. These risk scores were based on June 2024 enrollment and diagnoses from January 2023 through December 2023 with runout through April 26, 2024. Changes in budget-neutral plan risk scores between the Q3 to Q4 2024 risk scores and the Q1 to Q2 2025 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes.

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

Table 3 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Changes in Statewide Budget Neutral Risk Scores Q3 to Q4 2024 vs. Q1 to Q2 2025				
Cohort	Risk Scores:	Q3 to Q4 2024	Q1 to Q2 2025	% Change
	Enrollment:	June 2024	October 2024	
	Diagnosis Period:	CY 2023	SFY 2023	
Non-Newborn SSI / Disabled	Magnolia	1.007	1.011	0.45%
Non-Newborn SSI / Disabled	Molina	0.997	0.984	-1.33%
Non-Newborn SSI / Disabled	United	0.993	0.993	-0.05%
MA Adult	Magnolia	1.016	1.014	-0.20%
MA Adult	Molina	0.968	0.971	0.30%
MA Adult	United	1.007	1.007	0.01%
MA Children	Magnolia	1.006	1.009	0.27%
MA Children	Molina	0.963	0.961	-0.18%
MA Children	United	1.017	1.015	-0.12%
Quasi-CHIP	Magnolia	1.005	1.011	0.57%
Quasi-CHIP	Molina	0.964	0.957	-0.67%
Quasi-CHIP	United	1.014	1.012	-0.17%
Foster Care	Magnolia	0.974	0.984	1.06%
Foster Care	Molina	1.136	1.096	-3.59%
Foster Care	United	1.000	0.993	-0.70%

Exhibit 2 allocates the change in risk scores between the last release and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Updates the risk scores shown in Column A with an additional data runout.
- Column C: Updates the risk scores shown in Column B with an updated diagnosis period.
- Column D: Updates the risk scores shown in Column C with enrollment from October 2024, the snapshot enrollment month chosen to represent enrollment for January to June 2025.

Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the last release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.



Table 4 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Statewide Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q3 to Q4 2024	98%	96%	98%	98%
Q1 to Q2 2025	99%	97%	98%	98%
MA Adult				
Q3 to Q4 2024	94%	94%	94%	94%
Q1 to Q2 2025	94%	93%	94%	94%
MA Children				
Q3 to Q4 2024	97%	96%	97%	97%
Q1 to Q2 2025	97%	96%	97%	96%
Quasi-CHIP				
Q3 to Q4 2024	97%	96%	97%	97%
Q1 to Q2 2025	98%	97%	97%	97%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members falling into each durational category
 - Count of members in the non-utilizer category
 - Count of members assigned to the housing insecurity category, for applicable populations
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category
- Unscored Members
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- Risk Adjustment Results
 - Calculation of budget neutral risk score for scored and unscored members and in total



Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Conditions with the Top Five Disease Impacts Statewide Results				
Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, low to medium	Skeletal, medium	Psychiatric, low	Psychiatric, low
2	Cardiovascular, medium	Pregnancy, incomplete	Skeletal, very low to medium	Skeletal, very low to medium
3	Skeletal, medium	Psychiatric, low	Pulmonary, low	Pulmonary, low
4	Psychiatric, high	Gastro, low	Gastro, low	Diabetes, type 1
5	CNS, low	Pregnancy, complete	CNS, low	Gastro, low

Member-Level Risk Scores

Text files providing member-level demographic, duration, diagnosis, and other risk score category information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, diagnostic, and other risk score category information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the letter² that describes the custom risk weight model developed for periods after July 2024 for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis.

Exhibits 4A to 4F display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

CCO Capitation Rate = Base Capitation Rate x CCO Budget Neutral Risk Score

² Wentworth15 - July 2024 MSCAN Risk Weight Development.pdf” dated October 31, 2024.



The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates after the application of the quality withhold and prior to the following directed payments, all of which are not risk adjusted.

- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2025 and when we anticipate providing each risk score update for the Foster Care rate cell.

Table 7 Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3Q4 2024	November 2024	February 2025
Q1Q2 2025	December 2024	August 2025

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q1 to Q2 2025 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from July 2023 to June 2024 with runout through August 30, 2024, along with eligibility data from October 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q1 to Q2 2025 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.



Jennifer Wentworth
Mississippi Division of Medicaid
December 13, 2024
Page 7 of 7

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



Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink that reads 'Jill Bruckert'.

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

JAB/KNL/zk

Attachments (Provided in Excel)

A handwritten signature in black ink that reads 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

Caveats and Limitations
Mississippi Division of Medicaid
Q1 to Q2 2025 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q1 to Q2 2025 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from July 2023 through June 2024 with runout through August 2024 and eligibility data from October 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q1 to Q2 2025 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

Exhibit 1A

Mississippi Division of Medicaid

Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q1 to Q2 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	9,408	0.941	1.001	105	1.044	1.008	1.001
Molina	2,726	0.923	0.982	87	0.985	0.951	0.981
United	7,912	0.945	1.005	139	1.060	1.024	1.005
Total	20,046	0.940	1.000	331	1.035	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	9,950	1.028	1.013	101	1.086	1.011	1.013
Molina	2,905	0.994	0.979	71	1.042	0.970	0.979
United	7,968	1.006	0.991	101	1.084	1.010	0.991
Total	20,823	1.015	1.000	273	1.074	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,945	1.071	1.023	133	1.070	1.013	1.022
Molina	2,464	1.041	0.994	86	1.006	0.952	0.993
United	7,238	1.027	0.980	113	1.078	1.021	0.981
Total	16,647	1.048	1.000	332	1.056	1.000	1.000

Exhibit 1B

Mississippi Division of Medicaid

MA Adult Risk Score Adjustment Summary - Q1 to Q2 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	5,653	0.972	1.005	396	0.978	1.008	1.005
Molina	3,697	0.959	0.991	304	0.960	0.989	0.991
United	5,244	0.968	1.001	339	0.970	1.000	1.001
Total	14,594	0.967	1.000	1,039	0.970	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	6,258	1.001	1.020	420	0.951	0.992	1.018
Molina	4,537	0.940	0.957	339	0.968	1.010	0.961
United	5,790	0.993	1.012	369	0.959	1.000	1.011
Total	16,585	0.981	1.000	1,128	0.959	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	5,739	1.046	1.021	375	0.963	1.007	1.020
Molina	4,642	0.984	0.961	375	0.953	0.997	0.964
United	6,539	1.034	1.009	360	0.952	0.996	1.009
Total	16,920	1.024	1.000	1,110	0.956	1.000	1.000

Exhibit 1C

Mississippi Division of Medicaid

MA Children Risk Score Adjustment Summary - Q1 to Q2 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	29,612	1.011	1.008	1,119	0.991	0.999	1.008
Molina	16,756	0.968	0.965	880	0.994	1.002	0.967
United	27,508	1.016	1.012	1,085	0.991	1.000	1.012
Total	73,876	1.003	1.000	3,084	0.992	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	34,355	1.008	1.013	1,054	0.990	0.999	1.012
Molina	20,266	0.954	0.959	786	0.991	1.001	0.961
United	31,374	1.008	1.013	892	0.990	1.000	1.012
Total	85,995	0.995	1.000	2,732	0.990	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	28,355	1.036	1.006	973	0.995	1.001	1.006
Molina	18,343	0.982	0.954	900	0.991	0.998	0.956
United	30,126	1.053	1.022	950	0.994	1.000	1.022
Total	76,824	1.030	1.000	2,823	0.993	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q1 to Q2 2025 Prospective Risk Scores
SFY 2024 Diagnosis Period - October 2024 Enrollment Period

North Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,740	1.034	1.004	102	0.982	0.991	1.004
Molina	1,938	0.989	0.961	92	1.010	1.018	0.963
United	3,710	1.046	1.016	124	0.986	0.994	1.016
Total	9,388	1.030	1.000	318	0.991	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	4,337	1.033	1.018	72	1.004	0.988	1.018
Molina	2,117	0.979	0.965	60	1.021	1.004	0.966
United	4,097	1.013	0.999	95	1.023	1.007	0.999
Total	10,551	1.014	1.000	227	1.016	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Unadjusted Risk		Budget Neutral	Unadjusted Risk		Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,217	1.088	1.010	88	1.045	1.022	1.010
Molina	1,965	1.013	0.940	60	1.020	0.997	0.942
United	3,573	1.104	1.024	120	1.008	0.985	1.023
Total	8,755	1.078	1.000	268	1.023	1.000	1.000

Exhibit 1E

Mississippi Division of Medicaid

Foster Care Risk Score Adjustment Summary - Q1 to Q2 2025 Risk Scores

October 2024 Snapshot Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,522	0.946	0.996
Molina	244	0.994	1.047
United	490	0.938	0.988
Total	2,256	0.950	1.000

Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,552	0.992	0.982
Molina	299	1.112	1.101
United	434	1.004	0.994
Total	2,285	1.010	1.000

South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	2,154	0.895	0.976
Molina	450	1.025	1.118
United	677	0.915	0.997
Total	3,281	0.917	1.000

Exhibit 2A Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	0.938	0.938	0.960	0.941	0.1%	2.3%	-2.0%	0.3%
Molina	0.934	0.935	0.947	0.923	0.1%	1.4%	-2.6%	-1.2%
United	0.944	0.945	0.961	0.945	0.1%	1.6%	-1.7%	0.0%
Unscored Members								
Magnolia	1.041	N/A	N/A	1.044	N/A	N/A	N/A	0.2%
Molina	1.027	N/A	N/A	0.985	N/A	N/A	N/A	-4.1%
United	1.062	N/A	N/A	1.060	N/A	N/A	N/A	-0.1%
All Members								
Magnolia	0.940	0.941	0.961	0.943	0.1%	2.1%	-1.9%	0.3%
Molina	0.936	0.936	0.948	0.924	0.1%	1.2%	-2.5%	-1.3%
United	0.946	0.948	0.961	0.946	0.1%	1.4%	-1.5%	0.0%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.022	1.019	1.054	1.028	-0.3%	3.4%	-2.4%	0.6%
Molina	1.012	1.016	1.022	0.994	0.4%	0.6%	-2.7%	-1.8%
United	1.005	1.006	1.022	1.006	0.1%	1.5%	-1.6%	0.1%
Unscored Members								
Magnolia	1.108	N/A	N/A	1.086	N/A	N/A	N/A	-2.0%
Molina	1.082	N/A	N/A	1.042	N/A	N/A	N/A	-3.7%
United	1.022	N/A	N/A	1.084	N/A	N/A	N/A	6.1%
All Members								
Magnolia	1.024	1.020	1.054	1.029	-0.3%	3.3%	-2.3%	0.6%
Molina	1.013	1.017	1.022	0.994	0.3%	0.5%	-2.7%	-1.9%
United	1.005	1.007	1.022	1.007	0.1%	1.5%	-1.5%	0.2%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.067	1.068	1.092	1.071	0.1%	2.2%	-1.9%	0.3%
Molina	1.049	1.044	1.073	1.041	-0.5%	2.8%	-3.0%	-0.7%
United	1.032	1.029	1.048	1.027	-0.3%	1.9%	-2.0%	-0.4%
Unscored Members								
Magnolia	1.047	N/A	N/A	1.070	N/A	N/A	N/A	2.2%
Molina	1.069	N/A	N/A	1.006	N/A	N/A	N/A	-5.9%
United	1.085	N/A	N/A	1.078	N/A	N/A	N/A	-0.7%
All Members								
Magnolia	1.067	1.068	1.091	1.071	0.1%	2.2%	-1.8%	0.4%
Molina	1.049	1.044	1.073	1.040	-0.5%	2.7%	-3.0%	-0.9%
United	1.033	1.030	1.049	1.028	-0.3%	1.8%	-2.0%	-0.5%

Exhibit 2B Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	0.998	0.998	1.002	1.001	0.0%	0.4%	0.0%	0.3%
Molina	0.994	0.994	0.988	0.982	0.0%	-0.5%	-0.6%	-1.2%
United	1.004	1.005	1.002	1.005	0.1%	-0.3%	0.3%	0.0%
Unscored Members								
Magnolia	0.996	N/A	N/A	1.008	N/A	N/A	N/A	1.2%
Molina	0.982	N/A	N/A	0.951	N/A	N/A	N/A	-3.1%
United	1.015	N/A	N/A	1.024	N/A	N/A	N/A	0.9%
All Members								
Magnolia	0.998	0.998	1.002	1.001	0.0%	0.4%	-0.1%	0.3%
Molina	0.993	0.993	0.988	0.981	0.0%	-0.5%	-0.7%	-1.2%
United	1.005	1.005	1.002	1.005	0.0%	-0.3%	0.3%	0.0%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.008	1.005	1.016	1.013	-0.3%	1.1%	-0.3%	0.5%
Molina	0.998	1.002	0.985	0.979	0.4%	-1.7%	-0.6%	-1.9%
United	0.991	0.993	0.985	0.991	0.2%	-0.8%	0.6%	0.0%
Unscored Members								
Magnolia	1.034	N/A	N/A	1.011	N/A	N/A	N/A	-2.2%
Molina	1.010	N/A	N/A	0.970	N/A	N/A	N/A	-3.9%
United	0.954	N/A	N/A	1.010	N/A	N/A	N/A	5.9%
All Members								
Magnolia	1.008	1.005	1.016	1.013	-0.3%	1.1%	-0.3%	0.5%
Molina	0.998	1.002	0.985	0.979	0.4%	-1.7%	-0.7%	-1.9%
United	0.990	0.993	0.985	0.991	0.2%	-0.7%	0.6%	0.1%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.017	1.020	1.020	1.023	0.3%	0.0%	0.2%	0.5%
Molina	1.000	0.997	1.003	0.994	-0.3%	0.6%	-0.9%	-0.6%
United	0.983	0.982	0.980	0.980	-0.1%	-0.2%	0.1%	-0.3%
Unscored Members								
Magnolia	0.981	N/A	N/A	1.013	N/A	N/A	N/A	3.3%
Molina	1.001	N/A	N/A	0.952	N/A	N/A	N/A	-4.9%
United	1.016	N/A	N/A	1.021	N/A	N/A	N/A	0.4%
All Members								
Magnolia	1.017	1.019	1.020	1.022	0.3%	0.1%	0.2%	0.6%
Molina	1.000	0.997	1.003	0.993	-0.3%	0.6%	-1.0%	-0.7%
United	0.984	0.983	0.980	0.981	-0.1%	-0.3%	0.1%	-0.3%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	0.976	0.974	0.972	0.972	-0.2%	-0.2%	0.0%	-0.5%
Molina	0.939	0.938	0.942	0.959	-0.1%	0.4%	1.8%	2.2%
United	0.973	0.970	0.966	0.968	-0.4%	-0.4%	0.3%	-0.5%
Unscored Members								
Magnolia	0.939	N/A	N/A	0.978	N/A	N/A	N/A	4.2%
Molina	0.930	N/A	N/A	0.960	N/A	N/A	N/A	3.2%
United	0.954	N/A	N/A	0.970	N/A	N/A	N/A	1.7%
All Members								
Magnolia	0.974	0.972	0.972	0.972	-0.2%	-0.1%	0.0%	-0.2%
Molina	0.938	0.938	0.942	0.959	-0.1%	0.5%	1.8%	2.2%
United	0.972	0.969	0.966	0.969	-0.4%	-0.3%	0.3%	-0.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	0.994	0.993	0.995	1.001	-0.1%	0.2%	0.7%	0.7%
Molina	0.943	0.944	0.935	0.940	0.0%	-0.9%	0.5%	-0.4%
United	0.977	0.975	0.990	0.993	-0.3%	1.6%	0.3%	1.6%
Unscored Members								
Magnolia	0.956	N/A	N/A	0.951	N/A	N/A	N/A	-0.5%
Molina	0.952	N/A	N/A	0.968	N/A	N/A	N/A	1.7%
United	0.960	N/A	N/A	0.959	N/A	N/A	N/A	-0.1%
All Members								
Magnolia	0.992	0.990	0.994	0.998	-0.1%	0.3%	0.4%	0.6%
Molina	0.944	0.944	0.935	0.942	0.0%	-0.9%	0.7%	-0.2%
United	0.976	0.974	0.989	0.991	-0.2%	1.6%	0.1%	1.5%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.030	1.029	1.040	1.046	-0.1%	1.0%	0.6%	1.5%
Molina	0.968	0.967	0.974	0.984	-0.1%	0.7%	1.1%	1.7%
United	1.019	1.019	1.017	1.034	0.0%	-0.2%	1.7%	1.4%
Unscored Members								
Magnolia	0.947	N/A	N/A	0.963	N/A	N/A	N/A	1.7%
Molina	0.948	N/A	N/A	0.953	N/A	N/A	N/A	0.6%
United	0.953	N/A	N/A	0.952	N/A	N/A	N/A	-0.1%
All Members								
Magnolia	1.025	1.025	1.039	1.040	-0.1%	1.4%	0.2%	1.5%
Molina	0.967	0.967	0.974	0.983	-0.1%	0.8%	1.0%	1.6%
United	1.016	1.015	1.016	1.029	0.0%	0.1%	1.3%	1.3%

Exhibit 2D Mississippi Division of Medicaid Impact Analysis MA Adult Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.011	1.011	1.010	1.005	0.0%	-0.1%	-0.5%	-0.6%
Molina	0.972	0.974	0.979	0.991	0.2%	0.6%	1.3%	2.0%
United	1.008	1.007	1.004	1.001	-0.1%	-0.2%	-0.3%	-0.7%
Unscored Members								
Magnolia	0.997	N/A	N/A	1.008	N/A	N/A	N/A	1.1%
Molina	0.988	N/A	N/A	0.989	N/A	N/A	N/A	0.1%
United	1.013	N/A	N/A	1.000	N/A	N/A	N/A	-1.3%
All Members								
Magnolia	1.010	1.011	1.010	1.005	0.0%	-0.1%	-0.5%	-0.5%
Molina	0.973	0.975	0.979	0.991	0.1%	0.5%	1.2%	1.9%
United	1.008	1.007	1.004	1.001	-0.1%	-0.3%	-0.3%	-0.7%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.020	1.020	1.018	1.020	0.0%	-0.2%	0.2%	0.0%
Molina	0.968	0.970	0.957	0.957	0.2%	-1.3%	0.0%	-1.1%
United	1.003	1.002	1.014	1.012	-0.1%	1.2%	-0.2%	0.9%
Unscored Members								
Magnolia	1.000	N/A	N/A	0.992	N/A	N/A	N/A	-0.8%
Molina	0.995	N/A	N/A	1.010	N/A	N/A	N/A	1.4%
United	1.004	N/A	N/A	1.000	N/A	N/A	N/A	-0.4%
All Members								
Magnolia	1.019	1.019	1.018	1.018	0.0%	-0.1%	0.0%	-0.1%
Molina	0.970	0.971	0.958	0.961	0.2%	-1.4%	0.3%	-0.9%
United	1.003	1.002	1.013	1.011	-0.1%	1.2%	-0.2%	0.8%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.021	1.021	1.026	1.021	0.0%	0.5%	-0.5%	0.0%
Molina	0.959	0.959	0.962	0.961	0.0%	0.3%	-0.1%	0.2%
United	1.010	1.010	1.004	1.009	0.0%	-0.6%	0.5%	-0.1%
Unscored Members								
Magnolia	0.998	N/A	N/A	1.007	N/A	N/A	N/A	1.0%
Molina	0.998	N/A	N/A	0.997	N/A	N/A	N/A	-0.1%
United	1.004	N/A	N/A	0.996	N/A	N/A	N/A	-0.8%
All Members								
Magnolia	1.020	1.019	1.026	1.020	0.0%	0.7%	-0.6%	0.0%
Molina	0.962	0.962	0.964	0.964	0.0%	0.1%	0.2%	0.2%
United	1.010	1.010	1.004	1.009	0.0%	-0.6%	0.5%	-0.1%

Exhibit 2E Mississippi Division of Medicaid Impact Analysis MA Children Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.007	1.006	1.010	1.011	-0.1%	0.4%	0.1%	0.4%
Molina	0.970	0.970	0.966	0.968	0.0%	-0.3%	0.2%	-0.1%
United	1.020	1.017	1.016	1.016	-0.3%	-0.1%	0.0%	-0.4%
Unscored Members								
Magnolia	0.997	N/A	N/A	0.991	N/A	N/A	N/A	-0.7%
Molina	0.993	N/A	N/A	0.994	N/A	N/A	N/A	0.1%
United	1.011	N/A	N/A	0.991	N/A	N/A	N/A	-2.0%
All Members								
Magnolia	1.007	1.006	1.010	1.011	-0.1%	0.4%	0.1%	0.4%
Molina	0.971	0.971	0.967	0.970	0.0%	-0.4%	0.3%	-0.1%
United	1.020	1.017	1.016	1.015	-0.3%	-0.1%	-0.1%	-0.5%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.004	1.002	1.002	1.008	-0.3%	0.1%	0.5%	0.3%
Molina	0.952	0.952	0.944	0.954	0.0%	-0.8%	1.1%	0.2%
United	1.005	1.005	1.005	1.008	0.0%	0.0%	0.3%	0.3%
Unscored Members								
Magnolia	0.994	N/A	N/A	0.990	N/A	N/A	N/A	-0.4%
Molina	0.994	N/A	N/A	0.991	N/A	N/A	N/A	-0.3%
United	0.999	N/A	N/A	0.990	N/A	N/A	N/A	-0.9%
All Members								
Magnolia	1.004	1.002	1.002	1.007	-0.2%	0.1%	0.5%	0.3%
Molina	0.953	0.953	0.944	0.956	0.0%	-0.9%	1.2%	0.2%
United	1.005	1.004	1.005	1.007	0.0%	0.0%	0.2%	0.2%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.026	1.025	1.029	1.036	-0.1%	0.4%	0.7%	1.0%
Molina	0.982	0.979	0.976	0.982	-0.3%	-0.3%	0.7%	0.0%
United	1.046	1.044	1.049	1.053	-0.1%	0.5%	0.3%	0.7%
Unscored Members								
Magnolia	0.995	N/A	N/A	0.995	N/A	N/A	N/A	-0.1%
Molina	0.992	N/A	N/A	0.991	N/A	N/A	N/A	-0.1%
United	1.005	N/A	N/A	0.994	N/A	N/A	N/A	-1.1%
All Members								
Magnolia	1.025	1.024	1.028	1.035	-0.1%	0.4%	0.6%	1.0%
Molina	0.983	0.980	0.976	0.983	-0.3%	-0.4%	0.7%	0.1%
United	1.044	1.043	1.049	1.051	-0.1%	0.5%	0.2%	0.6%

Exhibit 2F Mississippi Division of Medicaid Impact Analysis MA Children Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.004	1.004	1.008	1.008	0.0%	0.4%	0.0%	0.4%
Molina	0.966	0.968	0.964	0.965	0.1%	-0.4%	0.1%	-0.1%
United	1.016	1.015	1.014	1.012	-0.1%	-0.2%	-0.1%	-0.4%
Unscored Members								
Magnolia	0.996	N/A	N/A	0.999	N/A	N/A	N/A	0.2%
Molina	0.992	N/A	N/A	1.002	N/A	N/A	N/A	1.0%
United	1.010	N/A	N/A	1.000	N/A	N/A	N/A	-1.1%
All Members								
Magnolia	1.003	1.004	1.008	1.008	0.0%	0.4%	0.0%	0.4%
Molina	0.967	0.969	0.964	0.967	0.1%	-0.4%	0.3%	0.0%
United	1.016	1.015	1.013	1.012	-0.1%	-0.2%	-0.2%	-0.4%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.012	1.011	1.013	1.013	-0.1%	0.2%	0.0%	0.1%
Molina	0.959	0.960	0.954	0.959	0.1%	-0.7%	0.6%	0.0%
United	1.013	1.014	1.015	1.013	0.1%	0.2%	-0.3%	0.0%
Unscored Members								
Magnolia	0.998	N/A	N/A	0.999	N/A	N/A	N/A	0.2%
Molina	0.999	N/A	N/A	1.001	N/A	N/A	N/A	0.2%
United	1.003	N/A	N/A	1.000	N/A	N/A	N/A	-0.3%
All Members								
Magnolia	1.012	1.010	1.013	1.012	-0.1%	0.2%	-0.1%	0.1%
Molina	0.961	0.961	0.954	0.961	0.1%	-0.8%	0.7%	0.0%
United	1.012	1.013	1.015	1.012	0.1%	0.2%	-0.3%	0.0%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.002	1.003	1.004	1.006	0.1%	0.1%	0.2%	0.4%
Molina	0.960	0.958	0.953	0.954	-0.2%	-0.5%	0.1%	-0.6%
United	1.022	1.022	1.024	1.022	0.0%	0.2%	-0.2%	0.1%
Unscored Members								
Magnolia	0.998	N/A	N/A	1.001	N/A	N/A	N/A	0.3%
Molina	0.995	N/A	N/A	0.998	N/A	N/A	N/A	0.3%
United	1.007	N/A	N/A	1.000	N/A	N/A	N/A	-0.7%
All Members								
Magnolia	1.002	1.003	1.004	1.006	0.1%	0.1%	0.2%	0.4%
Molina	0.961	0.959	0.953	0.956	-0.2%	-0.6%	0.3%	-0.5%
United	1.021	1.022	1.024	1.022	0.0%	0.2%	-0.2%	0.0%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.022	1.023	1.028	1.034	0.1%	0.5%	0.6%	1.2%
Molina	0.991	0.989	0.994	0.989	-0.3%	0.5%	-0.5%	-0.2%
United	1.033	1.035	1.035	1.046	0.2%	0.1%	1.1%	1.3%
Unscored Members								
Magnolia	1.005	N/A	N/A	0.982	N/A	N/A	N/A	-2.3%
Molina	0.995	N/A	N/A	1.010	N/A	N/A	N/A	1.5%
United	1.002	N/A	N/A	0.986	N/A	N/A	N/A	-1.6%
All Members								
Magnolia	1.021	1.022	1.027	1.032	0.1%	0.5%	0.5%	1.1%
Molina	0.992	0.989	0.995	0.991	-0.2%	0.5%	-0.4%	-0.1%
United	1.032	1.034	1.035	1.044	0.2%	0.1%	0.9%	1.2%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.021	1.022	1.032	1.033	0.1%	1.0%	0.1%	1.1%
Molina	0.959	0.954	0.961	0.979	-0.5%	0.7%	1.9%	2.1%
United	1.012	1.013	1.020	1.013	0.0%	0.7%	-0.7%	0.1%
Unscored Members								
Magnolia	1.015	N/A	N/A	1.004	N/A	N/A	N/A	-1.1%
Molina	0.987	N/A	N/A	1.021	N/A	N/A	N/A	3.4%
United	0.977	N/A	N/A	1.023	N/A	N/A	N/A	4.7%
All Members								
Magnolia	1.021	1.022	1.032	1.032	0.1%	1.0%	0.0%	1.1%
Molina	0.960	0.955	0.960	0.980	-0.5%	0.6%	2.0%	2.1%
United	1.011	1.012	1.020	1.014	0.0%	0.8%	-0.6%	0.2%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.059	1.057	1.088	1.088	-0.2%	2.9%	0.0%	2.7%
Molina	1.027	1.029	1.036	1.013	0.3%	0.6%	-2.2%	-1.3%
United	1.092	1.091	1.088	1.104	-0.1%	-0.3%	1.5%	1.1%
Unscored Members								
Magnolia	1.019	N/A	N/A	1.045	N/A	N/A	N/A	2.5%
Molina	1.005	N/A	N/A	1.020	N/A	N/A	N/A	1.5%
United	1.003	N/A	N/A	1.008	N/A	N/A	N/A	0.5%
All Members								
Magnolia	1.058	1.056	1.088	1.087	-0.2%	3.0%	-0.1%	2.7%
Molina	1.026	1.029	1.036	1.013	0.3%	0.7%	-2.2%	-1.3%
United	1.090	1.089	1.087	1.101	-0.1%	-0.1%	1.2%	1.0%

Exhibit 2H Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q3 to Q4 2024 to Q1 to Q2 2025 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.002	1.002	1.004	1.004	0.0%	0.2%	0.1%	0.3%
Molina	0.972	0.969	0.971	0.961	-0.3%	0.2%	-1.0%	-1.1%
United	1.012	1.014	1.011	1.016	0.1%	-0.3%	0.5%	0.4%
Unscored Members								
Magnolia	1.004	N/A	N/A	0.991	N/A	N/A	N/A	-1.4%
Molina	0.994	N/A	N/A	1.018	N/A	N/A	N/A	2.5%
United	1.001	N/A	N/A	0.994	N/A	N/A	N/A	-0.7%
All Members								
Magnolia	1.002	1.002	1.004	1.004	0.0%	0.1%	0.0%	0.2%
Molina	0.973	0.970	0.972	0.963	-0.3%	0.2%	-0.9%	-1.0%
United	1.012	1.013	1.011	1.016	0.1%	-0.2%	0.5%	0.3%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	1.016	1.017	1.019	1.018	0.1%	0.1%	-0.1%	0.2%
Molina	0.954	0.950	0.948	0.965	-0.4%	-0.1%	1.8%	1.2%
United	1.007	1.008	1.007	0.999	0.1%	-0.1%	-0.8%	-0.8%
Unscored Members								
Magnolia	1.020	N/A	N/A	0.988	N/A	N/A	N/A	-3.2%
Molina	0.992	N/A	N/A	1.004	N/A	N/A	N/A	1.2%
United	0.982	N/A	N/A	1.007	N/A	N/A	N/A	2.5%
All Members								
Magnolia	1.016	1.017	1.019	1.018	0.1%	0.1%	-0.1%	0.1%
Molina	0.955	0.951	0.948	0.966	-0.4%	-0.3%	1.9%	1.2%
United	1.007	1.007	1.007	0.999	0.1%	0.0%	-0.8%	-0.7%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Jun 2024	Jun 2024	Jun 2024	Oct 2024	% Change Due to Data Refresh	% Change Due to Diagnosis Period Change	% Change Due to Oct 2024 Enrollment Change	Total % Change
Diagnosis Period	CY 2023 (Runout through April 2024)	CY 2023 (Runout through August 2024)	SFY 2024 (Runout through August 2024)	SFY 2024 (Runout through August 2024)				
Scored Members								
Magnolia	0.994	0.993	1.011	1.010	-0.1%	1.9%	-0.1%	1.6%
Molina	0.963	0.966	0.962	0.940	0.3%	-0.4%	-2.3%	-2.4%
United	1.025	1.024	1.011	1.024	0.0%	-1.3%	1.4%	0.0%
Unscored Members								
Magnolia	1.011	N/A	N/A	1.022	N/A	N/A	N/A	1.1%
Molina	0.996	N/A	N/A	0.997	N/A	N/A	N/A	0.1%
United	0.994	N/A	N/A	0.985	N/A	N/A	N/A	-0.9%
All Members								
Magnolia	0.994	0.993	1.011	1.010	-0.1%	1.8%	-0.1%	1.6%
Molina	0.965	0.967	0.963	0.942	0.3%	-0.5%	-2.2%	-2.4%
United	1.024	1.023	1.010	1.023	0.0%	-1.3%	1.2%	-0.1%

Exhibit 3A

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - North Region - 01 to 02 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

	Risk Weight	Scored Members								Risk Weight	Scored Members							
		Magnolia			Molina			United			Total							
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months		% of Member Months	Disease Impact Rank	Member Months	% of Member Months				
Regression Intercept	0.113	N/A	9,408	100.00%	N/A	2,726	100.00%	N/A	7,912	100.00%	N/A	20,046	100.00%					
Demographic Categories																		
Age 1 to 4	0.470	N/A	281	2.99%	N/A	203	7.45%	N/A	266	3.36%	N/A	750	3.74%					
Age 5 to 14 Male	0.184	N/A	1,120	11.90%	N/A	379	13.90%	N/A	905	11.44%	N/A	2,404	11.99%					
Age 5 to 14 Female	0.265	N/A	485	5.16%	N/A	153	5.61%	N/A	462	5.84%	N/A	1,100	5.49%					
Age 15 to 24 Male	0.000	N/A	887	9.43%	N/A	274	10.05%	N/A	773	9.77%	N/A	1,934	9.65%					
Age 15 to 24 Female	0.187	N/A	459	4.88%	N/A	159	5.83%	N/A	422	5.33%	N/A	1,040	5.19%					
Age 25 to 44 Male	0.003	N/A	1,135	12.06%	N/A	291	10.67%	N/A	1,014	12.82%	N/A	2,440	12.17%					
Age 25 to 44 Female	0.133	N/A	1,025	10.89%	N/A	240	8.80%	N/A	837	10.58%	N/A	2,102	10.49%					
Age 45 and Older Male	0.107	N/A	1,691	17.97%	N/A	541	19.85%	N/A	1,430	18.07%	N/A	3,662	18.27%					
Age 45 and Older Female	0.027	N/A	2,325	24.71%	N/A	486	17.93%	N/A	1,803	22.79%	N/A	4,614	23.02%					
Duration Category																		
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	39	0.41%	N/A	38	1.39%	N/A	42	0.59%	N/A	119	0.59%					
Diagnosis Period Duration, 8 Months	0.320	N/A	21	0.22%	N/A	15	0.55%	N/A	17	0.21%	N/A	53	0.26%					
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	96	1.02%	N/A	64	2.35%	N/A	107	1.35%	N/A	267	1.33%					
Diagnosis Period Duration, 12 Months	0.000	N/A	9,252	98.34%	N/A	2,609	95.71%	N/A	7,746	97.90%	N/A	19,607	97.81%					
Homelessness Category																		
Homelessness	0.931	N/A	74	0.79%	N/A	24	0.88%	N/A	52	0.66%	N/A	150	0.75%					
Disease Categories																		
Cancer, very high	3.067	15	48	0.51%	7	22	0.81%	12	44	0.56%	11	114	0.57%					
Cancer, high	0.816	26	103	1.09%	20	36	1.32%	28	81	1.02%	27	220	1.10%					
Cancer, medium	0.611	24	145	1.54%	31	29	1.03%	19	150	1.90%	25	323	1.61%					
Cancer, low	0.318	38	105	1.12%	39	26	0.95%	37	85	1.07%	37	216	1.08%					
Cardiovascular, very high	1.460	29	50	0.53%	29	12	0.44%	25	54	0.68%	29	116	0.58%					
Cardiovascular, medium	0.584	3	1,042	11.08%	2	286	10.49%	2	865	10.93%	3	2,193	10.94%					
Cardiovascular, extra low to low	0.081	7	3,124	33.21%	8	730	26.78%	8	2,506	31.67%	7	6,360	31.73%					
Cerebrovascular, medium	0.115	43	112	1.19%	42	38	1.39%	44	93	1.18%	44	243	1.21%					
CNS, high	0.781	32	72	0.77%	30	22	0.81%	35	46	0.58%	32	140	0.70%					
CNS, medium	0.479	27	171	1.82%	19	69	2.53%	20	189	2.39%	22	429	2.14%					
CNS, low	0.243	5	1,537	16.34%	5	411	15.08%	5	1,300	16.43%	5	3,248	16.20%					
DD, low to medium	0.174	30	352	3.74%	32	91	3.34%	30	370	4.68%	30	813	4.06%					
Diabetes, type 1	0.862	18	146	1.55%	21	34	1.25%	21	104	1.31%	19	284	1.42%					
Diabetes, type 2	0.199	6	1,626	17.20%	6	356	13.06%	6	1,294	16.23%	6	3,266	16.29%					
Gastro, high	0.320	35	142	1.51%	34	36	1.32%	34	113	1.43%	35	291	1.45%					
Gastro, medium	0.268	25	326	3.47%	25	98	3.60%	26	271	3.43%	26	695	3.47%					
Gastro, low	0.135	8	1,816	19.30%	9	404	14.82%	9	1,432	18.10%	8	3,652	18.22%					
Hematological, extra high	4.752	44	2	0.02%	45	0	0.00%	38	4	0.05%	43	6	0.03%					
Hematological, medium to very high	0.931	12	162	1.72%	15	41	1.50%	11	161	2.03%	12	364	1.82%					
Hematological, low	0.370	33	130	1.38%	33	39	1.43%	33	99	1.25%	33	268	1.34%					
Infectious, high to very high	0.300	28	270	2.87%	27	78	2.86%	29	216	2.73%	28	564	2.81%					
Infectious, low to medium	0.188	31	323	3.43%	28	105	3.85%	31	274	3.46%	31	702	3.50%					
Metabolic, high	0.468	22	216	2.30%	26	55	2.02%	22	181	2.29%	21	452	2.25%					
Metabolic, medium	0.239	11	679	7.22%	14	172	6.31%	13	563	7.12%	13	1,414	7.05%					
Pregnancy, complete	0.173	41	93	0.99%	43	25	0.92%	43	68	0.86%	42	186	0.93%					
Pregnancy, incomplete	0.841	40	23	0.24%	38	11	0.40%	40	19	0.24%	40	53	0.26%					
Psychiatric, high	0.643	4	617	6.56%	4	171	6.27%	4	530	6.70%	4	1,318	6.57%					
Psychiatric, low to medium	0.225	1	3,533	37.55%	1	1,035	37.97%	1	3,118	39.41%	1	7,686	38.34%					
Pulmonary, very high	0.816	13	184	1.96%	16	46	1.69%	17	131	1.66%	17	361	1.80%					
Pulmonary, high	0.481	45	18	0.19%	44	5	0.18%	45	22	0.28%	45	45	0.22%					
Pulmonary, medium	0.472	16	290	3.08%	11	103	3.78%	16	251	3.17%	16	644	3.21%					
Pulmonary, low	0.131	9	1,601	17.02%	12	347	12.73%	10	1,166	14.74%	10	3,114	15.53%					
Rare Diseases	2.664	39	9	0.10%	40	2	0.07%	39	7	0.09%	39	18	0.09%					
Renal, extra high	4.191	10	47	0.50%	18	8	0.29%	7	49	0.62%	9	104	0.52%					
Renal, medium	0.362	14	412	4.38%	13	116	4.26%	15	348	4.40%	14	876	4.37%					
Renal, low	0.277	21	368	3.91%	22	104	3.82%	27	260	3.29%	23	732	3.65%					
Skeletal, medium	0.254	2	2,551	27.12%	3	579	21.24%	3	1,988	25.13%	2	5,118	25.53%					
Skeletal, very low to low	0.070	33	691	7.34%	36	157	5.76%	32	548	6.93%	34	1,396	6.96%					
Skin, low to high	0.624	23	146	1.55%	24	43	1.58%	24	128	1.62%	24	317	1.58%					
Skin, very low	0.169	20	617	6.56%	23	161	5.91%	23	494	6.24%	20	1,272	6.35%					
Substance abuse, low	0.324	17	409	4.35%	10	161	5.91%	14	400	5.06%	15	970	4.84%					
Substance abuse, very low	0.202	37	181	1.92%	34	68	2.49%	36	147	1.86%	36	396	1.98%					
Disabled Children Add-On - CNS, high	1.388	36	28	0.30%	37	4	0.26%	41	10	0.13%	41	45	0.22%					
Disabled Children Add-On - Gastro, high	1.508	19	80	0.85%	17	23	0.84%	18	67	0.85%	18	170	0.85%					
Disabled Children Add-On - Pulmonary, very high	0.419	42	36	0.38%	41	12	0.44%	42	31	0.39%	41	79	0.39%					
Population Statistics																		
No Classified Disease Categories	N/A	N/A	1,924	20.45%	N/A	678	24.87%	N/A	1,634	20.65%	N/A	4,236	21.13%					

Demographic Categories	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Age 1 to 4	1.364	N/A	5	4.76%	N/A	3	3.45%	N/A	18	12.95%	N/A	26	7.85%
Age 5 to 14 Male	0.701	N/A	6	5.71%	N/A	11	12.64%	N/A	15	10.79%	N/A	32	9.67%
Age 5 to 14 Female	0.872	N/A	3	2.86%	N/A	6	6.90%	N/A	8	5.76%	N/A	17	5.14%
Age 15 to 24 Male	0.522	N/A	8	7.62%	N/A	7	8.05%	N/A	7	5.04%	N/A	22	6.65%
Age 15 to 24 Female	0.831	N/A	7	6.57%	N/A	6	6.90%	N/A	5	3.60%	N/A	18	5.44%
Age 25 to 44 Male	0.797	N/A	14	13.33%	N/A	12	13.79%	N/A	13	9.35%	N/A	39	11.78%
Age 25 to 44 Female	1.120	N/A	9	8.57%	N/A	7	8.05%	N/A	15	10.79%	N/A	31	9.37%
Age 45 and Older Male	1.188	N/A	24	22.86%	N/A	18	20.69%	N/A	34	24.46%	N/A	76	22.96%
Age 45 and Older Female	1.249	N/A	29	27.62%	N/A	17	19.54%	N/A	24	17.27%	N/A	70	21.15%

Exhibit 3B Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - Central Region - Q1 to Q2 2025 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period													
Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	9,950	100.00%	N/A	2,905	100.00%	N/A	7,968	100.00%	N/A	20,823	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	346	3.48%	N/A	303	10.43%	N/A	308	3.87%	N/A	957	4.60%
Age 5 to 14 Male	0.184	N/A	1,129	11.35%	N/A	397	13.67%	N/A	938	11.77%	N/A	2,464	11.83%
Age 5 to 14 Female	0.265	N/A	514	5.17%	N/A	170	5.85%	N/A	438	5.50%	N/A	1,122	5.39%
Age 15 to 24 Male	0.000	N/A	1,020	10.25%	N/A	281	9.67%	N/A	776	9.74%	N/A	2,077	9.97%
Age 15 to 24 Female	0.187	N/A	541	5.44%	N/A	155	5.34%	N/A	404	5.07%	N/A	1,100	5.28%
Age 25 to 44 Male	0.003	N/A	1,221	12.27%	N/A	296	10.19%	N/A	1,013	12.71%	N/A	2,530	12.15%
Age 25 to 44 Female	0.133	N/A	1,060	10.65%	N/A	233	8.02%	N/A	787	9.88%	N/A	2,080	9.99%
Age 45 and Older Male	0.107	N/A	1,784	17.93%	N/A	596	20.52%	N/A	1,542	19.35%	N/A	3,922	18.83%
Age 45 and Older Female	0.027	N/A	2,335	23.47%	N/A	474	16.32%	N/A	1,762	22.11%	N/A	4,571	21.95%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	32	0.32%	N/A	29	1.00%	N/A	29	0.36%	N/A	90	0.43%
Diagnosis Period Duration, 8 Months	0.320	N/A	17	0.17%	N/A	7	0.24%	N/A	30	0.38%	N/A	54	0.26%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	87	0.87%	N/A	71	2.44%	N/A	84	1.05%	N/A	242	1.16%
Diagnosis Period Duration, 12 Months	0.000	N/A	9,814	98.63%	N/A	2,798	96.32%	N/A	7,825	98.21%	N/A	20,437	98.15%
Homelessness Category													
Homelessness	0.931	N/A	111	1.12%	N/A	46	1.58%	N/A	100	1.26%	N/A	257	1.23%
Disease Categories													
Cancer, very high	3.067	10	71	0.71%	7	27	0.93%	14	45	0.56%	10	143	0.69%
Cancer, high	0.816	27	124	1.25%	27	32	1.10%	25	118	1.48%	27	274	1.32%
Cancer, medium	0.611	29	158	1.59%	25	45	1.55%	19	179	2.25%	25	382	1.83%
Cancer, low	0.318	39	102	1.03%	37	34	1.17%	40	77	0.97%	39	213	1.02%
Cardiovascular, very high	1.460	18	99	0.99%	22	22	0.76%	27	56	0.70%	23	177	0.85%
Cardiovascular, medium	0.584	2	1,070	10.75%	2	302	10.40%	3	837	10.50%	2	2,209	10.61%
Cardiovascular, extra low to low	0.081	8	3,238	32.54%	9	825	28.40%	8	2,586	32.45%	8	6,649	31.93%
Cerebrovascular, medium	0.115	41	164	1.65%	42	50	1.72%	42	127	1.59%	42	341	1.64%
CNS, high	0.781	30	102	1.03%	30	29	1.00%	30	94	1.18%	30	225	1.08%
CNS, medium	0.479	20	294	2.95%	18	83	2.86%	21	209	2.62%	19	586	2.81%
CNS, low	0.243	5	1,742	17.51%	5	477	16.42%	5	1,386	17.39%	5	3,605	17.31%
DD, low to medium	0.174	31	454	4.56%	31	119	4.10%	31	351	4.41%	31	924	4.44%
Diabetes, type 1	0.862	22	152	1.53%	23	37	1.27%	22	112	1.41%	22	301	1.45%
Diabetes, type 2	0.199	7	1,726	17.35%	8	386	13.29%	6	1,269	15.93%	7	3,381	16.24%
Gastro, high	0.320	35	170	1.71%	33	54	1.86%	36	133	1.67%	35	357	1.71%
Gastro, medium	0.268	28	378	3.80%	29	85	2.93%	28	293	3.68%	29	756	3.63%
Gastro, low	0.135	9	1,846	18.55%	12	405	13.94%	10	1,289	16.18%	9	3,540	17.00%
Hematological, extra high	4.752	45	1	0.01%	39	2	0.07%	39	6	0.08%	41	9	0.04%
Hematological, medium to very high	0.931	11	224	2.25%	16	48	1.65%	11	181	2.27%	12	453	2.18%
Hematological, low	0.370	32	178	1.79%	34	46	1.58%	34	116	1.46%	33	340	1.63%
Infectious, high to very high	0.300	25	353	3.55%	28	84	2.89%	23	321	4.03%	26	758	3.64%
Infectious, low to medium	0.188	33	341	3.43%	32	97	3.34%	32	255	3.20%	32	693	3.33%
Metabolic, high	0.468	19	308	3.10%	24	68	2.34%	20	223	2.80%	20	599	2.88%
Metabolic, medium	0.239	15	733	7.37%	14	190	6.54%	13	594	7.45%	15	1,517	7.29%
Pregnancy, complete	0.173	44	74	0.74%	45	23	0.79%	45	41	0.51%	45	138	0.66%
Pregnancy, incomplete	0.841	40	29	0.29%	41	9	0.31%	41	22	0.28%	40	60	0.29%
Psychiatric, high	0.643	4	928	9.33%	4	213	7.33%	4	683	8.57%	4	1,824	8.76%
Psychiatric, low to medium	0.225	1	3,952	39.72%	1	1,085	37.35%	1	3,168	39.76%	1	8,205	39.40%
Pulmonary, very high	0.816	17	180	1.81%	20	41	1.41%	17	140	1.76%	17	361	1.73%
Pulmonary, high	0.481	43	35	0.35%	44	9	0.31%	44	23	0.29%	44	67	0.32%
Pulmonary, medium	0.472	14	386	3.88%	11	116	3.99%	15	285	3.58%	14	787	3.78%
Pulmonary, low	0.131	13	1,497	15.05%	13	372	12.81%	12	1,138	14.28%	13	3,007	14.44%
Rare Diseases	2.664	38	13	0.13%	40	3	0.10%	35	16	0.20%	37	32	0.15%
Renal, extra high	4.191	6	90	0.90%	6	22	0.76%	7	51	0.64%	6	163	0.78%
Renal, medium	0.362	16	439	4.41%	17	117	4.03%	16	333	4.18%	16	889	4.27%
Renal, low	0.277	21	480	4.82%	21	117	4.03%	24	348	4.37%	21	945	4.54%
Skeletal, medium	0.254	3	2,451	24.63%	3	617	21.24%	2	1,997	25.06%	3	5,065	24.32%
Skeletal, very low to low	0.070	34	854	8.58%	35	212	7.30%	33	665	8.35%	34	1,731	8.31%
Skin, low to high	0.624	26	166	1.67%	19	58	2.00%	26	151	1.90%	24	375	1.80%
Skin, very low	0.169	24	659	6.62%	26	161	5.54%	29	464	5.82%	28	1,284	6.17%
Substance abuse, low	0.324	12	633	6.36%	10	176	6.06%	9	544	6.83%	11	1,353	6.50%
Substance abuse, very low	0.202	37	190	1.91%	36	54	1.86%	38	147	1.84%	38	391	1.89%
Disabled Children Add-On - CNS, high	1.388	36	35	0.35%	38	7	0.24%	37	28	0.35%	36	70	0.34%
Disabled Children Add-On - Gastro, high	1.508	23	85	0.85%	15	30	1.03%	18	73	0.92%	18	188	0.90%
Disabled Children Add-On - Pulmonary, very hig	0.419	42	41	0.41%	43	12	0.41%	43	32	0.40%	43	85	0.41%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,752	17.61%	N/A	604	20.79%	N/A	1,462	18.35%	N/A	3,818	18.34%
Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	1.364	N/A	4	3.96%	N/A	2	2.82%	N/A	2	1.98%	N/A	8	2.93%
Age 5 to 14 Male	0.701	N/A	5	4.95%	N/A	6	8.45%	N/A	7	6.93%	N/A	18	6.59%
Age 5 to 14 Female	0.872	N/A	5	4.95%	N/A	2	2.82%	N/A	2	1.98%	N/A	9	3.30%
Age 15 to 24 Male	0.522	N/A	4	3.96%	N/A	5	7.04%	N/A	5	4.95%	N/A	14	5.13%
Age 15 to 24 Female	0.831	N/A	4	3.96%	N/A	7	9.86%	N/A	1	0.99%	N/A	12	4.40%
Age 25 to 44 Male	0.797	N/A	10	9.90%	N/A	5	7.04%	N/A	10	9.90%	N/A	25	9.16%
Age 25 to 44 Female	1.120	N/A	11	10.89%	N/A	9	12.68%	N/A	15	14.85%	N/A	35	12.82%
Age 45 and Older Male	1.188	N/A	29	28.71%	N/A	15	21.13%	N/A	29	28.71%	N/A	73	26.74%
Age 45 and Older Female	1.249	N/A	29	28.71%	N/A	20	28.17%	N/A	30	29.70%	N/A	79	28.94%
Risk Adjustment Results													
Scored Members		Magnolia			Molina			United			Total		
Member Months		9,950			2,905			7,968			20,823		
Unadjusted Plan Factor		1.028			0.994			1.006			1.015		
Budget Neutral Plan Factor		1.013			0.979			0.991			1.000		
Unscored Members		Magnolia			Molina			United			Total		
Member Months		101			71			101			273		
Unadjusted Plan Factor		1.086			1.042			1.084			1.074		
Budget Neutral Plan Factor		1.011			0.970			1.010			1.000		
Total Members		Magnolia			Molina			United			Total		
Member Months		10,051			2,976			8,069			21,096		
Unadjusted Plan Factor		1.029			0.994			1.007			1.016		
Budget Neutral Plan Factor		1.013			0.979			0.991			1.000		

Exhibit 3C Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - South Region - 01 to 02 2025 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.113	N/A	6,945	100.00%	N/A	2,464	100.00%	N/A	7,238	100.00%	N/A	16,647	100.00%
Demographic Categories													
Age 1 to 4	0.470	N/A	236	3.40%	N/A	194	7.87%	N/A	240	3.32%	N/A	670	4.02%
Age 5 to 14 Male	0.184	N/A	903	13.00%	N/A	293	11.89%	N/A	862	11.91%	N/A	2,058	12.36%
Age 5 to 14 Female	0.265	N/A	425	6.12%	N/A	151	6.13%	N/A	382	5.28%	N/A	958	5.75%
Age 15 to 24 Male	0.000	N/A	672	9.68%	N/A	241	9.78%	N/A	687	9.49%	N/A	1,600	9.61%
Age 15 to 24 Female	0.187	N/A	334	4.81%	N/A	137	5.56%	N/A	366	5.06%	N/A	837	5.03%
Age 25 to 44 Male	0.003	N/A	735	10.58%	N/A	239	9.70%	N/A	829	11.45%	N/A	1,803	10.83%
Age 25 to 44 Female	0.133	N/A	676	9.73%	N/A	193	7.83%	N/A	708	9.78%	N/A	1,577	9.47%
Age 45 and Older Male	0.107	N/A	1,278	18.40%	N/A	499	20.25%	N/A	1,409	19.47%	N/A	3,186	19.14%
Age 45 and Older Female	0.027	N/A	1,686	24.28%	N/A	517	20.98%	N/A	1,755	24.25%	N/A	3,958	23.78%
Duration Category													
Diagnosis Period Duration, 6 to 7 Months	0.382	N/A	36	0.52%	N/A	33	1.34%	N/A	38	0.53%	N/A	107	0.64%
Diagnosis Period Duration, 8 Months	0.320	N/A	19	0.27%	N/A	11	0.45%	N/A	27	0.37%	N/A	57	0.34%
Diagnosis Period Duration, 9 to 11 Months	0.167	N/A	94	1.35%	N/A	57	2.31%	N/A	98	1.35%	N/A	249	1.50%
Diagnosis Period Duration, 12 Months	0.000	N/A	6,796	97.85%	N/A	2,363	95.90%	N/A	7,075	97.75%	N/A	16,234	97.52%
Homelessness Category													
Homelessness	0.931	N/A	86	1.24%	N/A	54	2.19%	N/A	83	1.15%	N/A	223	1.34%
Disease Categories													
Cancer, very high	3.067	14	43	0.62%	11	17	0.69%	14	40	0.55%	14	100	0.60%
Cancer, high	0.816	22	119	1.71%	19	49	1.99%	26	100	1.38%	23	268	1.61%
Cancer, medium	0.611	30	101	1.45%	32	32	1.30%	27	131	1.81%	30	264	1.59%
Cancer, low	0.318	39	88	1.27%	37	32	1.30%	36	102	1.41%	36	222	1.33%
Cardiovascular, very high	1.460	25	60	0.86%	26	18	0.73%	30	45	0.62%	28	123	0.74%
Cardiovascular, medium	0.584	2	813	11.71%	2	280	11.36%	2	815	11.26%	2	1,908	11.46%
Cardiovascular, extra low to low	0.081	9	2,171	31.26%	10	672	27.27%	8	2,391	33.03%	10	5,234	31.44%
Cerebrovascular, medium	0.115	41	135	1.94%	41	45	1.83%	41	130	1.80%	41	310	1.86%
CNS, high	0.781	33	63	0.91%	34	22	0.89%	33	72	0.99%	33	157	0.94%
CNS, medium	0.479	17	247	3.56%	24	64	2.60%	18	221	3.05%	18	532	3.20%
CNS, low	0.243	5	1,390	20.01%	5	421	17.09%	5	1,415	19.55%	5	3,226	19.38%
DD, low to medium	0.174	29	418	6.02%	29	120	4.87%	29	417	5.76%	29	955	5.74%
Diabetes, type 1	0.862	20	128	1.84%	33	22	0.89%	17	128	1.77%	20	278	1.67%
Diabetes, type 2	0.199	6	1,142	16.44%	6	349	14.16%	6	1,135	15.68%	6	2,626	15.77%
Gastro, high	0.320	35	132	1.90%	30	62	2.52%	35	127	1.75%	35	321	1.93%
Gastro, medium	0.268	24	332	4.78%	27	97	3.94%	25	322	4.45%	26	751	4.51%
Gastro, low	0.135	8	1,491	21.47%	9	436	17.69%	9	1,430	19.76%	7	3,357	20.17%
Hematological, extra high	4.752	40	4	0.06%	42	1	0.04%	45	1	0.01%	43	6	0.04%
Hematological, medium to very high	0.931	13	146	2.10%	17	44	1.79%	16	125	1.73%	15	315	1.89%
Hematological, low	0.370	31	152	2.19%	28	57	2.31%	34	123	1.70%	32	332	1.99%
Infectious, high to very high	0.300	28	265	3.82%	21	107	4.34%	28	255	3.52%	27	627	3.77%
Infectious, low to medium	0.188	32	277	3.99%	31	105	4.26%	31	301	4.16%	31	683	4.10%
Metabolic, high	0.468	27	180	2.59%	25	62	2.52%	24	193	2.67%	25	435	2.61%
Metabolic, medium	0.239	16	502	7.23%	13	197	8.00%	15	497	6.87%	16	1,196	7.18%
Pregnancy, complete	0.173	45	47	0.68%	43	18	0.73%	43	51	0.70%	44	116	0.70%
Pregnancy, incomplete	0.841	42	17	0.24%	39	8	0.32%	40	20	0.28%	40	45	0.27%
Psychiatric, high	0.643	4	575	8.28%	4	179	7.26%	4	588	8.12%	4	1,342	8.06%
Psychiatric, low to medium	0.225	1	2,977	42.87%	1	989	40.14%	1	3,198	44.18%	1	7,164	43.03%
Pulmonary, very high	0.816	12	180	2.59%	15	54	2.19%	13	169	2.33%	12	403	2.42%
Pulmonary, high	0.481	44	17	0.24%	45	5	0.20%	44	18	0.25%	45	40	0.24%
Pulmonary, medium	0.472	15	266	3.83%	12	108	4.38%	12	294	4.06%	13	668	4.01%
Pulmonary, low	0.131	11	1,172	16.88%	14	355	14.41%	10	1,122	15.50%	11	2,649	15.91%
Rare Diseases	2.664	36	14	0.20%	44	1	0.04%	38	10	0.14%	39	25	0.15%
Renal, extra high	4.191	7	50	0.72%	7	16	0.65%	11	35	0.48%	9	101	0.61%
Renal, medium	0.362	18	311	4.48%	16	118	4.79%	19	287	3.97%	17	716	4.30%
Renal, low	0.277	21	370	5.33%	23	115	4.67%	21	348	4.81%	21	833	5.00%
Skeletal, medium	0.254	3	1,574	22.66%	3	525	21.31%	3	1,634	22.58%	3	3,733	22.42%
Skeletal, very low to low	0.070	34	697	10.04%	35	217	8.81%	32	803	11.09%	34	1,717	10.31%
Skin, low to high	0.624	26	136	1.96%	20	55	2.23%	22	153	2.11%	24	344	2.07%
Skin, very low	0.169	23	565	8.14%	22	189	7.67%	20	580	8.01%	22	1,334	8.01%
Substance abuse, low	0.324	10	540	7.78%	8	189	7.67%	7	634	8.76%	8	1,363	8.19%
Substance abuse, very low	0.202	38	144	2.07%	36	53	2.15%	37	136	1.88%	38	333	2.00%
Disabled Children Add-On - CNS, high	1.388	37	25	0.36%	38	7	0.28%	39	17	0.23%	37	49	0.29%
Disabled Children Add-On - Gastro, high	1.508	19	74	1.07%	18	27	1.10%	23	63	0.87%	19	164	0.99%
Disabled Children Add-On - Pulmonary, very high	0.419	43	29	0.42%	40	13	0.53%	42	29	0.40%	42	71	0.43%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,243	17.90%	N/A	524	21.27%	N/A	1,281	17.70%	N/A	3,048	18.31%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	1.364	N/A	9	6.77%	N/A	3	3.49%	N/A	4	3.54%	N/A	16	4.82%
Age 5 to 14 Male	0.701	N/A	14	10.53%	N/A	7	8.14%	N/A	4	3.54%	N/A	25	7.53%
Age 5 to 14 Female	0.872	N/A	1	0.75%	N/A	3	3.49%	N/A	4	3.54%	N/A	8	2.41%
Age 15 to 24 Male	0.522	N/A	5	3.76%	N/A	10	11.63%	N/A	5	4.42%	N/A	20	6.02%
Age 15 to 24 Female	0.831	N/A	4	3.01%	N/A	6	6.98%	N/A	4	3.54%	N/A	14	4.22%
Age 25 to 44 Male	0.797	N/A	17	12.78%	N/A	9	10.47%	N/A	15	13.27%	N/A	41	12.35%
Age 25 to 44 Female	1.120	N/A	16	12.03%	N/A	12	13.95%	N/A	19	16.81%	N/A	47	14.16%
Age 45 and Older Male	1.188	N/A	29	21.80%	N/A	15	17.44%	N/A	25	22.12%	N/A	69	20.78%
Age 45 and Older Female	1.249	N/A	38	28.57%	N/A	21	24.42%	N/A	33	29.20%	N/A	92	27.71%
Risk Adjustment Results													
Scored Members													
Member Months			6,945			2,464			7,238			16,647	
Unadjusted Plan Factor			1.071			1.041			1.027			1.048	
Budget Neutral Plan Factor			1.023			0.994			0.980			1.000	
Unscored Members													
Member Months			133			86			113			332	
Unadjusted Plan Factor			1.070			1.006			1.078			1.056	
Budget Neutral Plan Factor			1.013			0.952			1.021			1.000	
Total Members													
Member Months			7,078			2,550			7,351			16,979	
Unadjusted Plan Factor			1.071			1.040			1.028			1.048	
Budget Neutral Plan Factor			1.022			0.993			0.981			1.000	

Exhibit 3D
Mississippi Division of Medicaid
Risk Adjustment Results
MA Adult - North Region - O1 to O2 2025 Prospective Risk Scores
SFY 2024 Diagnosis Period - October 2024 Enrollment Period

	Risk Weight	Scored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.126	N/A	5,653	100.00%	N/A	3,697	100.00%	N/A	5,244	100.00%	N/A	14,594	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	21	0.37%	N/A	10	0.27%	N/A	19	0.36%	N/A	50	0.34%
Age 19 to 24 Female	0.460	N/A	505	8.93%	N/A	432	11.69%	N/A	543	10.35%	N/A	1,480	10.14%
Age 25 to 44 Male	0.111	N/A	279	4.94%	N/A	187	5.06%	N/A	281	5.36%	N/A	747	5.12%
Age 25 to 44 Female	0.305	N/A	4,237	74.95%	N/A	2,776	75.09%	N/A	3,884	74.07%	N/A	10,897	74.67%
Age 45 and Older Male	0.127	N/A	105	1.86%	N/A	69	1.87%	N/A	93	1.77%	N/A	267	1.83%
Age 45 and Older Female	0.326	N/A	506	8.95%	N/A	223	6.03%	N/A	424	8.09%	N/A	1,153	7.90%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	70	1.24%	N/A	76	2.06%	N/A	80	1.53%	N/A	226	1.55%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	5,583	98.76%	N/A	3,621	97.94%	N/A	5,164	98.47%	N/A	14,368	98.45%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	437	7.73%	N/A	278	7.52%	N/A	424	8.09%	N/A	1,139	7.80%
Homelessness Category													
Homelessness	0.472	N/A	7	0.12%	N/A	2	0.05%	N/A	0	0.00%	N/A	9	0.06%
Disease Categories													
Cancer, high to very high	2.607	14	29	0.51%	16	14	0.38%	21	14	0.27%	17	57	0.39%
Cancer, low to medium	0.394	27	58	1.03%	29	28	0.76%	30	45	0.86%	29	131	0.90%
Cardiovascular, very high	2.004	33	4	0.07%	34	3	0.08%	33	5	0.10%	33	12	0.08%
Cardiovascular, medium	0.547	10	212	3.75%	7	143	3.87%	7	219	4.18%	8	574	3.93%
Cardiovascular, low	0.442	11	179	3.17%	12	104	2.81%	15	150	2.86%	12	433	2.97%
Cardiovascular, extra low	0.118	5	1,596	28.23%	6	895	24.21%	6	1,273	24.28%	6	3,764	25.79%
Cerebrovascular, medium	0.456	38	9	0.16%	38	5	0.14%	39	9	0.17%	38	23	0.16%
CNS, high	0.552	34	14	0.25%	36	5	0.14%	38	8	0.15%	37	27	0.19%
CNS, medium	0.544	30	32	0.57%	33	15	0.41%	26	40	0.76%	30	87	0.60%
CNS, low	0.425	8	306	5.41%	10	163	4.41%	9	267	5.09%	9	736	5.04%
Diabetes, type 1	1.366	17	45	0.80%	14	31	0.84%	14	49	0.93%	15	125	0.86%
Diabetes, type 2	0.241	9	529	9.36%	9	300	8.11%	8	488	9.27%	7	1,315	9.01%
Eye, very low to extra low	0.271	23	115	2.03%	28	55	1.49%	25	100	1.91%	25	270	1.85%
Gastro, high	0.864	35	8	0.14%	35	5	0.14%	35	10	0.19%	36	23	0.16%
Gastro, medium	0.585	18	89	1.57%	18	58	1.57%	17	76	1.45%	18	223	1.53%
Gastro, low	0.278	4	829	14.66%	5	423	11.44%	5	594	11.33%	4	1,846	12.65%
Genital, extra low	0.232	13	336	5.94%	11	236	6.38%	11	324	6.18%	11	896	6.14%
Infectious, very high	1.355	39	1	0.02%	39	0	0.00%	40	2	0.04%	40	3	0.02%
Infectious, high	0.426	22	81	1.43%	22	46	1.24%	20	88	1.68%	21	215	1.47%
Infectious, low to medium	0.196	28	110	1.95%	25	87	2.35%	29	104	1.98%	27	301	2.06%
Metabolic, high	0.528	29	34	0.60%	26	32	0.87%	28	39	0.74%	28	105	0.72%
Metabolic, medium	0.296	12	266	4.71%	15	131	3.54%	12	229	4.37%	14	626	4.29%
Pregnancy, complete	0.295	6	617	10.91%	4	433	11.71%	4	622	11.86%	5	1,672	11.46%
Pregnancy, incomplete	1.430	3	163	2.88%	2	159	4.30%	3	176	3.36%	2	498	3.41%
Psychiatric, high	0.665	24	45	0.80%	23	26	0.70%	23	45	0.86%	23	116	0.79%
Psychiatric, medium	0.490	25	59	1.04%	27	34	0.92%	24	59	1.13%	24	152	1.04%
Psychiatric, low	0.200	2	1,296	22.93%	3	898	24.29%	2	1,297	24.73%	3	3,491	23.92%
Pulmonary, medium to very high	0.499	20	79	1.40%	19	57	1.54%	18	87	1.66%	19	223	1.53%
Pulmonary, low	0.271	7	486	8.60%	8	271	7.33%	10	382	7.48%	10	1,149	7.87%
Rare Diseases	6.883	36	1	0.02%	39	0	0.00%	32	2	0.04%	35	3	0.02%
Renal, extra high	2.600	40	0	0.00%	37	1	0.03%	36	3	0.06%	39	4	0.03%
Renal, medium	0.539	26	51	0.90%	24	32	0.87%	27	40	0.76%	26	123	0.84%
Renal, low	0.472	19	85	1.50%	20	54	1.46%	19	81	1.54%	20	220	1.51%
Skeletal, medium	0.270	1	1,818	32.16%	1	1,076	29.10%	1	1,670	31.85%	1	4,564	31.27%
Skeletal, low	0.251	21	144	2.55%	21	82	2.22%	22	122	2.33%	22	348	2.38%
Skeletal, very low	0.189	31	91	1.61%	31	51	1.38%	31	79	1.51%	31	221	1.51%
Skin, high	1.732	37	3	0.05%	32	5	0.14%	37	4	0.08%	34	12	0.08%
Skin, low	0.891	32	17	0.30%	30	11	0.30%	34	10	0.19%	32	38	0.26%
Skin, very low	0.178	16	354	6.26%	17	198	5.36%	16	338	6.45%	16	890	6.10%
Substance abuse, very low to low	0.299	15	244	4.32%	13	152	4.11%	13	226	4.31%	13	622	4.26%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,103	19.51%	N/A	798	21.59%	N/A	1,085	20.69%	N/A	2,986	20.46%

		Unscored Members												
		Magnolia			Molina			United			Total			
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories														
	Age 19 to 24 Male	0.331	N/A	3	0.76%	N/A	4	1.32%	N/A	4	1.18%	N/A	11	1.06%
	Age 19 to 24 Female	1.115	N/A	36	9.09%	N/A	22	7.24%	N/A	30	8.85%	N/A	88	8.47%
	Age 25 to 44 Male	0.639	N/A	42	10.61%	N/A	43	14.14%	N/A	41	12.09%	N/A	126	12.13%
	Age 25 to 44 Female	0.993	N/A	275	69.44%	N/A	205	67.43%	N/A	231	68.14%	N/A	711	68.43%
	Age 45 and Older Male	0.943	N/A	11	2.78%	N/A	8	2.63%	N/A	8	2.36%	N/A	27	2.60%
	Age 45 and Older Female	1.245	N/A	29	7.32%	N/A	22	7.24%	N/A	25	7.37%	N/A	76	7.31%

Risk Adjustment Results				
Scored Members		Magnolia	Molina	United
Member Months		5,653	3,697	5,244
Unadjusted Plan Factor		0.972	0.959	0.968
Budget Neutral Plan Factor		1.005	0.991	1.001
Unscored Members				
Member Months		396	304	339
Unadjusted Plan Factor		0.978	0.960	0.970
Budget Neutral Plan Factor		1.008	0.989	1.000
Total Members				
Member Months		6,049	4,001	5,583
Unadjusted Plan Factor		0.972	0.959	0.969
Budget Neutral Plan Factor		1.005	0.991	1.001

Exhibit 3E Mississippi Division of Medicaid Risk Adjustment Results MA Adult - Central Region - O1 to O2 2025 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period													
Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.126	N/A	6,258	100.00%	N/A	4,537	100.00%	N/A	5,790	100.00%	N/A	16,585	100.00%
Demographic Categories													
Age 19 to 24 Male	0.000	N/A	12	0.19%	N/A	7	0.15%	N/A	12	0.21%	N/A	31	0.19%
Age 19 to 24 Female	0.460	N/A	569	9.09%	N/A	546	12.03%	N/A	549	9.48%	N/A	1,664	10.03%
Age 25 to 44 Male	0.111	N/A	280	4.47%	N/A	204	4.50%	N/A	253	4.37%	N/A	737	4.44%
Age 25 to 44 Female	0.305	N/A	4,683	74.83%	N/A	3,434	75.69%	N/A	4,327	74.73%	N/A	12,444	75.03%
Age 45 and Older Male	0.127	N/A	136	2.17%	N/A	64	1.41%	N/A	121	2.09%	N/A	321	1.94%
Age 45 and Older Female	0.326	N/A	578	9.24%	N/A	282	6.22%	N/A	528	9.12%	N/A	1,388	8.37%
Duration Category													
Diagnosis Period Duration, 6 Months	0.448	N/A	95	1.52%	N/A	76	1.68%	N/A	84	1.45%	N/A	255	1.54%
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	6,163	98.48%	N/A	4,461	98.32%	N/A	5,706	98.55%	N/A	16,330	98.46%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.126)	N/A	491	7.85%	N/A	346	7.63%	N/A	451	7.79%	N/A	1,288	7.77%
Disease Categories													
Homelessness	0.472	N/A	10	0.16%	N/A	8	0.18%	N/A	10	0.17%	N/A	28	0.17%
Disease Categories													
Cancer, high to very high	2.607	19	22	0.35%	17	12	0.26%	14	28	0.48%	18	62	0.37%
Cancer, low to medium	0.394	32	47	0.75%	29	37	0.82%	32	48	0.83%	30	132	0.80%
Cardiovascular, very high	2.004	36	5	0.08%	38	0	0.00%	37	5	0.09%	37	10	0.06%
Cardiovascular, medium	0.547	7	273	4.36%	8	160	3.53%	7	280	4.84%	7	713	4.30%
Cardiovascular, low	0.442	13	205	3.28%	13	110	2.42%	16	145	2.50%	13	460	2.77%
Cardiovascular, extra low	0.118	6	1,671	26.70%	6	1,063	23.43%	6	1,529	26.41%	6	4,263	25.70%
Cerebrovascular, medium	0.456	39	9	0.14%	36	5	0.11%	39	12	0.21%	39	26	0.16%
CNS, high	0.552	33	31	0.50%	33	16	0.35%	27	42	0.73%	31	89	0.54%
CNS, medium	0.544	30	38	0.61%	32	19	0.42%	33	28	0.48%	32	85	0.51%
CNS, low	0.425	9	331	5.29%	7	213	4.69%	8	328	5.66%	8	872	5.26%
Diabetes, type 1	1.366	17	49	0.78%	22	19	0.42%	15	53	0.92%	17	121	0.73%
Diabetes, type 2	0.241	8	617	9.88%	10	313	6.90%	9	404	8.53%	9	1,424	8.59%
Eye, very low to extra low	0.271	21	172	2.75%	26	65	1.43%	24	112	1.93%	25	349	2.10%
Gastro, high	0.864	37	8	0.13%	35	4	0.09%	35	14	0.24%	36	26	0.16%
Gastro, medium	0.585	16	117	1.87%	16	76	1.68%	17	105	1.81%	15	298	1.80%
Gastro, low	0.278	4	832	13.29%	5	485	10.69%	4	710	12.26%	5	2,027	12.22%
Genital, extra low	0.232	12	422	6.74%	12	283	6.24%	12	354	6.11%	12	1,059	6.39%
Infectious, very high	1.355	40	1	0.02%	37	1	0.02%	40	4	0.07%	40	6	0.04%
Infectious, high	0.426	25	97	1.55%	20	66	1.45%	19	105	1.62%	21	268	1.62%
Infectious, low to medium	0.196	29	116	1.85%	28	87	1.92%	28	111	1.92%	28	314	1.89%
Metabolic, high	0.528	27	64	1.02%	25	41	0.90%	30	38	0.66%	27	143	0.86%
Metabolic, medium	0.296	14	282	4.51%	15	152	3.35%	13	249	4.30%	14	683	4.12%
Pregnancy, complete	0.295	5	762	12.18%	4	617	13.60%	5	639	11.04%	4	2,018	12.17%
Pregnancy, incomplete	1.430	2	232	3.71%	2	202	4.45%	2	231	3.99%	2	665	4.01%
Psychiatric, high	0.665	23	70	1.12%	19	43	0.95%	23	47	0.81%	23	160	0.96%
Psychiatric, medium	0.490	22	95	1.52%	24	47	1.04%	25	59	1.02%	24	201	1.21%
Psychiatric, low	0.200	3	1,543	24.66%	3	1,036	22.83%	3	1,473	25.44%	3	4,052	24.43%
Pulmonary, medium to very high	0.499	18	115	1.84%	18	58	1.28%	21	86	1.49%	19	259	1.56%
Pulmonary, low	0.271	10	513	8.20%	9	296	6.52%	10	432	7.46%	10	1,241	7.48%
Rare Diseases	6.883	34	2	0.03%	38	0	0.00%	29	3	0.05%	34	5	0.03%
Renal, extra high	2.600	38	2	0.03%	34	3	0.07%	34	5	0.09%	35	10	0.06%
Renal, medium	0.539	26	63	1.01%	27	32	0.71%	26	50	0.86%	26	145	0.87%
Renal, low	0.472	20	114	1.82%	23	51	1.12%	22	89	1.54%	20	254	1.53%
Skeletal, medium	0.270	1	1,788	28.57%	1	1,198	26.41%	1	1,690	29.19%	1	4,676	28.19%
Skeletal, low	0.251	24	170	2.72%	21	107	2.36%	20	171	2.95%	22	448	2.70%
Skeletal, very low	0.189	28	137	2.19%	31	70	1.54%	31	103	1.78%	29	310	1.87%
Skin, high	1.732	35	6	0.10%	38	0	0.00%	38	4	0.07%	38	10	0.06%
Skin, low	0.891	31	23	0.37%	30	15	0.33%	36	12	0.21%	33	50	0.30%
Skin, very low	0.178	15	387	6.18%	14	257	5.66%	18	331	5.72%	16	975	5.88%
Substance abuse, very low to low	0.299	11	333	5.32%	11	227	5.00%	11	317	5.47%	11	877	5.29%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,183	18.90%	N/A	1,051	23.17%	N/A	1,213	20.95%	N/A	3,447	20.78%
Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 19 to 24 Male	0.331	N/A	9	2.14%	N/A	7	2.06%	N/A	9	2.44%	N/A	25	2.22%
Age 19 to 24 Female	1.115	N/A	36	8.57%	N/A	42	12.39%	N/A	30	8.13%	N/A	108	9.57%
Age 25 to 44 Male	0.639	N/A	61	14.52%	N/A	38	11.21%	N/A	44	11.92%	N/A	143	12.68%
Age 25 to 44 Female	0.993	N/A	279	66.43%	N/A	225	66.37%	N/A	249	67.48%	N/A	753	66.76%
Age 45 and Older Male	0.943	N/A	10	2.38%	N/A	7	2.06%	N/A	13	3.52%	N/A	30	2.66%
Age 45 and Older Female	1.245	N/A	25	5.95%	N/A	20	5.90%	N/A	24	6.50%	N/A	69	6.12%
Risk Adjustment Results													
Magnolia			Molina			United			Total				
Scored Members			Scored Members			Scored Members			Scored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Unscored Members			Unscored Members			Unscored Members			Unscored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Total Members			Total Members			Total Members			Total Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				

Exhibit 3F Mississippi Division of Medicaid Risk Adjustment Results MA Adult - South Region - O1 to O2 2025 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period									
Scored Members									
Risk Weight	Magnolia			Molina			United		
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	Total Member Months
Regression Intercept	0.126	N/A	5,739	100.00%	N/A	4,642	100.00%	N/A	6,539
Demographic Categories									
Age 19 to 24 Male	0.000	N/A	16	0.28%	N/A	20	0.43%	N/A	15
Age 19 to 24 Female	0.460	N/A	533	9.29%	N/A	449	9.67%	N/A	588
Age 25 to 44 Male	0.111	N/A	342	5.96%	N/A	288	6.20%	N/A	407
Age 25 to 44 Female	0.305	N/A	4,178	72.80%	N/A	3,419	73.65%	N/A	4,724
Age 45 and Older Male	0.127	N/A	148	2.58%	N/A	122	2.63%	N/A	190
Age 45 and Older Female	0.326	N/A	522	9.10%	N/A	344	7.41%	N/A	615
Duration Category									
Diagnosis Period Duration, 6 Months	0.448	N/A	82	1.43%	N/A	66	1.42%	N/A	79
Diagnosis Period Duration, 7 to 12 Months	0.000	N/A	5,657	98.57%	N/A	4,576	98.58%	N/A	6,460
Non-Utilizer Category									
No Base Period Medical Utilization	(0.126)	N/A	454	7.91%	N/A	423	9.11%	N/A	496
Duration Categories									
Homelessness	0.472	N/A	11	0.19%	N/A	6	0.13%	N/A	14
Disease Categories									
Cancer, high to very high	2.607	18	25	0.44%	22	11	0.24%	18	28
Cancer, low to medium	0.394	31	57	0.99%	28	54	1.16%	29	76
Cardiovascular, very high	2.004	33	9	0.16%	39	1	0.02%	40	0
Cardiovascular, medium	0.547	8	258	4.50%	7	216	4.65%	8	312
Cardiovascular, low	0.442	15	211	3.68%	13	159	3.43%	13	259
Cardiovascular, extra low	0.118	7	1,400	24.39%	6	1,003	21.61%	7	1,616
Cerebrovascular, medium	0.456	39	12	0.21%	38	6	0.13%	37	9
CNS, high	0.552	38	15	0.26%	35	14	0.30%	36	17
CNS, medium	0.544	29	48	0.84%	31	33	0.71%	30	54
CNS, low	0.425	6	430	7.49%	8	266	5.73%	5	473
Diabetes, type 1	1.366	12	76	1.32%	17	33	0.71%	17	56
Diabetes, type 2	0.241	10	509	8.87%	10	351	7.56%	10	604
Eye, very low to extra low	0.271	23	156	2.72%	26	80	1.72%	26	138
Gastro, high	0.864	35	17	0.30%	33	15	0.32%	32	22
Gastro, medium	0.585	14	172	3.00%	14	104	2.24%	12	214
Gastro, low	0.278	4	860	14.99%	5	601	12.95%	4	889
Genital, extra low	0.232	13	435	7.58%	11	326	7.02%	14	431
Infectious, very high	1.355	40	4	0.07%	36	5	0.11%	38	2
Infectious, high	0.426	24	87	1.52%	21	71	1.53%	25	97
Infectious, low to medium	0.196	30	128	2.23%	32	90	1.94%	28	173
Metabolic, high	0.528	25	63	1.10%	27	41	0.88%	31	54
Metabolic, medium	0.296	17	229	3.99%	16	158	3.40%	16	263
Pregnancy, complete	0.295	5	633	11.03%	4	590	12.71%	6	677
Pregnancy, incomplete	1.430	3	220	3.83%	1	213	4.59%	3	227
Psychiatric, high	0.665	26	50	0.87%	24	34	0.73%	24	68
Psychiatric, medium	0.490	22	98	1.71%	23	54	1.16%	22	112
Psychiatric, low	0.200	2	1,690	29.45%	3	1,402	30.20%	2	2,155
Pulmonary, medium to very high	0.499	9	105	1.83%	19	79	1.70%	21	121
Pulmonary, low	0.271	9	504	8.78%	9	355	7.65%	11	524
Rare Diseases	6.883	32	3	0.05%	29	3	0.06%	35	2
Renal, extra high	2.600	36	4	0.07%	40	0	0.00%	39	1
Renal, medium	0.539	28	52	0.91%	30	34	0.73%	27	67
Renal, low	0.472	19	132	2.30%	20	79	1.70%	19	142
Skeletal, medium	0.270	1	1,439	25.07%	2	1,064	22.92%	1	1,707
Skeletal, low	0.251	20	213	3.71%	18	158	3.40%	20	259
Skeletal, very low	0.189	27	172	3.00%	25	119	2.56%	23	244
Skin, high	1.732	37	6	0.10%	37	2	0.04%	34	8
Skin, low	0.891	34	20	0.35%	34	10	0.22%	33	20
Skin, very low	0.178	16	418	7.28%	15	291	6.27%	15	508
Substance abuse, very low to low	0.299	11	405	7.06%	12	250	5.39%	9	505
Population Statistics									
No Classified Disease Categories	N/A	N/A	1,094	19.06%	N/A	954	20.55%	N/A	1,220
Unscored Members									
Risk Weight	Magnolia			Molina			United		
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	Total Member Months
Demographic Categories									
Age 19 to 24 Male	0.331	N/A	8	2.13%	N/A	7	1.87%	N/A	7
Age 19 to 24 Female	1.115	N/A	31	8.27%	N/A	48	12.80%	N/A	29
Age 25 to 44 Male	0.639	N/A	51	13.60%	N/A	59	15.73%	N/A	57
Age 25 to 44 Female	0.993	N/A	234	62.40%	N/A	229	61.07%	N/A	221
Age 45 and Older Male	0.943	N/A	15	4.00%	N/A	11	2.93%	N/A	17
Age 45 and Older Female	1.245	N/A	36	9.60%	N/A	21	5.60%	N/A	29
Risk Adjustment Results									
Scored Members		Magnolia		Molina		United		Total	
Member Months		5,739		4,642		6,539		16,920	
Unadjusted Plan Factor		1.046		0.984		1.034		1.024	
Budget Neutral Plan Factor		1.021		0.961		1.009		1.000	
Unscored Members		375		375		360		1,110	
Member Months		375		375		360		1,110	
Unadjusted Plan Factor		0.963		0.953		0.952		0.956	
Budget Neutral Plan Factor		1.007		0.997		0.996		1.000	
Total Members		6,114		5,017		6,899		18,030	
Member Months		6,114		5,017		6,899		18,030	
Unadjusted Plan Factor		1.040		0.983		1.029		1.020	
Budget Neutral Plan Factor		1.020		0.964		1.009		1.000	

Exhibit 3G

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - North Region - Q1 to Q2 2023 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

Scored Members										
	Risk Weight	Magnolia			Molina			United		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	29,612	100.00%	N/A	16,756	100.00%	N/A	27,508	100.00%
Demographic Categories										
Age 1 to 4	0.168	N/A	6,774	22.88%	N/A	5,319	31.74%	N/A	6,813	24.77%
Age 5 to 14 Male	0.038	N/A	7,959	26.88%	N/A	4,253	25.38%	N/A	7,205	26.19%
Age 5 to 14 Female	0.112	N/A	8,309	28.06%	N/A	4,385	26.17%	N/A	7,519	27.33%
Age 15 to 18 Male	0.000	N/A	3,209	10.84%	N/A	1,372	8.19%	N/A	2,933	10.66%
Age 15 to 18 Female	0.257	N/A	3,361	11.35%	N/A	1,427	8.52%	N/A	3,039	11.05%
Duration Category										
Diagnosis Period Duration, 6 Months	0.108	N/A	254	0.86%	N/A	204	1.22%	N/A	228	0.83%
Diagnosis Period Duration, 7 Months	0.098	N/A	261	0.88%	N/A	243	1.45%	N/A	285	1.04%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	29,097	98.26%	N/A	16,309	97.33%	N/A	26,995	98.14%
Non-Utilizer Category										
No Base Period Medical Utilization	(0.410)	N/A	1,683	5.68%	N/A	1,224	7.30%	N/A	1,528	5.55%
Homelessness Category										
Homelessness Category	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories										
Cancer, medium to very high	2.895	15	28	0.09%	17	15	0.09%	11	39	0.14%
Cardiovascular, very high	1.724	37	4	0.01%	41	0	0.00%	37	4	0.01%
Cardiovascular, medium	0.733	13	143	0.48%	11	90	0.54%	12	130	0.47%
Cardiovascular, low	0.450	9	312	1.05%	9	165	0.98%	9	297	1.08%
Cardiovascular, extra low	0.412	11	278	0.94%	15	112	0.67%	14	226	0.82%
Cerebrovascular, medium	2.021	39	1	0.00%	41	0	0.00%	40	2	0.01%
CNS, high	2.129	36	4	0.01%	36	5	0.03%	36	6	0.02%
CNS, medium	1.173	28	32	0.11%	27	16	0.10%	26	32	0.12%
CNS, low	0.751	5	483	1.63%	5	232	1.38%	5	422	1.53%
DD, medium	0.681	41	0	0.00%	28	3	0.02%	42	0	0.00%
DD, low	1.630	12	67	0.23%	12	35	0.21%	16	48	0.17%
Diabetes, type 1	3.867	6	67	0.23%	6	20	0.12%	6	68	0.25%
Diabetes, type 2	0.479	30	69	0.23%	35	25	0.15%	32	46	0.17%
Eye, very low to extra low	0.256	26	162	0.55%	24	99	0.59%	27	143	0.52%
Gastro, high	3.331	25	14	0.05%	22	8	0.05%	19	18	0.07%
Gastro, medium	1.271	24	39	0.13%	20	24	0.14%	24	31	0.11%
Gastro, low	0.340	4	1,283	4.33%	4	717	4.28%	4	1,261	4.58%
Genital, extra low	0.472	17	157	0.53%	14	100	0.60%	15	175	0.64%
Hematological, extra high	3.863	35	3	0.01%	38	1	0.01%	30	6	0.02%
Hematological, very high	3.011	34	5	0.02%	34	4	0.02%	38	2	0.01%
Hematological, low to medium	0.381	14	217	0.73%	16	116	0.69%	17	176	0.64%
Infectious, high to very high	0.682	27	62	0.21%	32	21	0.13%	33	33	0.12%
Infectious, medium	0.176	21	331	1.12%	19	208	1.24%	20	315	1.15%
Metabolic, high	0.754	19	80	0.27%	26	30	0.18%	18	81	0.29%
Metabolic, medium	0.391	29	91	0.31%	23	67	0.40%	28	91	0.33%
Pregnancy, complete	0.277	32	87	0.29%	33	44	0.26%	34	76	0.28%
Pregnancy, incomplete	3.124	10	37	0.12%	10	22	0.13%	10	41	0.15%
Psychiatric, high	3.507	22	15	0.05%	39	1	0.01%	25	11	0.04%
Psychiatric, medium	1.859	7	126	0.43%	6	75	0.45%	7	111	0.40%
Psychiatric, low	0.930	1	4,557	15.39%	1	2,118	12.64%	1	4,229	15.37%
Pulmonary, very high	1.975	23	26	0.09%	18	20	0.12%	22	27	0.10%
Pulmonary, medium to high	0.457	16	168	0.57%	13	112	0.67%	13	205	0.75%
Pulmonary, low	0.321	3	2,651	8.95%	3	1,235	7.37%	3	2,354	8.56%
Rare Diseases	7.506	33	3	0.01%	31	2	0.01%	31	3	0.01%
Renal, extra high	15.124	41	0	0.00%	30	1	0.01%	35	1	0.00%
Renal, medium	1.178	31	26	0.09%	29	15	0.09%	29	28	0.10%
Renal, low	0.277	18	240	0.81%	21	105	0.63%	23	188	0.68%
Skeletal, very low to medium	0.319	2	4,655	15.72%	2	2,417	14.42%	2	4,417	16.06%
Skin, high	0.773	38	5	0.02%	37	6	0.04%	39	6	0.02%
Skin, low	0.487	40	3	0.01%	40	3	0.02%	41	3	0.01%
Skin, very low	0.190	8	1,167	3.94%	7	614	3.66%	8	1,052	3.82%
Substance abuse, very low to low	1.082	20	54	0.18%	25	23	0.14%	21	50	0.18%
Population Statistics										
No Classified Disease Categories	N/A	N/A	15,648	52.84%	N/A	9,216	55.00%	N/A	14,531	52.82%

Unscored Members										
	Risk Weight	Magnolia			Molina			United		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories										
Age 1 to 4	0.976	N/A	328	29.31%	N/A	271	30.80%	N/A	285	26.27%
Age 5 to 14 Male	0.957	N/A	296	26.45%	N/A	222	25.23%	N/A	291	26.82%
Age 5 to 14 Female	0.953	N/A	310	27.70%	N/A	253	28.75%	N/A	324	29.86%
Age 15 to 18 Male	0.944	N/A	92	8.22%	N/A	54	6.14%	N/A	90	8.29%
Age 15 to 18 Female	1.321	N/A	93	8.31%	N/A	80	9.09%	N/A	95	8.76%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members	Member Months	29,612	16,756	27,508
	Unadjusted Plan Factor	1.011	0.968	1.016
	Budget Neutral Plan Factor	1.008	0.965	1.012
Unscored Members	Member Months	1,119	880	1,085
	Unadjusted Plan Factor	0.991	0.994	0.991
	Budget Neutral Plan Factor	0.999	1.002	1.000
Total Members	Member Months	30,731	17,636	28,593
	Unadjusted Plan Factor	1.011	0.970	1.015
	Budget Neutral Plan Factor	1.008	0.967	1.012

Exhibit 3H Mississippi Division of Medicaid Risk Adjustment Results MA Children - Central Region - Q1 to Q2 2023 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	34,355	100.00%	N/A	20,266	100.00%	N/A	31,374	100.00%	N/A	85,995	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	7,814	22.74%	N/A	6,557	32.36%	N/A	8,025	25.58%	N/A	22,396	26.04%
Age 5 to 14 Male	0.038	N/A	9,121	26.55%	N/A	5,062	24.98%	N/A	8,207	26.16%	N/A	22,390	26.04%
Age 5 to 14 Female	0.112	N/A	9,553	27.81%	N/A	5,227	25.79%	N/A	8,334	26.56%	N/A	23,114	26.88%
Age 15 to 18 Male	0.000	N/A	3,819	11.12%	N/A	1,692	8.35%	N/A	3,307	10.54%	N/A	8,818	10.25%
Age 15 to 18 Female	0.257	N/A	4,048	11.78%	N/A	1,728	8.53%	N/A	3,501	11.16%	N/A	9,277	10.79%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	228	0.66%	N/A	230	1.13%	N/A	236	0.75%	N/A	694	0.81%
Diagnosis Period Duration, 7 Months	0.098	N/A	242	0.70%	N/A	204	1.01%	N/A	227	0.72%	N/A	673	0.78%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	33,885	98.63%	N/A	19,832	97.86%	N/A	30,911	98.52%	N/A	84,628	98.41%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	2,025	5.89%	N/A	1,522	7.51%	N/A	1,860	5.93%	N/A	5,407	6.29%
Homelessness Category													
Homelessness	1.243	N/A	4	0.01%	N/A	1	0.00%	N/A	2	0.01%	N/A	7	0.01%
Disease Categories													
Cancer, medium to very high	2.895	13	41	0.12%	12	24	0.12%	13	38	0.12%	13	103	0.12%
Cardiovascular, very high	1.724	37	8	0.02%	37	1	0.00%	38	4	0.02%	38	13	0.02%
Cardiovascular, medium	0.733	15	146	0.42%	14	79	0.39%	14	137	0.44%	15	362	0.42%
Cardiovascular, low	0.450	9	369	1.07%	10	180	0.89%	9	352	1.12%	9	901	1.05%
Cardiovascular, extra low	0.412	12	298	0.87%	16	134	0.66%	10	369	1.18%	11	801	0.93%
Cerebrovascular, medium	2.021	41	3	0.01%	36	2	0.01%	40	3	0.01%	40	8	0.01%
CNS, high	2.129	28	17	0.05%	30	6	0.03%	29	14	0.04%	29	37	0.04%
CNS, medium	1.173	26	42	0.12%	27	16	0.08%	24	40	0.13%	24	98	0.11%
CNS, low	0.751	5	571	1.66%	5	337	1.66%	5	538	1.71%	5	1,446	1.68%
DD, medium	0.681	40	1	0.00%	39	0	0.00%	39	1	0.00%	41	2	0.00%
DD, low	1.630	11	79	0.23%	15	35	0.17%	12	74	0.24%	12	188	0.22%
Diabetes, type 1	3.867	7	75	0.22%	7	35	0.17%	7	79	0.25%	7	189	0.22%
Diabetes, type 2	0.479	30	71	0.21%	31	26	0.13%	31	57	0.18%	30	154	0.18%
Eye, very low to extra low	0.256	25	198	0.58%	28	73	0.36%	25	168	0.54%	25	439	0.51%
Gastro, high	3.331	22	21	0.06%	22	11	0.05%	22	18	0.06%	23	50	0.06%
Gastro, medium	1.271	21	58	0.17%	21	29	0.14%	23	47	0.15%	22	134	0.16%
Gastro, low	0.340	4	1,457	4.24%	4	837	4.13%	4	1,356	4.32%	4	3,650	4.24%
Genital, extra low	0.472	18	189	0.55%	13	125	0.62%	18	167	0.53%	18	481	0.56%
Hematological, extra high	3.863	39	2	0.01%	34	2	0.01%	36	3	0.01%	37	7	0.01%
Hematological, very high	3.011	34	6	0.02%	39	0	0.00%	37	3	0.01%	36	9	0.01%
Hematological, low to medium	0.381	16	250	0.73%	17	134	0.66%	17	224	0.71%	16	608	0.71%
Infectious, high to very high	0.682	32	44	0.13%	26	29	0.14%	34	33	0.11%	31	106	0.12%
Infectious, medium	0.176	23	384	1.12%	19	249	1.23%	21	354	1.13%	21	987	1.15%
Metabolic, high	0.754	19	112	0.33%	23	44	0.22%	20	87	0.28%	20	243	0.28%
Metabolic, medium	0.391	27	120	0.35%	24	63	0.31%	28	77	0.25%	27	260	0.30%
Pregnancy, complete	0.277	33	94	0.27%	32	35	0.17%	33	79	0.25%	32	208	0.24%
Pregnancy, incomplete	3.124	10	48	0.14%	9	27	0.13%	11	45	0.14%	10	120	0.14%
Psychiatric, high	3.507	24	16	0.05%	29	4	0.02%	26	9	0.03%	26	29	0.03%
Psychiatric, medium	1.859	6	199	0.58%	6	94	0.46%	6	166	0.53%	6	459	0.53%
Psychiatric, low	0.930	1	5,258	15.30%	1	2,404	11.86%	1	4,618	14.72%	1	12,280	14.28%
Pulmonary, very high	1.975	29	18	0.05%	25	11	0.05%	30	14	0.04%	28	43	0.05%
Pulmonary, medium to high	0.457	14	245	0.71%	11	174	0.86%	15	219	0.70%	14	638	0.74%
Pulmonary, low	0.321	3	2,939	8.59%	3	1,465	7.23%	3	2,695	8.59%	3	7,099	8.26%
Rare Diseases	7.505	31	4	0.01%	39	0	0.00%	35	2	0.01%	35	6	0.01%
Renal, extra high	15.124	36	1	0.00%	39	0	0.00%	27	2	0.01%	34	3	0.00%
Renal, medium	1.178	35	14	0.04%	33	7	0.03%	32	19	0.06%	33	40	0.05%
Renal, low	0.277	20	302	0.88%	18	160	0.79%	19	253	0.81%	19	715	0.83%
Skeletal, very low to medium	0.319	2	4,734	13.78%	2	2,678	13.21%	2	4,621	14.73%	2	12,033	13.99%
Skin, high	0.773	42	5	0.01%	38	1	0.00%	42	3	0.01%	42	9	0.01%
Skin, low	0.487	38	16	0.05%	35	12	0.06%	41	12	0.04%	39	40	0.05%
Skin, very low	0.190	8	1,144	3.33%	8	681	3.36%	8	1,141	3.64%	8	2,966	3.45%
Substance abuse, very low to low	1.082	17	88	0.26%	20	35	0.17%	16	89	0.28%	17	212	0.25%
Population Statistics													
No Classified Disease Categories	N/A	N/A	18,682	54.38%	N/A	11,382	56.16%	N/A	17,081	54.44%	N/A	47,145	54.82%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	345	32.73%	N/A	262	33.33%	N/A	274	30.72%	N/A	881	32.25%
Age 5 to 14 Male	0.957	N/A	274	26.00%	N/A	195	24.81%	N/A	232	26.01%	N/A	701	25.68%
Age 5 to 14 Female	0.953	N/A	280	26.57%	N/A	203	25.83%	N/A	252	28.25%	N/A	735	26.90%
Age 15 to 18 Male	0.944	N/A	72	6.83%	N/A	61	7.76%	N/A	62	6.95%	N/A	195	7.14%
Age 15 to 18 Female	1.321	N/A	83	7.87%	N/A	65	8.27%	N/A	72	8.07%	N/A	220	8.05%
Risk Adjustment Results													
Scored Members													
		Magnolia			Molina			United			Total		
Member Months		34,355			20,266			31,374			85,995		
Unadjusted Plan Factor		1.008			0.954			1.008			0.995		
Budget Neutral Plan Factor		1.013			0.959			1.013			1.000		
Unscored Members													
Member Months		1,054			786			892			2,732		
Unadjusted Plan Factor		0.990			0.991			0.990			0.990		
Budget Neutral Plan Factor		0.999			1.001			1.000			1.000		
Total Members													
Member Months		35,409			21,052			32,266			88,727		
Unadjusted Plan Factor		1.007			0.956			1.007			0.995		
Budget Neutral Plan Factor		1.012			0.961			1.012			1.000		

Exhibit 3I
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - South Region - 01 to 02 2025 Prospective Risk Scores
SFY 2024 Diagnosis Period - October 2024 Enrollment Period

		Scored Members											
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	28,355	100.00%	N/A	18,343	100.00%	N/A	30,126	100.00%	N/A	76,824	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	6,163	21.74%	N/A	5,801	31.63%	N/A	6,946	23.06%	N/A	18,910	24.61%
Age 5 to 14 Male	0.038	N/A	7,893	27.84%	N/A	4,619	25.18%	N/A	8,065	26.77%	N/A	20,577	26.78%
Age 5 to 14 Female	0.112	N/A	7,999	28.21%	N/A	4,753	25.91%	N/A	8,261	27.42%	N/A	21,013	27.35%
Age 15 to 18 Male	0.000	N/A	3,029	10.68%	N/A	1,587	8.65%	N/A	3,361	11.16%	N/A	7,977	10.38%
Age 15 to 18 Female	0.257	N/A	3,271	11.54%	N/A	1,583	8.63%	N/A	3,493	11.59%	N/A	8,347	10.87%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	239	0.84%	N/A	218	1.19%	N/A	298	0.99%	N/A	755	0.98%
Diagnosis Period Duration, 7 Months	0.098	N/A	276	0.97%	N/A	228	1.24%	N/A	264	0.88%	N/A	768	1.00%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	27,840	98.19%	N/A	17,897	97.57%	N/A	29,564	98.13%	N/A	75,301	98.02%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	1,584	5.59%	N/A	1,293	7.05%	N/A	1,611	5.35%	N/A	4,488	5.84%
Homelessness Category													
Homelessness	1.243	N/A	2	0.01%	N/A	0	0.00%	N/A	3	0.01%	N/A	5	0.01%
Disease Categories													
Cancer, medium to very high	2.895	14	33	0.12%	9	26	0.14%	12	41	0.14%	11	100	0.13%
Cardiovascular, very high	1.724	39	2	0.01%	37	2	0.01%	39	3	0.01%	40	7	0.01%
Cardiovascular, medium	0.733	13	140	0.49%	14	74	0.40%	14	145	0.48%	14	359	0.47%
Cardiovascular, low	0.450	10	274	0.97%	12	144	0.79%	10	302	1.00%	10	720	0.94%
Cardiovascular, extra low	0.412	15	220	0.78%	15	127	0.69%	11	308	1.02%	13	655	0.85%
Cerebrovascular, medium	2.021	42	1	0.00%	40	0	0.00%	37	9	0.03%	39	10	0.01%
CNS, high	2.129	34	5	0.02%	34	4	0.02%	33	11	0.04%	34	20	0.03%
CNS, medium	1.173	23	49	0.17%	25	29	0.16%	25	49	0.16%	25	127	0.17%
CNS, low	0.751	6	435	1.53%	6	266	1.45%	6	456	1.51%	6	1,157	1.51%
DD, medium	6.081	29	4	0.01%	40	0	0.00%	42	0	0.00%	38	4	0.01%
DD, low	1.630	19	44	0.16%	13	34	0.19%	13	69	0.23%	16	147	0.19%
Diabetes, type 1	3.867	5	133	0.47%	5	52	0.28%	5	148	0.49%	5	333	0.43%
Diabetes, type 2	0.479	32	36	0.13%	32	20	0.11%	32	50	0.17%	32	106	0.14%
Eye, very low to extra low	0.256	27	175	0.62%	27	112	0.61%	27	174	0.58%	26	461	0.60%
Gastro, high	3.331	26	14	0.05%	23	11	0.06%	17	30	0.10%	20	55	0.07%
Gastro, medium	1.271	21	49	0.17%	22	32	0.17%	21	59	0.20%	22	140	0.18%
Gastro, low	0.340	4	1,551	5.47%	4	1,019	5.55%	4	1,811	6.01%	4	4,380	5.70%
Genital, extra low	0.472	16	176	0.62%	16	110	0.60%	19	168	0.56%	17	454	0.59%
Hematological, extra high	3.863	36	2	0.01%	29	6	0.03%	38	3	0.01%	35	11	0.01%
Hematological, very high	3.011	38	2	0.01%	33	3	0.02%	31	9	0.03%	36	14	0.02%
Hematological, low to medium	0.381	20	175	0.62%	21	108	0.59%	20	206	0.68%	19	489	0.64%
Infectious, high to very high	0.682	30	34	0.12%	30	24	0.13%	28	51	0.17%	29	109	0.14%
Infectious, medium	0.176	24	325	1.15%	19	237	1.29%	24	337	1.12%	24	899	1.17%
Metabolic, high	0.754	18	96	0.34%	24	48	0.26%	22	99	0.33%	21	243	0.32%
Metabolic, medium	0.391	25	135	0.48%	17	119	0.65%	23	174	0.58%	23	428	0.56%
Pregnancy, complete	0.277	31	66	0.23%	31	44	0.24%	34	83	0.28%	31	193	0.25%
Pregnancy, incomplete	3.124	9	42	0.15%	11	21	0.11%	9	53	0.18%	9	116	0.15%
Psychiatric, high	3.507	22	17	0.06%	36	1	0.01%	26	14	0.05%	27	32	0.04%
Psychiatric, medium	1.859	7	168	0.59%	7	104	0.57%	7	168	0.56%	7	440	0.57%
Psychiatric, low	0.930	1	5,042	17.78%	1	2,614	14.25%	1	5,535	18.37%	1	13,191	17.17%
Pulmonary, very high	1.975	28	14	0.05%	28	13	0.07%	29	17	0.06%	28	44	0.06%
Pulmonary, medium to high	0.457	11	253	0.89%	10	144	0.79%	15	230	0.76%	12	627	0.82%
Pulmonary, low	0.321	3	2,283	8.05%	3	1,220	6.65%	3	2,386	7.92%	3	5,889	7.67%
Rare Diseases	7.506	37	1	0.00%	26	4	0.02%	35	3	0.01%	30	9	0.01%
Renal, extra high	15.124	33	1	0.00%	40	0	0.00%	30	2	0.01%	33	3	0.00%
Renal, medium	1.178	35	9	0.03%	35	6	0.03%	36	16	0.05%	37	31	0.04%
Renal, low	0.277	17	268	0.95%	20	150	0.82%	18	296	0.98%	18	714	0.93%
Skeletal, very low to medium	0.319	2	3,192	11.26%	2	1,813	9.88%	2	3,410	11.32%	2	8,415	10.95%
Skin, high	0.773	40	4	0.01%	38	3	0.02%	40	6	0.02%	41	13	0.02%
Skin, low	0.487	41	5	0.02%	39	1	0.01%	41	9	0.03%	42	15	0.02%
Skin, very low	0.190	8	1,196	4.22%	8	735	4.01%	8	1,297	4.31%	8	3,228	4.20%
Substance abuse, very low to low	1.082	12	98	0.35%	18	42	0.23%	16	93	0.31%	15	233	0.30%
Population Statistics													
No Classified Disease Categories	N/A	N/A	15,130	53.36%	N/A	10,409	56.75%	N/A	16,112	53.48%	N/A	41,651	54.22%

Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	301	30.94%	N/A	293	32.56%	N/A	282	29.68%	N/A	876	31.03%
Age 5 to 14 Male	0.957	N/A	291	29.91%	N/A	232	25.78%	N/A	254	26.74%	N/A	777	27.52%
Age 5 to 14 Female	0.953	N/A	221	22.71%	N/A	229	25.44%	N/A	249	26.21%	N/A	699	24.76%
Age 15 to 18 Male	0.944	N/A	70	7.19%	N/A	71	7.89%	N/A	78	8.21%	N/A	219	7.76%
Age 15 to 18 Female	1.321	N/A	90	9.25%	N/A	75	8.33%	N/A	87	9.16%	N/A	252	8.93%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		28,355	18,343	30,126
Unadjusted Plan Factor		1.036	0.982	1.053
Budget Neutral Plan Factor		1.006	0.954	1.022
Unscored Members				
Member Months		973	900	950
Unadjusted Plan Factor		0.995	0.991	0.994
Budget Neutral Plan Factor		1.001	0.998	1.000
Total Members				
Member Months		29,328	19,243	31,076
Unadjusted Plan Factor		1.035	0.983	1.051
Budget Neutral Plan Factor		1.006	0.956	1.022

Exhibit 3J

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - North Region - O1 to O2 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

		Scored Members											
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,740	100.00%	N/A	1,938	100.00%	N/A	3,710	100.00%	N/A	9,388	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,252	33.48%	N/A	665	34.31%	N/A	1,265	34.10%	N/A	3,182	33.89%
Age 5 to 14 Female	0.112	N/A	1,303	34.84%	N/A	687	35.45%	N/A	1,243	33.50%	N/A	3,233	34.44%
Age 15 to 18 Male	0.000	N/A	577	15.43%	N/A	282	14.55%	N/A	585	15.77%	N/A	1,444	15.38%
Age 15 to 18 Female	0.257	N/A	608	16.26%	N/A	304	15.69%	N/A	617	16.63%	N/A	1,529	16.29%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	22	0.59%	N/A	18	0.93%	N/A	24	0.65%	N/A	64	0.68%
Diagnosis Period Duration, 7 Months	0.098	N/A	45	1.20%	N/A	17	0.88%	N/A	34	0.92%	N/A	96	1.02%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,673	98.21%	N/A	1,903	98.19%	N/A	3,652	98.44%	N/A	9,228	98.30%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	187	5.00%	N/A	126	6.50%	N/A	190	5.12%	N/A	503	5.36%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	20	3	0.08%	15	2	0.10%	13	4	0.11%	16	9	0.10%
Cardiovascular, very high	1.724	37	0	0.00%	33	0	0.00%	35	1	0.03%	39	1	0.01%
Cardiovascular, medium	0.733	14	20	0.53%	17	6	0.31%	22	11	0.30%	14	37	0.39%
Cardiovascular, low	0.450	10	42	1.12%	9	21	1.08%	10	40	1.08%	9	103	1.10%
Cardiovascular, extra low	0.412	11	42	1.12%	10	18	0.93%	9	45	1.21%	10	105	1.12%
Cerebrovascular, medium	2.021	35	1	0.03%	33	0	0.00%	36	0	0.00%	38	1	0.01%
CNS, high	2.129	33	1	0.03%	25	1	0.05%	26	3	0.08%	29	5	0.05%
CNS, medium	1.173	16	9	0.24%	16	4	0.21%	18	8	0.22%	18	21	0.22%
CNS, low	0.751	6	35	0.94%	7	21	1.08%	7	42	1.13%	7	98	1.04%
DD, medium	0.681	37	0	0.00%	14	1	0.05%	36	0	0.00%	34	1	0.01%
DD, low	1.630	13	9	0.24%	22	2	0.10%	12	8	0.22%	13	19	0.20%
Diabetes, type 1	3.867	4	11	0.29%	4	7	0.36%	4	14	0.38%	4	32	0.34%
Diabetes, type 2	0.479	27	11	0.29%	24	5	0.26%	32	7	0.19%	28	23	0.24%
Eye, very low to extra low	0.256	21	30	0.80%	26	8	0.41%	29	19	0.51%	25	57	0.61%
Gastro, high	3.331	24	2	0.05%	21	1	0.05%	16	3	0.08%	21	6	0.06%
Gastro, medium	1.271	9	15	0.40%	11	5	0.26%	19	7	0.19%	12	27	0.29%
Gastro, low	0.340	5	122	3.26%	6	55	2.84%	5	124	3.34%	5	301	3.21%
Genital, extra low	0.472	25	12	0.32%	19	9	0.46%	15	22	0.59%	20	43	0.46%
Hematological, extra high	3.863	37	0	0.00%	33	0	0.00%	31	1	0.03%	36	1	0.01%
Hematological, very high	3.011	37	0	0.00%	33	0	0.00%	36	0	0.00%	40	0	0.00%
Hematological, low to medium	0.381	29	11	0.29%	23	7	0.36%	20	22	0.59%	24	40	0.43%
Infectious, high to very high	0.682	26	8	0.21%	30	2	0.10%	30	7	0.19%	27	17	0.18%
Infectious, medium	0.176	34	12	0.32%	32	4	0.21%	34	12	0.32%	35	28	0.30%
Metabolic, high	0.754	15	19	0.51%	20	5	0.26%	21	11	0.30%	15	35	0.37%
Metabolic, medium	0.391	30	8	0.21%	27	5	0.26%	28	13	0.35%	30	26	0.28%
Pregnancy, complete	0.277	31	10	0.27%	28	7	0.36%	33	9	0.24%	33	26	0.28%
Pregnancy, incomplete	3.124	12	5	0.13%	12	2	0.10%	11	5	0.13%	11	12	0.13%
Psychiatric, high	3.507	17	3	0.08%	33	0	0.00%	25	2	0.05%	22	5	0.05%
Psychiatric, medium	1.859	8	11	0.29%	5	14	0.72%	6	21	0.57%	6	46	0.49%
Psychiatric, low	0.930	1	694	18.56%	1	328	16.92%	1	733	19.76%	1	1,755	18.69%
Pulmonary, very high	1.975	36	1	0.03%	33	0	0.00%	23	4	0.11%	31	5	0.05%
Pulmonary, medium to high	0.457	19	19	0.51%	29	3	0.15%	24	16	0.43%	23	38	0.40%
Pulmonary, low	0.321	3	337	9.01%	3	136	7.02%	3	292	7.87%	3	765	8.15%
Rare Diseases	7.506	23	1	0.03%	33	0	0.00%	36	0	0.00%	32	1	0.01%
Renal, extra high	15.124	37	0	0.00%	33	0	0.00%	36	0	0.00%	40	0	0.00%
Renal, medium	1.178	28	4	0.11%	31	1	0.05%	27	5	0.13%	26	10	0.11%
Renal, low	0.277	18	34	0.91%	13	22	1.14%	17	36	0.97%	17	92	0.98%
Skeletal, very low to medium	0.319	2	692	18.50%	2	284	14.65%	2	648	17.47%	2	1,624	17.30%
Skin, high	0.773	32	3	0.08%	33	0	0.00%	36	0	0.00%	37	3	0.03%
Skin, low	0.487	37	0	0.00%	33	0	0.00%	36	0	0.00%	40	0	0.00%
Skin, very low	0.190	7	137	3.66%	8	69	3.56%	8	162	4.37%	8	368	3.92%
Substance abuse, very low to low	1.082	22	7	0.19%	18	4	0.21%	14	10	0.27%	19	21	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,917	51.26%	N/A	1,069	55.16%	N/A	1,903	51.29%	N/A	4,889	52.08%

Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	45	44.12%	N/A	42	45.65%	N/A	45	36.29%	N/A	132	41.51%
Age 5 to 14 Female	0.953	N/A	35	34.31%	N/A	27	29.35%	N/A	50	40.32%	N/A	112	35.22%
Age 15 to 18 Male	0.944	N/A	14	13.73%	N/A	9	9.78%	N/A	18	14.52%	N/A	41	12.89%
Age 15 to 18 Female	1.321	N/A	8	7.84%	N/A	14	15.22%	N/A	11	8.87%	N/A	33	10.38%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		3,740	1,938	3,710
Unadjusted Plan Factor		1.034	0.989	1.046
Budget Neutral Plan Factor		1.004	0.961	1.016
Unscored Members				
Member Months		102	92	124
Unadjusted Plan Factor		0.982	1.010	0.986
Budget Neutral Plan Factor		0.991	1.018	0.994
Total Members				
Member Months		3,842	2,030	3,834
Unadjusted Plan Factor		1.032	0.991	1.044
Budget Neutral Plan Factor		1.004	0.963	1.016

Exhibit 3K Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - Central Region- 01 to 02 2025 Prospective Risk Scores SFY 2024 Diagnosis Period - October 2024 Enrollment Period													
Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	4,337	100.00%	N/A	2,117	100.00%	N/A	4,097	100.00%	N/A	10,551	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,465	33.78%	N/A	731	34.53%	N/A	1,340	32.71%	N/A	3,536	33.51%
Age 5 to 14 Female	0.112	N/A	1,422	32.79%	N/A	730	34.48%	N/A	1,355	33.07%	N/A	3,507	33.24%
Age 15 to 18 Male	0.000	N/A	710	16.37%	N/A	325	15.35%	N/A	698	17.04%	N/A	1,733	16.42%
Age 15 to 18 Female	0.257	N/A	740	17.06%	N/A	331	15.64%	N/A	704	17.18%	N/A	1,775	16.82%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	25	0.58%	N/A	11	0.52%	N/A	15	0.37%	N/A	51	0.48%
Diagnosis Period Duration, 7 Months	0.098	N/A	22	0.51%	N/A	30	1.42%	N/A	23	0.56%	N/A	75	0.71%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	4,290	98.92%	N/A	2,076	98.06%	N/A	4,059	99.07%	N/A	10,425	98.81%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	177	4.08%	N/A	152	7.18%	N/A	178	4.34%	N/A	507	4.81%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Disease Categories													
Cancer, medium to very high	2.895	13	6	0.14%	10	4	0.19%	8	9	0.22%	11	19	0.18%
Cardiovascular, very high	1.724	39	0	0.00%	26	1	0.05%	32	1	0.02%	37	2	0.02%
Cardiovascular, medium	0.733	11	27	0.62%	14	11	0.52%	14	18	0.44%	13	56	0.53%
Cardiovascular, low	0.450	10	50	1.15%	11	23	1.09%	11	49	1.20%	12	122	1.16%
Cardiovascular, extra low	0.412	9	56	1.29%	13	21	0.99%	9	63	1.54%	9	140	1.33%
Cerebrovascular, medium	2.021	34	1	0.02%	34	0	0.00%	36	0	0.00%	39	1	0.01%
CNS, high	2.129	33	1	0.02%	23	1	0.05%	29	1	0.02%	30	3	0.03%
CNS, medium	1.173	14	13	0.30%	9	11	0.52%	18	8	0.20%	14	32	0.30%
CNS, low	0.751	4	76	1.75%	7	22	1.04%	5	58	1.42%	4	156	1.48%
DD, medium	0.681	26	1	0.02%	34	0	0.00%	36	0	0.00%	31	1	0.01%
DD, low	1.630	21	6	0.14%	22	2	0.09%	13	9	0.22%	15	17	0.16%
Diabetes, type 1	3.867	7	8	0.18%	4	7	0.33%	7	10	0.24%	6	25	0.24%
Diabetes, type 2	0.479	28	10	0.23%	28	3	0.14%	25	10	0.24%	26	23	0.22%
Eye, very low to extra low	0.256	18	42	0.97%	25	7	0.33%	22	32	0.78%	21	81	0.77%
Gastro, high	3.331	25	2	0.05%	20	1	0.05%	27	1	0.02%	25	4	0.04%
Gastro, medium	1.271	20	8	0.18%	17	4	0.19%	15	8	0.20%	16	20	0.19%
Gastro, low	0.340	5	128	2.95%	6	53	2.50%	6	125	3.05%	5	306	2.90%
Genital, extra low	0.472	16	23	0.53%	21	7	0.33%	23	13	0.32%	22	43	0.41%
Hematological, extra high	3.863	39	0	0.00%	34	0	0.00%	26	1	0.02%	35	1	0.01%
Hematological, very high	3.011	39	0	0.00%	34	0	0.00%	36	0	0.00%	41	0	0.00%
Hematological, low to medium	0.381	27	15	0.35%	18	13	0.61%	20	23	0.56%	23	51	0.48%
Infectious, high to very high	0.682	29	6	0.14%	24	3	0.14%	28	4	0.10%	29	13	0.12%
Infectious, medium	0.176	36	6	0.14%	32	5	0.24%	30	12	0.29%	34	23	0.22%
Metabolic, high	0.754	23	11	0.25%	19	6	0.28%	21	11	0.27%	20	28	0.27%
Metabolic, medium	0.391	31	10	0.23%	27	4	0.19%	24	13	0.32%	27	27	0.26%
Pregnancy, complete	0.277	32	11	0.25%	33	3	0.14%	35	4	0.10%	33	18	0.17%
Pregnancy, incomplete	3.124	12	6	0.14%	8	5	0.24%	12	7	0.17%	10	18	0.17%
Psychiatric, high	3.507	19	3	0.07%	34	0	0.00%	36	0	0.00%	28	3	0.03%
Psychiatric, medium	1.859	6	18	0.42%	5	10	0.47%	4	24	0.59%	7	52	0.49%
Psychiatric, low	0.930	1	821	18.93%	1	350	16.53%	1	715	17.45%	1	1,886	17.88%
Pulmonary, very high	1.975	30	2	0.05%	34	0	0.00%	31	1	0.02%	32	3	0.03%
Pulmonary, medium to high	0.457	24	18	0.42%	31	2	0.09%	19	20	0.49%	24	40	0.38%
Pulmonary, low	0.321	3	402	9.27%	3	172	8.12%	3	355	8.66%	3	929	8.80%
Rare Diseases	7.506	15	2	0.05%	15	1	0.05%	36	0	0.00%	18	3	0.03%
Renal, extra high	15.124	39	0	0.00%	34	0	0.00%	36	0	0.00%	41	0	0.00%
Renal, medium	1.178	35	1	0.02%	29	1	0.05%	34	1	0.02%	36	3	0.03%
Renal, low	0.277	22	35	0.81%	16	22	1.04%	17	34	0.83%	17	91	0.86%
Skeletal, very low to medium	0.319	2	660	15.22%	2	269	12.71%	2	614	14.99%	2	1,543	14.62%
Skin, high	0.773	38	1	0.02%	34	0	0.00%	33	2	0.05%	38	3	0.03%
Skin, low	0.487	37	2	0.05%	34	0	0.00%	36	0	0.00%	40	2	0.02%
Skin, very low	0.190	8	147	3.39%	12	53	2.50%	10	123	3.00%	8	323	3.06%
Substance abuse, very low to low	1.082	17	10	0.23%	30	1	0.05%	16	9	0.22%	19	20	0.19%
Population Statistics													
No Classified Disease Categories	N/A	N/A	2,329	53.70%	N/A	1,177	55.60%	N/A	2,261	55.19%	N/A	5,767	54.66%
Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	27	37.50%	N/A	19	31.67%	N/A	34	35.79%	N/A	80	35.24%
Age 5 to 14 Female	0.953	N/A	27	37.50%	N/A	23	38.33%	N/A	34	35.79%	N/A	84	37.00%
Age 15 to 18 Male	0.944	N/A	8	11.11%	N/A	7	11.67%	N/A	9	9.47%	N/A	24	10.57%
Age 15 to 18 Female	1.321	N/A	10	13.89%	N/A	11	18.33%	N/A	18	18.95%	N/A	39	17.18%
Risk Adjustment Results													
Scored Members		Magnolia			Molina			United			Total		
Member Months		4,337			2,117			4,097			10,551		
Unadjusted Plan Factor		1.033			0.979			1.013			1.014		
Budget Neutral Plan Factor		1.018			0.965			0.999			1.000		
Unscored Members		Magnolia			Molina			United			Total		
Member Months		72			60			95			227		
Unadjusted Plan Factor		1.004			1.021			1.023			1.016		
Budget Neutral Plan Factor		0.988			1.004			1.007			1.000		
Total Members		4,409			2,177			4,192			10,778		
Unadjusted Plan Factor		1.032			0.980			1.014			1.014		
Budget Neutral Plan Factor		1.018			0.966			0.999			1.000		

Exhibit 3L

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - South Region - Q1 to Q2 2025 Prospective Risk Scores

SFY 2024 Diagnosis Period - October 2024 Enrollment Period

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.595	N/A	3,217	100.00%	N/A	1,965	100.00%	N/A	3,573	100.00%	N/A	8,755	100.00%
Demographic Categories													
Age 1 to 4	0.168	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.038	N/A	1,119	34.78%	N/A	684	34.81%	N/A	1,245	34.84%	N/A	3,048	34.81%
Age 5 to 14 Female	0.112	N/A	1,038	32.27%	N/A	695	35.37%	N/A	1,204	33.70%	N/A	2,937	33.55%
Age 15 to 18 Male	0.000	N/A	542	16.85%	N/A	299	15.22%	N/A	560	15.67%	N/A	1,401	16.00%
Age 15 to 18 Female	0.257	N/A	518	16.10%	N/A	287	14.61%	N/A	564	15.79%	N/A	1,369	15.64%
Duration Category													
Diagnosis Period Duration, 6 Months	0.108	N/A	26	0.81%	N/A	9	0.46%	N/A	19	0.53%	N/A	54	0.63%
Diagnosis Period Duration, 7 Months	0.098	N/A	19	0.59%	N/A	23	1.17%	N/A	28	0.78%	N/A	70	0.80%
Diagnosis Period Duration, 8 to 12 Months	0.000	N/A	3,172	98.60%	N/A	1,933	98.37%	N/A	3,526	98.68%	N/A	8,631	98.58%
Non-Utilizer Category													
No Base Period Medical Utilization	(0.410)	N/A	167	5.19%	N/A	161	8.19%	N/A	180	5.04%	N/A	508	5.80%
Homelessness Category													
Homelessness	1.243	N/A	0	0.00%	N/A	0	0.00%	N/A	1	0.03%	N/A	1	0.01%
Disease Categories													
Cancer, medium to very high	2.895	10	6	0.19%	19	2	0.10%	12	6	0.17%	11	14	0.16%
Cardiovascular, very high	1.724	37	0	0.00%	33	0	0.00%	36	0	0.00%	39	0	0.00%
Cardiovascular, medium	0.733	22	11	0.34%	12	10	0.51%	18	16	0.45%	19	37	0.42%
Cardiovascular, low	0.450	15	30	0.93%	18	13	0.66%	20	26	0.73%	14	69	0.79%
Cardiovascular, extra low	0.412	14	34	1.06%	9	24	1.22%	9	55	1.54%	9	113	1.29%
Cerebrovascular, medium	2.021	37	0	0.00%	33	0	0.00%	36	0	0.00%	39	0	0.00%
CNS, high	2.129	25	3	0.09%	17	3	0.15%	11	9	0.25%	13	15	0.17%
CNS, medium	1.173	19	8	0.25%	10	8	0.41%	19	10	0.28%	16	26	0.30%
CNS, low	0.751	7	38	1.18%	8	17	0.87%	7	38	1.06%	7	93	1.07%
DD, medium	6.081	37	0	0.00%	33	0	0.00%	36	0	0.00%	39	0	0.00%
DD, low	1.630	21	5	0.16%	16	4	0.20%	15	9	0.25%	18	18	0.21%
Diabetes, type 1	3.867	3	27	0.84%	4	7	0.36%	3	27	0.76%	3	61	0.70%
Diabetes, type 2	0.479	33	6	0.19%	28	4	0.20%	31	7	0.20%	33	17	0.19%
Eye, very low to extra low	0.256	29	16	0.50%	29	6	0.31%	26	24	0.67%	30	46	0.53%
Gastro, high	3.331	18	3	0.09%	14	2	0.10%	24	2	0.06%	21	7	0.08%
Gastro, medium	1.271	11	12	0.37%	11	7	0.36%	25	5	0.14%	15	24	0.27%
Gastro, low	0.340	5	137	4.26%	5	74	3.77%	5	156	4.37%	5	367	4.19%
Genital, extra low	0.472	23	14	0.44%	21	10	0.51%	22	19	0.53%	24	43	0.49%
Hematological, extra high	3.863	30	1	0.03%	23	1	0.05%	36	0	0.00%	34	2	0.02%
Hematological, very high	3.011	26	2	0.06%	33	0	0.00%	27	2	0.06%	29	4	0.05%
Hematological, low to medium	0.381	24	17	0.53%	27	6	0.31%	29	12	0.34%	27	35	0.40%
Infectious, high to very high	0.682	32	5	0.16%	26	4	0.20%	32	4	0.11%	32	13	0.15%
Infectious, medium	0.176	36	6	0.19%	32	5	0.25%	33	10	0.28%	36	21	0.24%
Metabolic, high	0.754	20	11	0.34%	30	2	0.10%	17	16	0.45%	22	29	0.33%
Metabolic, medium	0.391	28	13	0.40%	25	7	0.36%	28	13	0.36%	33	38	0.38%
Pregnancy, complete	0.277	34	6	0.19%	31	5	0.25%	34	6	0.17%	35	17	0.19%
Pregnancy, incomplete	3.124	9	6	0.19%	24	1	0.05%	10	7	0.20%	10	14	0.16%
Psychiatric, high	3.507	31	1	0.03%	13	2	0.10%	21	3	0.08%	23	6	0.07%
Psychiatric, medium	1.859	6	17	0.53%	7	7	0.36%	6	18	0.50%	6	42	0.48%
Psychiatric, low	0.930	1	733	22.79%	1	418	21.27%	1	890	24.91%	1	2,041	23.31%
Pulmonary, very high	1.975	27	3	0.09%	33	0	0.00%	30	2	0.06%	31	5	0.06%
Pulmonary, medium to high	0.457	17	23	0.71%	20	12	0.61%	16	31	0.87%	17	66	0.75%
Pulmonary, low	0.321	4	246	7.65%	3	132	6.72%	4	278	7.78%	4	656	7.49%
Rare Diseases	7.506	37	0	0.00%	33	0	0.00%	14	2	0.06%	26	2	0.02%
Renal, extra high	15.124	13	1	0.03%	33	0	0.00%	36	0	0.00%	25	1	0.01%
Renal, medium	1.178	35	1	0.03%	33	0	0.00%	36	0	0.00%	37	0	0.00%
Renal, low	0.277	16	41	1.27%	15	24	1.22%	23	31	0.87%	20	96	1.10%
Skeletal, very low to medium	0.319	2	398	12.37%	2	213	10.84%	2	423	11.84%	2	1,034	11.81%
Skin, high	0.773	37	0	0.00%	33	0	0.00%	35	1	0.03%	38	1	0.01%
Skin, low	0.487	37	0	0.00%	33	0	0.00%	36	0	0.00%	39	0	0.00%
Skin, very low	0.190	8	149	4.63%	6	74	3.77%	8	127	3.55%	8	353	4.00%
Substance abuse, very low to low	1.082	12	14	0.44%	22	4	0.20%	13	15	0.42%	12	33	0.39%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,679	52.19%	N/A	1,015	51.65%	N/A	1,799	50.35%	N/A	4,493	51.32%

		Unscored Members								
Risk Weight	Disease Impact Rank	Magnolia		Molina		United		Total		
		Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories										
Age 1 to 4	0.976	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 5 to 14 Male	0.957	N/A	25	28.41%	N/A	22	36.67%	N/A	40	33.33%
Age 5 to 14 Female	0.953	N/A	33	37.50%	N/A	14	23.33%	N/A	47	39.84%
Age 15 to 18 Male	0.944	N/A	8	9.09%	N/A	13	21.67%	N/A	21	17.50%
Age 15 to 18 Female	1.321	N/A	22	25.00%	N/A	11	18.33%	N/A	18	15.00%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		3,217	1,965	3,573
Unadjusted Plan Factor		1.088	1.013	1.104
Budget Neutral Plan Factor		1.010	0.940	1.024
Unscored Members				
Member Months		88	60	120
Unadjusted Plan Factor		1.045	1.020	1.008
Budget Neutral Plan Factor		1.022	0.997	0.985
Total Members				
Member Months		3,305	2,025	3,693
Unadjusted Plan Factor		1.087	1.013	1.101
Budget Neutral Plan Factor		1.010	0.942	1.023

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
October 2024 Snapshot Period

North Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	284	18.66%	49	20.08%	93	18.98%	426 18.88%
Money Code 3	Receiving IV-E Assistance	0.938	249	16.36%	49	20.08%	75	15.31%	373 16.53%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	929	61.04%	137	56.15%	289	58.98%	1,355 60.06%
Other	All other Money Codes	0.000	60	3.94%	9	3.69%	33	6.73%	102 4.52%
Unadjusted Plan Factor			0.946		0.994		0.938		0.950
Member Months			1,522		244		490		2,256
Budget Neutral Plan Factor			0.996		1.047		0.988		1.000

Central Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	291	18.75%	75	25.08%	74	17.05%	440 19.26%
Money Code 3	Receiving IV-E Assistance	0.938	339	21.84%	80	26.76%	116	26.73%	535 23.41%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	872	56.19%	134	44.82%	216	49.77%	1,222 53.48%
Other	All other Money Codes	0.000	50	3.22%	10	3.34%	28	6.45%	88 3.85%
Unadjusted Plan Factor			0.992		1.112		1.004		1.010
Member Months			1,552		299		434		2,285
Budget Neutral Plan Factor			0.982		1.101		0.994		1.000

South Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months % of Member Months
Intercept	Regression Intercept	0.437		100.00%		100.00%		100.00%	100.00%
Money Code 2	CWS Foster Care	1.433	296	13.74%	87	19.33%	101	14.92%	484 14.75%
Money Code 3	Receiving IV-E Assistance	0.938	388	18.01%	113	25.11%	130	19.20%	631 19.23%
Money Code 4	Receiving IV-E Subadoption Ast	0.145	1,376	63.88%	236	52.44%	392	57.90%	2,004 61.08%
Other	All other Money Codes	0.000	94	4.36%	14	3.11%	54	7.98%	162 4.94%
Unadjusted Plan Factor			0.895		1.025		0.915		0.917
Member Months			2,154		450		677		3,281
Budget Neutral Plan Factor			0.976		1.118		0.997		1.000

Exhibit 4A
Mississippi Division of Medicaid
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024
Custom Risk Weights - Non-Newborn SSI / Disabled Rate Cell

Model R-Squared: 29.5%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	686,830	0.113	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	27,989	0.470	4.1%	N/A	1.364	1.364
Age 5 to 14 Male	82,498	0.184	12.0%	N/A	0.701	0.701
Age 5 to 14 Female	37,790	0.265	5.5%	N/A	0.872	0.872
Age 15 to 24 Male	64,121	0.000	9.3%	N/A	0.522	0.522
Age 15 to 24 Female	34,985	0.187	5.1%	N/A	0.831	0.831
Age 25 to 44 Male	80,695	0.003	11.7%	N/A	0.797	0.797
Age 25 to 44 Female	71,681	0.133	10.4%	N/A	1.120	1.120
Age 45 and Older Male	127,940	0.107	18.6%	N/A	1.188	1.188
Age 45 and Older Female	159,131	0.027	23.2%	N/A	1.249	1.249
Duration						
Diagnosis Period Duration, 6 to 7 Months	4,733	0.382	0.7%	0.000	1.320	N/A
Diagnosis Period Duration, 8 Months	2,773	0.320	0.4%	0.001	1.271	N/A
Diagnosis Period Duration, 9 to 11 Months	7,851	0.167	1.1%	0.004	1.340	N/A
Diagnosis Period Duration, 12 Months	671,473	0.000	97.8%	N/A	0.993	N/A
Homelessness						
Homelessness	5,632	0.931	0.8%	0.000	2.921	N/A
Disease Categories						
Cancer, very high	3,864	3.067	0.6%	0.000	5.033	N/A
Cancer, high	8,697	0.816	1.3%	0.000	2.519	N/A
Cancer, medium	12,472	0.611	1.8%	0.000	2.343	N/A
Cancer, low	7,519	0.318	1.1%	0.000	1.794	N/A
Cardiovascular, very high	4,821	1.460	0.7%	0.000	5.286	N/A
Cardiovascular, medium	78,617	0.584	11.4%	0.000	2.228	N/A
Cardiovascular, extra low to low	226,545	0.081	33.0%	0.000	1.115	N/A
Cerebrovascular, medium	11,081	0.115	1.6%	0.022	1.965	N/A
CNS, high	7,154	0.781	1.0%	0.000	2.878	N/A
CNS, medium	18,733	0.479	2.7%	0.000	1.839	N/A
CNS, low	123,627	0.243	18.0%	0.000	1.574	N/A
DD, low to medium	30,775	0.174	4.5%	0.000	1.252	N/A
Diabetes, type 1	10,180	0.862	1.5%	0.000	2.596	N/A
Diabetes, type 2	100,327	0.199	14.6%	0.000	1.596	N/A
Gastro, high	11,125	0.320	1.6%	0.000	3.363	N/A
Gastro, medium	29,419	0.268	4.3%	0.000	2.041	N/A
Gastro, low	124,224	0.135	18.1%	0.000	1.528	N/A
Hematological, extra high	12	4.752	0.0%	0.001	9.015	N/A
Hematological, medium to very high	13,267	0.931	1.9%	0.000	3.061	N/A
Hematological, low	10,527	0.370	1.5%	0.000	3.024	N/A
Infectious, high to very high	21,565	0.300	3.1%	0.000	2.374	N/A
Infectious, low to medium	25,862	0.188	3.8%	0.000	2.260	N/A
Metabolic, high	18,367	0.468	2.7%	0.000	2.576	N/A
Metabolic, medium	47,448	0.239	6.9%	0.000	2.349	N/A
Pregnancy, complete	5,329	0.173	0.8%	0.016	1.203	N/A
Pregnancy, incomplete	1,736	0.841	0.3%	0.000	1.941	N/A
Psychiatric, high	53,414	0.643	7.8%	0.000	1.568	N/A
Psychiatric, low to medium	282,160	0.225	41.1%	0.000	1.126	N/A
Pulmonary, very high	13,937	0.816	2.0%	0.000	3.257	N/A
Pulmonary, high	1,817	0.481	0.3%	0.000	2.577	N/A
Pulmonary, medium	32,635	0.472	4.8%	0.000	2.534	N/A
Pulmonary, low	105,596	0.131	15.4%	0.000	1.273	N/A
Rare Diseases	723	2.664	0.1%	0.000	4.594	N/A
Renal, extra high	4,153	4.191	0.6%	0.000	6.896	N/A
Renal, medium	27,425	0.362	4.0%	0.000	2.168	N/A
Renal, low	29,489	0.277	4.3%	0.000	1.870	N/A
Skeletal, medium	166,182	0.254	24.2%	0.000	1.595	N/A
Skeletal, very low to low	62,828	0.070	9.1%	0.002	1.374	N/A
Skin, low to high	11,851	0.624	1.7%	0.000	2.976	N/A
Skin, very low	47,331	0.169	6.9%	0.000	1.592	N/A
Substance abuse, low	45,757	0.324	6.7%	0.000	1.972	N/A
Substance abuse, very low	15,131	0.202	2.2%	0.000	1.694	N/A
Disabled Children Add-On						
Disabled Children Add-On - CNS, high	1,830	1.388	0.3%	0.000	4.287	N/A
Disabled Children Add-On - Gastro, high	5,933	1.508	0.9%	0.000	3.911	N/A
Disabled Children Add-On - Pulmonary, very high	2,933	0.419	0.4%	0.000	3.866	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4B			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - Non-Newborn SSI / Disabled Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, very high	3.067
CANH	Cancer, high	Cancer, high	0.816
CANM	Cancer, medium	Cancer, medium	0.611
CANL	Cancer, low	Cancer, low	0.318
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.460
CARM	Cardiovascular, medium	Cardiovascular, medium	0.584
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.081
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.081
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.115
CNSH	CNS, high	CNS, high	0.781
CNSM	CNS, medium	CNS, medium	0.479
CNSL	CNS, low	CNS, low	0.243
DDM	DD, medium	DD, low to medium	0.174
DDL	DD, low	DD, low to medium	0.174
DIA1	Diabetes, type 1	Diabetes, type 1	0.862
DIA2	Diabetes, type 2	Diabetes, type 2	0.199
EYEL	Eye, low	Not Used	Not Used
EYEVL	Eye, very low	Not Used	Not Used
GIH	Gastro, high	Gastro, high	0.320
GIM	Gastro, medium	Gastro, medium	0.268
GIL	Gastro, low	Gastro, low	0.135
GENEL	Genital, extra low	Not Used	Not Used
HEMEH	Hematological, extra high	Hematological, extra high	4.752
HEMVH	Hematological, very high	Hematological, medium to very high	0.931
HEMM	Hematological, medium	Hematological, medium to very high	0.931
HEML	Hematological, low	Hematological, low	0.370
INFVH	Infectious, very high	Infectious, high to very high	0.300
INFH	Infectious, high	Infectious, high to very high	0.300
INFM	Infectious, medium	Infectious, low to medium	0.188
INFL	Infectious, low	Infectious, low to medium	0.188
METH	Metabolic, high	Metabolic, high	0.468
METM	Metabolic, medium	Metabolic, medium	0.239
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.173
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.841
PSYH	Psychiatric, high	Psychiatric, high	0.643
PSYM	Psychiatric, medium	Psychiatric, low to medium	0.225
PSYL	Psychiatric, low	Psychiatric, low to medium	0.225
PULVH	Pulmonary, very high	Pulmonary, very high	0.816
PULH	Pulmonary, high	Pulmonary, high	0.481
PULM	Pulmonary, medium	Pulmonary, medium	0.472
PULL	Pulmonary, low	Pulmonary, low	0.131
RENEH	Renal, extra high	Renal, extra high	4.191
RENM	Renal, medium	Renal, medium	0.362
RENL	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, medium	0.254
SKCL	Skeletal, low	Skeletal, very low to low	0.070
SKCVL	Skeletal, very low	Skeletal, very low to low	0.070
SKNH	Skin, high	Skin, low to high	0.624
SKNL	Skin, low	Skin, low to high	0.624
SKNVL	Skin, very low	Skin, very low	0.169
SUBL	Substance abuse, low	Substance abuse, low	0.324
SUBVL	Substance abuse, very low	Substance abuse, very low	0.202
CCARVH	Disabled Children Add-On - Cardiovascular, very high	Not Used	Not Used
CCARM	Disabled Children Add-On - Cardiovascular, medium	Not Used	Not Used
CCNSH	Disabled Children Add-On - CNS, high	Disabled Children Add-On - CNS, high	1.388
CDDM	Disabled Children Add-On - DD, medium	Not Used	Not Used
CDIA1	Disabled Children Add-On - Diabetes, type 1	Not Used	Not Used
CGIH	Disabled Children Add-On - Gastro, high	Disabled Children Add-On - Gastro, high	1.508
CHEMEH	Disabled Children Add-On - Hematological, extra high	Not Used	Not Used
CHEMVH	Disabled Children Add-On - Hematological, very high	Not Used	Not Used
CINFVH	Disabled Children Add-On - Infectious, very high	Not Used	Not Used
CINFH	Disabled Children Add-On - Infectious, high	Not Used	Not Used
CINFM	Disabled Children Add-On - Infectious, medium	Not Used	Not Used
CMETH	Disabled Children Add-On - Metabolic, high	Not Used	Not Used
CMETM	Disabled Children Add-On - Metabolic, medium	Not Used	Not Used
CPSYH	Disabled Children Add-On - Psychiatric, high	Not Used	Not Used
CPSYM	Disabled Children Add-On - Psychiatric, medium	Not Used	Not Used
CPULVH	Disabled Children Add-On - Pulmonary, very high	Disabled Children Add-On - Pulmonary, very high	0.419
CRENEH	Disabled Children Add-On - Renal, extra high	Not Used	Not Used
CSUBL	Disabled Children Add-On - Substance abuse, low	Not Used	Not Used
CSUBVL	Disabled Children Add-On - Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.584
MRX2	Cardiac	Cardiovascular, extra low to low	0.081
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low to medium	0.225
MRX4	Diabetes	Diabetes, type 2	0.199
MRX5	Hemophilia/von Willebrands	Hematological, extra high	4.752
MRX6	Hepatitis	Infectious, low to medium	0.188
MRX7	HIV	Infectious, low to medium	0.188
MRX8	Infections, high	Infectious, high to very high	0.300
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.254
MRX10	Malignancies	Cancer, medium	0.611
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.781
MRX12	Parkinsons / Tremor	CNS, low	0.243
MRX13	Rare Diseases	Rare Diseases	2.664
MRX14	Seizure disorders	CNS, low	0.243
MRX15	Tuberculosis	Infectious, low to medium	0.188

Exhibit 4C
Mississippi Division of Medicaid
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024
Custom Risk Weights - MA Adult Rate Cell

Model R-Squared: 35.6%						
Risk Weight Category	CY 2023 Member Months ¹	Scored Member Coefficient	Scored Member Model Metrics			Unscored Member Coefficient ³
			Prevalence	P-Value	Population Risk Score ²	
Regression Intercept	439,404	0.126	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 19 to 24 Male	1,191	0.000	0.3%	N/A	0.331	0.331
Age 19 to 24 Female	33,669	0.460	7.7%	N/A	1.115	1.115
Age 25 to 44 Male	29,458	0.111	6.7%	N/A	0.639	0.639
Age 25 to 44 Female	320,071	0.305	72.8%	N/A	0.993	0.993
Age 45 and Older Male	11,689	0.127	2.7%	N/A	0.943	0.943
Age 45 and Older Female	43,326	0.326	9.9%	N/A	1.245	1.245
Non-Utilizer Category						
No Base Period Medical Utilization	35,780	(0.126)	8.1%	0.000	0.284	N/A
Duration						
Diagnosis Period Duration, 6 Months	4,681	0.448	1.1%	0.000	1.255	N/A
Diagnosis Period Duration, 7 to 12 Months	434,723	0.000	98.9%	N/A	0.997	N/A
Homelessness						
Homelessness	699	0.472	0.2%	0.025	2.273	N/A
Disease Categories						
Cancer, high to very high	1,485	2.607	0.3%	0.000	4.707	N/A
Cancer, low to medium	5,126	0.394	1.2%	0.000	1.864	N/A
Cardiovascular, very high	501	2.004	0.1%	0.000	4.770	N/A
Cardiovascular, medium	20,731	0.547	4.7%	0.000	2.145	N/A
Cardiovascular, low	16,476	0.442	3.7%	0.000	1.827	N/A
Cardiovascular, extra low	115,484	0.118	26.3%	0.000	1.220	N/A
Cerebrovascular, medium	632	0.456	0.1%	0.038	2.523	N/A
CNS, high	1,927	0.552	0.4%	0.000	2.343	N/A
CNS, medium	2,919	0.544	0.7%	0.000	2.330	N/A
CNS, low	28,055	0.425	6.4%	0.000	1.946	N/A
Diabetes, type 1	3,825	1.366	0.9%	0.000	2.939	N/A
Diabetes, type 2	30,601	0.241	7.0%	0.000	1.660	N/A
Eye, very low to extra low	9,330	0.271	2.1%	0.000	1.694	N/A
Gastro, high	1,193	0.864	0.3%	0.000	3.034	N/A
Gastro, medium	11,530	0.585	2.6%	0.000	2.187	N/A
Gastro, low	60,114	0.278	13.7%	0.000	1.602	N/A
Genital, extra low	28,771	0.232	6.5%	0.000	1.659	N/A
Infectious, very high	101	1.355	0.0%	0.013	3.451	N/A
Infectious, high	6,403	0.426	1.5%	0.000	2.269	N/A
Infectious, low to medium	10,381	0.196	2.4%	0.000	1.874	N/A
Metabolic, high	5,493	0.528	1.3%	0.000	2.286	N/A
Metabolic, medium	15,886	0.296	3.6%	0.000	2.077	N/A
Pregnancy, complete	47,226	0.295	10.7%	0.000	1.212	N/A
Pregnancy, incomplete	14,968	1.430	3.4%	0.000	2.252	N/A
Psychiatric, high	4,060	0.665	0.9%	0.000	2.039	N/A
Psychiatric, medium	5,861	0.490	1.3%	0.000	1.858	N/A
Psychiatric, low	127,229	0.200	29.0%	0.000	1.384	N/A
Pulmonary, medium to very high	9,517	0.499	2.2%	0.000	2.412	N/A
Pulmonary, low	37,305	0.271	8.5%	0.000	1.620	N/A
Rare Diseases	66	6.883	0.0%	0.000	9.430	N/A
Renal, extra high	128	2.600	0.0%	0.000	6.574	N/A
Renal, medium	3,760	0.539	0.9%	0.000	2.478	N/A
Renal, low	8,726	0.472	2.0%	0.000	2.097	N/A
Skeletal, medium	115,794	0.270	26.4%	0.000	1.436	N/A
Skeletal, low	15,336	0.251	3.5%	0.000	1.437	N/A
Skeletal, very low	11,243	0.189	2.6%	0.000	1.335	N/A
Skin, high	371	1.732	0.1%	0.000	4.561	N/A
Skin, low	1,151	0.891	0.3%	0.000	3.004	N/A
Skin, very low	29,277	0.178	6.7%	0.000	1.483	N/A
Substance abuse, very low to low	31,117	0.299	7.1%	0.000	1.675	N/A

¹ CY 2023 member months satisfying the regression criteria.
² Reflects the average total risk score for all members associated with the given variable.
³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4D Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024 CDPS+Rx Mapping to Custom Risk Weight Categories - MA Adult Rate Cell			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, high to very high	2.607
CANH	Cancer, high	Cancer, high to very high	2.607
CANM	Cancer, medium	Cancer, low to medium	0.394
CANL	Cancer, low	Cancer, low to medium	0.394
CARVH	Cardiovascular, very high	Cardiovascular, very high	2.004
CARM	Cardiovascular, medium	Cardiovascular, medium	0.547
CARL	Cardiovascular, low	Cardiovascular, low	0.442
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.118
CERM	Cerebrovascular, medium	Cerebrovascular, medium	0.456
CNSH	CNS, high	CNS, high	0.552
CNSM	CNS, medium	CNS, medium	0.544
CNSL	CNS, low	CNS, low	0.425
DDM	DD, medium	Not Used	Not Used
DDL	DD, low	Not Used	Not Used
DIA1	Diabetes, type 1	Diabetes, type 1	1.366
DIA2	Diabetes, type 2	Diabetes, type 2	0.241
EYEL	Eye, low	Eye, very low to extra low	0.271
EYEVL	Eye, very low	Eye, very low to extra low	0.271
GIH	Gastro, high	Gastro, high	0.864
GIM	Gastro, medium	Gastro, medium	0.585
GIL	Gastro, low	Gastro, low	0.278
GENEL	Genital, extra low	Genital, extra low	0.232
HEMEH	Hematological, extra high	Not Used	Not Used
HEMVH	Hematological, very high	Not Used	Not Used
HEMM	Hematological, medium	Not Used	Not Used
HEML	Hematological, low	Not Used	Not Used
INFVH	Infectious, very high	Infectious, very high	1.355
INFH	Infectious, high	Infectious, high	0.426
INFM	Infectious, medium	Infectious, low to medium	0.196
INFL	Infectious, low	Infectious, low to medium	0.196
METH	Metabolic, high	Metabolic, high	0.528
METM	Metabolic, medium	Metabolic, medium	0.296
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.295
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	1.430
PSYH	Psychiatric, high	Psychiatric, high	0.665
PSYM	Psychiatric, medium	Psychiatric, medium	0.490
PSYL	Psychiatric, low	Psychiatric, low	0.200
PULVH	Pulmonary, very high	Pulmonary, medium to very high	0.499
PULH	Pulmonary, high	Pulmonary, medium to very high	0.499
PULM	Pulmonary, medium	Pulmonary, medium to very high	0.499
PULL	Pulmonary, low	Pulmonary, low	0.271
RENEH	Renal, extra high	Renal, extra high	2.600
RENM	Renal, medium	Renal, medium	0.539
RENL	Renal, low	Renal, low	0.472
SKCM	Skeletal, medium	Skeletal, medium	0.270
SKCL	Skeletal, low	Skeletal, low	0.251
SKCVL	Skeletal, very low	Skeletal, very low	0.189
SKNH	Skin, high	Skin, high	1.732
SKNL	Skin, low	Skin, low	0.891
SKNVL	Skin, very low	Skin, very low	0.178
SUBL	Substance abuse, low	Substance abuse, very low to low	0.299
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.299
MRX1	Anti-coagulants	Cardiovascular, medium	0.547
MRX2	Cardiac	Cardiovascular, extra low	0.118
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.200
MRX4	Diabetes	Diabetes, type 2	0.241
MRX5	Hemophilia/von Willebrands	Not Used	Not Used
MRX6	Hepatitis	Infectious, low to medium	0.196
MRX7	HIV	Infectious, low to medium	0.196
MRX8	Infections, high	Infectious, high	0.426
MRX9	Inflammatory /Autoimmune	Skeletal, medium	0.270
MRX10	Malignancies	Cancer, low to medium	0.394
MRX11	Multiple Sclerosis / Paralysis	CNS, high	0.552
MRX12	Parkinsons / Tremor	CNS, low	0.425
MRX13	Rare Diseases	Rare Diseases	6.883
MRX14	Seizure disorders	CNS, low	0.425
MRX15	Tuberculosis	Infectious, low to medium	0.196

Exhibit 4E						
Mississippi Division of Medicaid						
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024						
Custom Risk Weights - CHIP & MississippiCAN Children Rate Cells						
Model R-Squared: 10.2%						
Risk Weight Category	Scored Member Model Metrics					
	CY 2023 Member Months ¹	Scored Member Coefficient	Prevalence	P-Value	Population Risk Score ²	Unscored Member Coefficient ³
Regression Intercept	3,309,147	0.595	100.0%	N/A	1.000	N/A
Demographic Categories						
Age 1 to 4	731,984	0.168	22.1%	N/A	0.976	0.976
Age 5 to 14 Male	909,713	0.038	27.5%	N/A	0.957	0.957
Age 5 to 14 Female	918,920	0.112	27.8%	N/A	0.953	0.953
Age 15 to 18 Male	371,291	0.000	11.2%	N/A	0.944	0.944
Age 15 to 18 Female	377,239	0.257	11.4%	N/A	1.321	1.321
Non-Utilizer Category						
No Base Period Medical Utilization	182,980	(0.410)	5.5%	0.000	0.282	N/A
Duration						
Diagnosis Period Duration, 6 Months	14,570	0.108	0.4%	0.037	0.886	N/A
Diagnosis Period Duration, 7 Months	26,037	0.098	0.8%	0.011	1.006	N/A
Diagnosis Period Duration, 8 to 12 Months	3,268,540	0.000	98.8%	N/A	1.000	N/A
Homelessness						
Homelessness	234	1.243	0.0%	0.002	3.173	N/A
Disease Categories						
Cancer, medium to very high	4,462	2.895	0.1%	0.000	5.020	N/A
Cardiovascular, very high	366	1.724	0.0%	0.000	7.166	N/A
Cardiovascular, medium	16,247	0.733	0.5%	0.000	2.440	N/A
Cardiovascular, low	43,787	0.450	1.3%	0.000	1.902	N/A
Cardiovascular, extra low	33,091	0.412	1.0%	0.000	2.102	N/A
Cerebrovascular, medium	265	2.021	0.0%	0.000	5.904	N/A
CNS, high	1,577	2.129	0.0%	0.000	4.449	N/A
CNS, medium	4,645	1.173	0.1%	0.000	3.149	N/A
CNS, low	50,373	0.751	1.5%	0.000	2.303	N/A
DD, medium	36	6.081	0.0%	0.000	9.047	N/A
DD, low	4,791	1.630	0.1%	0.000	3.800	N/A
Diabetes, type 1	8,130	3.867	0.2%	0.000	5.181	N/A
Diabetes, type 2	5,941	0.479	0.2%	0.000	2.127	N/A
Eye, very low to extra low	20,748	0.256	0.6%	0.000	1.548	N/A
Gastro, high	2,475	3.331	0.1%	0.000	5.923	N/A
Gastro, medium	6,128	1.271	0.2%	0.000	3.044	N/A
Gastro, low	166,443	0.340	5.0%	0.000	1.603	N/A
Genital, extra low	18,564	0.472	0.6%	0.000	1.940	N/A
Hematological, extra high	48	3.863	0.0%	0.000	4.657	N/A
Hematological, very high	557	3.011	0.0%	0.000	7.302	N/A
Hematological, low to medium	21,443	0.381	0.6%	0.000	1.974	N/A
Infectious, high to very high	4,543	0.662	0.1%	0.000	2.646	N/A
Infectious, medium	38,038	0.176	1.1%	0.000	1.436	N/A
Metabolic, high	12,930	0.754	0.4%	0.000	2.841	N/A
Metabolic, medium	10,153	0.391	0.3%	0.000	2.402	N/A
Pregnancy, complete	6,712	0.277	0.2%	0.000	1.750	N/A
Pregnancy, incomplete	3,714	3.124	0.1%	0.000	4.510	N/A
Psychiatric, high	1,066	3.507	0.0%	0.000	5.081	N/A
Psychiatric, medium	12,361	1.859	0.4%	0.000	3.079	N/A
Psychiatric, low	495,629	0.930	15.0%	0.000	1.883	N/A
Pulmonary, very high	2,702	1.975	0.1%	0.000	4.489	N/A
Pulmonary, medium to high	25,507	0.457	0.8%	0.000	1.941	N/A
Pulmonary, low	273,757	0.321	8.3%	0.000	1.456	N/A
Rare Diseases	287	7.506	0.0%	0.000	9.572	N/A
Renal, extra high	69	15.124	0.0%	0.000	19.997	N/A
Renal, medium	1,834	1.178	0.1%	0.000	3.242	N/A
Renal, low	25,902	0.277	0.8%	0.000	1.702	N/A
Skeletal, very low to medium	432,135	0.319	13.1%	0.000	1.490	N/A
Skin, high	306	0.773	0.0%	0.030	3.114	N/A
Skin, low	819	0.487	0.0%	0.025	2.125	N/A
Skin, very low	119,701	0.190	3.6%	0.000	1.366	N/A
Substance abuse, very low to low	6,264	1.082	0.2%	0.000	3.154	N/A

¹ CY 2023 member months satisfying the regression criteria.

² Reflects the average total risk score for all members associated with the given variable.

³ Unscored member coefficient developed using the population risk score for each demographic category.

Exhibit 4F			
Mississippi Division of Medicaid			
SFY 2025 MississippiCAN Risk Weight Development - Effective July 2024			
CDPS+Rx Mapping to Custom Risk Weight Categories - CHIP & MississippiCAN Children Rate Cells			
CDPS+Rx Abbreviation	CDPS+Rx Description	Risk Weight Category	Risk Weight
CANVH	Cancer, very high	Cancer, medium to very high	2.895
CANH	Cancer, high	Cancer, medium to very high	2.895
CANM	Cancer, medium	Cancer, medium to very high	2.895
CANL	Cancer, low	Not Used	Not Used
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.724
CARM	Cardiovascular, medium	Cardiovascular, medium	0.733
CARL	Cardiovascular, low	Cardiovascular, low	0.450
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.412
CERM	Cerebrovascular, medium	Cerebrovascular, medium	2.021
CNSH	CNS, high	CNS, high	2.129
CNSM	CNS, medium	CNS, medium	1.173
CNSL	CNS, low	CNS, low	0.751
DDM	DD, medium	DD, medium	6.081
DDL	DD, low	DD, low	1.630
DIA1	Diabetes, type 1	Diabetes, type 1	3.867
DIA2	Diabetes, type 2	Diabetes, type 2	0.479
EYEL	Eye, low	Eye, very low to extra low	0.256
EYEVH	Eye, very low	Eye, very low to extra low	0.256
GIH	Gastro, high	Gastro, high	3.331
GIM	Gastro, medium	Gastro, medium	1.271
GIL	Gastro, low	Gastro, low	0.340
GENEL	Genital, extra low	Genital, extra low	0.472
HEMEH	Hematological, extra high	Hematological, extra high	3.863
HEMVH	Hematological, very high	Hematological, very high	3.011
HEMM	Hematological, medium	Hematological, low to medium	0.381
HEML	Hematological, low	Hematological, low to medium	0.381
INFVH	Infectious, very high	Infectious, high to very high	0.662
INFH	Infectious, high	Infectious, high to very high	0.662
INFM	Infectious, medium	Infectious, medium	0.176
INFL	Infectious, low	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.754
METM	Metabolic, medium	Metabolic, medium	0.391
METVL	Metabolic, very low	Not Used	Not Used
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.277
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	3.124
PSYH	Psychiatric, high	Psychiatric, high	3.507
PSYM	Psychiatric, medium	Psychiatric, medium	1.859
PSYL	Psychiatric, low	Psychiatric, low	0.930
PULVH	Pulmonary, very high	Pulmonary, very high	1.975
PULH	Pulmonary, high	Pulmonary, medium to high	0.457
PULM	Pulmonary, medium	Pulmonary, medium to high	0.457
PULL	Pulmonary, low	Pulmonary, low	0.321
RENEH	Renal, extra high	Renal, extra high	15.124
RENM	Renal, medium	Renal, medium	1.178
RENH	Renal, low	Renal, low	0.277
SKCM	Skeletal, medium	Skeletal, very low to medium	0.319
SKCL	Skeletal, low	Skeletal, very low to medium	0.319
SKCVL	Skeletal, very low	Skeletal, very low to medium	0.319
SKNH	Skin, high	Skin, high	0.773
SKNL	Skin, low	Skin, low	0.487
SKNVL	Skin, very low	Skin, very low	0.190
SUBL	Substance abuse, low	Substance abuse, very low to low	1.082
SUBVL	Substance abuse, very low	Substance abuse, very low to low	1.082
MRX1	Anti-coagulants	Cardiovascular, medium	0.733
MRX2	Cardiac	Cardiovascular, extra low	0.412
MRX3	Psychosis/Bipolar/ Depression	Psychiatric, low	0.930
MRX4	Diabetes	Diabetes, type 2	0.479
MRX5	Hemophilia/von Willebrands	Hematological, extra high	3.863
MRX6	Hepatitis	Infectious, medium	0.176
MRX7	HIV	Infectious, medium	0.176
MRX8	Infections, high	Infectious, high to very high	0.662
MRX9	Inflammatory /Autoimmune	Skeletal, very low to medium	0.319
MRX10	Malignancies	Cancer, medium to very high	2.895
MRX11	Multiple Sclerosis / Paralysis	CNS, high	2.129
MRX12	Parkinsons / Tremor	CNS, low	0.751
MRX13	Rare Diseases	Rare Diseases	7.506
MRX14	Seizure disorders	CNS, low	0.751
MRX15	Tuberculosis	Not Used	Not Used

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2025

Region:	North									
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)	
Non-Newborn SSI / Disabled										
Magnolia	1.0012	\$750.00	\$750.92	\$290.00	\$160.00	\$10.00	\$5.00	\$465.00	\$1,215.92	
Molina	0.9812	\$750.00	\$735.91	\$290.00	\$160.00	\$10.00	\$5.00	\$465.00	\$1,200.91	
United	1.0051	\$750.00	\$753.83	\$290.00	\$160.00	\$10.00	\$5.00	\$465.00	\$1,218.83	
MA Adult										
Magnolia	1.0048	\$360.00	\$361.72	\$130.00	\$160.00	\$10.00	\$5.00	\$305.00	\$666.72	
Molina	0.9913	\$360.00	\$356.86	\$130.00	\$160.00	\$10.00	\$5.00	\$305.00	\$661.86	
United	1.0011	\$360.00	\$360.39	\$130.00	\$160.00	\$10.00	\$5.00	\$305.00	\$665.39	
MA Children										
Magnolia	1.0078	\$210.00	\$211.64	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$426.64	
Molina	0.9672	\$210.00	\$203.10	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$418.10	
United	1.0119	\$210.00	\$212.49	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$427.49	
Quasi-CHIP										
Magnolia	1.0038	\$200.00	\$200.77	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$415.77	
Molina	0.9634	\$200.00	\$192.67	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$407.67	
United	1.0155	\$200.00	\$203.11	\$40.00	\$160.00	\$10.00	\$5.00	\$215.00	\$418.11	
Foster Care										
Magnolia	0.9964	\$630.00	\$627.74	\$310.00	\$160.00	\$10.00	\$5.00	\$485.00	\$1,112.74	
Molina	1.0472	\$630.00	\$659.71	\$310.00	\$160.00	\$10.00	\$5.00	\$485.00	\$1,144.71	
United	0.9877	\$630.00	\$622.23	\$310.00	\$160.00	\$10.00	\$5.00	\$485.00	\$1,107.23	

¹ Capitation rates reflect the removal of the quality withhold
² Includes associated premium tax

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2025

Region:		Central								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0132	\$890.00	\$901.73	\$360.00	\$160.00	\$10.00	\$5.00	\$535.00	\$1,436.73
Molina		0.9789	\$890.00	\$871.20	\$360.00	\$160.00	\$10.00	\$5.00	\$535.00	\$1,406.20
United		0.9914	\$890.00	\$882.32	\$360.00	\$160.00	\$10.00	\$5.00	\$535.00	\$1,417.32
MA Adult										
Magnolia		1.0182	\$370.00	\$376.75	\$140.00	\$160.00	\$10.00	\$5.00	\$315.00	\$691.75
Molina		0.9611	\$370.00	\$355.59	\$140.00	\$160.00	\$10.00	\$5.00	\$315.00	\$670.59
United		1.0111	\$370.00	\$374.09	\$140.00	\$160.00	\$10.00	\$5.00	\$315.00	\$689.09
MA Children										
Magnolia		1.0121	\$220.00	\$222.67	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$447.67
Molina		0.9606	\$220.00	\$211.32	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$436.32
United		1.0124	\$220.00	\$222.73	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$447.73
Quasi-CHIP										
Magnolia		1.0175	\$220.00	\$223.85	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$448.85
Molina		0.9661	\$220.00	\$212.54	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$437.54
United		0.9992	\$220.00	\$219.82	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$444.82
Foster Care										
Magnolia		0.9821	\$660.00	\$648.20	\$440.00	\$160.00	\$10.00	\$5.00	\$615.00	\$1,263.20
Molina		1.1013	\$660.00	\$726.83	\$440.00	\$160.00	\$10.00	\$5.00	\$615.00	\$1,341.83
United		0.9942	\$660.00	\$656.15	\$440.00	\$160.00	\$10.00	\$5.00	\$615.00	\$1,271.15

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2025

Region:		South								
		(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ²	(f) MAPS Payment PMPM ²	(g) TREAT Payment PMPM ²	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled										
Magnolia		1.0224	\$930.00	\$950.79	\$390.00	\$160.00	\$10.00	\$5.00	\$565.00	\$1,515.79
Molina		0.9926	\$930.00	\$923.10	\$390.00	\$160.00	\$10.00	\$5.00	\$565.00	\$1,488.10
United		0.9811	\$930.00	\$912.38	\$390.00	\$160.00	\$10.00	\$5.00	\$565.00	\$1,477.38
MA Adult										
Magnolia		1.0200	\$350.00	\$356.98	\$150.00	\$160.00	\$10.00	\$5.00	\$325.00	\$681.98
Molina		0.9638	\$350.00	\$337.32	\$150.00	\$160.00	\$10.00	\$5.00	\$325.00	\$662.32
United		1.0087	\$350.00	\$353.04	\$150.00	\$160.00	\$10.00	\$5.00	\$325.00	\$678.04
MA Children										
Magnolia		1.0058	\$190.00	\$191.11	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$416.11
Molina		0.9561	\$190.00	\$181.65	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$406.65
United		1.0217	\$190.00	\$194.12	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$419.12
Quasi-CHIP										
Magnolia		1.0100	\$180.00	\$181.79	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$406.79
Molina		0.9418	\$180.00	\$169.52	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$394.52
United		1.0230	\$180.00	\$184.14	\$50.00	\$160.00	\$10.00	\$5.00	\$225.00	\$409.14
Foster Care										
Magnolia		0.9762	\$560.00	\$546.67	\$250.00	\$160.00	\$10.00	\$5.00	\$425.00	\$971.67
Molina		1.1180	\$560.00	\$626.10	\$250.00	\$160.00	\$10.00	\$5.00	\$425.00	\$1,051.10
United		0.9973	\$560.00	\$558.47	\$250.00	\$160.00	\$10.00	\$5.00	\$425.00	\$983.47

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

**DOM MSCAN SFY25 EMERGENCY CONTRACT
AMENDMENT 1
Exhibit 3**



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February 6, 2025

Jennifer Wentworth
Chief of Staff
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Report02 State Fiscal Year 2025 MississippiCAN Preliminary Rate Calculation and Certification - Update

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) has retained Milliman to develop actuarially sound capitation rates for state fiscal year (SFY) 2025 for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for Medicaid beneficiaries.

This report updates the preliminary capitation rates for all populations enrolled in MississippiCAN from the prior iteration dated September 6, 2024.¹ Overall, the SFY 2025 capitation rates in this report are 0.2% lower than the previous version (when compositing rates using calendar year (CY) 2022 membership). This report assumes ultimate approval of the preprints submitted to CMS for directed payments and directed fee schedules.

This report updates our preliminary SFY 2025 capitation rates; the following changes were made in this report relative to the prior certification:

- Updated projected SFY 2025 enrollment, using more recent membership data available. The rate changes shown below in Table 1 are composited using CY 2022 enrollment, and therefore, are not impacted by this update.
- Seasonal virus adjustments were updated to incorporate additional runout and feedback provided by the coordinated care organizations (CCOs).
- Fee schedule updates effective July 1, 2024 for behavioral health services (BHS), October 1, 2024 for home health (HH) and ambulatory surgical center (ASC) services, and January 1, 2025 for psychiatric residential treatment facilities (PRTF) services were incorporated into capitation rates.
- Corrected an issue that was discovered in the application of the intended unit cost trends for physician administered drugs (PADs).
- Updated charge trends for outpatient and certain physician services provided by DOM's payment methodology development vendor, Myers and Stauffer. This modeling included the impact of fee schedule updates effective July 1, 2023 and July 1, 2024. The impact of each service category is shown separately below in Table 1.

Table 1 summarizes the overall impact on capitation rates resulting from the changes noted above. The impact in Table 1 is based upon the membership distribution across rate cells in calendar year (CY) 2022. Each of these changes are described in more detail within the capitation report.

¹ "Report12 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification - Secured Copy.pdf" dated September 6, 2024.



Table 1 SFY 2025 Capitation Rate Development Summary of SFY 2025 Rate Change Components	
Assumption Change	Change from September 6, 2024 Preliminary Rates
Seasonal Virus Adjustment	1.003
BHS, HH, ASC, and PRTF Fee Schedule Adjustment	1.003
PAD Unit Cost Trend Fix Impact	0.996
Physician Unit Cost Trend Impact	0.993
Outpatient Unit Cost Trend Impact	1.004
Total SFY 2025 Rate Change	0.998

In addition, the following changes were incorporated, but do not have an impact on the SFY 2025 capitation rate PMPMs and therefore are not included in Table 1.

- All rate change comparisons to SFY 2024 capitation rates were updated to the most recent rate certification for SFY 2024 dated October 22, 2024. This does not have an impact on the SFY 2025 capitation rates, but does result in changes in the impact of changes between SFY 2024 and SFY 2025 as outlined in Section I of the report.
- Updated high-cost pharmacy risk corridor development to use a projected SFY 2025 membership basis instead of base period (CY 2022) membership.
- Included the Mississippi Outcomes for Maternal Safety (MOMS) state directed payment, which will be paid through a separate payment term. In conjunction with the incorporation of the MOMS state directed payment, the value-based purchasing (VBP) incentive payment was reduced from 0.50% to 0.25%.

Rates will be retroactively adjusted and recertified for the following items:

- Payments for the Mississippi Hospital Access Program (MHAP) Quality Incentive Payment Program (QIPP).
- Payments for the MHAP fee schedule adjustment (FSA) amounts.
- Payments for the Mississippi Medicaid Access to Physician Services (MAPS) program.
- Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program.
- Payments for the Mississippi Outcomes for Maternal Safety (MOMS) program.
- Payments for the ambulatory payment classification (APC) opt out program.

This recertification will be done at one time for capitation rates for the entire SFY 2025 period. This recertification is anticipated to happen two quarters following the end of SFY 2025.

There are many considerations taken in the development of SFY 2025 capitation rates to reflect impacts of COVID-19 and the unwinding of the continuous coverage requirement (CCR) in the Families First Coronavirus Act (FFCRA). Explicit adjustments for COVID-19 are made in the rate development for the following:

- **Base Period Data:** The SFY 2025 capitation rates use CY 2022 data as the basis for projections. Under normal circumstances, SFY 2025 capitation rates would be based on CY 2022 and CY 2021 experience for smaller rate cells. However, given the large population and member behavior changes in CY 2021, we do not find this experience to be a credible basis for SFY 2025 projections. Therefore, we use a single year of experience data for all populations as the basis for our SFY 2025 projections.
- **Acuity Adjustments:** MississippiCAN enrollment fluctuated significantly throughout CY 2022 due to the CCR and DOM policies shifting members between MississippiCAN and fee-for-service (FFS). Under the continuous coverage requirement DOM could not disenroll members who would normally lose eligibility during the public health emergency (PHE), as declared by the Department of Health and Human Services (HHS). However, beginning in June 2021, and continuing through late CY 2022, DOM transitioned individuals for whom Medicaid eligibility would have lapsed absent the CCR from coordinated care organizations (CCOs) into FFS Medicaid.



Jennifer Wentworth
Mississippi Division of Medicaid
February 6, 2025
Page 3 of 3

Per the Consolidated Appropriations Act, 2023 (CAA), the continuous coverage requirement, which was previously tied to the federal PHE ended on March 31, 2023. Additional guidance from the Centers for Medicare and Medicaid Services (CMS) indicated that states had 14 months after this date to complete redeterminations for affected enrollees. Within the options outlined by CMS, DOM began eligibility redeterminations starting in April 2023 and began disenrolling Mississippi Medicaid recipients who were no longer eligible in July 2023 and throughout the following year. We have been monitoring membership and population acuity changes as of a result of the end of the continuous coverage requirements and have applied an acuity adjustment in preliminary SFY 2025 capitation rates for certain populations based on the most recent data available as of March 2024.

- **COVID-19 / Influenza / RSV Adjustment:** We developed an adjustment for the estimated difference in costs included in the CY 2022 base period data and projected SFY 2025 costs for testing, vaccination, and treatment for influenza, respiratory syncytial virus (RSV), and COVID-19. These population specific adjustments reflect an expected decrease in COVID-19, influenza, and RSV costs from CY 2022 to SFY 2025.



Jennifer, please call us at 262 784 2250 if you have questions. We look forward to discussing this report with you and the CCOs.

Sincerely,

A handwritten signature in black ink, appearing to read "Jill Bruckert".

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

JAB/KNL/zk

Attachments

A handwritten signature in black ink, appearing to read "Katarina Lorenz".

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

MILLIMAN REPORT

State of Mississippi Division of Medicaid

State Fiscal Year 2025 MississippiCAN Preliminary Rate Calculation and Certification - Update

February 6, 2025

[Jill A. Bruckert](#), FSA, MAAA
Principal and Consulting Actuary

[Katarina N. Lorenz](#), FSA, MAAA
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EXHIBITS (Provided in Excel format only)

Capitation Rate Development

EXHIBIT 1	Base Data Exhibits – CY 2022 Encounter Data
EXHIBIT 2	Final Base Data and Projection Assumptions
EXHIBIT 3	Statewide Non-Service Expense Allowance Development
EXHIBIT 4	Final SFY 2025 Capitation Rates

Capitation Rate Support

EXHIBIT 5	SFY 2024 to SFY 2025 Rate Change
EXHIBIT 6	Service Category to Milliman <i>HCGs</i> Grouper Category Mapping
EXHIBIT 7A	Historical PMPM Trend Summary – All Populations
EXHIBIT 7B	Historical PMPM Trend Summary – SSI+ Population
EXHIBIT 7C	Historical PMPM Trend Summary – Adults Population
EXHIBIT 7D	Historical PMPM Trend Summary – Children Population
EXHIBIT 7E	Historical PMPM Trend Summary – Deliveries
EXHIBIT 8	Enhanced Match Services
EXHIBIT 9A	CY 2022 Databooks – Summary of Total Costs by Rate Cell
EXHIBIT 9B	CY 2022 Databooks – Summary of Allowed PMPM by Rate Cell
EXHIBIT 9C	CY 2022 Databooks – Summary of Total Costs by Rate Cell
EXHIBIT 10	Summary of Population, Program, and Reimbursement Changes
EXHIBIT 11A	Projected SFY 2024 and SFY 2025 Member Months
EXHIBIT 11B	Components of SFY 2024 Capitation Rates
EXHIBIT 11C	Components of SFY 2025 Capitation Rates
EXHIBIT 12	Unit Cost Trends by Category of Service

Expenditure Projection

EXHIBIT 13	SFY 2025 MississippiCAN Expenditure Estimate

Risk Corridor Calculations

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EXHIBIT 14C	SFY 2025 High Cost Pharmacy Risk Corridor Development
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EXHIBIT 15A	Procedure Codes for Non-Psychiatric Physician Visits
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APPENDICES

Supporting Documentation

APPENDIX A	SFY 2025 Rate Cell Definitions
APPENDIX B	Data Sources and Processing
APPENDIX C	CMS Managed Care Rate Setting Guide Response
APPENDIX D	Actuarial Certification of SFY 2025 MississippiCAN Capitation Rates
APPENDIX E	Data Reliance Letter

I. SUMMARY AND DISCUSSION OF RESULTS

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify to capitation rates for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for targeted Medicaid beneficiaries, effective for state fiscal year (SFY) 2025. This report provides preliminary SFY 2025 capitation rates and documents their development. This report is structured as follows:

- Section I includes a high-level overview of the change in capitation rates relative to the July 1, 2023 to June 30, 2024 (SFY 2024) capitation rates.
- Section II provides a short background of the MississippiCAN program.
- Section III documents the development of the base data.
- Section IV documents the rate setting process for SFY 2025 capitation rates.
- Appendices A and B contain additional details on the SFY 2025 rate cell definitions and base period data sources and processing.
- Appendix C provides responses to the CMS managed care rate setting guide for all rate cells.
- Appendix D contains an Actuarial Certification for all MississippiCAN rate cells.
- Appendix E documents our reliance on DOM for data and other assumptions in the development of the capitation rates.

SFY 2025 CAPITATION RATES

Table 1 includes per member per month (PMPM) preliminary capitation rates effective for SFY 2025 that will be paid to the Coordinated Care Organizations (CCOs) on a monthly basis (excluding all directed payments and any payments earned through the new value-based payment (VBP) incentive program) to provide medical and certain pharmacy services to their enrolled beneficiaries. Each CCO will be paid based on the distribution of members enrolled in each rate cell. In addition, CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions: North, Central, or South, as shown in Appendix A.

Table 1 Mississippi Division of Medicaid MississippiCAN Capitation Rates Per Member Per Month (PMPM) ¹ Effective SFY 2025			
Rate Cell	North	Central	South
Non-Newborn SSI / Disabled	\$759.18	\$900.54	\$946.20
Breast and Cervical Cancer	\$2,791.13	\$3,310.83	\$3,478.69
MA Adult	\$363.10	\$374.70	\$357.93
Pregnant Women	\$621.98	\$641.85	\$613.11
SSI / Disabled Newborn	\$6,799.51	\$7,185.86	\$6,059.94
Non-SSI Newborns 0 to 2 Months	\$2,372.70	\$2,507.52	\$2,114.62
Non-SSI Newborns 3 to 12 Months	\$313.48	\$331.29	\$279.38
Foster Care	\$636.29	\$672.44	\$567.08
MYPAC	\$3,442.53	\$3,638.14	\$3,068.09
MA Children	\$210.41	\$222.37	\$187.53
Quasi-CHIP	\$206.58	\$218.32	\$184.11

¹ Capitation rates in Table 1 exclude directed payments and are prior to the application of the quality withhold or VBP.

In addition, there are multiple directed payments that are paid outside of the monthly capitation rates and excluded from Table 1. The estimated cost for each directed payment is included as a PMPM amount in the preliminary SFY 2025 capitation rates. These PMPM amounts will be retrospectively adjusted on a CCO-specific basis to reflect final payments made for each program.

- The Mississippi Hospital Access Program (MHAP) hospital fee schedule adjustment (FSA) payments are paid outside of the capitation rates on a monthly basis. This amount varies by rate cell on a PMPM basis based on projected utilization of inpatient and outpatient services and actual membership. The MHAP FSA payments are projected to be \$719.7 million in SFY 2025. Please see Section IV of this report for additional details on the MHAP FSA.
- Payments for the MHAP quality incentive payment program (QIPP) are paid outside of the capitation rates on a quarterly basis. The MHAP QIPP payments are projected to be \$820.7 million in SFY 2025. Please see Section IV of this report for additional details on the MHAP QIPP.
- The Mississippi Medicaid Access to Physician Services (MAPS) program in MississippiCAN enhances payments to physicians who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The MAPS payments are estimated to be \$29.5 million in SFY 2025. Please see Section IV of this report for additional details on the MAPS program.
- The payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program in MississippiCAN for SFY 2025 enhances payments to eligible emergency ambulance providers. The TREAT payments are estimated to be \$25.3 million in SFY 2025. Please see Section IV of this report for additional details on the TREAT program.
- Payments for the MOMS program are paid outside of the capitation rates on an annual basis. This program aims to improve maternal outcomes in Mississippi through enhanced payments to hospitals and outpatient providers. These payments are estimated to be \$6.6 million in SFY 2025. Please see Section IV of this report for additional details on the MOMS program.

In addition, we expect that DOM will be filing a preprint with CMS for payments made to providers that opt out of the ambulatory payment classification (APC) payment model for outpatient services. The amount and structure of those payments are still under development at this time, but we will update the rate certification with the appropriate information once available.

In addition, the capitation rates will be adjusted on a CCO-specific basis for the following rate adjustments:

- **Quality Withhold:** As in SFY 2024 rates, DOM will apply a quality withhold to MississippiCAN payments in SFY 2025 based on metrics reported by the CCOs. The PMPM capitation rates in Table 1 are prior to the application of this quality withhold. Please see Section IV for more information on the quality withhold for SFY 2025.
- **Value-Based Payment Program (VBP):** Starting in SFY 2025, DOM is implementing a value-based payment program where CCOs can earn up to a 0.25% incentive payment. Please see Section IV for more information on this program.
- **Risk Adjustment:** The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be risk adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO and will be budget-neutral to DOM. The CDPS + Rx demographic and disease category weights will be calculated using Mississippi FFS and encounter data for the populations enrolled and services provided during SFY 2025.

The capitation rates for the Foster Care rate cell will be risk adjusted using a custom risk adjustment model developed for this population. This custom model uses a member's eligibility for either state or federal financial assistance to assign a risk score. The risk adjustment for the Foster Care rate cell will be applied on a concurrent basis.

Please see Section IV for more information on the application of risk adjustment to the applicable rate cells.

- **High-Cost Pharmacy Risk Corridor:** Similar to SFY 2024, a high-cost pharmacy risk corridor will be applied to recognize the uncertainty in determining rate setting assumptions for the impact of current and anticipated high-cost medications.

Please see Section IV for more information on how the High-Cost Pharmacy Risk Corridor settlement will be calculated.

Our Actuarial Certification of the SFY 2025 MississippiCAN capitation rates is included as Appendix D. It should be emphasized that capitation rates are a projection of future costs based on a set of starting data and assumptions. Actual costs will be dependent on each contracted CCO's situation, experience, and enrolled population.

SELECTION OF BASE DATA

Under normal circumstances, data from calendar year (CY) 2022 would be used as the primary base data for SFY 2025 capitation rates with data from CY 2021 used to supplement CY 2022 data for rate cells with fewer than 150,000 member months. Due to the emergence of COVID-19 in early 2020, and related enrollment changes occurring throughout CY 2021, the CY 2021 encounter data shows different utilization and cost patterns when compared with more recent time periods. We expect claims and member behavior in SFY 2025 to be more similar to adjusted CY 2022, rather than earlier time periods. Therefore, we did not incorporate CY 2021 data for the lower membership rate cells and CY 2022 data was used as our sole base data source for all rate cells in development of the SFY 2025 capitation rates, regardless of membership.

While CY 2022 encounter data is the primary data source for SFY 2025 capitation rates, emerging data from CY 2023 is also used in the development of several rate adjustments, such as seasonal virus impacts, population acuity adjustments, and trend assumptions.

In October 2022, a new MMIS vendor began processing all data for the Mississippi Medicaid and CHIP programs. In order to have consistency in the data for all months, the CY 2022 encounter data that serves as the basis for SFY 2025 capitation rates is supplied by DOM's new MMIS vendor, including restated months of data prior to October 2022. Milliman has worked closely with DOM and their MMIS vendor to refine our data process and validate the CY 2022 data.

CATEGORIES OF SERVICE

For SFY 2025 capitation rate development, the CY 2022 base data was categorized using a more granular category of service methodology in which inpatient, outpatient, and physician services are further subset into more specific sub-categories of service. We believe that these additional breakouts will allow for greater transparency when developing the SFY 2025 capitation rates. Table 2 below shows the comparison between the categories of service for the SFY 2024 and the SFY 2025 capitation rates.

The SFY 2024 capitation rate exhibits displayed costs for the MA Adult and Pregnant Women rate cells separately for delivery and non-delivery related costs. With the addition of maternity and delivery category of service breakouts for inpatient and physician services, we have adjusted our exhibits to show the MA Adult and Pregnant Women costs without this additional breakout as any delivery-specific adjustments will now be reflected in those categories of service.

Starting in July 2024, DOM entered into an arrangement with their Pharmacy Benefits Administrator (PBA) in which certain pharmacy claims are paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. Please see Appendix B for a further description of the associated pharmacy services.

Table 2	
Mississippi Division of Medicaid	
SFY 2024 & SFY 2025 Categories of Service	
SFY 2024 Category	SFY 2025 Category
Inpatient Hospital	Inpatient Hospital Services - Maternity / Deliveries
	Inpatient Hospital Services - Psychiatric / Substance Abuse
	Inpatient Hospital Services - All Other
Outpatient Hospital	Outpatient Hospital Services - Emergency Room
	Outpatient Hospital Services - Pharmacy
	Outpatient Hospital Services - All Other
Physician	Physician Services - Maternity / Deliveries
	Physician Services - Psychiatric / Substance Abuse
	Physician Services - All Other
Pharmacy	N/A
Dental	Dental - All Services
Other	All Other Services

PHE UNWIND AND COVID-19 CONSIDERATIONS IN SFY 2025 RATE DEVELOPMENT

Several adjustments were made in the SFY 2025 capitation rates to reflect changes as a result of COVID-19 and the unwinding impacts of the associated CCR, including:

- Acuity adjustments: Enrollment information through March 2024 was utilized as part of a risk score analysis to estimate changes in population acuity between the base period (CY 2022) and SFY 2025 for certain populations. Please see Section IV (Step 2) for more information on this adjustment.
- Seasonal virus adjustments: Adjustments are made in the rate development to account for estimated changes in seasonal virus loads (including COVID-19, RSV, and influenza) between CY 2022 and SFY 2025. Please see Section IV (Step 1) for more information on this adjustment.

CAPITATION RATE CHANGE SUMMARY

Table 3 summarizes the change in capitation rates from SFY 2024² to SFY 2025. This comparison is shown excluding the impact of directed payments, the quality withhold, and any payments earned through the VBP program, and is composited across all rate cells using CY 2022 membership. Table 3 also summarizes changes excluding the impact of program changes (noted by footnote 2 in Table 3), which increase or decrease total program costs concurrently with revenue for the CCOs and excluding the impact of COVID-19 adjustments (noted by footnote 3 in Table 3).

² “Report 14 – SFY 2024 Preliminary MississippiCAN Rate Calculation and Certification.pdf” dated October 22, 2024.

Table 3
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of SFY 2025 Rate Change Components¹

	Aggregated with CY 2022 Membership
SFY 2024 Capitation Rate - Including Pharmacy Services	\$517.87
Remove Non-Physician Administered Pharmacy Services	0.761
SFY 2024 Capitation Rate - Excluding Pharmacy Services	\$394.13
Shift CGT Estimates from Pharmacy to Physician	1.038
SFY 2024 Capitation Rate - Excluding Pharmacy Services with CGT Shift	\$409.13
Base Period Data Update	0.982
Restate CY 2022 to SFY 2024 Trends	1.001
Restate SFY 2024 Cell / Gene Therapy Coverage ²	0.981
Remove SFY 2024 Population Acuity Adjustment ³	0.970
Other Restated SFY 2024 Assumptions	0.998
Updates Relative to SFY 2024 Assumptions	0.934
SFY 2024 to SFY 2025 Utilization Trends	1.027
SFY 2024 to SFY 2025 Unit Cost Trends	1.005
SFY 2025 Population Acuity Adjustment ³	1.006
SFY 2025 Seasonal Virus Adjustment ³	1.010
SFY 2025 Hemophilia Population Carve-In ²	1.001
SFY 2025 Postpartum Coverage Extension ²	0.997
SFY 2024 to SFY 2025 Restorative Dental Reimbursement Change ²	1.001
Update SFY 2025 Admin	0.997
Remove SFY 2025 PBA Pharmacy Admin ²	0.993
Preliminary SFY 2025 Rate Change	0.968
SFY 2025 Rate Change - Excluding Program Changes²	0.995
SFY 2025 Rate Change - Excluding COVID-19 Adjustments³	0.982

¹ Rate changes exclude directed payments, the quality withhold, and the VBP.

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

³ COVID-19 adjustments include the population acuity adjustments and seasonal virus adjustment.

The values quoted below are all based on the program wide impact using CY 2022 membership to composite the rate cells. **The rate change components are based on SFY 2024 rates excluding pharmacy services and adjusted to show cell and gene therapy (CGT) costs as part of the physician service category (rather than pharmacy as originally projected in SFY 2024 rate development).**

- As discussed previously, SFY 2024 capitation rates were developed to project total medical and pharmacy costs, including those that will be covered by DOM's PBA for SFY 2025. For comparison purposes, we include the SFY 2024 rates with and without the PBA-eligible pharmacy services. The impact of removing estimated pharmacy category of service from the SFY 2024 rates decreases overall costs by about 23.9%.

The estimated SFY 2024 pharmacy category of service costs were developed using CY 2021 base period experience and trended to SFY 2024, including adding cost estimates for new CGT treatments to the pharmacy category of service. Based on our current understanding of how these claims will be paid in SFY 2025, these services will be paid in physician category of services. Therefore, we restated the SFY 2024 rates with CGT costs included in the physician service category for a more direct comparison to the SFY 2025 capitation rates. This change increases the SFY 2024 rates without PBA-eligible pharmacy services by 3.8%. The net impact of these two adjustments for the removal of PBA eligible pharmacy services (excluding CGTs) is a decrease of about 21.0%.

- The development of SFY 2025 capitation rates is a ground-up approach where the base data and each assumption is evaluated separate from the SFY 2024 capitation rates. However, for the purposes of explaining the rate change from SFY 2024 to SFY 2025, we isolate the impact of rebasing the data and assumptions that we updated relative to the data or assumptions used to develop the SFY 2024 values. Overall, this rebasing decreased the projection of SFY 2024 costs by 6.6% from costs projected in the SFY 2024 capitation rates.

This change contains the following sub-components:

- As stated above, SFY 2024 rates used CY 2021 data as the basis for capitation rate development. For SFY 2025, we rely on CY 2022 encounter data as the basis for rate development. The impact of changing our base data (including the associated impact of restating IBNR, TPL, missing data, and non-covered services) decreased projected costs by 1.8%.
 - Milliman restated CY 2022 to SFY 2024 trend assumptions. This included the recalculation of annual trend assumptions based on reviewing restated data, and the recalculation of fee schedule impacts based on base data for CY 2022 (rather than CY 2021); all topics are discussed in Section IV. Overall, this trend restatement resulted in a 0.1% decrease to capitation rates.
 - Several high-cost gene therapies are currently available or will become available during SFY 2025. Restating anticipated medical and non-PBA eligible pharmacy costs associated with these treatments, as well as the carve-in of Zolgensma from FFS, decreased rates by 1.9%. To date, the actual utilization of these high-cost gene therapies has been very low and the SFY 2025 estimates reflect this reduction in anticipated utilization for SFY 2025. Ultimate utilization levels are likely to be greater than or less than the estimates included in the SFY 2025 capitation rates. Therefore, a high-cost drug risk corridor has been implemented for SFY 2025 to mitigate the uncertainty in the estimation of utilization of these therapies and other high-cost pharmaceuticals.
 - The population acuity adjustments previously applied to reflect the impact of eligibility redeterminations from CY 2021 to SFY 2024 were removed to put the capitation rates on a 1.0 basis. A separate adjustment is applied to reflect population acuity changes between CY 2022 and SFY 2025. This reduces capitation rates by 3.0% overall.
 - Various other assumptions were restated, most notably the application of the preventative and diagnostic dental reimbursement increases occurring on July 1, 2021 and July 1, 2022. Now that we are utilizing CY 2022 base period data (instead of CY 2021), we no longer need to apply an adjustment for the July 1, 2021 change, and the July 1, 2022 adjustment is dampened to only apply to half the year. Relying on actual data vs. our prior assumptions reduced overall rates by approximately 0.2% across all rate cells.
- Composite utilization trend assumptions from SFY 2024 to SFY 2025 increased projected costs 2.7%. Please see Section IV for more information on trend assumptions included in SFY 2025 capitation rates.
 - Composite unit cost trend assumptions from SFY 2024 to SFY 2025 increased projected costs 0.5%. This change includes physician administered drug (PAD) trends and any fee schedule changes not modeled by DOM's payment methodology development (PMD) vendor. Please see Section IV for more information on the fee schedule changes currently modeled.
 - Throughout CY 2022, DOM transitioned individuals for whom Medicaid eligibility would have lapsed absent the CCR from the CCOs into FFS Medicaid. In addition, the continuous coverage requirement ended on March 31, 2023 and DOM started redeterminations in April 2023, with disenrollments of ineligible recipients starting in July 2023. During the official redetermination for individuals, there were multiple beneficiaries that had been moved from the CCOs into FFS initially that maintained Medicaid eligibility and subsequently were moved back into MississippiCAN, resulting in steady CCO enrollment increases throughout CY 2023 and into CY 2024. Given the changes in historical enrollment, Milliman developed a population acuity adjustment based on population risk scores to estimate the relative acuity of the base period to the projected SFY 2025 population. Across all rate cells, this population acuity adjustment increased capitation rates by 0.6%. Please see Section IV for a further description of the population acuity adjustment.
 - SFY 2024 capitation rates included an adjustment reflecting estimated changes in testing, treatment, and vaccination costs for COVID-19, influenza, and RSV. We performed a similar analysis for SFY 2025 capitation rates reviewing actual experience during CY 2023 to inform our new baseline costs for COVID-19, influenza, and RSV. The change to use these new adjustments increased the overall rate by 1.0%, as shown in Table 3.

MILLIMAN REPORT

- Starting January 1, 2024, eligible members with Hemophilia or Von Willebrand disease transitioned from FFS into MississippiCAN. Historically this population was carved-out of MississippiCAN due to the relatively high medical costs associated with these conditions, as well as the infrequent and non-uniform distribution of members across the CCOs. Milliman updated the analysis supporting this adjustment to use CY 2022 data and new projections of CGT usage for these members. Across all rate cells, this restatement increased capitation rates by approximately 0.1%.
- Per SB 2212, postpartum coverage extended from 60 days to 12 months for members who gave birth on or after April 1, 2023, such that the first enrollment month under the coverage extension was July 2023. An adjustment to account for the estimated cost differential between the prior coverage and the additional 10 months of postpartum coverage was included in the SFY 2024 capitation rates. Milliman updated this analysis for SFY 2025 and this resulted in an overall decrease in SFY 2025 capitation rates by 0.3% on a PMPM basis across all rate cells due to a higher percentage of membership in SFY 2025 in these newly covered postpartum months compared to SFY 2024 when this additional coverage was ramping up throughout the year.
- Per HB657, SFY 2025 MississippiCAN restorative dental services will be reimbursed at a rate 5.0% greater than in SFY 2024. Across all rate cells, this amounts to a slight increase to capitation rates.
- Changes to administrative expenses on a PMPM basis result in a decrease to the rate of approximately 0.3%, based upon CCO administrative expenses for CY 2022 trended to SFY 2025. A positive rate change in Table 3 indicates that the administrative costs increased as a percentage of the overall rate (i.e., administrative costs trended at a higher percentage than the overall rate). The overall PMPM for administrative expenses decreased 3.3% from the SFY 2024 allowance, comprised of a fixed administrative expense decrease from \$11.17 PMPM in the SFY 2024 rate to \$10.81 PMPM in the SFY 2025 rate, and a variable administrative expense decrease from \$26.07 in the SFY 2024 rate to \$25.21 in the SFY 2025 rate.
- As mentioned above, certain pharmacy expenses are expected to be paid by DOM's PBA rather than the CCOs. As these services will not be administered by the CCOs, Milliman reduced the SFY 2025 administrative cost levels to account for this change, based on splits of PBM related costs provided by DOM and the CCOs, which show that approximately 15% of prior PBM costs are related to duties that will be retained by the CCOs in SFY 2025. The change decreased overall capitation rates by 0.7% or an additional 7.5% (\$2.72) on a PMPM basis when aggregated using CY 2022 member months.

The rate change included in Table 3 does not include the impact of changes in directed payments from SFY 2024 to SFY 2025. The following changes in directed payments are expected for SFY 2025:

- The total MHAP payment across all MississippiCAN members increases from \$1.522 billion in SFY 2024 to \$1.540 billion in SFY 2025.
- The total MAPS payment decreases from \$39.4 million in SFY 2024 to \$29.5 million in SFY 2025.
- The TREAT payment amount increases from \$20.6 million in SFY 2024 to \$25.3 million in SFY 2025.
- The MOMS program is new in SFY 2025 and therefore does not have a comparable SFY 2024 amount.

Please see Section IV of this report for more information on changes to the directed payments for SFY 2025.

CAPITATION RATE CHANGE BY RATE CELL

Rate changes vary by capitation rate cell as shown in Table 4, which compares SFY 2025 capitation rates to SFY 2024 capitation rates, on a similar basis as Table 3. The level of detail for the rate change included in Table 3 above is shown by rate cell in Exhibit 5.

Table 4
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
Summary of Statewide SFY 2025 Rate Change¹

Rate Cell	Overall Rate Change	Excluding Program Changes²	Excluding COVID-19 Adjustments³
Non-Newborn SSI / Disabled	-6.6%	0.3%	-6.1%
Breast and Cervical Cancer	13.0%	13.6%	13.5%
MA Adult	-11.1%	-10.4%	-4.4%
Pregnant Women	-12.4%	-5.0%	-15.4%
SSI / Disabled Newborn	-13.6%	-13.2%	-15.5%
Non-SSI Newborns 0 to 2 Months	2.0%	2.5%	-0.1%
Non-SSI Newborns 3 to 12 Months	10.4%	7.6%	9.8%
Foster Care	-0.5%	0.1%	-3.8%
MYPAC	-10.1%	-9.6%	-13.6%
MA Children	2.5%	2.0%	6.0%
Quasi-CHIP	1.0%	1.6%	4.8%
Total - Aggregated with CY 2022 MMs	-3.2%	-0.5%	-1.8%

¹ Rate changes exclude directed payments, and are prior to the application of the quality withhold or VBP.

² Population acuity adjustment and seasonal virus adjustment changes have been excluded from this calculation.

³ COVID-19 adjustments include the acuity adjustments and seasonal virus impact.

DATA RELIANCE AND IMPORTANT CAVEATS

Milliman has developed certain models to estimate the values included in this report. The intent of the models was to estimate SFY 2025 capitation rates. We have reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOPs).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting for January 2022 to December 2022 with runout through June 2023, historical and projected reimbursement information, fee schedules, and other information from DOM, MississippiCAN CCOs, Gainwell Technologies, Myers and Stauffer, and CMS to calculate the preliminary MississippiCAN capitation rates shown in this report. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2025 base data.

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

Our report is intended for the internal use of DOM to review the preliminary MississippiCAN capitation rates for SFY 2025. The report and the models used to develop the values in this report may not be appropriate for other purposes. We anticipate the report will be shared with contracted CCOs and other interested parties. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

Jill Bruckert and Katarina Lorenz are consulting actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of their knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

II. MISSISSIPPICAN BACKGROUND

MississippiCAN, a Coordinated Care Program for Mississippi Medicaid beneficiaries, was designed to address the following goals:

- Improve access to needed medical services – This goal is accomplished by connecting the targeted beneficiaries with a medical home, increasing access to providers, and improving beneficiaries' use of primary and preventive care services.
- Improve quality of care – This goal is accomplished by providing systems and supportive services, including disease state management and other programs that will allow beneficiaries to take increased responsibility for their health care.
- Improve efficiencies and cost effectiveness – This goal is accomplished by contracting with CCOs on a capitated basis to provide services through an efficient, cost-effective system of care.

TARGET POPULATION

MississippiCAN was implemented in all 82 counties in the State of Mississippi for all eligible beneficiaries beginning January 1, 2011 for targeted, high-cost Medicaid beneficiaries defined by these categories of eligibility (COEs):

- COE001 – SSI via SDX
- COE019 – Disabled children at home
- COE025 – Working Disabled
- COE026 – DHS CWS Foster Care
- COE027 – Breast-Cervical

On December 1, 2012, the eligible population of MississippiCAN was expanded to include all Foster Care children, Non-SSI Newborns 0 to 12 months, MA Adults, and Pregnant Women, as defined by the following categories of eligibility and age requirements:

- COE003 – DHS-IV-E-Medicaid
- COE075 – Parents / Caretakers of minor children
- COE088 – Pregnant Women, 185% FPL – Ages 8+
- Non-SSI Newborns – Ages 0 to 12 months
 - COE003 – DHS IV-E Medicaid
 - COE026 – DHS Foster Care
 - COE071 – Newborn age 0 to 1 with income at or below 185% FPL
 - COE088 – Pregnant Women, 185% FPL

Effective December 1, 2012, all MississippiCAN populations were mandatory enrolled except SSI children, disabled children at home, Foster Care children, and members of the Mississippi Band of Choctaw Indians.

Between December 2014 and July 2015, the eligible population of MississippiCAN was expanded again to include children as defined by the following categories of eligibility, age, and income requirements:

- COE072 – Children age 1 to 5 with income at or below 133% FPL
- COE073 – Children age 6 to 19 with income at or below 100% FPL
- COE074 – Children age 6 to 19 with income between 100% and 133% FPL who would have qualified for CHIP under pre-Affordable Care Act rules

Effective January 1, 2014, COE074 children previously eligible for CHIP with income eligibility between 100% and 133% FPL became Medicaid eligible rather than CHIP eligible due to income eligibility outlined in the Affordable Care Act. These children were moved into MississippiCAN effective December 1, 2014 and referred to as "Quasi-CHIP" children.

The children covered under the above COEs previously covered in the Medicaid program are called “MA Children.” DOM phased in enrollment from FFS into MississippiCAN by July 2015, with most children transitioned between May 2015 and July 2015.

Effective December 1, 2015, in conjunction with the movement of inpatient services into MississippiCAN, enrollment procedures were changed to enroll newborns in MississippiCAN on the day of their birth. Previously, newborns were not enrolled until, on average, their second month of life due to a delay in assigning a Medicaid identification number and the process to enroll them in a CCO.

Starting October 1, 2018, Severely Emotionally Disturbed (SED) Children were covered by MississippiCAN. These children are identified with the lock-in code of “SED,” which is effective for one year after determination. To receive Mississippi Youth Program Around the Clock (MYPAC) services, a child must have an SED lock-in code. This population was referred to as “SED Children” prior to SFY 2021. Starting in SFY 2021, this population is referred to as the “MYPAC” rate cell.

Effective July 1, 2023, postpartum coverage extends from 60 days to 12 months. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. After July 1, 2023, this redetermination will not occur until the end of the 12 months of postpartum coverage.

Throughout this report, we frequently apply the same adjustments to rate cells with similar demographics. The rate cell groups summarized in Table 5 identify the rate cells contained within each grouping referenced throughout this report.

Table 5 Mississippi Division of Medicaid MississippiCAN Capitation Rates Rate Cell Groupings	
Rate Cells	Rate Cell Grouping
Non-Newborn SSI / Disabled	SSI
Breast and Cervical Cancer	SSI
MA Adult	Adults
Pregnant Women	Adults
SSI / Disabled Newborn	Children
Non-SSI Newborns 0 to 2 Months	Children
Non-SSI Newborns 3 to 12 Months	Children
Foster Care	Children
MYPAC	Children
MA Children	Children
Quasi-CHIP	Children

COVERED SERVICES

When MississippiCAN was first established in January 2011, three key services were initially excluded from the program. Over time, each has been moved from being covered by FFS to MississippiCAN as follows:

- Behavioral health services – Rolled into MississippiCAN effective December 1, 2012
- Non-emergent transportation services – Rolled into MississippiCAN effective July 1, 2014
- Inpatient services – Rolled into MississippiCAN effective December 1, 2015

Effective October 1, 2018, MississippiCAN included costs for psychiatric residential treatment facility (PRTF) stays. Historically, these costs were carved out of MississippiCAN, although members were not dis-enrolled from MississippiCAN.

Starting July 1, 2019, services provided at institutions for mental disease (IMD) are covered as part of the MississippiCAN program.

Effective January 1, 2024, members diagnosed with Hemophilia or Von Willebrand disease are included in the MississippiCAN program. These members were previously carved out to the FFS program.

Effective July 1, 2023, Zolgensma will be included as a covered treatment for members with spinal muscular atrophy. Previously this drug was carved out and CCOs were reimbursed for any incurred costs.

Effective July 1, 2024, pharmacy services will no longer be paid by the CCOs and will instead be paid through DOM's PBA.

CCOs historically have not provided services not covered under MississippiCAN "in lieu of" covered services.

ENROLLMENT PERIOD

All beneficiaries have the ability to choose the CCO in which to enroll. Enrolled beneficiaries will have an open enrollment period during the 90 days following their initial enrollment in a CCO, during which they can enroll in a different CCO "without cause" and an open enrollment period from October to December of each year. During this time period, beneficiaries may choose to change their CCO.

Various "for cause" reasons for disenrollment at other times incorporate federal requirements, such as: providers that do not (for religious or moral reasons) offer needed services; not all related services are available in the plan's network; or the plan lacks providers experienced in dealing with the enrollee's health care needs.

Eligibility criteria for MississippiCAN are the same as the eligibility criteria for Mississippi Medicaid. To receive enhanced federal funding during the COVID-19 PHE, DOM paused disenrollment of members from the Mississippi Medicaid program who normally would no longer be eligible for Medicaid services. Where readily identifiable (e.g., individuals aging out of the program eligibility requirements or pregnant women reaching 60 days postpartum), individuals who would have lost normal Medicaid eligibility in the MississippiCAN program were transitioned to FFS for the remainder of the CCR. Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from CCOs into FFS Medicaid. Following the end of the CCR, these members Medicaid eligibility will be redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely. These redeterminations began in SFY 2023 and continue through SFY 2024.

The CCOs do not have the ability to directly market to targeted beneficiaries. DOM provides information about choice of CCOs and enrolls the beneficiaries into their chosen CCO. The Medicaid Fiscal Agent provides some specific services of an enrollment broker to accomplish these tasks.

III. BASE DATA DEVELOPMENT

This section of the report describes the development of the base data used for the preliminary SFY 2025 MississippiCAN capitation rates.

METHODOLOGY OVERVIEW

The base data for the SFY 2025 capitation rates was developed by summarizing eligibility, encounter claims, and financial claim data for CY 2022 MississippiCAN enrollees. Exhibit 9 contains databooks summarizing encounter data for CY 2022 for all rate cells. Please note, the total and PMPM costs shown in the 2022 databook include missing data. The total and PMPM costs in the 2022 databooks tie to the starting totals on Exhibit 1 if missing data is removed from the databook.

The remainder of this section is a high-level description of the processing for eligibility, encounter claim data, and financial claim data for CY 2022 MississippiCAN enrollees. In addition, any adjustments made to the raw data are discussed in this section and shown in Exhibit 1. Please refer to Appendices A and B of this report for additional information on the validation and processing of these data sources.

Membership

Member months by rate cell and region in CY 2022 were summarized from the detailed Medicaid eligibility data, excluding populations not covered by MississippiCAN and individuals that opted out of the program (where applicable). These enrollment counts were validated against enrollment information provided by the CCOs. In total, the enrollment in the eligibility files is 0.4% lower than reported by the CCOs.

Adjustments are applied to the starting enrollment records to reflect changes resulting from several adjustments described below, including:

- **IMD removal:** Per CMS guidelines, eligibility and claims are removed for members with IMD stays of over 15 days in a given month.
- **MYPAC membership reallocation:** Some members were not correctly assigned a 'SED' lock-in code during CY 2022. Although this does not impact overall enrollment, membership is shifted from other children rate cells to the MYPAC rate cell.
- **SSI Children Formerly Moved to FFS Due to PRTF Stay:** Membership and claims information for these members was pulled from FFS data and added to the CY 2022 MississippiCAN eligibility and encounter claims data.

Row (a) of Exhibit 1 includes the adjusted CY 2022 member months included in base data development.

Claim Data

DOM and Milliman go through extensive data validation processes to review CCO submitted encounter data. DOM regularly monitors encounter claims compared to cash disbursement journals (CDJs) to ensure the timeliness and completeness of submitted encounters and works with Myers and Stauffer to identify the correct original or final claim to keep in each claim string. Milliman relied on this claim status identification process to remove duplicates and identify denied claims that are anticipated to be resubmitted and accepted, as described in Appendix B.

As part of rate development, Milliman requests financial reporting data from each CCO. This financial reporting data was reconciled to each CCO's 2022 audited NAIC financial statement. After several rounds of questions to clarify, adjust, and confirm understanding of the reported financial information, Milliman compared the encounter data to the financial reporting data, for paid claims and subcapitated claims. This comparison excludes estimates for incurred but not reported (IBNR) claims and adjusts for any claims that were identified as missing from the processed encounter data. To align the financial templates and encounter data on a comparable basis, we performed this reconciliation exercise using CY 2022 data with run-out through June 2023.

As discussed above, DOM transitioned to a new data vendor during CY 2022. In the process of reviewing the CY 2022 data from the new data vendor, Gainwell, we noted several issues, including duplicate claims. We are still working with DOM and Gainwell to determine a possible resolution for this issue. Therefore, this base data report includes an adjustment to calibrate encounters to CCO reported financial levels at a high-level service category level. This adjustment is discussed in more detail below.

Additionally, starting on July 1, 2024, DOM entered into an arrangement with their PBA in which certain pharmacy claims are paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. Please see Appendix B for a further description of the associated pharmacy services.

MYPAC Member Identification Adjustment

Beginning in July 2021, the assignment of the “SED” lock-in flag was applied inconsistently for some members. The lock-in flag is the primary means of identifying members in the MYPAC rate cell, and as such, using our current rate cell methodology, as outlined in Appendix A, some members were not assigned to the MYPAC rate cell and instead assigned to other children rate cells. We queried our enrollment records and claims data to identify members who should have been identified via the “SED” lock-in flag, but were not and reassigned them accordingly. We reassigned membership and corresponding claims amounts for 3,819 member months totaling approximately \$9.7 million from other children rate cells to the MYPAC rate cell.

The member months shown in row (a) of Exhibit 1 reflects the reassignment of these member months.

The adjustment to reassign the costs between rate cells is shown in Exhibit 1 in row (d).

Encounter to Financial Adjustment

In the development of the base data the following items are noted:

- As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we compared financial to encounter data utilizing the SFY 2024 level of granularity, and the following notes reflect this classification.
- Overall, the paid amounts in the encounters reconcile reasonably well to the paid amounts shown in the CCO financial reporting for the MississippiCAN populations, particularly for inpatient, outpatient, physician, and other services. As Table 6 shows, in total encounter data was 0.32% higher than financial data.
- At a category of service and rate cell level, there was a greater variance between encounter data and financial reporting, particularly for the inpatient and dental categories of service, which may be most impacted by the duplicate claim issues noted above. Therefore, when calculating and applying the financial to encounter data adjustments we applied separate adjustments for inpatient and dental services. All other service categories receive the same adjustment.

Table 6	
Mississippi Division of Medicaid	
SFY 2025 MississippiCAN Capitation Rate Development	
Comparison of Financial and Encounter Data	
Difference of Encounters and Financials (% of Encounters)	
OP / Physician / Other Services	0.69%
IP Services	-2.13%
Dental Services	-2.92%
All Services	-0.32%

Encounter data for all three CCOs is combined to summarize CY 2022 claim experience for MississippiCAN enrollees. The financial reporting expenditures for all CCOs were combined to perform the encounter validation outlined above, as well as to develop the following adjustments to apply to the encounter data:

- Removal of costs that would be paid or recouped through a third party.

- Addition of IBNR expenses not yet included in encounters.
- Addition of claims paid by the CCOs that are not yet reflected in the encounter system.

All experience used to develop the base period data for the SFY 2025 capitation rates is on a net basis and excludes any member cost sharing.

Row (b) of Exhibit 1 includes the CY 2022 total service costs from the encounter data. Row (c) converts the total service costs to a PMPM basis. To reflect the differences between claims in the financial reporting and the encounter data, the financial to encounter data adjustments are applied on row (e) of Exhibit 1. Given duplicate claims and other encounter data issues noted by Gainwell and DOM, this adjustment calibrates overall encounter claims to levels reported in the financial templates.

Missing Data Adjustment

A separate adjustment was made to account for payments made by the CCOs that are not reflected in the detailed encounter data or cannot be reasonably applied to a specific claim (e.g., provider bonuses or settlements). These claim amounts are not included in the detailed encounter data after the processing outlined in Appendix B. Each CCO provided separate financial reporting to support and validate the amounts reported for claims not appearing in encounters. As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we developed the adjustments utilizing the financial data at the SFY 2024 level of granularity and applied the resulting adjustment factors to all corresponding breakout categories of service. The detailed financial reporting provided by the CCOs included splits by region and rate cell, which were used to allocate missing data on Exhibit 1.

Overall, the base data is increased 0.5% on a PMPM basis for missing data.

The aggregate adjustment for all missing data described above is shown in Exhibit 1 in row (f).

IBNR Adjustment

The adjustment for IBNR claims as of June 30, 2023 uses the best estimate IBNR claims provided by each of the CCOs in their financial reporting. As the CY 2022 financial data was reported using the SFY 2024 categories of service definitions, we developed the adjustments utilizing the financial data at the SFY 2024 level of granularity and applied the resulting adjustment factors to all corresponding breakout categories of service.

We performed the following high-level reasonability checks to validate these estimates:

- Data, including IBNR estimates, was reported on a quarterly basis by each CCO. We reviewed the reported IBNR by quarter to determine that there was a reasonable pattern throughout the year (i.e., IBNR amounts held for Q1 2022 were significantly lower than Q4 2022).
- IBNR estimates among the CCOs were reviewed to validate that they were approximately the same as a percentage of total claims, where appropriate.
- IBNR estimates by category of service are approximately the same as a percentage of total claims as IBNR adjustments applied to the MississippiCAN data in prior years after accounting for differences in runout period between years.

Overall, the base data increased by 0.7% on a PMPM basis for IBNR claims.

This adjustment is shown in Exhibit 1 in row (g).

Non-Covered Services

As noted above, Milliman is aware of a known data issue related to identifying some non-covered physician services. Due to this known issue, we developed an estimate for CY 2022 non-covered physician services using percentages from the CY 2021 encounter data.

Additionally, Milliman summarized the costs of home health services exceeding CY 2022 service limits in the encounter data using the definitions provided by DOM, as detailed in Appendix B.

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The combined amount for physician and home health services estimated to exceed CY 2022 service limits, which totaled approximately 0.2% of CY 2022 MississippiCAN service costs, were removed from CY 2022 base data at the rate cell level of detail. Service limits do not apply up to age 21, thus, base period costs were not adjusted for these members.

The adjustment to remove estimated non-covered services in CY 2022 is shown in Exhibit 1 in row (h).

Zolgensma Removal

In CY 2022, Zolgensma, a gene therapy used to treat Spinal Muscular Atrophy, was carved-out of managed care and reimbursed separately by DOM on a case-by-case basis. We removed three Zolgensma claims totaling approximately \$6.5 million from the CY 2022 base data as the CCOs were not at-risk for these claims in CY 2022. Across all rate cells, this reduced base data by 0.4%.

The adjustment to remove Zolgensma treatments in CY 2022 is shown in Exhibit 1 in row (i).

Note, starting on July 1, 2023, the Zolgensma carve-out was reversed and CCOs are at-risk for these treatments, subject to the High-Cost Pharmacy Risk Corridor. We include estimates of projected Zolgensma treatments as part of the gene therapy drug coverage adjustment in Exhibit 2, which is detailed in Section IV of this report.

Third-Party Liability (TPL) Recoveries

The CCOs provided Milliman with a summary of recoveries for TPL payments related to claims incurred in CY 2022 and recovered through December 2022. Using CY 2019 through CY 2021 data, Milliman reviewed the portion of total CY 2019 through CY 2021 recoveries recovered after the end of each year. The recovery patterns looked noticeably different in CY 2020 and CY 2021, possibly because of the COVID-19 pandemic. Therefore, we relied on CY 2019 data to estimate total claim recoveries for services incurred in CY 2022, but not yet reflected in the CY 2022 base data. It is assumed that these outstanding TPL recoveries will reduce ultimate CY 2022 paid totals.

We removed the total TPL amounts as a percentage of total paid claims across all rate cells and categories of services from the CY 2022 base data. Across all rate cells, these TPL recoveries amounted to a 0.2% reduction to CY 2022 base data. We do not have information to apply this estimate at either a rate cell or category of service level, and therefore apply a uniform adjustment for the estimate of TPL recoveries.

This adjustment is shown in Exhibit 1 in row (j).

IMD (Institution for Mental Disease) Stays Beyond 15 Days

Per CMS regulations, services rendered at an IMD beyond 15 days in a given month for individuals aged 21 to 64 cannot be covered by Medicaid. CMS requires all claims (not just IMD claims) incurred by members and the enrollment records for those same months be removed from base data for the month with the IMD stay exceeding 15 days. The enrollment shown in row (a) of Exhibit 1 is after the removal of these 93 member months. An additional adjustment was made to remove all claims for these members in the impacted months, resulting in approximately a 0.1% reduction to the CY 2022 encounter data.

This adjustment is shown in Exhibit 1 in row (k).

IMD Unit Cost Adjustment

Some IMD stays for 15 days or fewer for individuals aged 21 to 64 will be covered under MississippiCAN. We adjusted the unit cost for similar claims in the CY 2022 experience to use DOM's fee schedule for these services. These unit cost adjustments resulted in a cost increase of approximately \$700 in total.

This adjustment is shown in Exhibit 1 in row (l).

[SSI Children Formerly Moved to FFS Due to PRTF Stay](#)

From October 2018 through May 2022, DOM moved certain SSI children from COE 001 to COE 005, which is not a MississippiCAN covered population, due to a psychiatric residential treatment facility (PRTF) stay. In SFY 2025, these members will remain in COE 001 during their PRTF stay, and MississippiCAN CCOs will be responsible for expenses incurred during these stays.

We reviewed the encounter data along with a supplemental enrollment extract provided by DOM identifying the members impacted during CY 2022 and found 63 members totaling 316 member months that were moved to COE 005 from January to May 2022. The enrollment shown in row (a) of Exhibit 1 reflects the inclusion of these member months. An additional adjustment was made to add claims for these members in the impacted months to the Non-Newborn SSI / Disabled rate cell. Overall, the base data increased by 0.3% on a PMPM basis for this adjustment.

This adjustment is shown in Exhibit 1 in row (m).

[Adjusted CY 2022 PMPM Costs](#)

Total 2022 base period PMPM costs by rate cell are shown in the final row of Exhibit 1.

IV. PROJECTED SFY 2025 CAPITATION RATES

Many adjustments must be applied to the base period data to develop SFY 2025 capitation rates. This section describes the adjustments applied to the base period data described in Section III to develop SFY 2025 capitation rates. These adjustments are applied in eight steps:

1. Trend costs from base period to SFY 2025.
2. Apply adjustments for population, program, and reimbursement methodology changes.
3. Include an allowance for CCO non-service expenses.
4. Adjust rates to reflect differences in geographic area by rate cell.
5. Apply quality withhold.
6. Adjust for CCO specific risk scores (if applicable).
7. Retrospectively adjust for directed payments.
8. Calculate risk corridor settlements.

STEP 1: TREND COSTS FROM BASE PERIOD TO SFY 2025

Starting with the blended base data developed in Section III, we apply trend adjustments to project the base period to SFY 2025. Below, we describe each trend adjustment shown on Exhibit 2. The adjustments for non-pharmacy and pharmacy services for which the CCOs are responsible (physician administered drugs) are developed using differing methodologies, and therefore, described separately in this section.

Non-Pharmacy Trend Overview

Our general approach to trend development for non-pharmacy categories of service is to consider known recent changes in provider reimbursement, along with historical PMPM trend values. We then develop utilization / service mix trends that produce targeted PMPM trends. We utilize this approach because it is frequently difficult to directly measure changes in utilization for services other than inpatient hospital and pharmacy over time due to differences in counting utilization “units.”

Exhibits 7A to 7E include a historical trend summary of PMPM costs from January 2019 through September 2023 for each high-level population type and in total for the MississippiCAN program. This data has been normalized for the following to put it on a consistent basis across time:

- IBNR from the financial templates was added to the encounter data to review PMPM trends on a completed basis.
- Estimates of the impact of the following material program or reimbursement changes were removed for the applicable time periods. These changes are accounted for in separate adjustments in this report, and therefore, should not be included in data analyzed for trends.
 - Removal of Zolgensma claims
 - 5% assessment removal for OPPS services
 - Implementation of 5% assessment on non-OPPS services
 - OPPS reimbursement changes not related to the 5% assessment
 - PAD reimbursement changes
 - PRTF services
 - OP dental reimbursement change
 - GME carve out
 - NET reimbursement adjustment
 - Provider settlements
 - Financial to encounter adjustments
 - Emergency ambulance reimbursement increases
- PMPMs at a rate cell level were aggregated using September 2023 membership into higher level population groupings and MississippiCAN in total. This removes the impact of membership mix changes across rate cells over time on the aggregate PMPMs.

- No adjustments were made to account for population acuity changes over time.

Table 7 below shows the annualized utilization trends assumed in SFY 2025 capitation rates. Please see Exhibit 12 for a summary of unit cost changes for each service category and rate cell. For the MYPAC rate cell, utilization trends for physician services are dampened relative to the trends shown for other children rate cells to reflect the high proportion of physician services obtained through the MYPAC providers, for which flat utilization trends were assumed. The impact of MYPAC reimbursement changes is reflected through a separate MYPAC fee schedule adjustment, shown on Exhibit 12.

Table 7
Mississippi Division of Medicaid
MississippiCAN Capitation Rates
CY 2022 to SFY 2025 Utilization Trends (Annualized)

Service Category	Population				
	SSI	BCCP	Adults	Children	Newborn
Inpatient Hospital – Maternity / Deliveries	1.0%	1.0%	1.0%	1.0%	1.0%
Inpatient Hospital – Psychiatric / Substance Abuse	5.0%	3.0%	2.0%	3.0%	0.0%
Inpatient Hospital – Other	5.0%	3.0%	2.0%	3.0%	0.0%
Outpatient Hospital – Emergency Room	0.0%	0.0%	0.0%	0.0%	0.0%
Outpatient Hospital – Pharmacy	2.0%	2.0%	1.5%	2.5%	2.5%
Outpatient Hospital – Other	5.0%	3.0%	2.0%	3.0%	3.0%
Physician – Maternity / Deliveries	1.0%	1.0%	1.0%	1.0%	1.0%
Physician – Psychiatric / Substance Abuse	6.0%	3.0%	2.0%	3.0%	3.0%
Physician – Other	5.5%	4.0%	2.0%	3.0%	2.0%
Dental	4.0%	4.0%	4.0%	4.0%	4.0%
Other	3.0%	3.0%	3.0%	3.0%	3.0%

The development of the utilization and unit cost trend assumptions is described below.

Utilization Trend for Non-Pharmacy Costs

Utilization trend reflects expected changes in:

- Demand for medical services
- Intensity or mix of medical services
- Provider practice patterns
- Provider coding changes

The following data sources were used to develop the utilization trend assumptions:

- Historical MississippiCAN specific trends as shown in Exhibits 7A through 7E, with limited credibility applied to trends during the COVID-19 pandemic.
- Emerging Q1 through Q3 2023 experience as reported by the CCOs was additionally summarized to review recent claim trend patterns by population. We adjusted the emerging experience for the following:
 - Acuity changes between Q1 through Q3 2023 and the final acuity projected for SFY 2025 (based on enrollment as of March 2024) for the MA Adult, MA Children, and Quasi-CHIP rate cells.
 - Reimbursement changes effective July 1, 2023 and projected reimbursement changes effective July 1, 2024 were applied to put reimbursement on a SFY 2025 basis.
- Experience from similar programs in other states.

Table 8 below shows the adjusted Q1 through Q3 2023 PMPM costs for the largest population groups, as reported by the CCOs in their emerging CY 2023 financial template data. As described above, this data was adjusted to reflect the expected acuity of the population currently enrolled (as of March 2024) and adjusted to be on a SFY 2025 reimbursement basis. To help assess the reasonability of the trend assumptions selected above, we compared the adjusted Q1 to Q3 2023 PMPM costs for the largest populations to the projected service costs in SFY 2025 and the implied PMPM trend on an annualized basis between the emerging CY 2023 experience and projected SFY 2025 costs. The results are summarized below in Table 8.

Table 8 Mississippi Division of Medicaid CY 2023 Emerging Experience							
	Q1 2023	Q2 2023	Q3 2023	SFY 2025	Implied Annualized Trend From	Implied Annualized Trend From	Implied Annualized Trend From
Rate Cell	PMPM ¹	PMPM ¹	PMPM ¹	PMPM ^{2,3}	Q1 2023	Q2 2023	Q3 2023
Non-Newborn SSI / Disabled	\$680.25	\$717.93	\$716.47	\$733.30	4.1%	1.3%	1.7%
MA Adult	\$301.52	\$303.63	\$305.69	\$315.73	2.5%	2.4%	2.4%
MA Children / Quasi-CHIP	\$164.51	\$155.71	\$165.99	\$169.81	1.7%	5.5%	1.7%

¹ Adjusted for acuity, reimbursement, and program changes.

² Adjusted to remove estimated CGT costs and the impact of extended postpartum coverage for pregnant women.

³ SFY 2025 PMPMs include estimated reimbursement changes from CY 2022 to SFY 2024, but do not include reimbursement changes from SFY 2024 to SFY 2025 in these preliminary rates.

The adjustment resulting from the selected utilization trends is shown in Exhibit 2 in row (b).

Unit Charge Trends for Non-Pharmacy Costs

The hospital inpatient, hospital outpatient, physician, and dental Medicaid FFS fee schedules are updated each year consistent with the following sources. DOM does not mandate provider reimbursement levels other than to require that reimbursement be at least as great as FFS for network providers. We assume that CCO reimbursement levels will move in tandem with changes to FFS reimbursement. Pursuant to SB2799 that was passed into Mississippi law on April 19, 2021, changes in reimbursement after July 1, 2021 will require legislative notification. HB657 was subsequently signed into law on April 19, 2022, allowing for changes in reimbursement rates as long as the payment methodology remains consistent. Based on direction from DOM we are modeling fee schedule changes for each service category as noted below. Coverage for new codes and prohibition for billing on discontinued codes is allowed. We assumed the net impact of these latter two issues will be budget neutral, but will reevaluate once data is available and adjust capitation rates, if needed. Unless otherwise noted, the fee schedule changes for prior years remained unchanged. The below sections discuss unit cost trends developed based on the fee schedule modeling provided by Conduent and Myers and Stauffer for inpatient, outpatient, and professional services.

- **Inpatient:** DOM reimburses hospital inpatient claims using an APR-DRG methodology based upon the 3M grouper. Due to issues with the detailed CY 2022 inpatient data as a result of the MMIS vendor transition, the unit cost trends continue to rely on the simulations provided by Conduent for SFY 2024 capitation rates showing the estimated impact of payment rate changes effective July 1, 2023 using an underlying mix of CY 2021 claims. No changes were made to the APR-DRG payment methodology for July 1, 2024.

Table 9 below shows the assumed annualized inpatient charge trends from CY 2022 to SFY 2025 by rate cell grouping including a 0% change for July 1, 2024. These trends are also shown by rate cell in the inpatient rows of the "all other" column in Exhibit 12.

Table 9 Mississippi Division of Medicaid Inpatient Unit Cost Trends for CY 2022 to SFY 2025	
Population	Inpatient
SSI	-1.83%
Adult	1.54%
Newborn ¹	3.34%
Children ²	-1.04%

¹ Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

² Children include all other children rate cells.

Outpatient: DOM reimburses hospital outpatient claims using the Medicare APC methodology updated on July 1 of each year. We received the simulation of reimbursement changes for OPPS services effective July 1, 2024 from Myers and Stauffer, and these are used to develop our unit cost trends for SFY 2025 capitation rates. The simulations utilize a CY 2022 claims base data set, with separate projections for July 1, 2023 fee schedule changes and July 1, 2024 fee schedule updates. Not all services included in our outpatient service category are billed using the OPPS payment methodology, and therefore, we dampened the impact of the OPPS reimbursement changes to apply to applicable services only.

Table 10 shows the assumed annualized outpatient charge trends for non-pharmacy services from CY 2022 to SFY 2025 by rate cell grouping. These trends are also shown by rate cell in the non-pharmacy outpatient rows of the “all other” column in Exhibit 12.

Table 10 Mississippi Division of Medicaid Outpatient Unit Cost Trends for CY 2022 to SFY 2025	
Population	Outpatient
SSI	2.30%
Adult	2.55%
Newborn ¹	4.84%
Children ²	3.18%
¹ Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.	
² Children include all other children rate cells.	

- **Physician:** DOM generally reimburses physician services as a percentage of Mississippi Medicare fee schedules and updates the FFS fee schedules on July 1 of each year for the Medicare fee schedule changes from January 1 of the given year. We received the simulated impact of fee schedule changes between CY 2022 and SFY 2025 from Myers and Stauffer, and these updated values have been incorporated into the SFY 2025 capitation rates.

The simulations utilize a base data set of CY 2022 claims with separate projections for July 1, 2023 fee schedule changes and July 1, 2024 fee schedule updates. These finalized simulations are reflected in the SFY 2025 capitation rates. The Myers and Stauffer simulations excluded early and periodic screening, diagnostic, and treatment (EPSDT) claims. Therefore, we applied the same increase we observed for simulated claims for similar populations, to these claims.

The per-encounter FQHC and RHC reimbursement is included in the MississippiCAN capitation rates to provide a steadier cash flow to the RHCs and FQHCs that serve the MississippiCAN population. The CCOs are expected to reimburse FQHCs and RHCs at DOM’s per-encounter rates. DOM will monitor the utilization of services at FQHCs and RHCs under MississippiCAN to ensure services are not diverted from FQHCs and RHCs to other providers. Approximately 13.5% of costs in the high-level physician category of service are for FQHCs and RHCs. Rate increases of 3.8%, and 4.6% were applied to FQHC and RHC per-encounter rates effective January 1, 2023 and January 1, 2024, respectively. We assumed the per-encounter increase for FQHCs and RHCs to be 4.2% for January 1, 2025, the average of the prior two years.

We assumed that reimbursement for all other services remain flat from CY 2022 to SFY 2025. Additionally, we excluded PAD claims from this analysis given we develop and apply trends separately for those services.

Table 11 below shows the combined physician unit cost trends, excluding PADs, incorporating the Myers and Stauffer simulated changes, assumed EPSDT increases, appropriate FQHC and RHC trends, and flat unit cost trends for services with no anticipated changes. These trends are applied to the physician maternity, psychiatric, and the portion of the other physician trends not related to PADs. The total physician other trend is a blend of these trends and PAD trends.

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

Table 11	
Mississippi Division of Medicaid	
Physician Unit Cost Trends for CY 2022 to SFY 2025	
Population	Physician
SSI	-0.10%
Adult	0.59%
Newborn ¹	-0.72%
Children ²	0.53%

¹Newborn include SSI / Disabled Newborns and Non-SSI Newborns 0 to 2 Months.

²Children include all other children rate cells.

- **Other:** The simulated impact of fee schedule changes for July 1, 2023 and July 1, 2024 for durable medical equipment (DME), medical supplies, audiology, and vision were provided by Myers and Stauffer along with other professional claims. The additional claim level detail provided in this analysis allowed us to more precisely align the claims we bucket into the “other” service category with the correct fee schedule changes. These trends are shown by rate cell in the “all other services” row and “all other” column of Exhibit 12.

Fee schedules were also updated between CY 2022 and SFY 2025 for several additional services, which were modeled separately by Milliman. The impact of changes in reimbursement for each service are shown individually in Exhibit 12 and include the following services:

- Prescribed Pediatric Extended Care (PPEC)
- Private Duty Nursing (PDN)
- Behavioral Health Services (BHS)
- Ambulatory Surgical Centers (ASC)
- Autism Spectrum Disorder (ASD)
- Home Health (HH)
- Psychiatric Residential Treatment Facility (PRTF)
- Mississippi Youth Programs Around the Clock (MYPAC)
- Orthodontia

The unit cost trends for each of the above services were calculated by comparing the CY 2022 payment rates with those currently expected to be in place during SFY 2025, composited based on the mix of services during CY 2022. See Exhibit 12 for additional details regarding the base period costs and applied trend for each service and Exhibit 10 for documentation of the date of fee schedule changes incorporated into each type of service

Row (c) in Exhibit 2 includes the aggregate unit cost adjustment factors from CY 2022 to SFY 2025.

Physician Administered Drug Trends

We developed physician administered drug (PAD) trends using the following sources:

- **MississippiCAN-Specific Data** – We analyzed completed January 2022 to December 2023 experience for pharmacy claims administered in a medical setting, also referred to in this report as physician administered drugs (PADs). We analyzed historical experience in CY 2022 and CY 2023 by high level population and drug type.
- **Industry Research** – We reviewed recent drug trend reports from PBMs to benchmark the prospective list price and utilization trends used in our detailed modeling of MississippiCAN-specific data. Additionally, we conducted industry research to adjust trends for anticipated market events, including but not limited to, recent average sales price (ASP) price change, biosimilars, novel brand drugs, expanded treatable population for approved drugs (e.g., new indication or age expansion), and drug mix in MississippiCAN medical experience.
- **FDA Drug Approvals** – When developing prospective PAD trends, we consider the FDA approval of various new therapies. However, building explicit additional trend into capitation rates for these products is difficult due to a lack of information on expected pricing and uptake among the various populations. Therefore, we build in modest additional trend to reflect the expansion of new approvals for each population. We note, the historical experience reviewed in trend development also reflects the impact of FDA approvals that were new during those periods. For select high-cost pharmaceuticals we build explicit adjustments into the capitation rates, as outlined in Step 2, rather than incorporating into the PAD trend assumption.

Based on our analyses, we estimate annualized utilization and unit cost trends from CY 2022 to SFY 2025 shown in Table 12. Difference in aggregate trends by population in Table 12 are due to each population's historical trends and drug mix.

Table 12 Mississippi Division of Medicaid Pharmacy Trends for CY 2022 to SFY 2025				
	SSI	Adult	Children	Newborn
Annualized Unit Cost Trends	2.00%	1.50%	2.50%	2.50%
Annualized Utilization Trends	2.00%	1.50%	2.50%	2.50%

Seasonal Virus Trend Adjustment

We continue to monitor costs associated with COVID-19 (testing, treatment, and vaccinations), as well as costs associated with influenza and respiratory syncytial virus (RSV). We queried CY 2022 MississippiCAN costs associated with COVID-19, influenza, and RSV by population and compared them to similar costs in emerging CY 2023 data with runout through August 2024. Specific adjustments were made to ensure claims are not counted as both COVID-19 and influenza / RSV. Additionally, we excluded all maternity and delivery claims from being identified as either COVID-19 or influenza / RSV, given we would expect those claims to occur regardless.

We expect that seasonal virus costs in SFY 2025 will be more similar to levels observed in CY 2023, which is further removed from the height of the COVID-19 PHE than the base period experience in CY 2022. We observe material decreases in costs related to COVID-19, influenza, and RSV in CY 2023 compared to CY 2022 levels. Therefore, we applied high-level dampening adjustments to apply to CY 2022 COVID-19, influenza, and RSV costs to decrease them in line with observed CY 2023 levels. These dampening adjustments were calculated separately by population and for COVID-19 vs. influenza and RSV and the final resulting dampened cost is included in Table 13 below. The PMPM cost adjustments are scaled across service categories based on the historical cost distribution.

Table 13 Mississippi Division of Medicaid Seasonal Virus Trend Adjustment				
	CY 2022 PMPM Cost	CY 2023 PMPM Cost	Adjustment	CY 2022 Dampened Cost PMPM
SSI				
COVID-19	\$19.03	\$7.86	-55.0%	\$8.56
Flu / RSV	\$5.17	\$4.66	-5.0%	\$4.91
Total	\$24.20	\$12.51		\$13.47
Newborn				
COVID-19	\$18.39	\$12.35	-30.0%	\$12.87
Flu / RSV	\$25.32	\$22.88	-5.0%	\$24.05
Total	\$43.70	\$35.23		\$36.92
Children				
COVID-19	\$8.34	\$4.69	-40.0%	\$5.01
Flu / RSV	\$5.22	\$4.52	-10.0%	\$4.69
Total	\$13.56	\$9.21		\$9.70
Adults				
COVID-19	\$11.82	\$4.69	-60.0%	\$4.73
Flu / RSV	\$2.36	\$2.48	0.0%	\$2.36
Total	\$14.18	\$7.18		\$7.09

Row (d) in Exhibit 2 shows the adjustment for seasonal viruses.

STEP 2: APPLY ADJUSTMENTS FOR POPULATION, PROGRAM, AND REIMBURSEMENT METHODOLOGY CHANGES

The following adjustments are applied to reflect changes in expected costs due to changes between the base period and rating period.

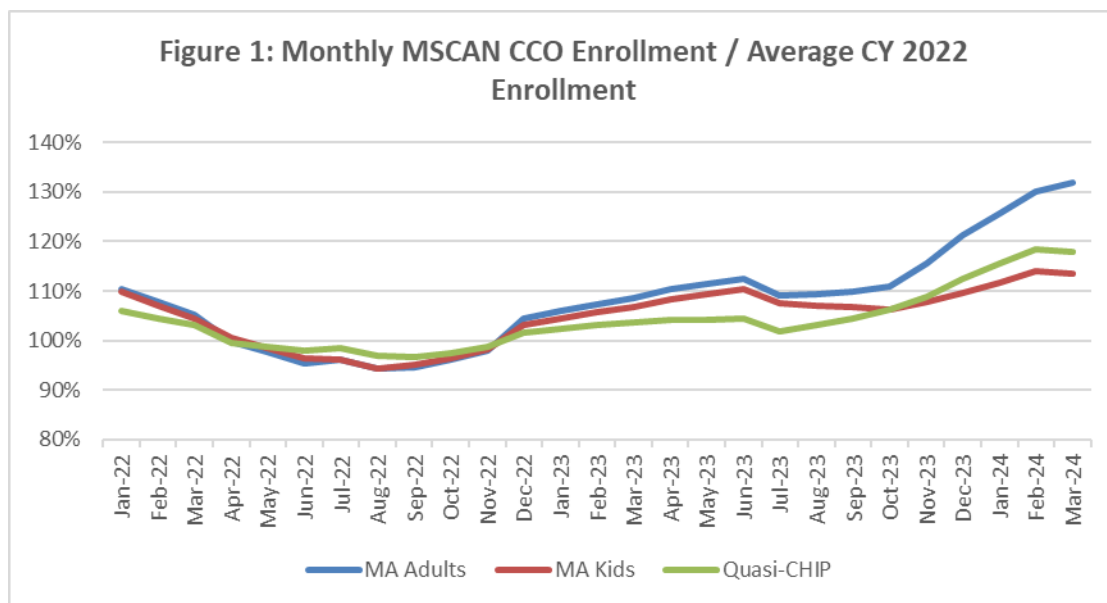
- Population Changes: Change in the mix of individuals already enrolled in MississippiCAN
- Program Changes: Changes to populations and / or services included in MississippiCAN
- Reimbursement Methodology Changes: Updates to Medicaid FFS reimbursement methodologies (assumes a parallel impact on MississippiCAN reimbursement), or changes in CCO reimbursement

Exhibit 10 summarizes the program, population, and reimbursement changes discussed in this section, the impacted rate cells for each change, and where the change is reflected in the rate development.

Population Acuity Adjustment

Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the CCR from the CCOs into FFS Medicaid. This transition from the CCOs into FFS Medicaid was concentrated in several populations where members commonly churn in and out of the Medicaid population or transition between rate cells due different income eligibility at different ages, including the MA Adults, MA Children, and Quasi-CHIP children. These transitions continued well into CY 2022, impacting the CY 2022 membership mix included in the base data used to develop SFY 2025 capitation rates.

In addition, the CCR ended on March 31, 2023, and DOM initiated eligibility redeterminations in April 2023, with disenrollments of ineligible recipients starting in July 2023 and continuing over the next 12 months. During the redetermination process, beneficiaries that had been moved from the CCOs into FFS initially that maintained Medicaid eligibility were moved back into MississippiCAN, resulting in steady CCO enrollment increases throughout CY 2023 and into CY 2024. Figure 1 shows this change in monthly enrollment compared to the average enrollment in CY 2022 for each rate cell (e.g., a ratio of 110% indicates that month's enrollment is 10% higher than the average enrollment during the CY 2022 base data).



To estimate the change in acuity due to population changes between the CY 2022 base period data and the population we expect to be enrolled during SFY 2025, we performed a risk score-based acuity analysis. We calculated risk scores for two distinct time frames:

- 1. CY 2022 (CY 2021 diagnoses and CY 2022 enrollment).
- 2. March 2024 (CY 2023 diagnoses and March 2024 enrollment used as a proxy for the population enrolled during SFY 2025).

Due to population and programmatic changes occurring in MississippiCAN since we last calculated Mississippi-specific risk scores, we did not use the custom Mississippi risk weights that have been used for risk adjustment in prior capitation rate periods. Instead, we relied on standard CDPS weights from the CDPS + Rx risk score model. We excluded pharmacy claims from the risk score model, as these claims are not included in the capitation rates for SFY 2025. Given the large changes in membership between CY 2022 and March 2024 we only looked at members that were able to be “scored,” meaning they had at least six months of enrollment during the diagnosis period.

To calculate the acuity adjustments, we compared the average risk scores for March 2024 enrollment compared to the average risk score in CY 2022 for each population. The results were very similar for MA Children and Quasi-CHIP, so the same adjustment was applied to both rate cells. The final acuity adjustments applied are a downward adjustment of 1.5% for MA Adults and an upward adjustment of 2.5% for MA Children and Quasi-CHIP, as shown in Table 14.

Table 14 Mississippi Division of Medicaid SFY 2025 MississippiCAN Capitation Rate Development Population Acuity Adjustment						
Cap Cell	CY 2022 - Scored Members		March 2024 - Scored Members		Risk Score Change	Final Acuity Adjustment
	Member Months	Average Risk Score	Member Months	Average Risk Score		
MA Adult	405,835	1.020	47,891	1.006	0.986	0.985
MA Children	2,462,797	0.947	238,373	0.972	1.027	1.025
Quasi-CHIP	275,824	0.967	27,371	0.986	1.019	1.025

Additional information about the risk scores for members enrolled in MississippiCAN during CY 2022 and March 2024, including additional splits for various time periods are shown in Tables 15 (MA Adult) and 16 (MississippiCAN children) below.

For CY 2022 MississippiCAN scored members, we reviewed the risk scores separately by quarter to assess the impact on risk scores of ongoing member eligibility redeterminations during CY 2022 when members were moved to FFS. This shows that risk scores remain relatively stable during CY 2022 as membership declines.

We similarly reviewed monthly risk scores for each scored population from December 2023 to March 2024 where we saw large membership increases as a result of member eligibility redeterminations related to the unwinding of the PHE. Tables 15 and 16 show a steady increase in membership month over month for all populations, but the impact on risk score varies by population (risk scores decrease for adults and increase for children).

Table 15 Mississippi Division of Medicaid Acuity Adjustment - MA Adult					
CY 2022 Risk Scores by Quarter					
	Q1 2022	Q2 2022	Q3 2022	Q4 2022	CY 2022
Scored Member Months	116,213	101,521	93,607	94,494	405,835
Average Monthly Enrollment	38,738	33,840	31,202	31,498	33,820
Risk Score	1.019	1.025	1.024	1.014	1.020
December 2023 to March 2024 Risk Scores					
	December 2023	January 2024	February 2024	March 2024	
Scored Members	42,388	44,399	46,263	47,891	
Risk Scores	1.019	1.013	1.009	1.006	

Table 16 Mississippi Division of Medicaid Acuity Adjustment - MA Children and Quasi-CHIP					
	CY 2022 Risk Scores by Quarter				
	Q1 2022	Q2 2022	Q3 2022	Q4 2022	CY 2022
Scored Member Months	750,429	683,691	649,991	654,510	2,738,621
Average Monthly Enrollment	250,143	227,897	216,664	218,170	228,218
Risk Score	0.941	0.949	0.954	0.949	0.949
	December 2023 to March 2024 Risk Scores				
	December 2023	January 2024	February 2024	March 2024	
Scored Members	237,899	247,128	257,521	265,744	
Risk Scores	0.971	0.971	0.973	0.973	

Row (e) in Exhibit 2 shows the population acuity adjustment.

Postpartum Coverage Extension

Per SB 2212, postpartum coverage extended from 60 days to 12 months effective July 1, 2023. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. After July 1, 2023, this redetermination will not occur until the end of the 12 months of postpartum coverage. While this program change has the largest impact on the Pregnant Women rate cell, other rate cells are also expected to have minor increases in enrollment due to extending the time until eligibility redetermination to 12 months postpartum (i.e., if someone would have been disenrolled during their annual redetermination they now will remain for the additional months until 12 months postpartum). We reviewed the impact of the coverage extension on all rate cells in the MississippiCAN program and believe the PMPM impact is minimal and did not include an adjustment for any rate cell except for the Pregnant Women rate cell, given its unique eligibility requirements and historical enrollment patterns. The projected membership in Exhibit 3 includes the impact of extending postpartum coverage for all rate cells.

While this program change will add membership and service costs to the Pregnant Women rate cell, these additional months of coverage are expected to be lower on a PMPM basis than the costs included in the CY 2022 base data. We developed separate adjustments to apply to the non-delivery costs and delivery costs included in Exhibit 2.

- **Non-Delivery Costs:** The estimated PMPM cost for months 3 through 12 postpartum was developed by reviewing the relativity of the non-pharmacy PMPMs for postpartum months 1 and 2 compared to months 3 through 12 for individuals that had a delivery while in the Pregnant Women rate cell in CY 2023 and were eligible for the extended coverage effective July 1, 2023. Given the limited amount of data available and limitations on claim runout we also compared this to the PMPM relativities used in SFY 2024 capitation rate development, which was calculated based on experience in the MA Adult rate cell during CY 2021. Both data sets showed a cost relativity of roughly 75%. We then applied this relativity to the PMPM cost for postpartum months 1 and 2 for the Pregnant Women rate cell in the CY 2022 base data.
- **Delivery Costs:** Additional delivery costs will not be incurred for the additional months of membership added to the Pregnant Women rate cell. Therefore, we dampen the delivery cost PMPM to spread across the increased membership basis. The adjustment for SFY 2025 is further dampened compared to the adjustment in SFY 2024 capitation rates because the extension of coverage will be in place for a full year at the start of SFY 2025 rather than a ramp-up of additional member months during SFY 2024. Therefore, we expect a higher percentage of non-delivery months in the pregnant women rate cell in SFY 2025 compared to SFY 2024.

Table 17 below demonstrates the development of the population change factors.

Table 17
Mississippi Division of Medicaid
SFY 2025 Capitation Rate Development
Pregnant Women Rate Cell
Postpartum Extension Adjustment

		Non-Delivery Costs	Delivery Costs
Prior Eligibility: Prenatal through 60 Days Postpartum			
(A)	Member Months	96,821	96,821
(B)	Total Allowed	\$31,518,325	\$56,111,477
(C) = (B) / (A)	CY 2022 Allowed PMPM	\$325.53	\$579.54
New Eligibility: 3 through 12 Months Postpartum			
(D)	Member Months	104,491	104,491
(E)	Total Allowed	\$17,134,718	\$0
(F) = (E) / (D)	Allowed PMPM	\$163.98	\$0.00
Total Population			
(G) = (A) + (D)	Member Months	201,312	201,312
(H) = (B) + (E)	Total Allowed	\$48,653,043	\$56,111,477
(I) = (H) / (G)	Allowed PMPM	\$241.68	\$278.73
(J) = (I) / (C)	Postpartum Population Change Factor	0.742	0.481

Row (f) in Exhibit 2 shows this adjustment.

Hemophilia Population Carve-In

Starting on January 1, 2024, eligible members diagnosed with Hemophilia and Von Willebrand's disease transitioned from FFS to MississippiCAN. Historically this population has been carved-out of MississippiCAN due to the relatively high-cost associated with treatment and the infrequent and non-uniform distribution across the CCOs. DOM provided a list of 168 members with hemophilia that were transitioned from FFS to MississippiCAN on January 1, 2024. We identified 153 members in CY 2022. We included an adjustment to include these members' CY 2022 FFS claims and enrollment to their current rate cell. Additionally, we increased overall costs to reflect the additional 15 members not present in the CY 2022 and assumed these members have the same average PMPM cost as those members reflected in the CY 2022 base period data.

Row (g) in Exhibit 2 shows this adjustment.

Gene Therapy Coverage

There are several high-cost gene therapies that are currently available. We worked closely with our clinical team and the clinical team at DOM to identify eligible members and estimate potential treatment uptake percentages and total costs for treatment for each gene therapy by rate cell. Table 18 below details the assumptions and estimated SFY 2025 impact for each treatment. Additionally, please see Exhibits 14C and 14D for the full development of these amounts by rate cell.

Table 18
Mississippi Division of Medicaid
SFY 2025 Capitation Rate Development
Gene Therapy Estimates

Condition	Therapy	Number of Treatments	Pharmacy Cost per Treatment	Inpatient Cost per Treatment	Total Anticipated Treatment Cost
Beta-Thalassemia	Zynteglo	1	\$2,800,000	\$200,000	\$3,000,000
Duchene Muscular Dystrophy	Elevydis	1	\$3,200,000	\$0	\$3,200,000
Hemophilia A	Roctavian	2	\$2,900,000	\$0	\$5,800,000
Hemophilia B	Hemgenix	1	\$3,500,000	\$0	\$3,500,000
Sickle Cell Disease	Lyfgenia / Casgevy	6	\$2,650,000	\$200,000	\$17,100,000
Spinal Muscular Atrophy	Zolgensma	3	\$2,254,412	\$0	\$6,763,236
Total		14	\$2,711,660	\$100,000	\$39,363,236

Row (h) in Exhibit 2 shows this adjustment.

Gene Therapy Coverage Savings

The gene therapies listed above are assumed to significantly reduce or eliminate symptoms of the underlying condition. We queried CY 2022 claims data for potential utilizers meeting the clinical profile for each gene therapy to analyze what historical costs looked like for these members. We reviewed this information with our clinical team and determined that a majority of costs associated with the underlying condition that are likely to be alleviated by the new gene therapies are related to pharmacy services. Since pharmacy claims not administered as part of the medical benefit are not included in capitation rates for SFY 2025, we have not applied a savings adjustment to the capitation rates reflecting a cost reduction.

Preventative and Diagnostic Dental Reimbursement Change

Per SB2799 signed into law on April 19, 2021, the payment rate for preventative and diagnostic dental services was increased by 5% effective on both July 1, 2022 and July 1, 2023. We determined the proportion of CY 2022 dental claims identified as preventative or diagnostic (defined as procedure codes D0100 through D1999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on preventative and diagnostic dental services with a 0% reimbursement adjustment on other dental services.

The cumulative preventive and diagnostic dental reimbursement change is shown in row (i) in Exhibit 2.

Restorative Dental Reimbursement Change

Per HB657 signed into law on April 19, 2022, DOM increased the payment rate for restorative dental services by 5% on both July 1, 2022 and July 1, 2023 and will increase by another 5% effective on July 1, 2024. We determined the proportion of CY 2022 dental claims identified as restorative (defined as procedure codes D2000 through D2999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the restorative services with a 0% reimbursement adjustment on other dental services, after adjusting for the preventative and diagnostic reimbursement changes discussed above.

The cumulative restorative dental reimbursement change is shown in row (j) in Exhibit 2.

Immaterial Program, Population, and Reimbursement Methodology Changes

There are several program, population, and reimbursement changes between the base period experience and SFY 2025 that we did not build an explicit adjustment into rates for, given the projected budget neutral or immaterial impact. These changes are described below.

- Tobacco Cessation – effective July 1, 2023, coverage for smoking cessation counseling services was expanded to cover up to 12 sessions per year. It is estimated that the impact to capitation rates for this change is negligible, so no adjustment was applied.

STEP 3: NON-SERVICE EXPENSE ALLOWANCE

Administrative Expenses, Premium Tax, and Targeted Margin

The administrative allowance included in the capitation rate is intended to cover administrative costs, including the following:

- Case management.
- Utilization management.
- Claim processing and other IT functions.
- Customer service.
- Provider contracting and credentialing.
- TPL and program integrity.
- Member grievances and appeals.
- Financial and other program reporting.
- Local overhead costs.
- Corporate overhead and business functions (e.g., legal, executive, human resources).

Exhibit 3 shows the build-up of the non-service expenses, comprised of the following components for SFY 2025:

- \$9.99 PMPM for fixed administrative costs.
- 5.98% of revenue less directed payments for variable administrative costs.
- 1.80% of revenue less directed payments for target underwriting margin and cost of capital.
- 3.00% for the Mississippi premium tax.

Table 19 displays the non-service expense allowance included in the SFY 2025 rates. All percentages of revenue are shown excluding directed payment revenue, which is ultimately not at risk to the CCOs.

Table 19 Mississippi Division of Medicaid SFY 2025 MississippiCAN Non-Benefit Expenses		
	% of Revenue	PMPM
Fixed Costs ¹	2.56%	\$9.99
Variable Costs ²	5.97%	\$23.31
Premium Tax ²	3.00%	\$11.71
Margin ²	1.80%	\$7.03
Total	13.33%	\$52.04

¹ Included in the rate as a PMPM, equivalent % of revenue shown.

² Included in the rate as a % of Revenue, equivalent PMPM is shown.

The administrative expense allowance for SFY 2025 was developed by trending the fixed and variable allowances from CY 2022 financial data provided by the CCOs, combined for MississippiCAN and CHIP. These reported expenses were then adjusted to limit PMPM increases to the employment cost index (ECI) trend of 5.1% between CY 2021 and CY 2022 on a CCO level, if applicable, and to adjust administrative expenses consistent with the administrative expense audits conducted by Myers and Stauffer and related party administrative expense analysis completed by DOM. Applying adjustments consistent with the audit report and related party expenses decreased the CCO reported administrative costs by roughly 3.5% (\$1.24 PMPM) and limiting the PMPM trend to 5.1% for the one CCO with higher trend decreased the reported administrative costs another 8.7% (\$3.03 PMPM). Compared to CY 2021 administrative expenses underlying the SFY 2024 capitation rate, adjusted CY 2022 administrative expenses are down 1.1% on a PMPM basis from \$36.42 to \$36.02 alongside membership decreases for the same time period of 15% to 20%.

Adjusted CY 2022 administrative expenses were trended by an annual trend of 3.8% from CY 2022 to SFY 2025. The 3.8% annual trend is a blend of actual employment cost index (ECI) data from CY 2022 through CY 2023 of 4.4% and an assumed 3.4% annual trend from CY 2023 to SFY 2025. The future 3.4% trend assumption is consistent with the average ECI annual change from CY 2018 through CY 2022. The ECI data reflects expected changes in wages and other services that comprise a majority of administrative costs. In addition, we reviewed the CMS Medicare Economic Index (MEI) that includes actual changes through June 2023 and forecasted quarterly changes afterwards. The MEI from CY 2022 through SFY 2025 has an annualized change of 3.8%, similar to our analysis with the ECI data.

Administrative costs for SFY 2025 were also adjusted to reflect the transition of certain pharmacy claims from the CCOs to the DOM contracted PBA. Based on reporting provided by the CCOs and DOM, we estimate that approximately 85% of reported CCO PBM costs incurred during CY 2022 are related to duties that will no longer be performed by the CCOs in SFY 2025 and were therefore removed, resulting in a decrease in administrative costs of roughly \$2.39 PMPM or approximately 7.5%. After the removal of these PBM fees the administrative expenses are projected to decrease by 10.7% on a PMPM basis compared to SFY 2024.

Finally, the administrative expenses are split between the MississippiCAN and CHIP programs, based on the distribution of costs in prior financial template reporting that split MississippiCAN and CHIP expenses. The final overall projected administrative cost PMPM (for fixed and variable expenses) is \$33.30 for the MississippiCAN program in SFY 2025 as shown in columns (c) and (e) of Exhibit 3.

The margin of 1.8% of revenue is applied in column (f) of Exhibit 3 and premium tax of 3.00% of revenue is applied in column (i) of Exhibit 3 for costs included in the capitation rates and Exhibit 13 for state directed payments.

STEP 4: ADJUST FOR GEOGRAPHIC AREA

CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions (as defined in Appendix A): North, Central, or South. Table 20 shows the geographic area factor adjustments that are applied based on a beneficiary's region.

Table 20 Mississippi Division of Medicaid Area Factors			
Area Factors			
Region	SSI	Adults and Deliveries	Children
North	0.878	0.995	1.020
Central	1.042	1.026	1.078
South	1.095	0.981	0.909

We developed the geographic area factors on a budget-neutral basis by blending projected claims PMPM across rate cell groupings weighted upon the statewide rate cell distribution for each region and reviewing the relative difference in PMPM cost for each region. We created three different rate cell groups (as shown in Table 5) to aggregate experience for similar rate cells, so that we could adequately reflect area factor differences among rate cells and still maintain credibility.

Exhibit 4 includes the resulting capitation rates for each region using these area factors.

STEP 5: ADJUST FOR QUALITY WITHHOLD

Continuing in SFY 2025, a 1.0% quality withhold will be placed on capitation rates for the MississippiCAN program. The terms of the withhold arrangement are outlined in the contract with the CCOs. To earn back the withhold the CCOs must achieve HEDIS scores for the following conditions that are greater than or equal to 2.0% above the baseline HEDIS scores, with a percentage of the withhold assigned to each category. The benchmarks for SFY 2025 will be set based on the average of all CCO reported scores from calendar years 2021 and 2022 (prorated based on member months).

Each of the following HEDIS measures will be used to earn back one twelfth (approximately 8.33%) of the quality withhold, for approximately 83.33% total across all HEDIS measures:

- Well-Child First 30 months (W15 metrics impact the quality withhold; W30 is reporting only for SFY 2025):
 - Six or more visits for children 15 months of age
 - Two or more visits for children 30 months of age
- Immunization for Adolescents (IMA):
 - Combination 2: Meningococcal, Tdap, and HPV
- Anti-Depressant Management-Acute (AMM-AD):
 - Effective Acute Phase Treatment
- Follow-Up After Hospitalization for Mental Illness:
 - 30 Days – Ages 6 to 17
- Prenatal and Postpartum Care (PPC-AD):
 - Timeliness of Prenatal Care
- Comprehensive Diabetes Care:
 - HbA1c Testing

- Blood Pressure Control
- Eye Exams
- Adult and Children Asthma Control – Ages 5 to 64
- Adults Pharmacotherapy Management of COPD Exacerbation: Systemic Corticosteroid

DOM will be monitoring readmission rates reported as part of the QIPP in SFY 2025. For SFY 2025, this will be included as a scored metric for the quality withhold. During SFY 25, CCOs will be required to improve their actual-to-expected (A/E) ratio compared to the baseline years by 2.0% if the baseline A/E ratio is >1.0 or not allow the A/E ratio to be >1.0 for the reporting period if the baseline A/E ratio is <1.0. During SFY 2025, CY 2020 and CY 2021 will serve as the baseline years. This PPHR measure will be used to earn back 8.33% of the quality withhold.

Consistent with SFY 2024, DOM will also be monitoring the cesarean section (C-section) rates among all births paid for by a CCO during the measurement period (CY 2024) and comparing to the baseline period (CY 2021). To earn back the final 8.33% of the withhold a CCO must improve their individual C-section rate by two (2.0) percentage points during the measurement period compared to the baseline period.

If a CCO does not have sufficient data to consider its HEDIS scores credible, DOM will not hold the CCO liable for not meeting the measurement. In this case, the portion of the incentive withheld related to that measurement will be returned to the CCO. DOM will not prorate the results for a CCO based on the outcomes of the measures attained during SFY 2025. After discussions with DOM about the metric development and expectations, we believe that a return of 100% of the withhold is reasonably achievable by the CCOs.

Exhibit 4 includes the resulting capitation rates for each region net of the quality withhold.

STEP 6: ADJUST FOR CCO-SPECIFIC RISK SCORE (IF APPLICABLE)

Risk Adjustment for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP Rate Cells

The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be further adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). Costs for the Breast and Cervical Cancer, Foster Care, and Pregnant Women populations are less variable since they tend to utilize similar services across each population. In addition, some of the population sizes are too small from which to develop custom weights specific to the covered services and MississippiCAN reimbursement levels. Therefore, we do not risk adjust these populations. Since the risk adjustment is prospective, there is no historical diagnosis information from which to develop a risk score for newborns.

The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

To establish these risk scores, the CDPS + Rx risk adjuster will be run with risk weights consistent with services covered in MississippiCAN for the given time period. These risk weights are calculated using Mississippi FFS and encounter data for the Non-Newborn SSI / Disabled, MA Adult, MA Children, Quasi-CHIP, and CHIP populations. In addition, a beneficiary must have at least six months of eligibility in the data year to be scored. If a beneficiary does not have enough data, they will receive a score based on demographic information, such as age and gender. We will monitor the percentage of CCO enrollees who are not scored and adjust the methodology if necessary.

DOM's MMIS vendor changed in October 2022, and we have been working to evaluate the quality of the membership and encounter claims data after this transition. This evaluation is now complete, allowing us to utilize this data to develop updated population-specific cost weights and risk scores reflecting the populations and services covered during SFY 2025. We updated risk weights and risk scores for the first half of SFY 2025 (July through December 2024) using CY 2023 encounter and FFS data with runout through April 26, 2024, as well as June 2024 enrollment data. We have not calculated the risk scores for the second half of SFY 2025 (January through June 2025), but we plan to complete this work by the end of the year.

Table 21
Mississippi Division of Medicaid
CCO Capitation Rate Risk Adjustment Schedule
SFY 2025 Capitation Payments

Rate Cell	Capitation Payments	Diagnosis Source Data	Enrollment Source
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	July 2024 to December 2024	CY 2023 Encounter and FFS claims with runout through April 26, 2024	June 2024
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	January 2025 to June 2025	SFY 2024 Encounter and FFS claims with runout through August 30, 2024	October 2024

Risk Adjustment for the Foster Care Rate Cell

Starting in SFY 2021, the Foster Care rate cell is concurrently risk adjusted after the risk adjustment period ends. The Foster Care rate cell will be risk adjusted using a custom risk adjustment model that does not depend on the CDPS + Rx risk adjuster. After testing the predictive ability of several potential models, we determined the member's eligibility for either state or federal financial assistance was the most accurate indicator of the member's risk score. This status is captured by the money code field on DOM's enrollment records. Updated risk weights for each money code were calculated using more recent data, and reflecting changes to the covered population. These risk weights will be used for calculating foster care risk scores for SFY 2025.

Unlike the other risk-adjusted populations, risk adjustment for the Foster Care rate cell will be applied concurrently after the risk adjustment period ends. Given the small size of the Foster Care rate cell, small fluctuations in membership could have a material impact on risk adjustment if applied prospectively. Therefore, we will continue to concurrently risk adjust the Foster Care rate cell in SFY 2025.

Application of Risk Scores

A CCO's capitation rate will be determined based upon the following formula:

$$\text{CCO Capitation Rate} = \text{Base Capitation Rate} \times \text{CCO Normalized Risk Factor}$$

The base capitation rates are found in Exhibit 4.

The CCO normalized risk factor will equal the average risk factor across all beneficiaries that a CCO enrolls divided by the average risk factor for the rate cell's population. Regional risk scores will be normalized to ensure the risk adjustment process is revenue neutral across all CCOs.

STEP 8: DIRECTED PAYMENTS

DOM will process the capitation rate adjustments for multiple directed payments outside of the monthly capitation rate payment system in the form of payments to the CCOs for the actual amount paid to providers and the associated premium tax impact related to these payments. We will calculate and certify adjusted CCO-specific capitation rates at the conclusion of SFY 2025. This recertification is expected to be completed by June 2026.

MHAP Overview

Concurrent with the inclusion of inpatient hospital services in MississippiCAN capitation rates effective December 1, 2015, MHAP was established. This program helps to ensure sufficient access to inpatient and outpatient hospital services for the Medicaid population by including enhanced hospital reimbursement in the capitation rates.

MHAP is funded through a broad-based hospital assessment for facilities in Mississippi and an intergovernmental transfer (IGT) for a facility in Memphis (located within a county contiguous to Mississippi). This provider assessment is outlined in Miss. Code Ann §43-13-145.

Per CMS’s approval on January 12, 2018, beginning in SFY 2018 MHAP began to transition to directed payments according to the specifications and requirements of 42 CFR 438.6 et seq. Table 22 displays the two components of MHAP (FSA and QIPP) and the total dollars in each component from SFY 2024 to SFY 2025.

Table 22 Mississippi Division of Medicaid MississippiCAN Capitation Rates MHAP Distribution by SFY			
SFY	MHAP FSA	MHAP QIPP	Total MHAP
2024	\$733,317,426	\$788,996,459	\$1,522,313,885
2025	\$719,679,373	\$820,744,321	\$1,540,423,694

The roughly \$18 million in additional funding from SFY 2024 to SFY 2025 is comprised of an increase of roughly \$43.5 million (described in the MHAP QIPP section below) and a decrease of approximately \$25.4 million for the removal of payments to an out of state children’s hospital.

MHAP FSA

For SFY 2025, a payment of \$719.7 million is included as a directed FSA on inpatient and outpatient claims that will be paid monthly outside the capitation rates as a separate payment term.

The preliminary FSA amounts are shown in column (c) of Exhibit 13, consistent with the program design that 60% of the \$719.7 million will be paid for inpatient hospital services, and 40% will be paid for outpatient hospital services using projected SFY 2025 membership. These calculations were performed across all MississippiCAN rate cells with each of the inpatient and outpatient FSA percentage impacts applied uniformly. This results in a larger proportion of the FSA funding included in rate cells with higher inpatient and outpatient utilization.

The estimated FSA PMPM in Exhibit 13 is based on projected SFY 2025 membership and estimated utilization across all CCOs. Due to actual vs. projected CCO-specific MississippiCAN membership and claim utilization, this estimated capitation adjustment may result in an overpayment or underpayment of the FSA in SFY 2025 if no adjustments are made. The final CCO specific FSA amounts will be calculated on a PMPM basis at the end of SFY 2025, and the appropriate documentation will be provided to CMS.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on June 26, 2024 with an amendment approved by CMS on December 11, 2024. The control name for this preprint is MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630.

The MHAP FSA additive adjustment is shown in column (c) in Exhibit 13. An additional allowance for premium tax on the MHAP FSA is included in column (d) in Exhibit 13.

MHAP QIPP

Beginning in SFY 2020, a quality incentive payment program (QIPP) was included as a component of MHAP. Consistent with the preprint submitted to CMS, the QIPP will be paid as a uniform payment arrangement for SFY 2025. The goal of the QIPP is to utilize state and federal investments to improve the quality of care and health status of the Mississippi Medicaid population. The introduction of QIPP was a multi-year process with an increasing percentage of the payments linked to performance improvements achieved and maintained by the hospital industry.

For SFY 2025, the QIPP will consist of approximately \$820.7 million, which will be paid outside of the capitation rates on a quarterly basis as a separate payment term. DOM will determine the payments made to facilities based on agreed upon performance measures. Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2025 to include a QIPP PMPM for each CCO, which will include a provision for premium tax.

New for SFY 2025, additional funding of \$43.5 million is included in the expected QIPP payments related to a new VBP arrangement in which hospitals can earn bonus payments for meeting performance levels assigned to a variety of metrics. These payments will only be made to hospitals that meet the prescribed performance levels for each metric.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on June 26, 2024 with an amendment approved by CMS on December 11, 2024. The control name for this preprint is MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630.

The MHAP QIPP additive adjustment is shown in column (e) in Exhibit 13. An additional allowance for premium tax on the MHAP QIPP is included in column (f) in Exhibit 13.

TREAT Program

Beginning July 1, 2022, emergency ambulance reimbursement are proposed to be increased consistent with a §438.6(c) directed payment for eligible providers. Subject to CMS approval, payments for the TREAT program are estimated to be \$25.3 million for SFY 2025 and will be paid outside the capitation rate as a uniform payment arrangement.

Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2025 to include a TREAT PMPM for each CCO, which will include a provision for premium tax.

The adjustments to capitation rates are consistent with the preprint that was approved by CMS for SFY 2025 on July 22, 2024. The control name is MS_Fee_Oth_Renewal_20240701-20250630.

The TREAT additive adjustment is shown in column (g) in Exhibit 13. An additional allowance for premium tax on the TREAT payments is included in column (h) in Exhibit 13.

Mississippi MAPS Program

Beginning in SFY 2020, the Mississippi Medicaid Access to Physician Services (MAPS) program enhanced payments to physicians who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The term "qualifying hospital" means a Mississippi state-owned academic health science center with a Level 1 trauma center, Level 4 neonatal intensive care nursery, an organ transplant program, and more than a four hundred (400) physician multispecialty practice group.

DOM will require that CCOs provide the same supplemental percentage increase, equal to 58.63% of Medicare rates, to all qualifying providers. Payments in SFY 2025 are expected to be \$29.5 million. Similar to MHAP, capitation rates will be retroactively adjusted for SFY 2025 to include a MAPS PMPM including a provision for premium tax for each CCO and rate cell based on actual membership and utilization. The appropriate documentation will be submitted to CMS at the time of this retroactive adjustment.

This program is being made under a §438.6(c) payment arrangement consistent with the preprint that was approved with CMS for SFY 2025 on December 23, 2024. The control name is MS_Fee.VBP_AMC_Renewal_20240701-20250630.

The MAPS additive adjustment is shown in column (i) in Exhibit 13. An additional allowance for premium tax on the MAPS is included in column (j) in Exhibit 13.

MOMS Program

Beginning in SFY 2025, the Mississippi Outcomes for Maternal Safety (MOMS) program was established to address Mississippi's high rates of severe maternal morbidity (SMM). This program will support redesigned care delivery by incorporating new discharge protocols and requirements for post-discharge follow-up appointments. The MOMS initiative is based on a performance improvement model designed to incentive hospitals and outpatient providers to evaluate SMM risk and ensure timely postpartum follow-up, aiming to improve maternal health outcomes and reduce maternal morbidity. To qualify for the incentive payment, hospitals must complete a MOMS risk score assessment for each patient, assigning the appropriate risk score after delivery and at discharge. This score is crucial as it informs the timing requirement for incentive payment of ongoing post-discharge care. Hospitals will receive incentive payments for each patient where this process is successfully completed and submitted. We expect payments will be made annually after the close of the SFY 2025 time period. Capitation rates will be retroactively adjusted to include the final MOMS payment (including applicable premium tax) for each CCO and rate cell based on actual payments once known.

This program is being operated under a §438.6(c) payment arrangement consistent with the preprint that was filed with CMS for SFY 2025 on December 2, 2024 under the control name of MS_VBP_IPH.PC.SP_New_20240701-20250630.

The MOMS additive adjustment is shown in column (k) on Exhibit 13. The applicable premium tax amount is shown in column (l) on Exhibit 13.

Table 23 below shows a summary of the directed payment amounts for SFY 2024 and SFY 2025.

Table 23 Mississippi Division of Medicaid Summary of Directed Payments by SFY		
	SFY 2024	SFY 2025
Total MHAP	\$1,522,313,885	\$1,540,423,694
MHAP FSA	\$733,317,426	\$719,679,373
MHAP QIPP	\$788,996,459	\$820,744,321
MAPS	\$39,420,290	\$29,526,177
TREAT	\$20,616,966	\$25,285,224
MOMS ¹	N/A	\$6,603,083
Total Directed Payments	\$1,582,351,141	\$1,601,838,118

¹ The preprint for the SFY 2025 MOMS program is pending CMS approval.

STEP 9: CALCULATE RISK CORRIDOR SETTLEMENTS

Subject to CMS approval, DOM will implement a symmetrical risk corridor to address the uncertainty around cell and gene therapies (CGTs) and other potential high-cost medications.

High-Cost Pharmacy Risk Corridor

Some Medicaid members have conditions requiring very expensive drug treatments. These members are infrequent and not evenly distributed among the CCOs. To help mitigate the CCO’s risk, the state is continuing the high-cost pharmacy risk corridor started in SFY 2024, subject to CMS approval. The risk corridor is applicable to total drug spend and related costs due to administration and monitoring for specified products of \$250,000 or more per year at a member level. Table 24 below, as well as Exhibit 14A, include a PMPM estimate of the costs that will be covered in the high-cost pharmacy risk corridor specific to each rate cell. Please see Exhibits 14C and 14D for the detailed calculations of the high-cost pharmacy targets below. The actual costs from the CCOs will be compared to these estimated costs for the settlement calculations.

Table 24 Mississippi Division of Medicaid SFY 2025 High-Cost Pharmacy Risk Corridor	
Rate Cell	SFY 2025 High-Cost Pharmacy Target PMPM
Non-Newborn SSI / Disabled	\$35.09
Breast and Cervical Cancer	\$0.00
MA Adult	\$0.64
Pregnant Women	\$0.00
SSI / Disabled Newborn	\$0.47
Non-SSI Newborns 0 to 2 Months	\$28.38
Non-SSI Newborns 3 to 12 Months	\$17.05
Foster Care	\$5.10
MYPAC	\$0.00
MA Children	\$4.04
Quasi-CHIP	\$0.00
Total	\$8.43

Table 25 summarizes the share of gains and losses relative to the estimated high-cost pharmacy costs for each party.

Table 25 Mississippi Division of Medicaid Proposed High-Cost Pharmacy Risk Corridor Parameters		
CCO Gain / Loss	CCO Share of Gain / Loss in Corridor	DOM Share of Gain / Loss in Corridor
Less than -6.0%	0%	100%
-6.0% to -3.0%	50%	50%
-3.0% to +3.0%	100%	0%
+3.0% to +6.0%	50%	50%
Greater than +6.0%	0%	100%

The high-cost pharmacy risk corridor will be implemented using the following provisions:

- Estimated high-cost pharmacy costs are calculated separately for each rate cell based on the expected mix of high-cost products.
- Each rate cell's actual high-cost pharmacy costs will include payments made for the following:
 - All drugs billed as medical claims with a HCPCS code that starts with the letter “J.”
 - Inpatient stays for the administration and monitoring for select gene therapies and other select products. The estimated pharmacy costs included in the high-cost risk corridor include the following; however, DOM will monitor and revise the list of approved products if additional products are covered by DOM for use during SFY 2025.
 - Lyfgenia
 - Casgevy
 - Zynteglo
- The timing of the initial and final high-cost pharmacy risk corridor settlements are outlined below.
 - The initial settlement will occur after the contract year is closed, using six months of runout.
 - The final settlement will occur once the MLR audit has been completed. MLR audits are usually completed 12 to 18 months after the close of the SFY.
- The 91.3% minimum MLR provision (Federal MLR definition) in the CCO contract will apply after the high-cost pharmacy risk corridor settlement calculation.

STEP 10: OTHER PROGRAM CONSIDERATIONS

Minimum MLR Requirement

The program includes a minimum federal MLR requirement of 91.3% of revenue. The sum of medical expenses and HCQI expenses must meet or exceed 91.3% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 91.3% threshold is not met, CCOs return revenue to DOM until the threshold is met.

Value-Based Payment Incentive Program

Effective July 1, 2024, DOM will implement a value-based payment incentive program (VBP) as part of the MississippiCAN contract. In alignment with DOM's Comprehensive Quality Strategy the VBP will target three primary focus areas: maternal health, metabolic health, and mental health.

- **Maternal Health.** Mississippi has the highest maternal mortality rate in the country with 82 maternal deaths per 100,000 births. Mississippi also has the highest percentage of births by black mothers (42% of all births) in the country, which is significant given that black women have higher mortality rates than any other racial or ethnic group.

- **Metabolic Health.** Nationally, obesity rates have risen, and obesity is a significant contributor to a host of conditions, such as type II diabetes, hypertension, coronary artery disease, stroke, and many others. Mississippi has the sixth highest obesity rate in the country with more than 39% of its residents being obese. Additionally, the percentage of the Mississippi Medicaid population that is considered to be obese is estimated to be higher than the state average with obesity rates being higher among individuals with lower income.
- **Mental Health.** Mental health has an impact on physical health. For example, depression increases the risk for many conditions, such as diabetes, heart disease, and stroke. Mississippi was ranked 47th in the nation for access to mental health services. Additionally, mental health conditions have been shown to contribute to a large proportion of pregnancy-related deaths (23%).

The program will consist of associated quality measures, payment arrangements and amounts, as determined and defined by DOM, which promote quality in the delivery of services. DOM will leverage the Health Care Payment Learning & Action Network (LAN) Framework that characterizes payment models. Within this framework, the progression of payment models is tied to cost and quality and progress from fee-for-service models in Category 1 to population-based payments at Category 4. Similarly, the VBP will be phased in, such that a portion of incentives are tied to pay for reporting on the implementation of redesigned systems and performance measures (Category 2B) and will transition to pay for performance (Category 2C), while a portion of incentives will begin as pay for performance.

While the program launch is July 1, 2024 to align with the CCO contract start date, the first performance period will be based on CY 2024 data and will be reported in July 2025. Each subsequent program year will be based on the calendar year and reported annually in July.

For SFY 2025, the following performance measures are to be assessed and incentivized:

1. Severe Maternal Morbidity Risk Assessment – Part A: Assessment Completion, and Part B: Timely Follow-up.
2. Low-risk Cesarean Delivery (LRCD-CH).
3. Antidepressant Medication Management (AMM-AD).
4. Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medication (SSD-AD).

Severe Maternal Morbidity (SMM) includes the unexpected outcomes of labor and delivery that result in significant short- or long-term consequences to a woman's health. To manage poor outcomes, Mississippi will use diagnostic information to develop a maternal health risk assessment to be used by hospitals at time of discharge. Based upon the Mississippi Outcomes for Maternal Safety (MOMS) score assigned to the beneficiary at the time of discharge, required interventions will be employed to ensure follow-up care within specified timeframes. Incentives will be based initially upon reporting on assessment and follow-up implementation activities (e.g., technology infrastructure), then transition to pay for reporting performance, and in future performance years, transition to pay for performance.

The new VBP program builds upon the current CCO incentive withhold program as a quality-based incentive (i.e., bonus) payment in addition to the CCO's monthly capitation rates. Under the VBP program, each CCO will be eligible to receive additional funds over and above base capitation rates. Monetary incentives will not exceed one-quarter percent (0.25%) above the capitation payment and, as such will not be in excess of 105% of the approved capitation payments in accordance with 42 C.F.R. § 438.6(b). The introduction of the VBP program does not impact how capitation rates were calculated for SFY 2025.

DOM will apply a weighted percentage of the eligible incentive allocation, and each measure will be evaluated separately for payment.

Pay for performance incentives will be based on statewide performance targets. Targets will be defined by DOM using nationally available benchmarks where available and align to the CCO incentive withhold program, as applicable. Failure to meet a measure target will result in no incentive being paid for that measure. There will be no partial incentive payments awarded.

The payment model will recognize the contributions of CCOs, hospitals and other providers, through the distribution of incentive payments to the CCOs that are then shared as applicable and in proportions as set by DOM. In exchange for incentives created through the VBP, CCOs, hospitals, and other providers are expected to collaborate with one another,

utilizing care management and other available tools to ensure that performance targets set by DOM are met. At DOM's discretion, additional incentives for CCOs may include priority in CCO auto-enrollment, with higher performing CCOs having the potential to be assigned auto-enrolled members at a higher percentage rate.

Upon collection of data in July of each year, DOM will review actual performance to target performance to calculate measure achievement. Based on performance achieved, incentive payment will be calculated. CCOs will receive a performance report indicating performance and payment achieved. CCOs will have an opportunity to review and request information or a reconsideration of payments applied. DOM will then finalize and release incentive payments. The timeline will align with the CCO incentive withhold program and allows six months after the calendar year to gather, review and analyze the applicable data. CCOs are then expected to share incentives with hospitals and other providers based on program requirements.

MILLIMAN REPORT

EXHIBITS 1 THROUGH 15

(Provided in Excel Format Only)

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

February 6, 2025

APPENDIX A

SFY 2025 Rate Cell Definitions

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

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February 6, 2025

APPENDIX A

SFY 2025 RATE CELL DEFINITIONS

This section of our report outlines the rate cell definitions to be used for SFY 2025 for the populations addressed in this report. These definitions are summarized in Table 1 below. Capitation rate cells for SFY 2025 were kept consistent with the SFY 2024 capitation rate cells. Previously the MA Adult and Pregnant Women rate cells included an additional breakout of delivery service costs in Exhibit 2, which has been removed now that level of detail is provided for delivery costs as part of the service category breakouts.

Table 1 Mississippi Division of Medicaid Rate Cell Definitions			
Rate Cell Grouping for Assumption Development	Rate Cell	Age Requirement	Category of Eligibility (COE)
Children	SSI / Disabled Newborns	Ages 0 to 12 months (13-month duration)	001, 019
Children	Non-SSI Newborns – age 0 to 2 months	Ages 0 to 2 months (3-month duration)	003, 026, 071, 088
Children	Non-SSI Newborns – age 3 to 12 months	Ages 3 to 12 months (10-month duration)	003, 026, 071, 088
Children	MA Children	Ages 1 to 19	072, 073
Children	Quasi-CHIP	Ages 1 to 19	074
Children	MYPAC ¹	Ages 1 to 20	N/A, Lckn_cd = SED
Children	Foster Care	Ages 1+	003, 026
Adult	Pregnant Women	Ages 8 to 64	088
Adult	MA Adult	Ages 19+	075
SSI	Non-Newborn SSI / Disabled	Ages 1+	001, 019, 025
SSI	Breast and Cervical Cancer	N/A	027

¹ MYPAC rate cell is defined using the 'SED' lock-in code along with claims and eligibility information due to issues with the 'SED' lock-in code after July 1, 2021.

All rate cell eligibility excludes the following individuals not enrolled in MississippiCAN:

- Retroactive membership
- Dual eligible members
- Institutionalized beneficiaries in a long-term care facility
- Individuals in the following waiver programs: WAL, WED, WMR, or WTB

Additionally, fee-for-service (FFS) eligibility and claims data will be used to summarize experience for members with hemophilia or Von Willebrand disease in CY 2022 who will be enrolled in MississippiCAN during SFY 2025 and to review acuity differences due to enrollment shifts between FFS and MississippiCAN during the COVID-19 Public Health Emergency (PHE).

GEOGRAPHIC REGIONS

DOM uses regional payments to better reflect enrollment for CCOs that enroll a disproportionate number of members from higher-cost or lower-cost regions of the state. DOM uses the three regions of North, Central, and South based on the county where a beneficiary lives. Table 2 displays the counties included in each region.

APPENDIX A

SFY 2025 RATE CELL DEFINITIONS

Table 2 Mississippi Division of Medicaid Geographic Regions by County		
North Region	Central Region	South Region
Alcorn	Calhoun	Adams
Attala	Chickasaw	Amite
Benton	Choctaw	Covington
Bolivar	Claiborne	Forrest
Carroll	Clarke	Franklin
Coahoma	Clay	George
DeSoto	Copiah	Greene
Grenada	Hinds	Hancock
Holmes	Issaquena	Harrison
Humphreys	Jasper	Jackson
Itawamba	Kemper	Jefferson
Lafayette	Lauderdale	Jefferson Davis
Lee	Leake	Jones
LeFlore	Lowndes	Lamar
Marshall	Madison	Lawrence
Montgomery	Monroe	Lincoln
Panola	Neshoba	Marion
Pontotoc	Newton	Pearl River
Prentiss	Noxubee	Perry
Quitman	Okitbbeh	Pike
Sunflower	Rankin	Stone
Tallahatchie	Scott	Walthall
Tate	Sharkey	Wayne
Tippah	Simpson	Wilkinson
Tishomingo	Smith	
Tunica	Warren	
Union	Webster	
Washington	Winston	
Yalobusha	Yazoo	

To determine a beneficiary's county, we used the following approach:

- County code included on a beneficiary's enrollment record in a given month.
- Absent (a), we mapped zip codes in the enrollment file to counties. In cases where a zip code is present in more than one county, we assumed that a zip code maps to a given county if:
 - The zip code shows up most frequently for a given county in the enrollment file (assuming a minimum of five occurrences).
 - Census information indicating the portion of a zip code's population that resides in each county. County is assigned to a zip code based on the county that includes the largest portion of a zip code's population.

If a beneficiary could not be assigned to a region, we excluded their eligibility and claim experience from the base data. This accounts for less than 0.4% of all current MississippiCAN eligible members in CY 2022.

APPENDIX B

Data Sources and Processing

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi’s MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

February 6, 2025

APPENDIX B

DATA SOURCES AND PROCESSING

A number of data sources are used to develop the base data for the SFY 2025 MississippiCAN capitation rates.

- Medicaid eligibility data
- FFS claim data
- CCO encounter data
- CCO financial data

CY 2022 experience forms the primary base data for the SFY 2025 capitation rates.

This section of the report outlines each data source and steps to process the data.

MEDICAID ELIGIBILITY

DOM's MMIS vendor provided detailed Medicaid eligibility data for CY 2022. Before analyzing claims, we pared down the eligibility data to groups that are eligible to enroll in MississippiCAN, as defined in Appendix A of our report. In order to isolate data only for this group, we applied various filters as described in the rest of this appendix.

We relied upon the 'CAN' lock-in code for each eligibility span to include individuals enrolled in MississippiCAN in the base period. This assumes that MMIS-calculated enrollment criteria in the base period is consistent with how it will be applied for SFY 2025 capitation rate payments. In addition, this removes opt-outs from voluntary populations (SSI children and Mississippi Band of Choctaw Indians) from the base data used to develop capitation rates.

In addition, adjustments were made for the removal of retroactive eligibility periods and records not able to map to a geographic area.

Removal of Retroactive Eligibility Periods

Beneficiary enrollment in the FFS program can occur retroactively. When some individuals apply and qualify for Medicaid coverage, DOM reimburses claims, which occurred during the retroactive qualification period prior to their application. DOM backdates the eligibility of the individual to accommodate the retroactive coverage.

There is also a lag between the first date of eligibility and the date of enrollment in a CCO because Medicaid eligibility begins on the first day of the month in which the application was received. Once a Medicaid beneficiary signs up for a CCO, they will be enrolled on the first day of the subsequent month. The retroactive enrollment period is not covered by the CCO, so we removed retroactive eligibility included in the data provided to us using the following criteria:

- Eligibility months prior to the date that a beneficiary was added to the Medicaid enrollment file were removed. For example, if a beneficiary is active January 15, 2022, but they were added to the enrollment file February 1, 2022, we only included data on or after February 1, 2022 to exclude any retroactivity that may have occurred.

As of December 2015, newborns are enrolled in MississippiCAN at the time of their birth. Therefore, the retroactive eligibility exclusion is not applicable to these populations.

Geographic Area

If a beneficiary could not be assigned to a region, we excluded them from the base data. This accounts for less than 0.4% of all current MississippiCAN eligible member months in CY 2022. See Appendix A for additional information on the assignment of a geographic region.

FFS DATA

FFS claims are provided by DOM's MMIS vendor. These claims include any populations and / or services not included in MississippiCAN. We reviewed the FFS data for reasonability for several considerations, including the following, and verified it was consistent with monthly DOM cost reporting:

- Monthly claim counts per member
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Monthly units and payments by rate cell

APPENDIX B

DATA SOURCES AND PROCESSING

ENCOUNTER DATA

Encounter claims are included in the data provided by DOM's MMIS vendor. This data represents the actual amounts paid to the provider, so no repricing was done as part of the development of capitation rates. A claim processed by a CCO and submitted to DOM can be identified in the data based on the `cde_claim_ffs_enc` field. A value of 'E' in this field denotes an encounter claim. Please note, field names may vary from those provided in the encounter data submission from the CCOs.

For all service categories we used CY 2022 encounter data with runout through June 2023.

Only encounter claims for members flagged as a MississippiCAN enrollee in the eligibility data were included in the base data. Encounter claims which failed to be mapped to a MississippiCAN CCO enrollee were removed.

CCO encounters are rigorously vetted by Myers and Stauffer as part of their reconciliation of encounters against CCOs' cash disbursement journals (CDJs). As part of this reconciliation, Myers and Stauffer identifies encounter claims that are duplicates, voids, or replacements for other encounter claims. Myers and Stauffer shares these findings with CCOs at a claim level to ensure they are accurately determining the final, non-duplicated version of each paid claim. As a result of their analysis, Myers and Stauffer are able to reconcile closely to the CCOs' CDJs (historically within 0.5% on a paid basis). We use summaries provided by Myers and Stauffer to identify final, non-duplicative claims consistent with their CDJ reconciliation.

Lastly, the encounter data is run through Milliman's *Health Cost Guidelines*TM (HCGs) grouper to map the encounter data into detailed categories of service. These categories of service are then rolled up into eleven high level categories of service used for rate development. This mapping from detailed category of service to broad category of service is included as Exhibit 2.

After processing the data, we review the encounter data for several considerations, including:

- Monthly encounter counts per member (including and excluding \$0 payments)
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Quarterly units and payments relative to financials by COS
- Frequency of diagnosis completion by COS

Removal of Pharmacy Benefit Administered Claims

Starting in July 2024, DOM expects to enter into an arrangement with their Pharmacy Benefits Administrator (PBA) in which certain pharmacy claims will be paid through the PBA. As such, we identified and removed the associated pharmacy claims from the CY 2022 base data for the purpose of developing SFY 2025 capitation rates. These claims were identified and removed using the follow logic:

- Claim Type equal to "P" or "Q"

FINANCIAL REPORTING DATA

For base data development, each CCO submitted a financial report reconciled to their organization's audited CY 2022 financial statements for Mississippi. Reports were submitted for CY 2022 including earned premium, claim experience with run out through June 2023 for CY 2022 data, best estimate IBNR claim amounts, subcapitated arrangements, non-service expenses, and membership. The reported membership was close in total to the MMIS enrollment, so we utilized the MMIS enrollment for rate development.

We worked with each CCO to validate that their reports were filled out consistently with the category of service and non-medical definitions used in the capitation rate development. Adjustments were made to the original submissions to help align these definitions.

APPENDIX B

DATA SOURCES AND PROCESSING

CLAIMS ABOVE STATE-PLAN COVERED SERVICE LIMITS

When processing encounter data, we identify claims above Mississippi's state-plan covered service limits. These services are provided by some CCOs as an expanded benefit. However, as they are not state-plan-covered, these services are excluded from the base data when setting capitation rates. We identified three types of benefits offered by CCOs that are above state-plan covered service limits, described below. Children receiving EPSDT services, identified as individuals under the age of 21, are exempt from the service limits described below.

- **Physician Visits** – Members are limited to 16 physician visits within a state fiscal year. This limit is applied separately for psychiatric and non-psychiatric visits.

To identify physician visits, claims are required to have a claim type of "M" (Professional). Additionally, the claim must have one of a list of specific procedure codes. Exhibits 15A and 15B show the required procedure codes for non-psychiatric and psychiatric physician visits, respectively. Due to issues identifying claims at this level of detail within the CY 2022 data we are estimating the value of physician visits above the limit based on percentages from the CY 2021 data used for SFY 2024 capitation rate development.

- **Home Health Visits** – Up to 36 home health visits per state fiscal year are covered under Mississippi's state plan. Home health visits are identified as claims with a claim type of "H" (Home Health) and a revenue code of 421, 441, 551, 571, or 589.

APPENDIX C

CMS Managed Care Rate Setting Guide Response

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

February 6, 2025

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

I. RESPONSES TO 2024-2025 CMS MANAGED CARE RATE DEVELOPMENT GUIDE

SECTION I. MEDICAID MANAGED CARE RATES

1. General Information

- Rate period – This report documents and certifies capitation rates in effect from July 1, 2024 to June 30, 2025 (SFY 2025).
- Actuarial rate certification – See Appendix D.
- Final capitation rates – See Exhibit 4.
- Program descriptions – Please refer to the following sections:
 - Section II – MississippiCAN program background
 - Appendix A – Rate cell definitions
 - Section IV: Step 5 – Background on the quality withhold applied in SFY 2025
- Medical Loss Ratio (MLR) – The program includes a minimum MLR requirement of 91.3% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses must meet or exceed 91.3% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 91.3% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices. Please see Section IV Step 10 for more information about the minimum MLR requirement. Prior MLR experience is considered when developing trends for the capitation rates. Please see Section IV Step 1 for information on trend setting.
- Federal Medical Assistance Percentage (FMAP) – DOM receives an enhanced FMAP for COVID-19 vaccination administration fees (through September 30, 2024), family planning services, breast and cervical cancer services, Indian health services, home health services, rehabilitation services, private duty nursing services, and Quasi-CHIP members that prior to the Affordable Care Act were covered under the CHIP program. Any differences in capitation rates according to covered populations are based on valid rate development standards and not based on the FMAP associated with the covered populations.
- Cross-subsidies – Rate cells do not cross-subsidize other rate cells.
- Rate change from SFY 2024 capitation rates – See Section I.
- Known rate amendments – The capitation rates included in this report will require recertification to account for the following:
 - CCO specific MHAP, MAPS, TREAT, and MOMS payments made to providers. This initial certification includes a PMPM estimate of these amounts across all CCOs in Exhibit 13. We anticipate that this adjustment will be submitted by February 2026.
 - Final charge trends for inpatient, outpatient, and certain physician services as calculated by DOM's payment methodology development vendor.
 - Population adjustments related to procedural changes in presumptive eligibility or passive enrollment starting in SFY 2025.
- Impact of COVID-19 – See Section I.

2. Data

- Service and enrollment data sources – See Appendix B.
- Validation and quality adjustments – See Section III for encounter data and financial reporting validation.

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

- Changes in data sources – SFY 2025 capitation rates use CY 2022 CCO encounter and financial data as the base period data sources. SFY 2024 capitation rates used CY 2021 CCO encounter and financial as the base period data sources. Please see section III.
- Potential Future Data improvements – We anticipate no major enhancements to data collection in the future.
- Other data adjustments – None.
- Data reliance – See Appendix E.

3. Projected Benefit Costs and Trends

- Assumptions used to project benefit costs do not vary based on the rate of federal financial participation associated with the covered populations. A summary of program, population, and reimbursement changes is included in Exhibit 10. No changes were determined to be immaterial and separate rating adjustments are applied to estimate the impact of the changes between the base data and rating period.
- Overpayments to providers – Section III summarizes recoveries for overpayments to providers by CCOs and how these recoveries are accounted for when summarizing the base data used to develop SFY 2025 capitation rates.
- Projected benefit cost trends:
 - Annual trend assumptions – Section IV: Step 1 outlines the trend assumptions from CY 2022 to the rating period. Please refer to Exhibits 7A to 7E for more information. Negative unit cost trends for CY 2022 to the rating period for inpatient hospital services shown in Table 9 are due to decreases in fee schedules over time.
 - Reimbursement changes – Section IV: Step 2 describes the reimbursement changes between the base period and rating period.
- Mental Health Parity and Addiction Equity Act – No additional services were necessary to add to the program to achieve compliance with the act.
- In-lieu-of services – CCOs do not provide any material amounts of in-lieu-of services.
- Retrospective eligibility periods – No consideration for retroactive eligibility periods is included in the base data or rate development, because such services are covered under FFS.
- Changes in covered services and benefits: There are four benefit changes between the base period and the rate year:
 - Expansion of postpartum coverage for pregnant women from 60 days to 12 months (described in Section IV, Step 2).
 - Members diagnosed with Hemophilia or Von Willebrand disease are now covered as part of the MississippiCAN program (described in Section IV, Step 2).
 - Zolgensma is included as a covered therapy after carved out prior to SFY 2024 (described in Section IV, Step 2).
 - Effective July 1, 2024 pharmacy services will be paid by DOM's pharmacy benefit administrator (PBA) (removed from base data as described in Section III).
- Other adjustments:
 - A population change adjustment was applied to reflect that some children in the Non-Newborn SSI / Disabled rate cell were historically moved into FFS after a PRTF stay. Starting in SFY 2022, these individuals will remain in the MississippiCAN program. This adjustment was applied in Section III.

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

- Area relativity factors – Please see Section IV: Step 4 for a discussion of the area factor development for the North, Central, and South regions.
- Final projected benefit costs – See Exhibit 4.
- Conditions of any litigation to which the state is subjected – Not applicable; no impact on rates.

4. Special Contract Provisions Related to Payment

- Incentive Arrangements – In SFY 2025, CCOs will have the opportunity to earn up to 0.5% of revenue based on performance in the Value Base Payment (VBP) program. Payments to CCOs will be based on their performance across three primary focus areas: maternal health, metabolic health, and mental health. Please see Section IV Step 10 for more information.
- Withhold Arrangements – A quality withhold will be implemented for the SFY 2025 capitation rates. Please see Section IV: Step 5 for a description of the quality withhold.
- Risk sharing.
 - The program includes a minimum MLR requirement of 91.3% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses, must meet or exceed 91.3% of revenue. Revenue for premium taxes are excluded from the MLR calculation. If the 91.3% threshold is not met, MCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices. Please see Section IV Step 10 for more information on the minimum MLR requirement.
 - For SFY 2025 the program is subject to a high-cost pharmacy risk corridor. Please see Section IV: Step 10 for details of the implementation of this risk corridor.
 - Any risk-sharing arrangements are consistent with pricing assumptions and no remittance / payment is calculated using pricing assumptions.
- Delivery System and Provider Payment Initiatives – Not applicable.
- State Directed Payments.

The SFY 2025 capitation rates included in this certification reflect four directed payment arrangements that will be in effect for SFY 2025 as described in Section IV, Step 8. The necessary information for the four state directed payment arrangements included in these preliminary capitation rates is summarized below.

Summary of All State Directed Payments			
Control Name of the State Directed Payment	Type of Payment	Brief Description	Is the Payment Included as a Rate Adjustment or Separate Payment Term?
MS_Fee.VBP_IPH.OPH_Am end_20240701-20250630	Uniform dollar or percentage increase	Enhanced hospital reimbursement for inpatient and outpatient hospital services for qualifying facilities	Separate payment term
MS_Fee.VBP_AMC_Renew al_20240701-20250630	Uniform dollar or percentage increase	Enhanced payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital	Separate payment term
MS_Fee_Oth_Renewal_202 40701-20250630	Uniform dollar or percentage increase	Enhanced reimbursement for ambulance providers	Separate payment term
MS_VBP_IPH.PC.SP_New_ 20240701-20250630	Uniform dollar or percentage increase	Enhanced reimbursement for hospitals and outpatient providers to improve maternal outcomes	Separate payment term

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

Summary of State Directed Payments Included as a Separate Payment Term					
Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	The Magnitude on a PMPM Basis	Confirmation the Rate Development is Consistent with the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period
See Exhibit 13					
MS_Fee.VBP_IPH.OPH_Amend_20240701-20250630	FSA component of MHAP: \$719.7 million QIPP component of MHAP: \$820.7 million	Confirmed the actuarial certification covers this separate payment term	FSA component of MHAP: allocated across rate cells based on projected IP / OP spend. 60% is allocated based on projected IP spend and 40% is allocated based on projected OP spend. Ranges from \$42.26 to \$4,893.47 PMPM. QIPP component of MHAP: allocated as a fixed PMPM of \$158.91 across all rate cells.	Confirmed	Confirmed
See Exhibit 13					
MS_Fee.VBP_AMC_Renewal_20240701-20250630	\$29.5 million	Confirmed the actuarial certification covers this separate payment term	Allocated as a fixed PMPM of \$5.72 across all rate cells	Confirmed	Confirmed
See Exhibit 13					
MS_Fee_Oth_Renewal_20240701-20250630	\$25.3 million	Confirmed the actuarial certification covers this separate payment term	Allocated as a fixed PMPM of \$4.90 across all rate cells	Confirmed	Confirmed
See Exhibit 13					
MS_VBP_IPH.PC.SP_New_20240701-20250630	\$6.6 million	Confirmed the actuarial certification covers this separate payment term	Allocated as a fixed PMPM of \$1.28 across all rate cells	Confirmed	Confirmed

All services covered under the MississippiCAN program are subject to a minimum fee schedule of the FFS rate. This minimum fee schedule is set in accordance with the provisions of §438.6(c). It is our understanding that this type of minimum fee schedule does not necessitate prior approval from CMS and no preprint is required.

DOM has confirmed that there are no additional directed payments in the program that are not addressed in the certification.

DOM has also confirmed that there are no requirements regarding the reimbursement rates the managed care plans must pay to any providers unless specifically specified in the certification as a state directed payment or authorized under applicable law, regulation, or waiver.

- Pass Through Payments – Not applicable.

5. Projected Non-Benefit Costs

- Assumptions used to project non-benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Administrative cost data, projected costs, premium tax and margin – See Section IV: Step 3.

APPENDIX C

Responses to 2024-2025 CMS Managed Care Rate Development Guide

- Historical non-benefit costs – CY 2022 administrative costs for the three CCOs were \$34.70 PMPM, as reported on the audited financial templates. Please see Section IV: Step 3 for a description of adjustments applied to this base data to project the SFY 2022 administrative allowance.

6. Risk Adjustment and Acuity Adjustments

- Risk adjustment – See Section IV: Step 6. A custom risk adjustment model will be developed for the MA Children, Quasi-CHIP, MA Adult, and Non-Newborn SSI / Disabled rate cells using the Chronic Disability Payment System (CDPS) model.

A custom risk adjustment model will be developed for the Foster Care rate cell using information from members' enrollment information.

- Acuity Adjustments – See Section IV: Step 2 for a description of the acuity adjustment applied to reflect changes in member acuity from CY 2022 to SFY 2025.

SECTION II. MEDICAID MANAGED CARE RATES WITH LONG-TERM SERVICES

This section does not apply as MississippiCAN is not a long-term care service program.

SECTION III. NEW ADULT POPULATION CAPITATION RATES

This section does not apply as the state of Mississippi has not expanded coverage as a result of the Affordable Care Act.

APPENDIX D

Actuarial Certification of SFY 2025 MississippiCAN Capitation Rates

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

February 6, 2025



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

jill.bruckert@milliman.com

February 6, 2025

**Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2025 MississippiCAN Capitation Rates - Update**

I, Jill A. Bruckert, am associated with the firm of Milliman, Inc., am a member of the American Academy of Actuaries, and meet its Qualification Standards for Statements of Actuarial Opinion. I was retained by the Mississippi Division of Medicaid (DOM) to perform an actuarial certification of the Mississippi Coordinated Access Network (MississippiCAN) coordinated care capitation rates for July 1, 2024 to June 30, 2025 (SFY 2025) for filing with the Centers for Medicare and Medicaid Services (CMS). This certification is an update to the SFY 2025 certification dated September 6, 2024.

I reviewed the capitation rate development and am familiar with the following regulation and guidance:

- The requirements of 42 CFR §438.3(c), 438.3(e), 438.4, 438.5, 438.6, and 438.7
- CMS "Appendix A, PAHP, PIHP, and MCO Contracts Financial Review Documentation for At-risk Capitated Contracts Ratesetting dated November 10, 2014"
- 2024 to 2025 Medicaid Managed Care Rate Development Guide
- Actuarial Standard of Practice 49 and other applicable standards of practice

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2025 dated February 6, 2025 and accompanying this certification.

To the best of my information, knowledge, and belief, for the SFY 2025 period, the capitation rates offered by DOM are in compliance with the relevant requirements of 42 CFR 438.4. The attached actuarial report describes the capitation rate setting methodology. Please note, as outlined in the cover letter of the report, there are a number of outstanding program changes that will be incorporated into an update to SFY 2025 capitation rates.

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

In making my opinion, I relied upon the accuracy of the underlying claim and eligibility data records and other information prepared by DOM and participating CCOs. I did not audit the data and calculations, but did review them for reasonableness and consistency and did not find material defects. In other respects, my examination included such review of the underlying assumptions and methods used and such tests of the calculations as I considered necessary. The reliance letter from DOM is included in Appendix E of the rate report issued on February 6, 2025.

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

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



Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2025 MississippiCAN Capitation Rates
February 6, 2025
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This Opinion assumes the reader is familiar with the MississippiCAN program, Medicaid coordinated care programs, and actuarial rating techniques. The Opinion is intended for the State of Mississippi and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

A handwritten signature in black ink, reading 'Jill A. Bruckert', written over a horizontal line.

Jill A. Bruckert
Member, American Academy of Actuaries
Principal and Consulting Actuary
February 6, 2025

APPENDIX E

Data Reliance Letter

State of Mississippi Division of Medicaid
SFY 2025 MississippiCAN Preliminary Rate Calculation and Certification

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2025 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

February 6, 2025

OFFICE OF THE GOVERNOR
Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201



February 4, 2025

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

Re: Data Reliance for Actuarial Certification of SFY 2025 MississippiCAN Capitation Rates

Dear Jill:

I, Jennifer Wentworth, Chief of Staff for the Mississippi Division of Medicaid (DOM), hereby affirm that the data prepared and submitted to Milliman, Inc. (Milliman) for the purpose of certifying MississippiCAN capitation rates was prepared under my direction and, to the best of my knowledge and belief, is accurate, complete, and consistent with the data used to develop the capitation rates. Capitation rates are effective July 1, 2024 to June 30, 2025.

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

1. Data from DOM's Medicaid Management Information Systems (MMIS) vendor (Gainwell):
 - a. Encounter claims through June 2023.
 - b. Medicaid eligibility through June 2023.
2. Data from DOM's vendor Myers and Stauffer:
 - a. Detailed encounter claim status reports, including identification of duplicative or voided claims through August 30, 2024.
3. Supporting documentation provided by DOM:
 - a. Data identification logic:
 - i. Logic for identifying members eligible for the MYPAC rate cell.
 - ii. Logic for identifying members with hemophilia.
 - iii. Logic for identifying Institution for Mental Disease (IMD) facilities.
 - iv. Logic for identifying claims above state plan covered service limits.
 - b. Reimbursement and / or program changes:
 - i. SB 2799 passed April 19, 2021.
 1. Preventative and diagnostic dental reimbursement increases of 5% effective July 1,

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Milliman, Inc.
February 4, 2025
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2022 and July 1, 2023.

2. Fee schedules frozen effective July 1, 2021.
- ii. HB 657 signed into law on April 19, 2022.
 1. Restorative dental reimbursement increases of 5% effective July 1, 2022, July 1, 2023, and July 1, 2024.
 2. Ability to change fee schedules with legislative review. DOM will update reimbursement for the following provider types.
 - a. Physician fee schedules effective July 1, 2022.
 - b. Inpatient and outpatient fee schedules effective July 1, 2023.
- iii. SB 2212 signed into law on March 16, 2023.
 1. Postpartum coverage for eligible members extended from 60 days to 12 months.
- iv. Professional, inpatient DRG, and outpatient APC fee re-pricing impacts for July 2022 and July 2023 prepared by Conduent.
- v. Professional, inpatient DRG, and outpatient APC fee re-pricing impacts for July 2023 and July 2024 prepared by Myers & Stauffer.
- vi. Estimates of uptake rates of certain gene therapies used to treat Hemophilia A, Hemophilia B, Sickle Cell Disease, Beta-Thalassemia, and Duchene Muscular Dystrophy.
- vii. Confirmation that Zolgensma will be included in the capitation rate for SFY 2025.
- viii. Fee schedule updates for the following categories of service:
 1. Psychiatric Residential Treatment Facilities (PRTF) – January 2023, January 2024, and January 2025
 2. Ambulatory Surgical Center (ASC) – October 2023, January 2024, and October 2024
 3. Autism Spectrum Disorder (ASD) – January 2023
 4. Orthodontia Services – October 2023
 5. Behavioral Health Services – July 2023 and July 2024
 6. MYPAC Services – November 2023
 7. Home Health Agency (HHA) Services – October 2024
 8. Prescribed Pediatric Extended Care (PPEC) Services – October 2022

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9. Private Duty Nursing (PDN) Services – October 2022 and July 2023

ix. CY 2022 fee schedules for the following categories of service:

1. Psychiatric Residential Treatment Facilities (PRTF)
2. Ambulatory Surgical Center (ASC)
3. Autism Spectrum Disorder (ASD)
4. Orthodontia Services
5. Behavioral Health Services
6. MYPAC Services
7. Home Health Agency (HHA) Services
8. Prescribed Pediatric Extended Care (PPEC)
9. Private Duty Nursing (PDN)

c. Directed payments:

- i. SFY 2025 Mississippi Hospital Access Program (MHAP) total funding amount of \$1,540,423,694 along with splits for a quality incentive payment pool (QIPP) amount of \$820,744,321, the inpatient fee schedule adjustment (FSA) amount of \$431,807,624, and the outpatient FSA amount of \$287,871,749 to be used in capitation rate development.
- ii. SFY 2025 Mississippi Medicaid Access to Physician Services (MAPS) funding amount of \$29,526,177.
- iii. SFY 2025 Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) funding amount of \$25,285,224.
- iv. SFY 2025 Mississippi Outcomes for Maternal Safety (MOMS) funding amount of \$6,603,083.

d. Historical data:

- i. Files summarizing individuals in the Non-Newborn SSI / Disabled rate cell moved to FFS due to a PRTF stay in CY 2022.
- ii. MLR reports through December 2023.

e. Other data:

- i. Quality withhold parameters for SFY 2025.

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- ii. Value-based payment program parameters for SFY 2025.
- iii. High-cost drug risk corridor parameters for SFY 2025.
- iv. Other computer files and clarifying correspondence.

Milliman relied on DOM and their MMIS vendor for the collection and processing of the CCO encounter data. Milliman relied on Myers and Stauffer's review of encounter data for duplicative or voided claims. Milliman relied on the CCOs to provide accurate CY 2022 financial data as certified by each CCO. Milliman did not audit the CCO financial data, or the encounter data, but did assess the data for reasonableness as documented in the capitation rate report.

Jennifer Westworth

Name

Chief of Staff

Title

February 4, 2025

Date

For more information about Milliman,
please visit us at:

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Milliman leverages deep expertise, actuarial rigor, and advanced technology to develop solutions for a world at risk. We help clients in the public and private sectors navigate urgent, complex challenges—from extreme weather and market volatility to financial insecurity and rising health costs—so they can meet their business, financial, and social objectives. Our solutions encompass insurance, financial services, healthcare, life sciences, and employee benefits. Founded in 1947, Milliman is an independent firm with offices in major cities around the globe.

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Caveats and Limitations
Mississippi Division of Medicaid
READ BEFORE PROCEEDING

Milliman has developed certain models to estimate the values included in these exhibits and appendices. The intent of the models was to estimate SFY 2025 capitation rates. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting for January 2022 to December 2022 with runout through June 2023, historical and projected reimbursement information, fee schedules, and other information from DOM, MississippiCAN CCOs, Change Healthcare, Myers and Stauffer, and CMS to calculate the preliminary MississippiCAN base data shown in exhibits and appendices. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2025 capitation rates.

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

Our exhibits and appendices are intended for the internal use of DOM to review preliminary MississippiCAN capitation rates for SFY 2025. The exhibits and appendices and the models used to develop the values in these exhibits and appendices may not be appropriate for other purposes. We anticipate the exhibits and appendices will be shared with contracted CCOs, CMS and other interested parties. Milliman does not intend to service, and assumes no duty or liability to, other parties who receive this work. It should only be distributed and reviewed in its entirety. These capitation rates may not be appropriate for all CCOs. Any CCO considering participating in MississippiCAN should consider their unique circumstances before deciding to contract under these rates.

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

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

Caveats and Limitations
Mississippi Division of Medicaid
READ BEFORE PROCEEDING

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The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting for January 2022 to December 2022 with runout through June 2023, historical and projected reimbursement information, fee schedules, and other information from DOM, MississippiCAN CCOs, Change Healthcare, Myers and Stauffer, and CMS to calculate the preliminary MississippiCAN base data shown in exhibits and appendices. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix E for a full list of the data relied upon to develop the SFY 2025 capitation rates.

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



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December 13, 2024

Jennifer Wentworth
Chief of Staff
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth17 - MississippiCAN Capitation Risk Adjustment – Q1 to Q2 2025 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2025, which are documented in a separately provided report.¹ As outlined in that report and summarized in Table 1 below, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective January 1, 2025 through June 30, 2025 (Q1 to Q2 2025) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2025.

As described in greater detail below, we develop Q1 to Q2 2025 risk scores using diagnoses from July 2023 to June 2024 (SFY 2024) and the enrollment mix for each CCO as of October 2024. In addition, we adjusted the enrollment records to identify MYPAC rate cell members that were incorrectly assigned to other children rate cells.

Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q1 to Q2 2025 were developed using:

¹ "Report18 - SFY 2025 Preliminary MississippiCAN Rate Calculation and Certification.pdf," dated December 4, 2024.



- Diagnosis Period: Medical and drug diagnosis information from encounter and FFS claims incurred during SFY 2024 with runout through August 30, 2024. Pharmacy claims data was excluded from this analysis for July to September 2023, given issues with the pharmacy data during that time period.
- Enrollment Period: Demographic and enrollment information from October 2024.

Table 2 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Based on SFY 2024 Diagnosis Period and October 2024 Enrollment							
		North		Central		South	
Rate Cell	CCO	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,513	1.001	10,051	1.013	7,078	1.022
Non-Newborn SSI / Disabled	Molina	2,813	0.981	2,976	0.979	2,550	0.993
Non-Newborn SSI / Disabled	United	8,051	1.005	8,069	0.991	7,351	0.981
MA Adult	Magnolia	6,049	1.005	6,678	1.018	6,114	1.020
MA Adult	Molina	4,001	0.991	4,876	0.961	5,017	0.964
MA Adult	United	5,583	1.001	6,159	1.011	6,899	1.009
MA Children	Magnolia	30,731	1.008	35,409	1.012	29,328	1.006
MA Children	Molina	17,636	0.967	21,052	0.961	19,243	0.956
MA Children	United	28,593	1.012	32,266	1.012	31,076	1.022
Quasi-CHIP	Magnolia	3,842	1.004	4,409	1.018	3,305	1.010
Quasi-CHIP	Molina	2,030	0.963	2,177	0.966	2,025	0.942
Quasi-CHIP	United	3,834	1.016	4,192	0.999	3,693	1.023
Foster Care	Magnolia	1,522	0.996	1,552	0.982	2,154	0.976
Foster Care	Molina	244	1.047	299	1.101	450	1.118
Foster Care	United	490	0.988	434	0.994	677	0.997

Only MississippiCAN-eligible members enrolled in a CCO during October 2024 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found on the enrollment record, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations additional variables based upon utilizer status, housing insecurity indicators, and the length of enrollment during the diagnostic period are included in the risk score calculation.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment records.

Starting in July 2021, some members in the MYPAC rate cell, which is not risk adjusted, were not correctly assigned a 'SED' lock-in flag and were instead assigned to other children rate cells, including several rate cells that are risk adjusted. We identified members that utilized MYPAC services during the risk adjustment period and recategorized these members to the MYPAC rate cell for the purposes of risk adjustment calculations.

A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members aged 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2025 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.



Risk Score Changes

The last release of risk scores included prospective budget-neutral risk scores for Q3 to Q4 2024. These risk scores were based on June 2024 enrollment and diagnoses from January 2023 through December 2023 with runout through April 26, 2024. Changes in budget-neutral plan risk scores between the Q3 to Q4 2024 risk scores and the Q1 to Q2 2025 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes.

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

Table 3 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Changes in Statewide Budget Neutral Risk Scores Q3 to Q4 2024 vs. Q1 to Q2 2025				
Cohort	Risk Scores:	Q3 to Q4 2024	Q1 to Q2 2025	% Change
	Enrollment:	June 2024	October 2024	
	Diagnosis Period:	CY 2023	SFY 2023	
Non-Newborn SSI / Disabled	Magnolia	1.007	1.011	0.45%
Non-Newborn SSI / Disabled	Molina	0.997	0.984	-1.33%
Non-Newborn SSI / Disabled	United	0.993	0.993	-0.05%
MA Adult	Magnolia	1.016	1.014	-0.20%
MA Adult	Molina	0.968	0.971	0.30%
MA Adult	United	1.007	1.007	0.01%
MA Children	Magnolia	1.006	1.009	0.27%
MA Children	Molina	0.963	0.961	-0.18%
MA Children	United	1.017	1.015	-0.12%
Quasi-CHIP	Magnolia	1.005	1.011	0.57%
Quasi-CHIP	Molina	0.964	0.957	-0.67%
Quasi-CHIP	United	1.014	1.012	-0.17%
Foster Care	Magnolia	0.974	0.984	1.06%
Foster Care	Molina	1.136	1.096	-3.59%
Foster Care	United	1.000	0.993	-0.70%

Exhibit 2 allocates the change in risk scores between the last release and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Updates the risk scores shown in Column A with an additional data runout.
- Column C: Updates the risk scores shown in Column B with an updated diagnosis period.
- Column D: Updates the risk scores shown in Column C with enrollment from October 2024, the snapshot enrollment month chosen to represent enrollment for January to June 2025.

Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the last release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.



Table 4 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Statewide Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q3 to Q4 2024	98%	96%	98%	98%
Q1 to Q2 2025	99%	97%	98%	98%
MA Adult				
Q3 to Q4 2024	94%	94%	94%	94%
Q1 to Q2 2025	94%	93%	94%	94%
MA Children				
Q3 to Q4 2024	97%	96%	97%	97%
Q1 to Q2 2025	97%	96%	97%	96%
Quasi-CHIP				
Q3 to Q4 2024	97%	96%	97%	97%
Q1 to Q2 2025	98%	97%	97%	97%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members falling into each durational category
 - Count of members in the non-utilizer category
 - Count of members assigned to the housing insecurity category, for applicable populations
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category
- Unscored Members
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- Risk Adjustment Results
 - Calculation of budget neutral risk score for scored and unscored members and in total



Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6 Mississippi Division of Medicaid Q1 to Q2 2025 MississippiCAN Risk Scores Conditions with the Top Five Disease Impacts Statewide Results				
Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, low to medium	Skeletal, medium	Psychiatric, low	Psychiatric, low
2	Cardiovascular, medium	Pregnancy, incomplete	Skeletal, very low to medium	Skeletal, very low to medium
3	Skeletal, medium	Psychiatric, low	Pulmonary, low	Pulmonary, low
4	Psychiatric, high	Gastro, low	Gastro, low	Diabetes, type 1
5	CNS, low	Pregnancy, complete	CNS, low	Gastro, low

Member-Level Risk Scores

Text files providing member-level demographic, duration, diagnosis, and other risk score category information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, diagnostic, and other risk score category information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the letter² that describes the custom risk weight model developed for periods after July 2024 for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis.

Exhibits 4A to 4F display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

CCO Capitation Rate = Base Capitation Rate x CCO Budget Neutral Risk Score

² Wentworth15 - July 2024 MSCAN Risk Weight Development.pdf” dated October 31, 2024.



The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates after the application of the quality withhold and prior to the following directed payments, all of which are not risk adjusted.

- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2025 and when we anticipate providing each risk score update for the Foster Care rate cell.

Table 7 Mississippi Division of Medicaid SFY 2025 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3Q4 2024	November 2024	February 2025
Q1Q2 2025	December 2024	August 2025

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q1 to Q2 2025 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from July 2023 to June 2024 with runout through August 30, 2024, along with eligibility data from October 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q1 to Q2 2025 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.



Jennifer Wentworth
Mississippi Division of Medicaid
December 13, 2024
Page 7 of 7

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



Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jill Bruckert'.

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

JAB/KNL/zk

Attachments (Provided in Excel)

A handwritten signature in black ink, appearing to read 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

Caveats and Limitations
Mississippi Division of Medicaid
Q1 to Q2 2025 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q1 to Q2 2025 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters and FFS claims from July 2023 through June 2024 with runout through August 2024 and eligibility data from October 2024 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q1 to Q2 2025 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2025 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

DOM MSCAN SFY25 EMERGENCY CONTRACT

AMENDMENT 1

Exhibit 4



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June 17, 2022

Jennifer Wentworth
Special Projects Admin, Accounting
Mississippi Office of the Governor, Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201

[Sent via email: jennifer.wentworth@medicaid.ms.gov]

Re: MississippiCAN Capitation Risk Adjustment – Q3Q4 2022 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2023. A separately provided report¹ documents the development of MississippiCAN capitation rates for SFY 2023. As summarized by Table 1, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 SFY 2023 MississippiCAN Risk Adjustment Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective July 1, 2022 through December 31, 2022 (Q3Q4 2022) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2023. Risk scores for January through June 2022 (Q1Q2 2022) were provided in a separate letter in December 2022.²

Similar to Q1Q2 2022 risk scores we did not make any adjustments to our risk adjustment methodology, despite the decrease in diagnoses recorded due to the COVID-19 pandemic occurring during the diagnosis period. We reviewed the change in plan-level risk scores during the COVID-19 pandemic on a budget neutral basis and observed changes consistent with the magnitude in a typical update. Based on this review and the additional analysis documented in our prior letter, we determined that no change in methodology is necessary.

As described in greater detail below, we develop Q3Q4 2022 risk scores using the enrollment mix for each CCO as of April 2022. Starting June 2021, DOM began disenrolling MississippiCAN members who would have lost Medicaid eligibility prior to the COVID-19 public health emergency (PHE) into FFS. This rapid decrease in MississippiCAN enrollment along with uncertainty surrounding the end date for the PHE may result in the actual enrollment mix in Q3Q4 2022 for each CCO being much different than the assumed mix based on April 2022 enrollment. Thus, Milliman will consider an update to Q3Q4 2022 risk scores, once that period has concluded using actual enrollment mix in that

¹ "Report05 - State Fiscal Year 2023 MississippiCAN Preliminary Rate Calculation and Certification.pdf," dated April 20, 2022

² "Wentworth23 – Q1Q2 2022 MississippiCAN Risk Adjustment.pdf," dated December 13, 2021



period. Risk score calculations for each member would not differ from those calculated in this letter, but risk scores for each CCO would be recalculated using the actual mix of enrollees during the Q3Q4 2022 period.

Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q3Q4 2022 were developed using:

- Diagnosis Period: Medical and drug diagnosis information from encounter and FFS claims incurred during CY 2021 with runout through April 2022
- Enrollment Snapshot: Demographic and enrollment information from April 2022

Only MississippiCAN-eligible members enrolled in a CCO in April 2022 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found in the enrollment snapshot, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations a variable based upon the length of enrollment during the diagnostic period is included in the risk score calculation.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment snapshot.

Table 2 SFY 2023 MississippiCAN Risk Adjustment Q3Q4 2022 Prospective Risk Scores Based on CY 2021 Diagnosis Period							
Rate Cell	CCO	North		Central		South	
		Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,978	1.000	10,910	1.032	7,528	1.031
Non-Newborn SSI / Disabled	Molina	2,261	0.998	2,462	0.973	2,234	0.983
Non-Newborn SSI / Disabled	United	8,242	1.001	8,401	0.967	7,654	0.975
MA Adult	Magnolia	3,965	1.011	4,442	1.034	5,223	1.012
MA Adult	Molina	2,524	0.966	3,063	0.951	4,363	0.945
MA Adult	United	3,667	1.011	4,383	1.000	6,382	1.028
MA Children	Magnolia	26,285	1.002	31,161	1.014	30,706	1.006
MA Children	Molina	11,332	0.938	14,083	0.929	17,629	0.936
MA Children	United	23,519	1.027	27,583	1.020	33,318	1.028
Quasi-CHIP	Magnolia	2,969	1.001	3,408	0.992	2,915	0.966
Quasi-CHIP	Molina	1,296	0.968	1,394	0.968	1,473	0.935
Quasi-CHIP	United	3,202	1.012	3,413	1.021	3,566	1.055
Foster Care	Magnolia	1,340	0.931	1,377	0.947	1,937	0.925
Foster Care	Molina	227	1.297	264	1.221	362	1.286
Foster Care	United	416	1.059	383	1.039	584	1.073



A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members age 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2023 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.

Risk Score Changes

The prior release of risk scores included prospective budget-neutral risk scores for Q1Q2 2022. These risk scores were based on October 2021 enrollment and diagnoses from SFY 2021 with runout through October 2021. Changes in budget-neutral plan risk scores between the Q1Q2 2022 risk scores and the Q3Q4 2022 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes.

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column. Note, the significant changes in the Foster Care rate cell are driven by a change in the enrollment practices for this population over time and is the reason that Foster Care risk scores will be retrospectively adjusted for actual enrollment.

Table 3 SFY 2023 MississippiCAN Risk Adjustment Changes in Statewide Budget Neutral Risk Score Q1Q2 2022 vs. Q3Q4 2022				
Cohort	Risk Scores: Enrollment: Diagnosis Period:	Q1Q2 2022 Oct 2021 SFY 2021	Q3Q4 2022 Apr 2022 CY 2021	% Change
Non-Newborn SSI / Disabled	Magnolia	1.017	1.020	0.34%
Non-Newborn SSI / Disabled	Molina	1.016	0.984	-3.16%
Non-Newborn SSI / Disabled	United	0.975	0.981	0.55%
MA Adult	Magnolia	1.017	1.019	0.15%
MA Adult	Molina	0.965	0.952	-1.34%
MA Adult	United	1.008	1.015	0.66%
MA Children	Magnolia	1.008	1.008	-0.02%
MA Children	Molina	0.937	0.934	-0.27%
MA Children	United	1.024	1.025	0.12%
Quasi-CHIP	Magnolia	0.992	0.987	-0.57%
Quasi-CHIP	Molina	0.957	0.956	-0.04%
Quasi-CHIP	United	1.026	1.030	0.44%
Foster Care	Magnolia	0.950	0.933	-1.79%
Foster Care	Molina	1.255	1.268	1.08%
Foster Care	United	1.030	1.059	2.80%

Exhibit 2 allocates the change in risk scores between the prior release³ and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable
- Column B: Restates the risk scores shown in Column A with additional data runout
- Column C: Updates the risk scores shown in Column B with an updated diagnosis period
- Column D: Updates the risk scores shown in Column C with an updated enrollment period. This column contains the final risk scores for this release

³ "Wentworth23 – Q1Q2 2022 MississippiCAN Risk Adjustment.pdf," dated December 13, 2021



Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the prior release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.

Table 4 SFY 2023 MississippiCAN Risk Adjustment Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q1Q2 2022	99%	96%	99%	99%
Q3Q4 2022	99%	97%	99%	99%
MA Adult				
Q1Q2 2022	94%	91%	92%	93%
Q3Q4 2022	94%	93%	93%	93%
MA Children				
Q1Q2 2022	98%	96%	98%	97%
Q3Q4 2022	98%	97%	98%	98%
Quasi-CHIP				
Q1Q2 2022	98%	97%	98%	98%
Q3Q4 2022	99%	97%	98%	98%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 SFY 2023 MississippiCAN Risk Adjustment Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category
 - Count of members falling into each durational category
 - Disease category prevalence
 - Count of members not assigned to a CDPS + Rx category



- **Unscored Members**
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- **Risk Adjustment Results**
 - Calculation of budget neutral risk score for scored and unscored members and in total

Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6
SFY 2023 MississippiCAN Risk Adjustment
Q3Q4 2022 Prospective Risk Scores – Conditions with the Top Five Disease Impacts
Statewide Results

Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, medium low to medium	Skeletal, very low to low	Psychiatric, medium low	Psychiatric, medium low
2	Cardiovascular, medium	Psychiatric, medium low	Pulmonary, low to medium	Pulmonary, low to medium
3	Psychiatric, high	Psychiatric, low	Cardiovascular, extra low to low	Cardiovascular, extra low to low
4	AIDS, high	Pregnancy, incomplete	Gastro, low	Psychiatric, low
5	CNS, low	Cardiovascular, extra low	Psychiatric, low	Diabetes, type 2 low

Member-Level Risk Scores

Text files providing member-level demographic, duration, and diagnosis information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, and diagnostic information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the following letters for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis:

- **Non-Newborn SSI / Disabled and MA Children / Quasi-CHIP** – “Clark07 - MSCAN Risk Weight Development.pdf,” dated June 25, 2019. This letter includes risk score information for the MA Adult rate cell. However, that information is superseded by the letter listed below.
- **MA Adult** – “Clark14 - MSCAN Risk Weight Development.pdf,” dated June 8, 2020.
- **Foster Care** – “Clark17 - Risk Adjustment Methodology for Foster Care Rate Cell.pdf,” dated June 18, 2020.



Exhibits 4A to 4C display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

$$CCO \text{ Capitation Rate} = \text{Base Capitation Rate} \times CCO \text{ Normalized Risk Factor}$$

The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates prior to the following directed payments, all of which are not risk adjusted.

- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2023 and when we anticipate providing each risk score update for the Foster Care rate cell. Notably, we plan to provide final Foster Care risk scores for the Q3Q4 2022 period in February 2023 and final risk scores for the Q1Q2 2023 period in August 2023.

Table 7 SFY 2023 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3Q4 2022	June 2022	February 2023
Q1Q2 2023	December 2022	August 2023

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q3Q4 2022 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters, FFS claims, and eligibility data from January 2021 to April 2022 with runout through April 2022 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.



Jennifer Wentworth
Mississippi Office of the Governor, Division of Medicaid
June 17, 2022
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This letter is designed to document the risk scores for Q3 to Q4 2022 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

I am an Principal and Consulting Actuary for Milliman, member of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of my knowledge and belief, this letter is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

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



Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink that reads "Jill A. Bruckert".

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

JABF/laa

Attachments



EXHIBITS

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	9,911	0.992	1.000	67	1.046	1.013	1.000
Molina	2,190	0.990	0.998	71	1.050	1.017	0.998
United	8,129	0.993	1.001	113	1.013	0.982	1.001
Total	20,230	0.992	1.000	251	1.032	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	10,844	1.095	1.032	66	1.001	0.984	1.032
Molina	2,402	1.032	0.973	60	0.989	0.972	0.973
United	8,308	1.026	0.966	93	1.048	1.030	0.967
Total	21,554	1.061	1.000	219	1.018	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	7,459	1.141	1.031	69	1.020	0.996	1.031
Molina	2,159	1.085	0.981	75	1.073	1.047	0.983
United	7,552	1.078	0.975	102	0.991	0.968	0.975
Total	17,170	1.106	1.000	246	1.024	1.000	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	3,716	1.013	1.013	249	0.997	0.992	1.011
Molina	2,305	0.961	0.961	219	1.018	1.013	0.966
United	3,424	1.012	1.012	243	1.001	0.997	1.011
Total	9,445	1.000	1.000	711	1.005	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	4,113	1.035	1.038	329	0.991	0.986	1.034
Molina	2,801	0.943	0.945	262	1.015	1.010	0.951
United	4,057	0.998	1.000	326	1.010	1.006	1.000
Total	10,971	0.998	1.000	917	1.005	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	4,944	1.055	1.013	279	0.998	1.001	1.012
Molina	4,111	0.982	0.943	252	0.986	0.990	0.945
United	6,007	1.072	1.029	375	1.002	1.006	1.028
Total	15,062	1.041	1.000	906	0.996	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	25,821	1.016	1.002	464	1.014	1.011	1.002
Molina	10,870	0.948	0.936	462	0.997	0.994	0.938
United	22,977	1.041	1.028	542	0.999	0.996	1.027
Total	59,668	1.013	1.000	1,468	1.003	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	30,692	1.021	1.014	469	0.996	0.997	1.014
Molina	13,666	0.933	0.927	417	1.002	1.004	0.929
United	27,042	1.027	1.021	541	0.997	0.999	1.020
Total	71,400	1.006	1.000	1,427	0.998	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	30,231	1.037	1.006	475	0.999	1.005	1.006
Molina	17,166	0.963	0.935	463	0.983	0.990	0.936
United	32,717	1.059	1.028	601	0.997	1.004	1.028
Total	80,114	1.030	1.000	1,539	0.993	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q3Q4 2022 Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,921	1.049	1.001	48	1.054	1.001	1.001
Molina	1,245	1.012	0.965	51	1.086	1.031	0.968
United	3,133	1.063	1.013	69	1.029	0.977	1.012
Total	7,299	1.049	1.000	168	1.053	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,356	1.026	0.992	52	1.076	1.004	0.992
Molina	1,361	1.001	0.968	33	1.050	0.979	0.968
United	3,348	1.056	1.021	65	1.080	1.007	1.021
Total	8,065	1.034	1.000	150	1.072	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,885	1.077	0.965	30	1.053	0.988	0.966
Molina	1,422	1.041	0.932	51	1.068	1.002	0.935
United	3,510	1.178	1.056	56	1.071	1.005	1.055
Total	7,817	1.116	1.000	137	1.066	1.000	1.000

Exhibit 1E
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q3Q4 2022 Risk Scores
April 2022 Snapshot Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,340	0.744	0.931
Molina	227	1.035	1.297
United	416	0.846	1.059
Total	1,983	0.799	1.000

Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,377	0.829	0.947
Molina	264	1.068	1.221
United	383	0.909	1.039
Total	2,024	0.875	1.000

South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,937	0.740	0.925
Molina	362	1.028	1.286
United	584	0.858	1.073
Total	2,883	0.800	1.000

Exhibit 2A Mississippi Division of Medicaid Impact Analysis Non-Newborn SSI / Disabled Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.989	0.989	1.020	0.992	0.0%	3.1%	-2.7%	0.3%
Molina	0.990	0.987	1.025	0.990	-0.2%	3.8%	-3.5%	0.0%
United	0.984	0.982	1.018	0.993	-0.2%	3.7%	-2.5%	0.9%
Unscored Members								
Magnolia	1.081	1.078	0.977	1.046	-0.3%	-9.3%	7.0%	-3.3%
Molina	1.004	1.010	0.859	1.050	0.5%	-14.9%	22.2%	4.5%
United	1.016	1.010	1.129	1.013	-0.5%	11.8%	-10.2%	-0.2%
All Members								
Magnolia	0.990	0.989	1.020	0.993	0.0%	3.0%	-2.7%	0.3%
Molina	0.989	0.987	1.025	0.991	-0.2%	3.8%	-3.3%	0.2%
United	0.985	0.983	1.019	0.993	-0.2%	3.6%	-2.5%	0.9%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.078	1.078	1.120	1.095	0.0%	3.9%	-2.2%	1.6%
Molina	1.079	1.082	1.101	1.032	0.3%	1.7%	-6.2%	-4.4%
United	1.014	1.015	1.058	1.026	0.0%	4.2%	-3.0%	1.1%
Unscored Members								
Magnolia	1.004	0.997	0.805	1.001	-0.6%	-19.2%	24.3%	-0.2%
Molina	0.996	0.996	1.108	0.989	0.0%	11.3%	-10.7%	-0.6%
United	0.991	0.997	0.957	1.048	0.6%	-4.0%	9.5%	5.7%
All Members								
Magnolia	1.077	1.078	1.120	1.095	0.0%	3.9%	-2.3%	1.6%
Molina	1.078	1.081	1.101	1.032	0.3%	1.9%	-6.3%	-4.3%
United	1.014	1.015	1.058	1.026	0.0%	4.2%	-3.0%	1.2%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.128	1.127	1.175	1.141	-0.2%	4.3%	-2.9%	1.1%
Molina	1.126	1.122	1.157	1.085	-0.3%	3.1%	-6.2%	-3.6%
United	1.060	1.065	1.115	1.078	0.5%	4.7%	-3.3%	1.8%
Unscored Members								
Magnolia	1.044	1.036	0.918	1.020	-0.8%	-11.3%	11.1%	-2.3%
Molina	1.044	1.025	0.983	1.073	-1.8%	-4.1%	9.1%	2.8%
United	1.059	1.053	0.999	0.991	-0.5%	-5.1%	-0.8%	-6.3%
All Members								
Magnolia	1.127	1.125	1.175	1.139	-0.2%	4.4%	-3.0%	1.1%
Molina	1.123	1.119	1.157	1.086	-0.4%	3.4%	-6.1%	-3.3%
United	1.060	1.065	1.115	1.077	0.5%	4.7%	-3.4%	1.7%

Exhibit 2B
Mississippi Division of Medicaid
Impact Analysis Non-Newborn SSI / Disabled Population
Q1Q2 2022 to Q3Q4 2022 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.002	1.003	1.000	1.000	0.1%	-0.3%	0.0%	-0.2%
Molina	1.003	1.001	1.005	0.998	-0.1%	0.4%	-0.8%	-0.5%
United	0.997	0.996	0.999	1.001	-0.1%	0.2%	0.2%	0.4%
Unscored Members								
Magnolia	1.051	1.050	0.979	1.013	-0.2%	-6.7%	3.4%	-3.7%
Molina	0.977	0.983	0.861	1.017	0.7%	-12.4%	18.1%	4.1%
United	0.988	0.984	1.132	0.982	-0.4%	15.1%	-13.3%	-0.6%
All Members								
Magnolia	1.002	1.003	1.000	1.000	0.1%	-0.3%	0.0%	-0.2%
Molina	1.002	1.001	1.005	0.998	-0.1%	0.4%	-0.7%	-0.3%
United	0.997	0.996	0.999	1.001	-0.1%	0.3%	0.2%	0.4%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.023	1.023	1.024	1.032	0.0%	0.1%	0.8%	0.9%
Molina	1.024	1.027	1.006	0.973	0.2%	-2.0%	-3.3%	-5.1%
United	0.963	0.962	0.967	0.966	0.0%	0.4%	-0.1%	0.4%
Unscored Members								
Magnolia	1.008	1.001	0.842	0.984	-0.7%	-15.9%	16.9%	-2.4%
Molina	0.999	0.999	1.158	0.972	0.0%	15.9%	-16.0%	-2.7%
United	0.995	1.000	1.000	1.030	0.6%	0.0%	2.9%	3.5%
All Members								
Magnolia	1.023	1.023	1.024	1.032	0.0%	0.1%	0.8%	0.8%
Molina	1.024	1.026	1.007	0.973	0.2%	-1.9%	-3.4%	-5.0%
United	0.963	0.963	0.967	0.967	0.0%	0.4%	0.0%	0.4%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.028	1.025	1.025	1.031	-0.3%	0.0%	0.6%	0.3%
Molina	1.025	1.021	1.009	0.981	-0.4%	-1.1%	-2.9%	-4.4%
United	0.965	0.969	0.973	0.975	0.4%	0.3%	0.2%	1.0%
Unscored Members								
Magnolia	0.995	0.997	0.934	0.996	0.3%	-6.3%	6.6%	0.1%
Molina	0.994	0.987	1.000	1.047	-0.7%	1.3%	4.7%	5.3%
United	1.008	1.014	1.016	0.968	0.6%	0.2%	-4.8%	-4.0%
All Members								
Magnolia	1.028	1.025	1.025	1.031	-0.3%	0.0%	0.6%	0.3%
Molina	1.024	1.019	1.009	0.983	-0.4%	-1.0%	-2.6%	-4.0%
United	0.966	0.970	0.973	0.975	0.4%	0.3%	0.2%	0.9%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.988	0.980	0.985	1.013	-0.8%	0.5%	2.8%	2.5%
Molina	0.956	0.951	0.944	0.961	-0.5%	-0.8%	1.9%	0.5%
United	0.987	0.980	1.002	1.012	-0.7%	2.2%	1.0%	2.6%
Unscored Members								
Magnolia	0.990	0.990	0.989	0.997	0.0%	-0.1%	0.8%	0.7%
Molina	0.987	0.986	0.989	1.018	-0.1%	0.3%	2.9%	3.1%
United	1.007	1.006	0.972	1.001	0.0%	-3.4%	3.0%	-0.5%
All Members								
Magnolia	0.988	0.981	0.985	1.012	-0.7%	0.4%	2.7%	2.4%
Molina	0.959	0.954	0.944	0.966	-0.5%	-1.1%	2.4%	0.8%
United	0.988	0.982	1.002	1.012	-0.6%	2.0%	0.9%	2.4%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.005	1.003	1.021	1.035	-0.2%	1.8%	1.4%	3.0%
Molina	0.942	0.941	0.944	0.943	-0.1%	0.3%	-0.1%	0.1%
United	0.988	0.986	0.987	0.998	-0.3%	0.2%	1.1%	0.9%
Unscored Members								
Magnolia	0.994	0.994	0.880	0.991	-0.1%	-11.5%	12.7%	-0.3%
Molina	0.980	0.981	0.967	1.015	0.1%	-1.5%	5.0%	3.5%
United	1.003	1.001	1.353	1.010	-0.2%	35.2%	-25.3%	0.7%
All Members								
Magnolia	1.005	1.003	1.021	1.032	-0.2%	1.8%	1.1%	2.7%
Molina	0.945	0.944	0.944	0.949	-0.1%	0.0%	0.5%	0.5%
United	0.989	0.987	0.987	0.999	-0.3%	0.1%	1.1%	0.9%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.060	1.056	1.058	1.055	-0.4%	0.1%	-0.3%	-0.5%
Molina	0.991	0.990	0.982	0.982	-0.2%	-0.8%	0.0%	-1.0%
United	1.047	1.041	1.066	1.072	-0.6%	2.4%	0.5%	2.3%
Unscored Members								
Magnolia	0.993	0.994	0.831	0.998	0.1%	-16.4%	20.1%	0.4%
Molina	0.978	0.978	1.009	0.986	0.0%	3.2%	-2.2%	0.8%
United	0.996	0.993	1.121	1.002	-0.2%	12.9%	-10.6%	0.7%
All Members								
Magnolia	1.055	1.052	1.057	1.051	-0.3%	0.6%	-0.6%	-0.4%
Molina	0.991	0.989	0.982	0.982	-0.2%	-0.8%	0.0%	-0.9%
United	1.043	1.037	1.066	1.068	-0.6%	2.8%	0.2%	2.3%

Exhibit 2D Mississippi Division of Medicaid Impact Analysis MA Adult Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.008	1.007	1.004	1.013	-0.1%	-0.3%	0.8%	0.4%
Molina	0.976	0.978	0.962	0.961	0.2%	-1.6%	-0.1%	-1.5%
United	1.007	1.007	1.022	1.012	0.0%	1.4%	-0.9%	0.5%
Unscored Members								
Magnolia	0.995	0.995	1.009	0.992	0.1%	1.3%	-1.7%	-0.3%
Molina	0.992	0.991	1.009	1.013	0.0%	1.8%	0.4%	2.2%
United	1.011	1.011	0.991	0.997	0.0%	-2.0%	0.5%	-1.5%
All Members								
Magnolia	1.008	1.007	1.004	1.011	-0.1%	-0.2%	0.7%	0.4%
Molina	0.978	0.979	0.962	0.966	0.1%	-1.7%	0.4%	-1.2%
United	1.008	1.008	1.022	1.011	0.0%	1.4%	-1.0%	0.4%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.023	1.023	1.034	1.038	0.0%	1.0%	0.4%	1.4%
Molina	0.959	0.960	0.955	0.945	0.1%	-0.5%	-1.1%	-1.5%
United	1.006	1.006	0.999	1.000	-0.1%	-0.6%	0.1%	-0.7%
Unscored Members								
Magnolia	1.001	1.001	0.905	0.986	0.0%	-9.5%	8.9%	-1.4%
Molina	0.986	0.988	0.995	1.010	0.2%	0.7%	1.5%	2.4%
United	1.009	1.008	1.393	1.006	-0.1%	38.2%	-27.8%	-0.4%
All Members								
Magnolia	1.022	1.022	1.033	1.034	0.0%	1.1%	0.0%	1.2%
Molina	0.961	0.962	0.955	0.951	0.1%	-0.7%	-0.5%	-1.1%
United	1.007	1.006	0.999	1.000	-0.1%	-0.7%	0.1%	-0.6%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.023	1.023	1.017	1.013	0.0%	-0.6%	-0.4%	-1.0%
Molina	0.957	0.959	0.944	0.943	0.3%	-1.6%	-0.2%	-1.5%
United	1.011	1.009	1.025	1.029	-0.2%	1.6%	0.4%	1.8%
Unscored Members								
Magnolia	1.005	1.006	0.822	1.001	0.1%	-18.3%	21.9%	-0.3%
Molina	0.989	0.989	0.997	0.990	0.1%	0.8%	-0.8%	0.1%
United	1.007	1.005	1.109	1.006	-0.1%	10.3%	-9.3%	-0.1%
All Members								
Magnolia	1.022	1.022	1.017	1.012	0.1%	-0.5%	-0.5%	-1.0%
Molina	0.960	0.962	0.944	0.945	0.2%	-1.8%	0.1%	-1.5%
United	1.010	1.008	1.025	1.028	-0.2%	1.7%	0.2%	1.7%

Exhibit 2E Mississippi Division of Medicaid Impact Analysis MA Children Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.978	0.977	1.002	1.016	-0.1%	2.5%	1.4%	3.8%
Molina	0.912	0.912	0.928	0.948	0.0%	1.8%	2.1%	3.9%
United	1.000	0.997	1.023	1.041	-0.3%	2.6%	1.8%	4.1%
Unscored Members								
Magnolia	0.999	0.999	1.006	1.014	0.0%	0.7%	0.8%	1.5%
Molina	0.988	0.988	0.946	0.997	0.0%	-4.2%	5.4%	0.9%
United	0.999	0.999	0.891	0.999	0.0%	-10.8%	12.1%	-0.1%
All Members								
Magnolia	0.979	0.978	1.002	1.015	-0.1%	2.5%	1.3%	3.8%
Molina	0.915	0.915	0.928	0.950	0.0%	1.4%	2.3%	3.8%
United	1.000	0.997	1.023	1.040	-0.3%	2.6%	1.7%	4.0%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.992	0.990	1.007	1.021	-0.3%	1.7%	1.4%	2.9%
Molina	0.911	0.906	0.918	0.933	-0.6%	1.3%	1.6%	2.4%
United	0.994	0.994	1.009	1.027	0.0%	1.5%	1.8%	3.3%
Unscored Members								
Magnolia	1.006	1.005	0.913	0.996	-0.1%	-9.2%	9.1%	-1.0%
Molina	0.990	0.991	0.896	1.002	0.1%	-9.6%	11.8%	1.2%
United	0.989	0.989	0.961	0.997	0.1%	-2.9%	3.8%	0.9%
All Members								
Magnolia	0.992	0.990	1.007	1.020	-0.3%	1.7%	1.3%	2.8%
Molina	0.914	0.909	0.918	0.935	-0.5%	1.0%	1.9%	2.3%
United	0.994	0.994	1.009	1.026	0.0%	1.5%	1.7%	3.3%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.017	1.016	1.029	1.037	-0.1%	1.4%	0.7%	2.0%
Molina	0.947	0.946	0.958	0.963	-0.1%	1.3%	0.5%	1.7%
United	1.043	1.040	1.053	1.059	-0.2%	1.2%	0.6%	1.6%
Unscored Members								
Magnolia	0.998	0.998	0.869	0.999	0.0%	-12.9%	14.9%	0.1%
Molina	0.990	0.990	0.947	0.983	0.0%	-4.3%	3.8%	-0.7%
United	1.000	1.000	1.078	0.997	0.0%	7.8%	-7.4%	-0.2%
All Members								
Magnolia	1.016	1.015	1.029	1.036	-0.1%	1.4%	0.7%	1.9%
Molina	0.949	0.948	0.958	0.964	-0.1%	1.1%	0.6%	1.6%
United	1.041	1.039	1.053	1.058	-0.2%	1.3%	0.5%	1.6%

Exhibit 2F Mississippi Division of Medicaid Impact Analysis MA Children Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.004	1.005	1.006	1.002	0.1%	0.1%	-0.4%	-0.2%
Molina	0.936	0.938	0.932	0.936	0.2%	-0.6%	0.4%	-0.1%
United	1.026	1.025	1.027	1.028	-0.1%	0.2%	0.1%	0.1%
Unscored Members								
Magnolia	1.003	1.003	1.038	1.011	0.0%	3.4%	-2.6%	0.8%
Molina	0.993	0.992	0.976	0.994	0.0%	-1.7%	1.9%	0.1%
United	1.004	1.004	0.919	0.996	0.0%	-8.5%	8.4%	-0.8%
All Members								
Magnolia	1.004	1.005	1.006	1.002	0.1%	0.1%	-0.3%	-0.1%
Molina	0.939	0.940	0.932	0.938	0.2%	-0.9%	0.6%	-0.1%
United	1.026	1.024	1.027	1.027	-0.1%	0.2%	0.0%	0.1%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.015	1.015	1.017	1.014	-0.1%	0.2%	-0.3%	-0.1%
Molina	0.933	0.929	0.927	0.927	-0.4%	-0.2%	0.0%	-0.6%
United	1.018	1.020	1.019	1.021	0.2%	-0.1%	0.1%	0.3%
Unscored Members								
Magnolia	1.012	1.011	0.985	0.997	-0.1%	-2.5%	1.2%	-1.4%
Molina	0.996	0.997	0.968	1.004	0.0%	-2.9%	3.8%	0.8%
United	0.994	0.995	1.037	0.999	0.0%	4.3%	-3.7%	0.4%
All Members								
Magnolia	1.015	1.015	1.017	1.014	-0.1%	0.2%	-0.3%	-0.1%
Molina	0.935	0.932	0.927	0.929	-0.3%	-0.5%	0.2%	-0.6%
United	1.017	1.019	1.019	1.020	0.2%	0.0%	0.1%	0.3%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.004	1.005	1.005	1.006	0.0%	0.1%	0.1%	0.2%
Molina	0.935	0.936	0.936	0.935	0.1%	0.0%	-0.1%	0.0%
United	1.029	1.029	1.028	1.028	-0.1%	0.0%	0.0%	-0.1%
Unscored Members								
Magnolia	1.002	1.002	0.891	1.005	0.0%	-11.1%	12.8%	0.3%
Molina	0.994	0.994	0.971	0.990	0.0%	-2.3%	1.9%	-0.5%
United	1.004	1.004	1.105	1.004	0.0%	10.0%	-9.1%	0.0%
All Members								
Magnolia	1.004	1.004	1.005	1.006	0.0%	0.1%	0.1%	0.2%
Molina	0.938	0.938	0.936	0.936	0.1%	-0.2%	0.1%	-0.1%
United	1.029	1.028	1.028	1.028	-0.1%	0.0%	-0.1%	-0.1%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.014	1.015	1.030	1.049	0.0%	1.5%	1.9%	3.5%
Molina	0.983	0.982	1.007	1.012	-0.1%	2.5%	0.6%	3.0%
United	1.033	1.031	1.058	1.063	-0.2%	2.6%	0.4%	2.9%
Unscored Members								
Magnolia	1.021	1.024	N/A	1.054	0.3%	N/A	N/A	3.2%
Molina	1.080	1.080	N/A	1.086	0.0%	N/A	N/A	0.5%
United	1.070	1.070	N/A	1.029	0.0%	N/A	N/A	-3.8%
All Members								
Magnolia	1.014	1.015	1.030	1.049	0.0%	1.4%	1.9%	3.5%
Molina	0.985	0.985	1.007	1.015	-0.1%	2.2%	0.8%	3.0%
United	1.034	1.032	1.058	1.062	-0.2%	2.5%	0.4%	2.7%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.009	1.010	1.031	1.026	0.0%	2.1%	-0.5%	1.6%
Molina	0.984	0.984	1.007	1.001	0.0%	2.4%	-0.6%	1.7%
United	1.038	1.039	1.055	1.056	0.1%	1.5%	0.1%	1.7%
Unscored Members								
Magnolia	1.013	1.010	1.144	1.076	-0.2%	13.2%	-5.9%	6.3%
Molina	1.062	1.062	N/A	1.050	0.0%	N/A	N/A	-1.1%
United	1.062	1.062	1.046	1.080	0.0%	-1.6%	3.3%	1.7%
All Members								
Magnolia	1.009	1.010	1.031	1.027	0.0%	2.1%	-0.4%	1.7%
Molina	0.986	0.986	1.007	1.002	0.0%	2.2%	-0.5%	1.6%
United	1.039	1.039	1.055	1.056	0.1%	1.5%	0.1%	1.7%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	1.078	1.080	1.085	1.077	0.1%	0.4%	-0.7%	-0.1%
Molina	1.016	1.015	1.042	1.041	-0.2%	2.7%	-0.1%	2.4%
United	1.137	1.142	1.166	1.178	0.4%	2.2%	1.0%	3.6%
Unscored Members								
Magnolia	1.032	1.034	0.983	1.053	0.2%	-4.9%	7.2%	2.1%
Molina	1.033	1.035	N/A	1.068	0.2%	N/A	N/A	3.4%
United	1.058	1.058	N/A	1.071	0.0%	N/A	N/A	1.2%
All Members								
Magnolia	1.077	1.079	1.085	1.077	0.1%	0.5%	-0.7%	0.0%
Molina	1.018	1.016	1.042	1.043	-0.2%	2.5%	0.1%	2.4%
United	1.136	1.140	1.166	1.177	0.4%	2.3%	0.9%	3.6%

Exhibit 2H Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q1Q2 2022 to Q3Q4 2022 Risk Score Change								
Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.998	0.999	0.992	1.001	0.1%	-0.6%	0.8%	0.3%
Molina	0.967	0.967	0.970	0.965	0.0%	0.4%	-0.5%	-0.2%
United	1.016	1.015	1.020	1.013	-0.1%	0.5%	-0.6%	-0.3%
Unscored Members								
Magnolia	0.964	0.966	N/A	1.001	0.2%	N/A	N/A	3.7%
Molina	1.020	1.019	N/A	1.031	-0.1%	N/A	N/A	1.1%
United	1.010	1.009	N/A	0.977	-0.1%	N/A	N/A	-3.3%
All Members								
Magnolia	0.997	0.998	0.992	1.001	0.1%	-0.6%	0.8%	0.4%
Molina	0.968	0.968	0.970	0.968	0.0%	0.2%	-0.3%	-0.1%
United	1.016	1.015	1.020	1.012	-0.1%	0.5%	-0.7%	-0.3%
Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.993	0.993	0.995	0.992	0.0%	0.2%	-0.3%	-0.1%
Molina	0.968	0.967	0.972	0.968	-0.1%	0.5%	-0.4%	0.0%
United	1.021	1.021	1.018	1.021	0.0%	-0.4%	0.3%	0.0%
Unscored Members								
Magnolia	0.967	0.966	1.015	1.004	-0.1%	5.1%	-1.1%	3.8%
Molina	1.014	1.014	N/A	0.979	0.1%	N/A	N/A	-3.4%
United	1.014	1.015	0.927	1.007	0.1%	-8.7%	8.7%	-0.7%
All Members								
Magnolia	0.992	0.992	0.995	0.992	0.0%	0.2%	-0.2%	0.0%
Molina	0.969	0.969	0.972	0.968	-0.1%	0.3%	-0.3%	-0.1%
United	1.021	1.021	1.018	1.021	0.0%	-0.4%	0.3%	0.0%
Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Oct 2021	Oct 2021	Oct 2021	Apr 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	SFY 2021	SFY 2021	CY 2021	CY 2021				
Scored Members								
Magnolia	0.987	0.986	0.975	0.965	-0.1%	-1.1%	-1.0%	-2.2%
Molina	0.930	0.926	0.936	0.932	-0.4%	1.0%	-0.4%	0.3%
United	1.041	1.042	1.048	1.056	0.2%	0.6%	0.7%	1.5%
Unscored Members								
Magnolia	0.990	0.991	1.000	0.988	0.1%	0.9%	-1.2%	-0.2%
Molina	0.991	0.992	N/A	1.002	0.1%	N/A	N/A	1.1%
United	1.015	1.014	N/A	1.005	-0.1%	N/A	N/A	-1.0%
All Members								
Magnolia	0.987	0.986	0.975	0.966	0.0%	-1.2%	-1.0%	-2.1%
Molina	0.932	0.929	0.936	0.935	-0.3%	0.8%	-0.1%	0.3%
United	1.040	1.042	1.048	1.055	0.2%	0.6%	0.7%	1.4%

Exhibit 3A
Mississippi Division of Medicaid
Risk Adjustment Results
Non-Newborn SSI / Disabled - North Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.077	N/A	9,911	100.00%	N/A	2,190	100.00%	N/A	8,129	100.00%	N/A	20,230	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	298	3.01%	N/A	150	6.85%	N/A	262	3.22%	N/A	710	3.51%
Age 5 to 14 Female	0.089	N/A	502	5.07%	N/A	109	4.98%	N/A	439	5.40%	N/A	1,050	5.19%
Age 5 to 14 Male	0.067	N/A	1,130	11.40%	N/A	251	11.46%	N/A	893	10.99%	N/A	2,274	11.24%
Age 15 to 24 Female	0.108	N/A	456	4.60%	N/A	117	5.34%	N/A	422	5.19%	N/A	995	4.92%
Age 15 to 24 Male	0.000	N/A	827	8.34%	N/A	249	11.37%	N/A	760	9.35%	N/A	1,836	9.08%
Age 25 to 44 Female	0.206	N/A	1,159	11.69%	N/A	224	10.23%	N/A	910	11.31%	N/A	2,293	11.33%
Age 25 to 44 Male	0.053	N/A	1,200	12.11%	N/A	225	10.27%	N/A	1,006	12.38%	N/A	2,431	12.02%
Age 45 to 64 Female	0.109	N/A	2,541	25.64%	N/A	390	17.81%	N/A	1,922	23.64%	N/A	4,853	23.99%
Age 45 to 64 Male	0.111	N/A	1,777	17.93%	N/A	474	21.64%	N/A	1,501	18.46%	N/A	3,752	18.55%
Age 65 and Older Male and Female	0.006	N/A	21	0.21%	N/A	1	0.05%	N/A	14	0.17%	N/A	36	0.18%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	28	0.28%	N/A	37	1.69%	N/A	45	0.55%	N/A	110	0.54%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	34	0.34%	N/A	27	1.23%	N/A	46	0.57%	N/A	107	0.53%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	9,849	99.37%	N/A	2,126	97.08%	N/A	8,038	98.88%	N/A	20,013	98.93%
Disease Categories													
Cancer, very high	4.640	12	50	0.50%	4	21	0.96%	7	54	0.66%	8	125	0.62%
Cancer, high	1.263	23	116	1.17%	13	34	1.55%	30	73	0.90%	26	223	1.10%
Cancer, medium	0.649	27	192	1.94%	31	34	1.55%	23	200	2.46%	27	426	2.11%
Cancer, low	0.148	46	95	0.96%	47	22	1.00%	46	106	1.30%	45	223	1.10%
Cardiovascular, very high	1.401	34	49	0.49%	32	11	0.50%	33	46	0.57%	34	106	0.52%
Cardiovascular, medium	0.570	2	1,022	10.31%	2	208	9.50%	2	733	9.02%	2	1,963	9.70%
Cardiovascular, medium - child	0.188	49	59	0.60%	46	21	0.96%	49	50	0.62%	49	130	0.64%
Cardiovascular, low	0.192	19	910	9.18%	20	195	8.90%	19	741	9.12%	20	1,846	9.13%
Cardiovascular, extra low	0.106	6	3,162	31.90%	8	609	27.81%	6	2,534	31.17%	6	6,305	31.17%
Cerebrovascular, low	0.153	44	158	1.59%	42	46	2.10%	43	140	1.72%	44	344	1.70%
CNS, medium to high	0.589	18	298	3.01%	17	67	3.06%	17	248	3.05%	19	613	3.03%
CNS, high - child	1.358	40	26	0.26%	44	4	0.18%	44	15	0.18%	42	45	0.22%
CNS, low	0.218	5	1,711	17.26%	6	343	15.66%	4	1,397	17.19%	5	3,451	17.06%
DD, low to medium	0.153	39	353	3.56%	37	78	3.56%	34	379	4.66%	38	810	4.00%
Diabetes, type 1 high	1.267	47	10	0.10%	49	2	0.09%	45	14	0.17%	46	26	0.13%
Diabetes, type 1 medium	0.683	33	128	1.29%	35	21	0.96%	32	100	1.23%	32	249	1.23%
Diabetes, type 2 medium	0.416	9	630	6.36%	18	93	4.25%	13	417	5.13%	10	1,140	5.64%
Diabetes, type 2 low	0.177	16	1,097	11.07%	24	189	8.63%	16	857	10.54%	18	2,143	10.59%
Eye, low	0.142	48	86	0.87%	48	21	0.96%	48	69	0.85%	48	176	0.87%
Eye, very low	0.107	31	934	9.42%	38	109	4.98%	35	538	6.62%	33	1,581	7.82%
Genital, extra low	0.070	43	377	3.80%	43	83	3.79%	42	317	3.90%	43	777	3.84%
Gastro, medium to high	0.523	8	539	5.44%	7	125	5.71%	9	429	5.28%	9	1,093	5.40%
Gastro, high - child	1.264	30	91	0.92%	26	24	1.10%	29	76	0.93%	30	191	0.94%
Gastro, low	0.127	10	1,893	19.10%	16	319	14.57%	12	1,435	17.65%	12	3,647	18.03%
Hematological, very high to extra high	1.633	24	89	0.90%	33	9	0.41%	22	84	1.03%	23	182	0.90%
Hematological, medium	0.705	32	127	1.28%	30	37	1.69%	31	105	1.29%	31	269	1.33%
Hematological, low	0.491	38	111	1.12%	36	28	1.28%	36	114	1.40%	37	253	1.25%
AIDS, high	1.699	4	232	2.34%	3	58	2.65%	5	176	2.17%	4	466	2.30%
HIV, medium	1.210	42	24	0.24%	41	6	0.27%	41	22	0.27%	41	52	0.26%
Infectious, low to medium	0.435	21	351	3.54%	14	98	4.47%	24	291	3.58%	21	740	3.66%
Metabolic, high	1.035	22	143	1.44%	27	28	1.28%	20	137	1.69%	22	308	1.52%
Metabolic, high - child	0.158	51	32	0.32%	50	7	0.32%	51	35	0.43%	51	74	0.37%
Metabolic, medium	0.396	25	351	3.54%	21	92	4.20%	26	289	3.56%	24	732	3.62%
Metabolic, very low	0.138	26	998	10.07%	25	221	10.09%	25	840	10.33%	25	2,059	10.18%
Pregnancy, incomplete	0.395	45	36	0.36%	45	11	0.50%	50	20	0.25%	47	67	0.33%
Psychiatric, high	0.677	3	602	6.07%	5	126	5.75%	3	536	6.59%	3	1,264	6.25%
Psychiatric, medium low to medium	0.264	1	2,559	25.82%	1	579	26.44%	1	2,206	27.14%	1	5,344	26.42%
Psychiatric, low	0.167	14	1,240	12.51%	15	250	11.42%	14	1,016	12.50%	14	2,506	12.39%
Pulmonary, very high	1.167	13	193	1.95%	10	46	2.10%	21	121	1.49%	13	360	1.78%
Pulmonary, very high - child	1.465	37	39	0.39%	29	18	0.82%	38	34	0.42%	36	91	0.45%
Pulmonary, high	0.593	50	16	0.16%	51	0	0.00%	47	18	0.22%	50	34	0.17%
Pulmonary, medium	0.475	17	382	3.85%	12	100	4.57%	15	340	4.18%	16	822	4.06%
Pulmonary, low	0.178	7	1,871	18.88%	9	333	15.21%	8	1,321	16.25%	7	3,525	17.42%
Renal, extra high	3.856	20	40	0.40%	23	9	0.41%	10	55	0.68%	15	104	0.51%
Renal, very high	0.489	28	252	2.54%	28	55	2.51%	27	217	2.67%	28	524	2.59%
Renal, low to medium	0.132	36	436	4.40%	39	80	3.65%	39	333	4.10%	39	849	4.20%
Skeletal, medium	0.308	15	642	6.48%	19	122	5.57%	18	469	5.77%	17	1,233	6.09%
Skeletal, very low to low	0.149	11	1,604	16.18%	11	326	14.89%	11	1,229	15.12%	11	3,159	15.62%
Skin, low - high	0.254	41	132	1.33%	40	32	1.46%	40	125	1.54%	40	289	1.43%
Skin, very low	0.090	35	750	7.57%	34	161	7.35%	37	590	7.26%	35	1,501	7.42%
Substance abuse, very low to low	0.153	29	769	7.76%	22	228	10.41%	28	661	8.13%	29	1,658	8.20%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,864	18.81%	N/A	460	21.00%	N/A	1,474	18.13%	N/A	3,798	18.77%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	1	1.49%	N/A	2	2.82%	N/A	5	4.42%	N/A	8	3.19%
Age 5 to 14 Female	0.660	N/A	3	4.48%	N/A	1	1.41%	N/A	3	2.65%	N/A	7	2.79%
Age 5 to 14 Male	0.572	N/A	4	5.97%	N/A	6	8.45%	N/A	8	7.08%	N/A	18	7.17%
Age 15 to 24 Female	0.746	N/A	5	7.46%	N/A	2	2.82%	N/A	6	5.31%	N/A	13	5.18%
Age 15 to 24 Male	0.523	N/A	4	5.97%	N/A	6	8.45%	N/A	9	7.96%	N/A	19	7.57%
Age 25 to 44 Female	1.154	N/A	8	11.94%	N/A	13	18.31%	N/A	16	14.16%	N/A	37	14.74%
Age 25 to 44 Male	0.821	N/A	5	7.46%	N/A	6	8.45%	N/A	18	15.93%	N/A	29	11.55%
Age 45 to 64 Female	1.314	N/A	13	19.40%	N/A	17	23.94%	N/A	24	21.24%	N/A	54	21.51%
Age 45 to 64 Male	1.185	N/A	24	35.82%	N/A	18	25.35%	N/A	24	21.24%	N/A	66	26.29%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%

Risk Adjustment Results				
Scored Members		Magnolia	Molina	United
Member Months		9,911	2,190	8,129
Unadjusted Plan Factor		0.992	0.990	0.993
Budget Neutral Plan Factor		1.000	0.998	1.001
Unscored Members		Total		
Member Months		67	71	113
Unadjusted Plan Factor		1.046	1.050	1.013
Budget Neutral Plan Factor		1.013	1.017	0.982
Total Members		Total		
Member Months		9,978	2,261	8,242
Unadjusted Plan Factor		0.993	0.991	0.993
Budget Neutral Plan Factor		1.000	0.998	1.001

Exhibit 3B

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - Central Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.077	N/A	10,844	100.00%	N/A	2,402	100.00%	N/A	8,308	100.00%	N/A	21,554	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	356	3.28%	N/A	191	7.95%	N/A	311	3.74%	N/A	858	3.98%
Age 5 to 14 Female	0.089	N/A	551	5.08%	N/A	119	4.95%	N/A	442	5.32%	N/A	1,112	5.16%
Age 5 to 14 Male	0.067	N/A	1,243	11.46%	N/A	269	11.20%	N/A	962	11.58%	N/A	2,474	11.48%
Age 15 to 24 Female	0.108	N/A	528	4.87%	N/A	143	5.95%	N/A	444	5.34%	N/A	1,115	5.17%
Age 15 to 24 Male	0.000	N/A	977	9.01%	N/A	259	10.78%	N/A	762	9.17%	N/A	1,998	9.27%
Age 25 to 44 Female	0.206	N/A	1,245	11.48%	N/A	177	7.37%	N/A	879	10.58%	N/A	2,301	10.68%
Age 25 to 44 Male	0.053	N/A	1,267	11.68%	N/A	289	12.03%	N/A	1,038	12.49%	N/A	2,594	12.03%
Age 45 to 64 Female	0.109	N/A	2,608	24.05%	N/A	403	16.78%	N/A	1,810	21.79%	N/A	4,821	22.37%
Age 45 to 64 Male	0.111	N/A	2,002	18.46%	N/A	549	22.86%	N/A	1,627	19.58%	N/A	4,178	19.38%
Age 65 and Older Male and Female	0.006	N/A	67	0.62%	N/A	3	0.12%	N/A	33	0.40%	N/A	103	0.48%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	35	0.32%	N/A	27	1.12%	N/A	46	0.55%	N/A	108	0.50%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	49	0.45%	N/A	39	1.62%	N/A	53	0.64%	N/A	141	0.65%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	10,760	99.23%	N/A	2,336	97.25%	N/A	8,209	98.81%	N/A	21,305	98.84%
Disease Categories													
Cancer, very high	4.640	11	60	0.55%	3	32	1.33%	17	36	0.43%	10	128	0.59%
Cancer, high	1.263	25	126	1.16%	17	34	1.42%	21	110	1.32%	23	270	1.25%
Cancer, medium	0.649	28	230	2.12%	30	40	1.67%	23	209	2.52%	25	479	2.22%
Cancer, low	0.148	46	131	1.21%	45	28	1.17%	48	66	0.79%	46	225	1.04%
Cardiovascular, very high	1.401	32	81	0.75%	41	7	0.29%	32	49	0.59%	32	137	0.64%
Cardiovascular, medium	0.570	3	1,073	9.89%	4	221	9.20%	3	734	8.83%	3	2,028	9.41%
Cardiovascular, medium - child	0.188	50	51	0.47%	50	15	0.62%	50	47	0.57%	50	113	0.52%
Cardiovascular, low	0.192	22	919	8.47%	15	235	9.78%	24	698	8.40%	22	1,852	8.59%
Cardiovascular, extra low	0.106	7	3,576	32.98%	9	642	26.73%	6	2,584	31.10%	6	6,802	31.56%
Cerebrovascular, low	0.153	43	276	2.55%	40	66	2.75%	43	173	2.08%	43	515	2.39%
CNS, medium to high	0.589	16	412	3.80%	14	80	3.33%	13	295	3.55%	15	787	3.65%
CNS, high - child	1.358	39	42	0.39%	46	3	0.12%	42	25	0.30%	41	70	0.32%
CNS, low	0.218	5	2,049	18.90%	6	454	18.90%	5	1,525	18.36%	5	4,028	18.69%
DD, low to medium	0.153	36	497	4.58%	32	127	5.29%	34	380	4.57%	35	1,004	4.66%
Diabetes, type 1 high	1.267	45	21	0.19%	43	7	0.29%	49	7	0.08%	45	35	0.16%
Diabetes, type 1 medium	0.683	34	131	1.21%	34	21	0.87%	36	81	0.97%	34	233	1.08%
Diabetes, type 2 medium	0.416	10	774	7.14%	20	99	4.12%	11	432	5.20%	11	1,305	6.05%
Diabetes, type 2 low	0.177	21	1,111	10.25%	24	197	8.20%	20	895	10.77%	20	2,203	10.22%
Eye, low	0.142	47	129	1.19%	48	23	0.96%	46	80	0.96%	47	232	1.08%
Eye, very low	0.107	30	1,101	10.15%	35	126	5.25%	33	556	6.69%	33	1,783	8.27%
Genital, extra low	0.070	44	412	3.80%	44	75	3.12%	44	309	3.72%	44	796	3.69%
Gastro, medium to high	0.523	9	645	5.95%	7	156	6.49%	7	463	5.57%	8	1,264	5.86%
Gastro, high - child	1.264	33	88	0.81%	29	21	0.87%	30	66	0.79%	31	175	0.81%
Gastro, low	0.127	12	2,054	18.94%	19	327	13.61%	16	1,320	15.89%	12	3,701	17.17%
Hematological, very high to extra high	1.633	20	124	1.14%	31	13	0.54%	22	84	1.01%	21	221	1.03%
Hematological, medium	0.705	31	165	1.52%	28	39	1.62%	31	114	1.37%	30	318	1.48%
Hematological, low	0.491	38	146	1.35%	33	39	1.62%	38	96	1.16%	37	281	1.30%
AIDS, high	1.699	4	322	2.97%	5	62	2.58%	4	244	2.94%	4	628	2.91%
HIV, medium	1.210	41	39	0.36%	38	9	0.37%	40	35	0.42%	40	83	0.39%
Infectious, low to medium	0.435	24	373	3.44%	21	94	3.91%	29	246	2.96%	26	713	3.31%
Metabolic, high	1.035	19	196	1.81%	22	38	1.58%	19	159	1.91%	19	393	1.82%
Metabolic, high - child	0.158	51	55	0.51%	51	10	0.42%	51	46	0.55%	51	111	0.51%
Metabolic, medium	0.396	29	373	3.44%	26	86	3.58%	26	283	3.41%	29	742	3.44%
Metabolic, very low	0.138	26	1,126	10.38%	25	251	10.45%	28	784	9.44%	27	2,161	10.03%
Pregnancy, incomplete	0.395	49	28	0.26%	47	9	0.37%	49	28	0.34%	49	65	0.30%
Psychiatric, high	0.677	2	1,045	9.64%	2	226	9.41%	2	757	9.11%	2	2,028	9.41%
Psychiatric, medium low to medium	0.264	1	3,200	29.51%	1	602	25.06%	1	2,248	27.06%	1	6,050	28.07%
Psychiatric, low	0.167	18	1,252	11.55%	12	304	12.66%	10	1,127	13.57%	17	2,683	12.45%
Pulmonary, very high	1.167	13	214	1.97%	23	30	1.25%	15	145	1.75%	16	389	1.80%
Pulmonary, very high - child	1.465	40	35	0.32%	37	8	0.33%	39	30	0.36%	39	73	0.34%
Pulmonary, high	0.593	48	23	0.21%	49	5	0.21%	45	24	0.29%	48	52	0.24%
Pulmonary, medium	0.475	17	459	4.23%	11	122	5.08%	18	351	4.22%	18	932	4.32%
Pulmonary, low	0.178	8	1,935	17.84%	10	346	14.40%	8	1,328	15.98%	9	3,609	16.74%
Renal, extra high	3.856	6	99	0.91%	8	18	0.75%	9	55	0.66%	7	172	0.80%
Renal, very high	0.489	27	315	2.90%	27	68	2.83%	27	225	2.71%	28	608	2.82%
Renal, low to medium	0.132	35	581	5.36%	39	79	3.29%	37	367	4.42%	38	1,027	4.76%
Skeletal, medium	0.308	14	807	7.44%	18	136	5.66%	14	561	6.75%	14	1,504	6.98%
Skeletal, very low to low	0.149	15	1,644	15.16%	13	327	13.61%	12	1,185	14.26%	13	3,156	14.64%
Skin, low - high	0.254	42	180	1.66%	42	37	1.54%	41	144	1.73%	42	361	1.67%
Skin, very low	0.090	37	831	7.66%	36	131	5.45%	35	617	7.43%	36	1,579	7.33%
Substance abuse, very low to low	0.153	23	1,069	9.86%	16	282	11.74%	25	829	9.98%	24	2,180	10.11%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,683	15.52%	N/A	469	19.53%	N/A	1,478	17.79%	N/A	3,630	16.84%

	Risk Weight	Magnolia			Unscored Members			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months			
Demographic Categories																
Age 1 to 4	1.113	N/A	0	0.00%	N/A	3	5.00%	N/A	2	2.15%	N/A	5	2.28%			
Age 5 to 14 Female	0.660	N/A	5	7.58%	N/A	3	5.00%	N/A	2	2.15%	N/A	10	4.57%			
Age 5 to 14 Male	0.572	N/A	7	10.61%	N/A	7	11.67%	N/A	8	8.60%	N/A	22	10.05%			
Age 15 to 24 Female	0.746	N/A	2	3.03%	N/A	5	8.33%	N/A	0	0.00%	N/A	7	3.20%			
Age 15 to 24 Male	0.523	N/A	4	6.06%	N/A	5	8.33%	N/A	12	12.90%	N/A	21	9.59%			
Age 25 to 44 Female	1.154	N/A	7	10.61%	N/A	8	13.33%	N/A	9	9.68%	N/A	24	10.96%			
Age 25 to 44 Male	0.821	N/A	9	13.64%	N/A	4	6.67%	N/A	6	6.45%	N/A	19	8.68%			
Age 45 to 64 Female	1.314	N/A	14	21.21%	N/A	12	20.00%	N/A	29	31.18%	N/A	55	25.11%			
Age 45 to 64 Male	1.185	N/A	18	27.27%	N/A	13	21.67%	N/A	25	26.88%	N/A	56	25.57%			
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%			

Risk Adjustment Results				
Scored Members		Magnolia	Molina	United
Member Months		10,844	2,402	8,308
Unadjusted Plan Factor		1.095	1.032	1.026
Budget Neutral Plan Factor		1.032	0.973	0.966
Unscored Members				
Member Months		66	60	93
Unadjusted Plan Factor		1.001	0.989	1.048
Budget Neutral Plan Factor		0.984	0.972	1.030
Total Members				
Member Months		10,910	2,462	8,401
Unadjusted Plan Factor		1.095	1.032	1.026
Budget Neutral Plan Factor		1.032	0.973	0.967

Exhibit 3C

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - South Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.077	N/A	7,459	100.00%	N/A	2,159	100.00%	N/A	7,552	100.00%	N/A	17,170	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	265	3.55%	N/A	145	6.72%	N/A	240	3.18%	N/A	650	3.79%
Age 5 to 14 Female	0.089	N/A	428	5.74%	N/A	102	4.72%	N/A	417	5.52%	N/A	947	5.52%
Age 5 to 14 Male	0.067	N/A	949	12.72%	N/A	230	10.65%	N/A	911	12.06%	N/A	2,090	12.17%
Age 15 to 24 Female	0.108	N/A	347	4.65%	N/A	156	7.23%	N/A	370	4.90%	N/A	873	5.08%
Age 15 to 24 Male	0.000	N/A	581	7.79%	N/A	247	11.44%	N/A	654	8.66%	N/A	1,482	8.63%
Age 25 to 44 Female	0.206	N/A	738	9.89%	N/A	176	8.15%	N/A	778	10.30%	N/A	1,692	9.85%
Age 25 to 44 Male	0.053	N/A	772	10.35%	N/A	189	8.75%	N/A	821	10.87%	N/A	1,782	10.38%
Age 45 to 64 Female	0.109	N/A	1,969	26.40%	N/A	461	21.35%	N/A	1,867	24.72%	N/A	4,297	25.03%
Age 45 to 64 Male	0.111	N/A	1,386	18.58%	N/A	451	20.89%	N/A	1,475	19.53%	N/A	3,312	19.29%
Age 65 and Older Male and Female	0.006	N/A	24	0.32%	N/A	2	0.09%	N/A	19	0.25%	N/A	45	0.26%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	30	0.40%	N/A	40	1.85%	N/A	40	0.53%	N/A	110	0.64%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	25	0.34%	N/A	49	2.27%	N/A	52	0.69%	N/A	126	0.73%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	7,404	99.26%	N/A	2,070	95.88%	N/A	7,460	98.78%	N/A	16,934	98.63%
Disease Categories													
Cancer, very high	4.640	9	52	0.70%	3	24	1.11%	12	43	0.57%	8	119	0.69%
Cancer, high	1.263	21	110	1.47%	19	35	1.62%	22	104	1.38%	22	249	1.45%
Cancer, medium	0.649	29	140	1.88%	32	32	1.49%	25	172	2.28%	29	344	2.00%
Cancer, low	0.148	46	111	1.49%	46	22	1.02%	46	93	1.23%	46	226	1.32%
Cardiovascular, very high	1.401	32	54	0.72%	34	14	0.65%	38	35	0.46%	33	103	0.60%
Cardiovascular, medium	0.570	2	772	10.35%	2	238	11.02%	2	730	9.67%	2	1,740	10.13%
Cardiovascular, medium - child	0.188	51	33	0.44%	51	8	0.37%	51	27	0.36%	51	68	0.40%
Cardiovascular, low	0.192	19	772	10.35%	21	205	9.50%	20	759	10.05%	20	1,736	10.11%
Cardiovascular, extra low	0.106	8	2,338	31.34%	8	589	27.28%	7	2,340	30.99%	7	5,267	30.68%
Cerebrovascular, low	0.153	43	197	2.64%	42	47	2.18%	43	164	2.17%	43	408	2.38%
CNS, medium to high	0.589	17	305	4.09%	16	82	3.80%	14	305	4.04%	16	692	4.03%
CNS, high - child	1.358	42	25	0.34%	43	4	0.19%	41	26	0.34%	42	55	0.32%
CNS, low	0.218	4	1,557	20.87%	5	389	18.02%	4	1,477	19.56%	4	3,423	19.94%
DD, low to medium	0.153	35	415	5.56%	36	95	4.40%	33	408	5.40%	35	918	5.35%
Diabetes, type 1 high	1.267	41	27	0.36%	44	4	0.19%	45	13	0.17%	44	44	0.26%
Diabetes, type 1 medium	0.683	34	103	1.38%	38	20	0.93%	32	100	1.32%	32	223	1.30%
Diabetes, type 2 medium	0.416	11	509	6.82%	12	130	6.02%	15	427	5.65%	13	1,066	6.21%
Diabetes, type 2 low	0.177	24	739	9.91%	24	168	7.78%	23	713	9.44%	24	1,620	9.44%
Eye, low	0.142	47	65	0.87%	50	11	0.51%	48	59	0.78%	48	135	0.79%
Eye, very low	0.107	33	697	9.34%	40	112	5.19%	37	470	6.22%	36	1,279	7.45%
Genital, extra low	0.070	45	312	4.18%	45	71	3.29%	44	285	3.77%	45	668	3.89%
Gastro, medium to high	0.523	6	564	7.56%	6	159	7.36%	5	561	7.43%	5	1,284	7.48%
Gastro, high - child	1.264	31	60	0.80%	31	17	0.79%	31	63	0.83%	31	140	0.82%
Gastro, low	0.127	14	1,562	20.94%	17	376	17.42%	16	1,379	18.26%	15	3,317	19.32%
Hematological, very high to extra high	1.633	25	73	0.98%	29	15	0.69%	27	64	0.85%	25	152	0.89%
Hematological, medium	0.705	30	127	1.70%	26	41	1.90%	30	118	1.56%	30	286	1.67%
Hematological, low	0.491	38	117	1.57%	33	40	1.85%	35	110	1.46%	37	267	1.56%
AIDS, high	1.699	5	178	2.39%	7	48	2.22%	6	162	2.15%	6	388	2.26%
HIV, medium	1.210	44	19	0.25%	30	18	0.83%	39	32	0.42%	41	69	0.40%
Infectious, low to medium	0.435	22	302	4.05%	18	108	5.00%	19	342	4.53%	21	752	4.38%
Metabolic, high	1.035	23	127	1.70%	23	36	1.67%	24	121	1.60%	23	284	1.65%
Metabolic, high - child	0.158	50	43	0.58%	49	11	0.51%	50	43	0.57%	50	97	0.56%
Metabolic, medium	0.396	26	289	3.87%	25	73	3.38%	26	264	3.50%	26	626	3.65%
Metabolic, very low	0.138	28	783	10.50%	27	202	9.36%	29	685	9.07%	28	1,670	9.73%
Pregnancy, incomplete	0.395	48	21	0.28%	48	6	0.28%	49	21	0.28%	49	48	0.28%
Psychiatric, high	0.677	3	604	8.10%	4	161	7.46%	3	568	7.52%	3	1,333	7.76%
Psychiatric, medium low to medium	0.264	1	2,325	31.17%	1	591	27.37%	1	2,286	30.27%	1	5,202	30.30%
Psychiatric, low	0.167	16	1,109	14.87%	15	293	13.57%	13	1,180	15.63%	14	2,582	15.04%
Pulmonary, very high	1.167	10	195	2.61%	10	52	2.41%	9	186	2.46%	10	433	2.52%
Pulmonary, very high - child	1.465	39	29	0.39%	39	9	0.42%	42	19	0.25%	40	57	0.33%
Pulmonary, high	0.593	49	12	0.16%	47	5	0.23%	47	18	0.24%	47	35	0.20%
Pulmonary, medium	0.475	18	367	4.92%	11	122	5.65%	17	363	4.81%	17	852	4.96%
Pulmonary, low	0.178	7	1,406	18.85%	9	343	15.89%	8	1,297	17.17%	9	3,046	17.74%
Renal, extra high	3.856	12	54	0.72%	22	10	0.46%	21	37	0.49%	18	101	0.59%
Renal, very high	0.489	27	229	3.07%	28	55	2.55%	28	211	2.79%	27	495	2.88%
Renal, low to medium	0.132	37	446	5.98%	37	107	4.96%	36	401	5.31%	38	954	5.56%
Skeletal, medium	0.308	13	660	8.85%	13	162	7.50%	11	649	8.59%	11	1,471	8.57%
Skeletal, very low to low	0.149	15	1,296	17.37%	14	331	15.33%	10	1,425	18.87%	12	3,052	17.78%
Skin, low - high	0.254	40	150	2.01%	41	47	2.18%	40	145	1.92%	39	342	1.99%
Skin, very low	0.090	36	697	9.34%	35	185	8.57%	34	687	9.10%	34	1,569	9.14%
Substance abuse, very low to low	0.153	20	948	12.71%	20	286	13.25%	18	999	13.23%	19	2,233	13.01%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,178	15.79%	N/A	427	19.78%	N/A	1,234	16.34%	N/A	2,839	16.53%

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 4	1.113	N/A	0	0.00%	N/A	4	5.33%	N/A	0	0.00%	N/A	4	1.63%
Age 5 to 14 Female	0.660	N/A	4	5.80%	N/A	2	2.67%	N/A	2	1.96%	N/A	8	3.25%
Age 5 to 14 Male	0.572	N/A	5	7.25%	N/A	5	6.67%	N/A	10	9.80%	N/A	20	8.13%
Age 15 to 24 Female	0.746	N/A	5	7.25%	N/A	2	2.67%	N/A	5	4.90%	N/A	12	4.88%
Age 15 to 24 Male	0.523	N/A	5	7.25%	N/A	5	6.67%	N/A	12	11.76%	N/A	22	8.94%
Age 25 to 44 Female	1.154	N/A	12	17.39%	N/A	11	14.67%	N/A	9	8.82%	N/A	32	13.01%
Age 25 to 44 Male	0.821	N/A	8	11.59%	N/A	6	8.00%	N/A	13	12.75%	N/A	27	10.98%
Age 45 to 64 Female	1.314	N/A	20	28.99%	N/A	21	28.00%	N/A	20	19.61%	N/A	61	24.80%
Age 45 to 64 Male	1.185	N/A	10	14.49%	N/A	19	25.33%	N/A	31	30.39%	N/A	60	24.39%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		7,459	2,159	7,552
Unadjusted Plan Factor		1.141	1.085	1.078
Budget Neutral Plan Factor		1.031	0.981	0.975
Unscored Members				
Member Months		69	75	102
Unadjusted Plan Factor		1.020	1.073	0.991
Budget Neutral Plan Factor		0.996	1.047	0.968
Total Members				
Member Months		7,528	2,234	7,654
Unadjusted Plan Factor		1.139	1.086	1.077
Budget Neutral Plan Factor		1.031	0.983	0.975

Exhibit 3D
Mississippi Division of Medicaid
Risk Adjustment Results
MA Adult - North Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

		Scored Members											
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	3,716	100.00%	N/A	2,305	100.00%	N/A	3,424	100.00%	N/A	9,445	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	248	6.67%	N/A	275	11.93%	N/A	314	9.17%	N/A	837	8.86%
Age 15 to 24 Male	0.000	N/A	8	0.22%	N/A	7	0.30%	N/A	6	0.18%	N/A	21	0.22%
Age 25 to 44 Female	0.236	N/A	2,780	74.81%	N/A	1,668	72.36%	N/A	2,484	72.55%	N/A	6,932	73.39%
Age 25 to 44 Male	0.058	N/A	230	6.19%	N/A	160	6.94%	N/A	213	6.22%	N/A	603	6.38%
Age 45 and Older Female	0.245	N/A	373	10.04%	N/A	155	6.72%	N/A	336	9.81%	N/A	864	9.15%
Age 45 and Older Male	0.365	N/A	77	2.07%	N/A	40	1.74%	N/A	71	2.07%	N/A	188	1.99%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	283	7.62%	N/A	238	10.33%	N/A	267	7.80%	N/A	788	8.34%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	61	1.64%	N/A	67	2.91%	N/A	89	2.60%	N/A	217	2.30%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,372	90.74%	N/A	2,000	86.77%	N/A	3,068	89.60%	N/A	8,440	89.36%
Disease Categories													
Cancer, high to very high	3.752	14	21	0.57%	14	11	0.48%	8	25	0.73%	10	57	0.60%
Cancer, medium	0.997	25	34	0.91%	21	24	1.04%	23	34	0.99%	23	92	0.97%
Cancer, low	0.364	37	17	0.46%	37	8	0.35%	37	13	0.38%	38	38	0.40%
Cardiovascular, very high	1.914	40	1	0.03%	38	1	0.04%	38	2	0.06%	39	4	0.04%
Cardiovascular, medium	0.601	11	145	3.90%	11	80	3.47%	11	130	3.80%	11	355	3.76%
Cardiovascular, low	0.315	18	183	4.92%	19	94	4.08%	17	158	4.61%	18	435	4.61%
Cardiovascular, extra low	0.122	2	1,097	29.52%	4	560	24.30%	4	893	26.08%	4	2,550	27.00%
CNS, medium to high	0.836	28	30	0.81%	30	15	0.65%	25	39	1.14%	27	84	0.89%
CNS, low	0.419	9	239	6.43%	6	141	6.12%	6	244	7.13%	7	624	6.61%
Diabetes, type 1 high	2.432	36	3	0.08%	36	2	0.09%	39	1	0.03%	37	6	0.06%
Diabetes, type 1 medium	1.612	16	37	1.00%	18	19	0.82%	20	26	0.76%	19	82	0.87%
Diabetes, type 2 medium	1.043	15	69	1.86%	17	30	1.30%	15	61	1.78%	15	160	1.69%
Diabetes, type 2 low	0.375	7	293	7.88%	8	142	6.16%	9	233	6.80%	8	668	7.07%
DD, low to medium	0.613	39	5	0.13%	40	2	0.09%	40	0	0.00%	40	7	0.07%
Eye, very low to low	0.324	23	108	2.91%	32	37	1.61%	30	69	2.02%	29	214	2.27%
Genital, extra low	0.118	27	249	6.70%	27	166	7.20%	27	230	6.72%	26	645	6.83%
Gastro, medium to high	0.933	8	109	2.93%	7	58	2.52%	10	86	2.51%	9	253	2.68%
Gastro, low	0.224	3	579	15.58%	9	234	10.15%	5	459	13.41%	5	1,272	13.47%
Hematological, low to extra high	0.318	33	50	1.35%	31	38	1.65%	31	61	1.78%	33	149	1.58%
AIDS, high	1.445	13	59	1.59%	15	28	1.21%	14	49	1.43%	14	136	1.44%
HIV, medium	1.320	38	3	0.08%	39	1	0.04%	35	10	0.29%	36	14	0.15%
Infectious, low to medium	0.578	17	100	2.69%	16	62	2.69%	19	76	2.22%	17	238	2.52%
Metabolic, high	0.857	32	23	0.62%	26	25	1.08%	26	33	0.96%	28	81	0.86%
Metabolic, medium	0.393	34	39	1.05%	35	13	0.56%	34	40	1.17%	34	92	0.97%
Metabolic, very low	0.138	29	170	4.57%	29	92	3.99%	33	135	3.94%	31	397	4.20%
Pregnancy, complete	0.160	19	326	8.77%	13	296	12.84%	16	334	9.75%	16	956	10.12%
Pregnancy, incomplete	0.997	5	121	3.26%	1	104	4.51%	3	130	3.80%	2	355	3.76%
Psychiatric, high	0.972	26	33	0.89%	23	23	1.00%	28	26	0.76%	25	82	0.87%
Psychiatric, medium	0.513	24	67	1.80%	24	43	1.87%	22	73	2.13%	22	183	1.94%
Psychiatric, medium low	0.321	4	393	10.58%	3	233	10.11%	2	427	12.47%	3	1,053	11.15%
Psychiatric, low	0.212	6	526	14.16%	5	313	13.58%	7	468	13.67%	6	1,307	13.84%
Pulmonart, medium to high	0.600	20	86	2.31%	22	38	1.65%	18	76	2.22%	20	200	2.12%
Pulmonary, low	0.227	10	394	10.60%	12	209	9.07%	12	329	9.61%	13	932	9.87%
Renal, medium to extra high	0.855	31	26	0.70%	28	16	0.69%	29	27	0.79%	30	69	0.73%
Renal, low	0.304	30	76	2.05%	33	32	1.39%	32	62	1.81%	32	170	1.80%
Skeletal, medium	0.586	12	147	3.96%	10	89	3.86%	13	126	3.68%	12	362	3.83%
Skeletal, very low to low	0.362	1	531	14.29%	2	263	11.41%	1	506	14.78%	1	1,300	13.76%
Skin, low to high	0.941	35	12	0.32%	34	7	0.30%	36	13	0.38%	35	32	0.34%
Skin, very low	0.132	22	269	7.24%	25	163	7.07%	24	251	7.33%	24	683	7.23%
Substance abuse, low	0.289	21	153	4.12%	20	95	4.12%	21	134	3.91%	21	382	4.04%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,106	29.76%	N/A	734	31.84%	N/A	995	29.06%	N/A	2,835	30.02%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	15	6.02%	N/A	18	8.22%	N/A	19	7.82%	N/A	52	7.31%
Age 15 to 24 Male	0.514	N/A	2	0.80%	N/A	2	0.91%	N/A	2	0.82%	N/A	6	0.84%
Age 25 to 44 Female	0.989	N/A	164	65.86%	N/A	152	69.41%	N/A	155	63.79%	N/A	471	66.24%
Age 25 to 44 Male	0.770	N/A	36	14.46%	N/A	15	6.85%	N/A	33	13.58%	N/A	84	11.81%
Age 45 and Older Female	1.353	N/A	23	9.24%	N/A	22	10.05%	N/A	28	11.52%	N/A	73	10.27%
Age 45 and Older Male	1.362	N/A	9	3.61%	N/A	10	4.57%	N/A	6	2.47%	N/A	25	3.52%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		3,716	2,305	3,424
Unadjusted Plan Factor		1.013	0.961	1.012
Budget Neutral Plan Factor		1.013	0.961	1.012
Unscored Members				
Member Months		249	219	243
Unadjusted Plan Factor		0.997	1.018	1.001
Budget Neutral Plan Factor		0.992	1.013	0.997
Total Members				
Member Months		3,965	2,524	3,667
Unadjusted Plan Factor		1.012	0.966	1.012
Budget Neutral Plan Factor		1.011	0.966	1.011

Exhibit 3E
Mississippi Division of Medicaid
Risk Adjustment Results
MA Adult - Central Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

		Scored Members											
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	4,113	100.00%	N/A	2,801	100.00%	N/A	4,057	100.00%	N/A	10,971	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	254	6.18%	N/A	294	10.50%	N/A	323	7.96%	N/A	871	7.94%
Age 15 to 24 Male	0.000	N/A	6	0.15%	N/A	9	0.32%	N/A	14	0.35%	N/A	29	0.26%
Age 25 to 44 Female	0.236	N/A	3,113	75.69%	N/A	2,138	76.33%	N/A	2,971	73.23%	N/A	8,222	74.94%
Age 25 to 44 Male	0.058	N/A	203	4.94%	N/A	147	5.25%	N/A	224	5.52%	N/A	574	5.23%
Age 45 and Older Female	0.245	N/A	450	10.94%	N/A	154	5.50%	N/A	440	10.85%	N/A	1,044	9.52%
Age 45 and Older Male	0.365	N/A	87	2.12%	N/A	59	2.11%	N/A	85	2.10%	N/A	231	2.11%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	257	6.25%	N/A	234	8.35%	N/A	335	8.26%	N/A	826	7.53%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	68	1.65%	N/A	64	2.28%	N/A	117	2.88%	N/A	249	2.27%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,788	92.10%	N/A	2,503	89.36%	N/A	3,605	88.86%	N/A	9,896	90.20%
Disease Categories													
Cancer, high to very high	3.752	18	15	0.36%	21	7	0.25%	27	8	0.20%	23	30	0.27%
Cancer, medium	0.997	25	39	0.95%	26	20	0.71%	24	35	0.86%	25	94	0.86%
Cancer, low	0.364	39	15	0.36%	38	5	0.18%	39	17	0.42%	39	37	0.34%
Cardiovascular, very high	1.914	37	4	0.10%	40	0	0.00%	37	6	0.15%	38	10	0.09%
Cardiovascular, medium	0.601	12	157	3.82%	8	104	3.71%	12	140	3.45%	12	401	3.66%
Cardiovascular, low	0.315	21	163	3.96%	18	89	3.18%	19	152	3.75%	19	404	3.68%
Cardiovascular, extra low	0.122	3	1,261	30.66%	5	707	25.24%	4	1,146	28.25%	4	3,114	28.38%
CNS, medium to high	0.836	29	36	0.88%	32	16	0.57%	30	31	0.76%	30	83	0.76%
CNS, low	0.419	7	302	7.34%	10	139	4.96%	8	268	6.61%	7	709	6.46%
Diabetes, type 1 high	2.432	38	3	0.07%	34	4	0.14%	38	3	0.07%	37	10	0.09%
Diabetes, type 1 medium	1.612	16	40	0.97%	25	14	0.50%	18	34	0.84%	18	88	0.80%
Diabetes, type 2 medium	1.043	13	87	2.12%	15	44	1.57%	13	79	1.95%	13	210	1.91%
Diabetes, type 2 low	0.375	9	306	7.44%	12	147	5.25%	7	301	7.42%	9	754	6.87%
DD, low to medium	0.613	40	3	0.07%	39	1	0.04%	40	1	0.02%	40	5	0.05%
Eye, very low to low	0.324	26	120	2.92%	27	54	1.93%	31	80	1.97%	27	254	2.32%
Genital, extra low	0.118	28	279	6.78%	22	214	7.64%	26	276	6.80%	26	769	7.01%
Gastro, medium to high	0.933	8	123	2.99%	7	73	2.61%	10	108	2.66%	8	304	2.77%
Gastro, low	0.224	6	624	15.17%	6	331	11.82%	6	571	14.07%	6	1,526	13.91%
Hematological, low to extra high	0.318	31	78	1.90%	29	49	1.75%	29	83	2.05%	31	210	1.91%
AIDS, high	1.445	14	58	1.41%	13	37	1.32%	15	50	1.23%	14	145	1.32%
HIV, medium	1.320	36	10	0.24%	37	5	0.18%	36	10	0.25%	36	25	0.23%
Infectious, low to medium	0.578	23	74	1.80%	20	46	1.64%	20	81	2.00%	22	201	1.83%
Metabolic, high	0.857	34	22	0.53%	31	17	0.61%	32	23	0.57%	32	62	0.57%
Metabolic, medium	0.393	32	55	1.34%	36	19	0.68%	35	40	0.99%	34	114	1.04%
Metabolic, very low	0.138	33	155	3.77%	33	83	2.96%	33	130	3.20%	33	368	3.35%
Pregnancy, complete	0.160	17	354	8.61%	9	391	13.96%	16	387	9.54%	16	1,132	10.32%
Pregnancy, incomplete	0.997	4	145	3.53%	1	128	4.57%	5	138	3.40%	2	411	3.75%
Psychiatric, high	0.972	19	55	1.34%	19	28	1.00%	22	42	1.04%	20	125	1.14%
Psychiatric, medium	0.513	22	93	2.26%	23	48	1.71%	21	91	2.24%	21	232	2.11%
Psychiatric, medium low	0.321	2	511	12.42%	3	284	10.14%	2	448	11.04%	3	1,243	11.33%
Psychiatric, low	0.212	5	662	16.10%	4	427	15.24%	3	672	16.56%	5	1,761	16.05%
Pulmonart, medium to high	0.600	20	88	2.14%	17	65	2.32%	17	93	2.29%	17	246	2.24%
Pulmonary, low	0.227	11	438	10.65%	11	252	9.00%	11	434	10.70%	11	1,124	10.25%
Renal, medium to extra high	0.855	27	43	1.05%	28	20	0.71%	28	33	0.81%	28	96	0.88%
Renal, low	0.304	30	93	2.26%	30	50	1.79%	25	110	2.71%	29	253	2.31%
Skeletal, medium	0.586	10	179	4.35%	14	89	3.18%	9	180	4.44%	10	448	4.08%
Skeletal, very low to low	0.362	1	576	14.00%	2	311	11.10%	1	522	12.87%	1	1,409	12.84%
Skin, low to high	0.941	35	20	0.49%	35	9	0.32%	34	17	0.42%	35	46	0.42%
Skin, very low	0.132	24	310	7.54%	24	185	6.60%	23	288	7.10%	24	783	7.14%
Substance abuse, low	0.289	15	255	6.20%	16	140	5.00%	14	264	6.51%	15	659	6.01%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,132	27.52%	N/A	874	31.20%	N/A	1,220	30.07%	N/A	3,226	29.40%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	21	6.38%	N/A	15	5.73%	N/A	25	7.67%	N/A	61	6.65%
Age 15 to 24 Male	0.514	N/A	2	0.61%	N/A	4	1.53%	N/A	3	0.92%	N/A	9	0.98%
Age 25 to 44 Female	0.989	N/A	234	71.12%	N/A	175	66.79%	N/A	210	64.42%	N/A	619	67.50%
Age 25 to 44 Male	0.770	N/A	40	12.16%	N/A	26	9.92%	N/A	38	11.66%	N/A	104	11.34%
Age 45 and Older Female	1.353	N/A	23	6.99%	N/A	33	12.60%	N/A	34	10.43%	N/A	90	9.81%
Age 45 and Older Male	1.362	N/A	9	2.74%	N/A	9	3.44%	N/A	16	4.91%	N/A	34	3.71%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		4,113	2,801	4,057
Unadjusted Plan Factor		1.035	0.943	0.998
Budget Neutral Plan Factor		1.038	0.945	1.000
Unscored Members				
Member Months		329	262	326
Unadjusted Plan Factor		0.991	1.015	1.010
Budget Neutral Plan Factor		0.986	1.010	1.006
Total Members				
Member Months		4,442	3,063	4,383
Unadjusted Plan Factor		1.032	0.949	0.999
Budget Neutral Plan Factor		1.034	0.951	1.000

Exhibit 3F
Mississippi Division of Medicaid
Risk Adjustment Results
MA Adult - South Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	4,944	100.00%	N/A	4,111	100.00%	N/A	6,007	100.00%	N/A	15,062	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	313	6.33%	N/A	410	9.97%	N/A	451	7.51%	N/A	1,174	7.79%
Age 15 to 24 Male	0.000	N/A	10	0.20%	N/A	20	0.49%	N/A	16	0.27%	N/A	46	0.31%
Age 25 to 44 Female	0.236	N/A	3,530	71.40%	N/A	2,932	71.32%	N/A	4,242	70.62%	N/A	10,704	71.07%
Age 25 to 44 Male	0.058	N/A	443	8.96%	N/A	344	8.37%	N/A	508	8.46%	N/A	1,295	8.60%
Age 45 and Older Female	0.245	N/A	523	10.58%	N/A	304	7.39%	N/A	590	9.82%	N/A	1,417	9.41%
Age 45 and Older Male	0.365	N/A	125	2.53%	N/A	101	2.46%	N/A	200	3.33%	N/A	426	2.83%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	347	7.02%	N/A	336	8.17%	N/A	416	6.93%	N/A	1,099	7.30%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	112	2.27%	N/A	139	3.38%	N/A	180	3.00%	N/A	431	2.86%
Diagnosis Period Duration, 12 Months	0.000	N/A	4,485	90.72%	N/A	3,636	88.45%	N/A	5,411	90.08%	N/A	13,532	89.84%
Disease Categories													
Cancer, high to very high	3.752	23	14	0.28%	24	9	0.22%	22	23	0.38%	22	46	0.31%
Cancer, medium	0.997	32	36	0.73%	23	40	0.97%	24	58	0.97%	25	134	0.89%
Cancer, low	0.364	37	26	0.53%	39	19	0.46%	38	37	0.62%	38	82	0.54%
Cardiovascular, very high	1.914	39	3	0.06%	36	7	0.17%	39	4	0.07%	39	14	0.09%
Cardiovascular, medium	0.601	12	197	3.98%	12	132	3.21%	13	214	3.56%	13	543	3.61%
Cardiovascular, low	0.315	17	246	4.98%	16	189	4.60%	16	297	4.94%	16	732	4.86%
Cardiovascular, extra low	0.122	7	1,237	25.02%	7	902	21.94%	6	1,571	26.15%	8	3,710	24.63%
CNS, medium to high	0.836	27	49	0.99%	29	30	0.73%	25	66	1.10%	28	145	0.96%
CNS, low	0.419	4	426	8.62%	6	302	7.35%	5	524	8.72%	5	1,252	8.31%
Diabetes, type 1 high	2.432	36	6	0.12%	32	8	0.19%	37	6	0.10%	36	20	0.13%
Diabetes, type 1 medium	1.612	20	43	0.87%	19	30	0.73%	17	56	0.93%	20	129	0.86%
Diabetes, type 2 medium	1.043	14	100	2.02%	21	42	1.02%	14	119	1.98%	14	261	1.73%
Diabetes, type 2 low	0.375	13	307	6.21%	14	194	4.72%	12	376	6.26%	12	877	5.82%
DD, low to medium	0.613	40	6	0.12%	40	5	0.12%	40	4	0.07%	40	15	0.10%
Eye, very low to low	0.324	26	133	2.69%	31	63	1.53%	29	135	2.25%	29	331	2.20%
Genital, extra low	0.118	28	331	6.69%	25	282	6.86%	27	439	7.31%	27	1,052	6.98%
Gastro, medium to high	0.933	5	185	3.74%	5	159	3.87%	3	270	4.49%	4	614	4.08%
Gastro, low	0.224	6	765	15.47%	8	435	10.58%	7	820	13.65%	7	2,020	13.41%
Hematological, low to extra high	0.318	30	115	2.33%	28	81	1.97%	32	111	1.85%	31	307	2.04%
AIDS, high	1.445	15	57	1.15%	15	44	1.07%	18	62	1.03%	15	163	1.08%
HIV, medium	1.320	38	6	0.12%	38	9	0.22%	36	17	0.28%	37	32	0.21%
Infectious, low to medium	0.578	16	140	2.83%	18	99	2.41%	20	154	2.56%	18	393	2.61%
Metabolic, high	0.857	29	43	0.87%	35	18	0.44%	30	51	0.85%	32	112	0.74%
Metabolic, medium	0.393	35	56	1.13%	33	45	1.09%	34	71	1.18%	35	172	1.14%
Metabolic, very low	0.138	34	182	3.68%	34	125	3.04%	33	212	3.53%	33	519	3.45%
Pregnancy, complete	0.160	21	381	7.71%	13	477	11.60%	19	560	9.32%	19	1,418	9.41%
Pregnancy, incomplete	0.997	8	149	3.01%	1	175	4.26%	9	163	2.71%	6	487	3.23%
Psychiatric, high	0.972	22	58	1.17%	26	31	0.75%	26	55	0.92%	24	144	0.96%
Psychiatric, medium	0.513	18	143	2.89%	17	112	2.72%	15	190	3.16%	17	445	2.95%
Psychiatric, medium low	0.321	2	660	13.35%	3	491	11.94%	2	888	14.78%	2	2,039	13.54%
Psychiatric, low	0.212	3	925	18.71%	4	743	18.07%	4	1,186	19.74%	3	2,854	18.95%
Pulmonart, medium to high	0.600	19	121	2.45%	20	75	1.82%	21	144	2.40%	21	340	2.26%
Pulmonary, low	0.227	10	526	10.64%	10	408	9.92%	11	622	10.35%	11	1,556	10.33%
Renal, medium to extra high	0.855	25	55	1.11%	27	35	0.85%	28	56	0.93%	26	146	0.97%
Renal, low	0.304	31	120	2.43%	30	81	1.97%	31	138	2.30%	30	339	2.25%
Skeletal, medium	0.586	9	243	4.92%	9	164	3.99%	10	277	4.61%	9	684	4.54%
Skeletal, very low to low	0.362	1	738	14.93%	2	470	11.43%	1	973	16.20%	1	2,181	14.48%
Skin, low to high	0.941	33	32	0.65%	37	13	0.32%	35	27	0.45%	34	72	0.48%
Skin, very low	0.132	24	386	7.81%	22	307	7.47%	23	500	8.32%	23	1,193	7.92%
Substance abuse, low	0.289	11	412	8.33%	11	307	7.47%	8	582	9.69%	10	1,301	8.64%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,435	29.03%	N/A	1,307	31.79%	N/A	1,573	26.19%	N/A	4,315	28.65%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	30	10.75%	N/A	24	9.52%	N/A	25	6.67%	N/A	79	8.72%
Age 15 to 24 Male	0.514	N/A	4	1.43%	N/A	3	1.19%	N/A	2	0.53%	N/A	9	0.99%
Age 25 to 44 Female	0.989	N/A	172	61.65%	N/A	155	61.51%	N/A	222	59.20%	N/A	549	60.60%
Age 25 to 44 Male	0.770	N/A	35	12.54%	N/A	40	15.87%	N/A	66	17.60%	N/A	141	15.56%
Age 45 and Older Female	1.353	N/A	23	8.24%	N/A	20	7.94%	N/A	35	9.33%	N/A	78	8.61%
Age 45 and Older Male	1.362	N/A	15	5.38%	N/A	10	3.97%	N/A	25	6.67%	N/A	50	5.52%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		4,944	4,111	6,007
Unadjusted Plan Factor		1.055	0.982	1.072
Budget Neutral Plan Factor		1.013	0.943	1.029
Unscored Members				
Member Months		279	252	375
Unadjusted Plan Factor		0.998	0.986	1.002
Budget Neutral Plan Factor		1.001	0.990	1.006
Total Members				
Member Months		5,223	4,363	6,382
Unadjusted Plan Factor		1.051	0.982	1.068
Budget Neutral Plan Factor		1.012	0.945	1.028

Exhibit 3G

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - North Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	25,821	100.00%	N/A	10,870	100.00%	N/A	22,977	100.00%	N/A	59,668	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	3,618	14.01%	N/A	2,140	19.69%	N/A	3,413	14.85%	N/A	9,171	15.37%
Age 1 to 5 Female	0.068	N/A	3,628	14.05%	N/A	2,105	19.37%	N/A	3,420	14.88%	N/A	9,153	15.34%
Age 6 to 12 Male	0.047	N/A	4,788	18.54%	N/A	1,898	17.46%	N/A	4,102	17.85%	N/A	10,788	18.08%
Age 6 to 12 Female	0.049	N/A	5,019	19.44%	N/A	2,004	18.44%	N/A	4,199	18.27%	N/A	11,222	18.81%
Age 13 to 18 Male	0.000	N/A	4,322	16.74%	N/A	1,336	12.29%	N/A	3,907	17.00%	N/A	9,565	16.03%
Age 13 to 18 Female	0.297	N/A	4,446	17.22%	N/A	1,387	12.76%	N/A	3,936	17.13%	N/A	9,769	16.37%
Disease Categories													
Cancer, very high	27.677	41	0	0.00%	22	1	0.01%	32	1	0.00%	32	2	0.00%
Cancer, high	4.235	27	11	0.04%	33	1	0.01%	22	16	0.07%	27	28	0.05%
Cancer, medium	3.414	19	24	0.09%	26	5	0.05%	20	22	0.10%	20	51	0.09%
Cancer, low	0.629	38	5	0.02%	37	0	0.00%	40	4	0.02%	41	9	0.02%
Cardiovascular, very high	5.998	36	1	0.00%	37	0	0.00%	34	4	0.02%	35	5	0.01%
Cardiovascular, medium	0.760	21	93	0.36%	19	48	0.44%	24	74	0.32%	21	215	0.36%
Cardiovascular, extra low to low	0.593	3	1,292	5.00%	3	432	3.97%	3	1,220	5.31%	3	2,944	4.93%
Cerebrovascular, low	0.316	39	6	0.02%	35	6	0.06%	38	10	0.04%	40	22	0.04%
CNS, high	10.392	29	4	0.02%	37	0	0.00%	18	8	0.03%	26	12	0.02%
CNS, medium	1.647	32	12	0.05%	30	6	0.06%	27	29	0.13%	30	47	0.08%
CNS, low	0.575	9	367	1.42%	10	152	1.40%	10	350	1.52%	9	869	1.46%
DD, low to medium	2.162	22	29	0.11%	25	8	0.07%	21	34	0.15%	22	71	0.12%
Diabetes, type 2 low	2.030	5	181	0.70%	8	55	0.51%	7	148	0.64%	7	384	0.64%
Eye, very low to low	0.349	25	146	0.57%	28	39	0.36%	30	107	0.47%	29	292	0.49%
Genital, extra low	0.361	26	136	0.53%	21	78	0.72%	26	134	0.58%	25	348	0.58%
Gastro, high	5.482	23	11	0.04%	17	8	0.07%	17	20	0.09%	17	39	0.07%
Gastro, medium	1.521	18	55	0.21%	20	19	0.17%	23	43	0.19%	19	117	0.20%
Gastro, low	0.386	4	1,020	3.95%	4	441	4.06%	5	928	4.04%	4	2,389	4.00%
Hematological, low to extra high	0.598	17	150	0.58%	18	69	0.63%	19	130	0.57%	18	349	0.58%
AIDS, high	1.527	20	47	0.18%	27	10	0.09%	28	26	0.11%	23	83	0.14%
HIV, medium	1.204	37	4	0.02%	36	1	0.01%	36	6	0.03%	37	11	0.02%
Infectious, low to medium	0.197	28	234	0.91%	23	125	1.15%	29	197	0.86%	28	556	0.93%
Metabolic, medium to high	1.382	13	126	0.49%	15	39	0.36%	14	120	0.52%	15	285	0.48%
Metabolic, very low	0.506	10	362	1.40%	9	207	1.90%	11	380	1.65%	10	949	1.59%
Pregnancy, incomplete	2.708	11	67	0.26%	16	19	0.17%	16	54	0.24%	16	140	0.23%
Psychiatric, high	2.650	34	4	0.02%	32	3	0.03%	33	10	0.04%	34	17	0.03%
Psychiatric, medium	1.509	8	191	0.74%	5	96	0.88%	4	244	1.06%	5	531	0.89%
Psychiatric, medium low	1.218	1	2,972	11.51%	1	883	8.12%	1	2,690	11.71%	1	6,545	10.97%
Psychiatric, low	0.619	6	539	2.09%	7	197	1.81%	6	551	2.40%	6	1,287	2.16%
Pulmonary, high	7.062	16	20	0.08%	11	12	0.11%	9	34	0.15%	11	66	0.11%
Pulmonary, low to medium	0.502	2	2,666	10.32%	2	922	8.48%	2	2,274	9.90%	2	5,862	9.82%
Renal, extra high	13.306	33	1	0.00%	37	0	0.00%	41	0	0.00%	36	1	0.00%
Renal, very high	1.565	31	15	0.06%	29	7	0.06%	31	19	0.08%	31	41	0.07%
Renal, medium	0.837	40	1	0.00%	34	3	0.03%	37	6	0.03%	39	10	0.02%
Renal, low	0.295	24	189	0.73%	24	73	0.67%	25	165	0.72%	24	427	0.72%
Skeletal, medium	0.567	15	294	1.14%	12	122	1.12%	12	311	1.35%	12	727	1.22%
Skeletal, low	0.437	14	395	1.53%	13	152	1.40%	13	395	1.72%	13	942	1.58%
Skeletal, very low	0.278	7	1,181	4.57%	6	445	4.09%	8	1,070	4.66%	8	2,696	4.52%
Skin, high	1.516	35	4	0.02%	37	0	0.00%	39	2	0.01%	38	6	0.01%
Skin, very low to low	0.188	12	962	3.73%	14	335	3.08%	15	854	3.72%	14	2,151	3.60%
Substance abuse, very low to low	0.381	30	64	0.25%	31	25	0.23%	35	46	0.20%	33	135	0.23%
Population Statistics													
No Classified Disease Categories	N/A	N/A	16,472	63.79%	N/A	7,335	67.48%	N/A	14,443	62.86%	N/A	38,250	64.10%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	65	14.01%	N/A	69	14.94%	N/A	93	17.16%	N/A	227	15.46%
Age 1 to 5 Female	0.833	N/A	67	14.44%	N/A	77	16.67%	N/A	76	14.02%	N/A	220	14.99%
Age 6 to 12 Male	1.046	N/A	84	18.10%	N/A	101	21.86%	N/A	93	17.16%	N/A	278	18.94%
Age 6 to 12 Female	0.896	N/A	78	16.81%	N/A	95	20.56%	N/A	135	24.91%	N/A	308	20.98%
Age 13 to 18 Male	1.007	N/A	86	18.53%	N/A	53	11.47%	N/A	57	10.52%	N/A	196	13.35%
Age 13 to 18 Female	1.292	N/A	84	18.10%	N/A	67	14.50%	N/A	88	16.24%	N/A	239	16.28%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		25,821	10,870	22,977
Unadjusted Plan Factor		1.016	0.948	1.041
Budget Neutral Plan Factor		1.002	0.936	1.028
Unscored Members				
Member Months		464	462	542
Unadjusted Plan Factor		1.014	0.997	0.999
Budget Neutral Plan Factor		1.011	0.994	0.996
Total Members				
Member Months		26,285	11,332	23,519
Unadjusted Plan Factor		1.015	0.950	1.040
Budget Neutral Plan Factor		1.002	0.938	1.027

Exhibit 3H

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - Central Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	30,692	100.00%	N/A	13,666	100.00%	N/A	27,042	100.00%	N/A	71,400	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	4,467	14.55%	N/A	2,685	19.65%	N/A	4,085	15.11%	N/A	11,237	15.74%
Age 1 to 5 Female	0.068	N/A	4,178	13.61%	N/A	2,658	19.45%	N/A	4,040	14.94%	N/A	10,876	15.23%
Age 6 to 12 Male	0.047	N/A	5,554	18.10%	N/A	2,366	17.31%	N/A	4,877	18.03%	N/A	12,797	17.92%
Age 6 to 12 Female	0.049	N/A	5,767	18.79%	N/A	2,433	17.80%	N/A	4,934	18.25%	N/A	13,134	18.39%
Age 13 to 18 Male	0.000	N/A	5,182	16.88%	N/A	1,779	13.02%	N/A	4,496	16.63%	N/A	11,457	16.05%
Age 13 to 18 Female	0.297	N/A	5,544	18.06%	N/A	1,745	12.77%	N/A	4,610	17.05%	N/A	11,899	16.67%
Disease Categories													
Cancer, very high	27.677	40	0	0.00%	37	0	0.00%	24	2	0.01%	33	2	0.00%
Cancer, high	4.235	30	9	0.03%	32	2	0.01%	34	5	0.02%	31	16	0.02%
Cancer, medium	3.414	15	40	0.13%	18	13	0.10%	20	27	0.10%	18	80	0.11%
Cancer, low	0.629	39	3	0.01%	37	0	0.00%	40	2	0.01%	41	5	0.01%
Cardiovascular, very high	5.998	40	0	0.00%	37	0	0.00%	32	4	0.01%	35	4	0.01%
Cardiovascular, medium	0.760	26	71	0.23%	27	23	0.17%	25	69	0.26%	25	163	0.23%
Cardiovascular, extra low to low	0.593	3	1,474	4.80%	3	442	3.23%	3	1,317	4.87%	3	3,233	4.53%
Cerebrovascular, low	0.316	38	7	0.02%	36	5	0.04%	39	6	0.02%	40	18	0.03%
CNS, high	10.392	28	4	0.01%	20	4	0.03%	30	3	0.01%	28	11	0.02%
CNS, medium	1.647	29	25	0.08%	26	12	0.09%	22	36	0.13%	26	73	0.10%
CNS, low	0.575	8	462	1.51%	7	219	1.60%	9	429	1.59%	8	1,110	1.55%
DD, low to medium	2.162	19	46	0.15%	25	10	0.07%	19	43	0.16%	20	99	0.14%
Diabetes, type 2 low	2.030	6	205	0.67%	6	67	0.49%	5	209	0.77%	6	481	0.67%
Eye, very low to low	0.349	24	166	0.54%	28	50	0.37%	28	120	0.44%	27	336	0.47%
Genital, extra low	0.361	23	170	0.55%	22	84	0.61%	27	132	0.49%	23	386	0.54%
Gastro, high	5.482	22	13	0.04%	19	8	0.06%	21	13	0.05%	21	34	0.05%
Gastro, medium	1.521	20	54	0.18%	21	24	0.18%	18	68	0.25%	19	146	0.20%
Gastro, low	0.386	4	1,251	4.08%	4	616	4.51%	4	1,156	4.27%	4	3,023	4.23%
Hematological, low to extra high	0.598	17	212	0.69%	17	80	0.59%	16	192	0.71%	16	484	0.68%
AIDS, high	1.527	27	29	0.09%	29	9	0.07%	31	17	0.06%	29	55	0.08%
HIV, medium	1.204	34	7	0.02%	33	7	0.05%	35	14	0.05%	34	28	0.04%
Infectious, low to medium	0.197	25	289	0.94%	23	152	1.11%	26	251	0.93%	24	692	0.97%
Metabolic, medium to high	1.382	13	137	0.45%	15	53	0.39%	13	133	0.49%	13	323	0.45%
Metabolic, very low	0.506	11	449	1.46%	8	244	1.79%	12	369	1.36%	11	1,062	1.49%
Pregnancy, incomplete	2.708	18	45	0.15%	16	18	0.13%	17	39	0.14%	17	102	0.14%
Psychiatric, high	2.650	31	10	0.03%	31	5	0.04%	29	15	0.06%	30	30	0.04%
Psychiatric, medium	1.509	7	226	0.74%	9	78	0.57%	7	200	0.74%	7	504	0.71%
Psychiatric, medium low	1.218	1	3,712	12.09%	1	1,088	7.96%	1	3,195	11.81%	1	7,995	11.20%
Psychiatric, low	0.619	5	718	2.34%	5	238	1.74%	6	640	2.37%	5	1,596	2.24%
Pulmonary, high	7.062	16	18	0.06%	14	11	0.08%	11	30	0.11%	15	59	0.08%
Pulmonary, low to medium	0.502	2	3,386	11.03%	2	1,233	9.02%	2	2,938	10.86%	2	7,557	10.58%
Renal, extra high	13.306	33	1	0.00%	37	0	0.00%	41	0	0.00%	38	1	0.00%
Renal, very high	1.565	36	4	0.01%	34	3	0.02%	36	8	0.03%	36	15	0.02%
Renal, medium	0.837	37	6	0.02%	35	4	0.03%	37	7	0.03%	37	17	0.02%
Renal, low	0.295	21	261	0.85%	24	85	0.62%	23	199	0.74%	22	545	0.76%
Skeletal, medium	0.567	10	440	1.43%	13	141	1.03%	10	395	1.46%	10	976	1.37%
Skeletal, low	0.437	12	493	1.61%	12	184	1.35%	14	419	1.55%	12	1,096	1.54%
Skeletal, very low	0.278	9	948	3.09%	10	390	2.85%	8	891	3.29%	9	2,229	3.12%
Skin, high	1.516	35	5	0.02%	37	0	0.00%	38	3	0.01%	39	8	0.01%
Skin, very low to low	0.188	14	945	3.08%	11	429	3.14%	15	917	3.39%	14	2,291	3.21%
Substance abuse, very low to low	0.381	32	64	0.21%	30	36	0.26%	33	60	0.22%	32	160	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	19,539	63.66%	N/A	9,406	68.83%	N/A	17,220	63.68%	N/A	46,165	64.66%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	75	15.99%	N/A	73	17.51%	N/A	81	14.97%	N/A	229	16.05%
Age 1 to 5 Female	0.833	N/A	84	17.91%	N/A	56	13.43%	N/A	92	17.01%	N/A	232	16.26%
Age 6 to 12 Male	1.046	N/A	84	17.91%	N/A	95	22.78%	N/A	100	18.48%	N/A	279	19.55%
Age 6 to 12 Female	0.896	N/A	81	17.27%	N/A	73	17.51%	N/A	100	18.48%	N/A	254	17.80%
Age 13 to 18 Male	1.007	N/A	78	16.63%	N/A	63	15.11%	N/A	90	16.64%	N/A	231	16.19%
Age 13 to 18 Female	1.292	N/A	67	14.29%	N/A	57	13.67%	N/A	78	14.42%	N/A	202	14.16%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		30,692	13,666	27,042
Unadjusted Plan Factor		1.021	0.933	1.027
Budget Neutral Plan Factor		1.014	0.927	1.021
Unscored Members				
Member Months		469	417	541
Unadjusted Plan Factor		0.996	1.002	0.997
Budget Neutral Plan Factor		0.997	1.004	0.999
Total Members				
Member Months		31,161	14,083	27,583
Unadjusted Plan Factor		1.020	0.935	1.026
Budget Neutral Plan Factor		1.014	0.929	1.020

Exhibit 31
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - South Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	30,231	100.00%	N/A	17,166	100.00%	N/A	32,717	100.00%	N/A	80,114	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	4,587	15.17%	N/A	3,536	20.60%	N/A	4,943	15.11%	N/A	13,066	16.31%
Age 1 to 5 Female	0.068	N/A	4,414	14.60%	N/A	3,376	19.67%	N/A	4,807	14.69%	N/A	12,597	15.72%
Age 6 to 12 Male	0.047	N/A	5,662	18.73%	N/A	3,001	17.48%	N/A	6,100	18.64%	N/A	14,763	18.43%
Age 6 to 12 Female	0.049	N/A	5,759	19.05%	N/A	3,012	17.55%	N/A	6,051	18.49%	N/A	14,822	18.50%
Age 13 to 18 Male	0.000	N/A	4,796	15.86%	N/A	2,126	12.38%	N/A	5,356	16.37%	N/A	12,278	15.33%
Age 13 to 18 Female	0.297	N/A	5,013	16.58%	N/A	2,115	12.32%	N/A	5,460	16.69%	N/A	12,588	15.71%
Disease Categories													
Cancer, very high	27.677	41	0	0.00%	41	0	0.00%	32	1	0.00%	33	1	0.00%
Cancer, high	4.235	26	14	0.05%	19	12	0.07%	19	27	0.08%	21	53	0.07%
Cancer, medium	3.414	21	26	0.09%	25	10	0.06%	16	41	0.13%	19	77	0.10%
Cancer, low	0.629	38	8	0.03%	37	4	0.02%	40	4	0.01%	40	16	0.02%
Cardiovascular, very high	5.998	37	1	0.00%	33	2	0.01%	37	1	0.00%	35	4	0.00%
Cardiovascular, medium	0.760	22	102	0.34%	24	45	0.26%	24	99	0.30%	24	246	0.31%
Cardiovascular, extra low to low	0.593	3	1,582	5.23%	3	645	3.76%	3	1,846	5.64%	3	4,073	5.08%
Cerebrovascular, low	0.316	40	5	0.02%	40	5	0.03%	39	11	0.03%	41	21	0.03%
CNS, high	10.392	34	1	0.00%	29	2	0.01%	29	5	0.02%	30	8	0.01%
CNS, medium	1.647	28	24	0.08%	28	18	0.10%	27	35	0.11%	28	77	0.10%
CNS, low	0.575	9	410	1.36%	11	233	1.36%	10	477	1.46%	10	1,120	1.40%
DD, low to medium	2.162	20	43	0.14%	27	14	0.08%	21	44	0.13%	22	101	0.13%
Diabetes, type 2 low	2.030	7	185	0.61%	8	74	0.43%	7	209	0.64%	7	468	0.58%
Eye, very low to low	0.349	24	188	0.62%	26	88	0.51%	28	153	0.47%	27	429	0.54%
Genital, extra low	0.361	27	152	0.50%	22	105	0.61%	23	218	0.67%	26	475	0.59%
Gastro, high	5.482	16	28	0.09%	16	17	0.10%	26	12	0.04%	17	57	0.07%
Gastro, medium	1.521	19	70	0.23%	23	23	0.13%	20	70	0.21%	20	163	0.20%
Gastro, low	0.386	4	1,409	4.66%	4	907	5.28%	5	1,599	4.89%	4	3,915	4.89%
Hematological, low to extra high	0.598	17	211	0.70%	17	130	0.76%	18	204	0.62%	16	545	0.68%
AIDS, high	1.527	29	24	0.08%	32	8	0.05%	31	26	0.08%	29	58	0.07%
HIV, medium	1.204	35	8	0.03%	38	2	0.01%	35	6	0.02%	38	16	0.02%
Infectious, low to medium	0.197	25	304	1.01%	18	271	1.58%	25	369	1.13%	25	944	1.18%
Metabolic, medium to high	1.382	11	163	0.54%	10	101	0.59%	9	207	0.63%	9	471	0.59%
Metabolic, very low	0.506	13	432	1.43%	9	281	1.64%	13	492	1.50%	12	1,205	1.50%
Pregnancy, incomplete	2.708	18	41	0.14%	21	14	0.08%	17	51	0.16%	18	106	0.13%
Psychiatric, high	2.650	31	7	0.02%	31	5	0.03%	30	19	0.06%	31	31	0.04%
Psychiatric, medium	1.509	5	311	1.03%	5	149	0.87%	4	415	1.27%	5	875	1.09%
Psychiatric, medium low	1.218	1	3,910	12.93%	1	1,560	9.09%	1	4,492	13.73%	1	9,962	12.43%
Psychiatric, low	0.619	6	658	2.18%	6	344	2.00%	6	829	2.53%	6	1,831	2.29%
Pulmonary, high	7.062	15	23	0.08%	13	16	0.09%	15	20	0.06%	15	59	0.07%
Pulmonary, low to medium	0.502	2	2,986	9.88%	2	1,407	8.20%	2	3,122	9.54%	2	7,515	9.38%
Renal, extra high	13.306	32	1	0.00%	30	1	0.01%	41	0	0.00%	34	2	0.00%
Renal, very high	1.565	33	7	0.02%	35	5	0.03%	38	3	0.01%	36	15	0.02%
Renal, medium	0.837	36	8	0.03%	39	2	0.01%	34	16	0.05%	37	26	0.03%
Renal, low	0.295	23	251	0.83%	20	131	0.76%	22	310	0.95%	23	692	0.86%
Skeletal, medium	0.567	12	394	1.30%	14	192	1.12%	11	456	1.39%	13	1,042	1.30%
Skeletal, low	0.437	14	500	1.65%	15	247	1.44%	14	553	1.69%	14	1,300	1.62%
Skeletal, very low	0.278	8	1,126	3.72%	7	596	3.47%	8	1,250	3.82%	8	2,972	3.71%
Skin, high	1.516	39	3	0.01%	36	5	0.03%	36	4	0.01%	39	12	0.01%
Skin, very low to low	0.188	10	1,248	4.13%	12	700	4.08%	12	1,370	4.19%	11	3,318	4.14%
Substance abuse, very low to low	0.381	30	73	0.24%	34	26	0.15%	33	68	0.21%	32	167	0.21%
Population Statistics													
No Classified Disease Categories	N/A	N/A	18,891	62.49%	N/A	11,454	66.72%	N/A	20,118	61.49%	N/A	50,463	62.99%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	82	17.26%	N/A	87	18.79%	N/A	93	15.47%	N/A	262	17.02%
Age 1 to 5 Female	0.833	N/A	81	17.05%	N/A	89	19.22%	N/A	90	14.98%	N/A	260	16.89%
Age 6 to 12 Male	1.046	N/A	92	19.37%	N/A	88	19.01%	N/A	117	19.47%	N/A	297	19.30%
Age 6 to 12 Female	0.896	N/A	81	17.05%	N/A	94	20.30%	N/A	135	22.46%	N/A	310	20.14%
Age 13 to 18 Male	1.007	N/A	69	14.53%	N/A	48	10.37%	N/A	77	12.81%	N/A	194	12.61%
Age 13 to 18 Female	1.292	N/A	70	14.74%	N/A	57	12.31%	N/A	89	14.81%	N/A	216	14.04%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		30,231	17,166	32,717
Unadjusted Plan Factor		1.037	0.963	1.059
Budget Neutral Plan Factor		1.006	0.935	1.028
Unscored Members				
Member Months		475	463	601
Unadjusted Plan Factor		0.999	0.983	0.997
Budget Neutral Plan Factor		1.005	0.990	1.004
Total Members				
Member Months		30,706	17,629	33,318
Unadjusted Plan Factor		1.036	0.964	1.058
Budget Neutral Plan Factor		1.006	0.936	1.028

Exhibit 3J

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - North Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

		Scored Members											
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	2,921	100.00%	N/A	1,245	100.00%	N/A	3,133	100.00%	N/A	7,299	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	752	25.74%	N/A	345	27.71%	N/A	794	25.34%	N/A	1,891	25.91%
Age 6 to 12 Female	0.049	N/A	793	27.15%	N/A	340	27.31%	N/A	793	25.31%	N/A	1,926	26.39%
Age 13 to 18 Male	0.000	N/A	649	22.22%	N/A	269	21.61%	N/A	761	24.29%	N/A	1,679	23.00%
Age 13 to 18 Female	0.297	N/A	727	24.89%	N/A	291	23.37%	N/A	785	25.06%	N/A	1,803	24.70%
Disease Categories													
Cancer, very high	27.677	37	0	0.00%	32	0	0.00%	36	0	0.00%	38	0	0.00%
Cancer, high	4.235	29	1	0.03%	20	1	0.08%	29	1	0.03%	28	3	0.04%
Cancer, medium	3.414	15	5	0.17%	16	2	0.16%	27	2	0.06%	16	9	0.12%
Cancer, low	0.629	37	0	0.00%	32	0	0.00%	36	0	0.00%	38	0	0.00%
Cardiovascular, very high	5.998	37	0	0.00%	32	0	0.00%	36	0	0.00%	38	0	0.00%
Cardiovascular, medium	0.760	20	12	0.41%	26	3	0.24%	21	12	0.38%	23	27	0.37%
Cardiovascular, extra low to low	0.593	3	150	5.14%	3	53	4.26%	3	160	5.11%	3	363	4.97%
Cerebrovascular, low	0.316	37	0	0.00%	32	0	0.00%	35	3	0.10%	37	3	0.04%
CNS, high	10.392	19	1	0.03%	32	0	0.00%	19	1	0.03%	22	2	0.03%
CNS, medium	1.647	24	4	0.14%	21	2	0.16%	16	8	0.26%	20	14	0.19%
CNS, low	0.575	9	47	1.61%	10	18	1.45%	13	30	0.96%	12	95	1.30%
DD, low to medium	2.162	17	6	0.21%	17	3	0.24%	22	4	0.13%	18	13	0.18%
Diabetes, type 2 low	2.030	4	28	0.96%	4	12	0.96%	5	29	0.93%	4	69	0.95%
Eye, very low to low	0.349	26	17	0.58%	29	4	0.32%	26	20	0.64%	27	41	0.56%
Genital, extra low	0.361	28	14	0.48%	27	5	0.40%	28	12	0.38%	29	31	0.42%
Gastro, high	5.482	27	1	0.03%	19	1	0.08%	18	2	0.06%	21	4	0.05%
Gastro, medium	1.521	16	10	0.34%	13	5	0.40%	14	10	0.32%	14	25	0.34%
Gastro, low	0.386	8	81	2.77%	7	36	2.89%	8	94	3.00%	8	211	2.89%
Hematological, low to extra high	0.598	25	10	0.34%	25	4	0.32%	20	17	0.54%	25	31	0.42%
AIDS, high	1.527	23	5	0.17%	22	2	0.16%	24	5	0.16%	26	12	0.16%
HIV, medium	1.204	35	1	0.03%	32	0	0.00%	36	0	0.00%	36	1	0.01%
Infectious, low to medium	0.197	36	5	0.17%	31	2	0.16%	33	8	0.26%	35	15	0.21%
Metabolic, medium to high	1.382	10	17	0.58%	12	6	0.48%	9	24	0.77%	9	47	0.64%
Metabolic, very low	0.506	18	21	0.72%	18	11	0.88%	17	26	0.83%	17	58	0.79%
Pregnancy, incomplete	2.708	22	3	0.10%	24	1	0.08%	15	5	0.16%	19	9	0.12%
Psychiatric, high	2.650	32	1	0.03%	32	0	0.00%	31	1	0.03%	32	2	0.03%
Psychiatric, medium	1.509	6	27	0.92%	8	9	0.72%	7	28	0.89%	7	64	0.88%
Psychiatric, medium low	1.218	1	394	13.49%	1	158	12.69%	1	440	14.04%	1	992	13.59%
Psychiatric, low	0.619	7	57	1.95%	5	31	2.49%	4	109	3.48%	5	197	2.70%
Pulmonary, high	7.062	14	3	0.10%	14	1	0.08%	25	1	0.03%	15	5	0.07%
Pulmonary, low to medium	0.502	2	276	9.45%	2	91	7.31%	2	302	9.64%	2	669	9.17%
Renal, extra high	13.306	37	0	0.00%	32	0	0.00%	36	0	0.00%	38	0	0.00%
Renal, very high	1.565	34	1	0.03%	28	1	0.08%	30	2	0.06%	30	4	0.05%
Renal, medium	0.837	33	2	0.07%	32	0	0.00%	32	2	0.06%	33	4	0.05%
Renal, low	0.295	21	28	0.96%	23	10	0.80%	23	27	0.86%	24	65	0.89%
Skeletal, medium	0.567	11	40	1.37%	11	18	1.45%	10	54	1.72%	11	112	1.53%
Skeletal, low	0.437	12	50	1.71%	9	28	2.25%	11	69	2.20%	10	147	2.01%
Skeletal, very low	0.278	5	152	5.20%	6	53	4.26%	6	163	5.20%	6	368	5.04%
Skin, high	1.516	31	2	0.07%	32	0	0.00%	36	0	0.00%	34	2	0.03%
Skin, very low to low	0.188	13	114	3.90%	15	37	2.97%	12	132	4.21%	13	283	3.88%
Substance abuse, very low to low	0.381	30	10	0.34%	30	2	0.16%	34	3	0.10%	31	15	0.21%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,853	63.44%	N/A	812	65.22%	N/A	1,894	60.45%	N/A	4,559	62.46%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	17	35.42%	N/A	11	21.57%	N/A	16	23.19%	N/A	44	26.19%
Age 6 to 12 Female	0.896	N/A	14	29.17%	N/A	14	27.45%	N/A	28	40.58%	N/A	56	33.33%
Age 13 to 18 Male	1.007	N/A	6	12.50%	N/A	8	15.69%	N/A	11	15.94%	N/A	25	14.88%
Age 13 to 18 Female	1.292	N/A	11	22.92%	N/A	18	35.29%	N/A	14	20.29%	N/A	43	25.60%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		2,921	1,245	3,133
Unadjusted Plan Factor		1.049	1.012	1.063
Budget Neutral Plan Factor		1.001	0.965	1.013
Unscored Members				
Member Months		48	51	69
Unadjusted Plan Factor		1.054	1.086	1.029
Budget Neutral Plan Factor		1.001	1.031	0.977
Total Members				
Member Months		2,969	1,296	3,202
Unadjusted Plan Factor		1.049	1.015	1.062
Budget Neutral Plan Factor		1.001	0.968	1.012

Exhibit 3K
Mississippi Division of Medicaid
Risk Adjustment Results
Quasi-CHIP - Central Region - Q3Q4 2022 Prospective Risk Scores
CY 2021 Diagnosis Period - April 2022 Snapshot Period

		Scored Members											
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.539	N/A	3,356	100.00%	N/A	1,361	100.00%	N/A	3,348	100.00%	N/A	8,065	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	804	23.96%	N/A	352	25.86%	N/A	828	24.73%	N/A	1,984	24.60%
Age 6 to 12 Female	0.049	N/A	843	25.12%	N/A	356	26.16%	N/A	812	24.25%	N/A	2,011	24.93%
Age 13 to 18 Male	0.000	N/A	864	25.74%	N/A	304	22.34%	N/A	847	25.30%	N/A	2,015	24.98%
Age 13 to 18 Female	0.297	N/A	845	25.18%	N/A	349	25.64%	N/A	861	25.72%	N/A	2,055	25.48%
Disease Categories													
Cancer, very high	27.677	35	0	0.00%	31	0	0.00%	38	0	0.00%	40	0	0.00%
Cancer, high	4.235	35	0	0.00%	21	1	0.07%	31	1	0.03%	29	2	0.02%
Cancer, medium	3.414	19	3	0.09%	14	2	0.15%	15	6	0.18%	16	11	0.14%
Cancer, low	0.629	34	1	0.03%	31	0	0.00%	38	0	0.00%	39	1	0.01%
Cardiovascular, very high	5.998	35	0	0.00%	31	0	0.00%	26	1	0.03%	32	1	0.01%
Cardiovascular, medium	0.760	29	3	0.09%	18	6	0.44%	36	1	0.03%	31	10	0.12%
Cardiovascular, extra low to low	0.593	3	168	5.01%	4	43	3.16%	3	179	5.35%	3	390	4.84%
Cerebrovascular, low	0.316	33	2	0.06%	29	2	0.15%	37	1	0.03%	36	5	0.06%
CNS, high	10.392	35	0	0.00%	31	0	0.00%	19	1	0.03%	28	1	0.01%
CNS, medium	1.647	21	5	0.15%	31	0	0.00%	29	3	0.09%	26	8	0.10%
CNS, low	0.575	11	44	1.31%	13	13	0.96%	13	41	1.22%	11	98	1.22%
DD, low to medium	2.162	15	7	0.21%	20	2	0.15%	17	8	0.24%	17	17	0.21%
Diabetes, type 2 low	2.030	5	24	0.72%	3	14	1.03%	4	29	0.87%	5	67	0.83%
Eye, very low to low	0.349	24	18	0.54%	25	6	0.44%	21	25	0.75%	22	49	0.61%
Genital, extra low	0.361	23	18	0.54%	28	2	0.15%	24	18	0.54%	25	38	0.47%
Gastro, high	5.482	14	3	0.09%	31	0	0.00%	27	1	0.03%	20	4	0.05%
Gastro, medium	1.521	20	6	0.18%	16	4	0.29%	30	3	0.09%	21	13	0.16%
Gastro, low	0.386	6	94	2.80%	6	43	3.16%	10	82	2.45%	8	219	2.72%
Hematological, low to extra high	0.598	17	23	0.69%	22	6	0.44%	20	17	0.51%	19	46	0.57%
AIDS, high	1.527	26	2	0.06%	17	3	0.22%	23	5	0.15%	24	10	0.12%
HIV, medium	1.204	35	0	0.00%	26	1	0.07%	38	0	0.00%	38	1	0.01%
Infectious, low to medium	0.197	31	5	0.15%	30	3	0.22%	34	7	0.21%	34	15	0.19%
Metabolic, medium to high	1.382	12	17	0.51%	10	9	0.66%	12	20	0.60%	10	46	0.57%
Metabolic, very low	0.506	18	23	0.69%	19	9	0.66%	18	24	0.72%	18	56	0.69%
Pregnancy, incomplete	2.708	22	3	0.09%	9	5	0.37%	9	12	0.36%	13	20	0.25%
Psychiatric, high	2.650	28	1	0.03%	31	0	0.00%	28	2	0.06%	30	3	0.04%
Psychiatric, medium	1.509	7	23	0.69%	11	7	0.51%	6	27	0.81%	6	57	0.71%
Psychiatric, medium low	1.218	1	447	13.32%	1	165	12.12%	1	459	13.71%	1	1,071	13.28%
Psychiatric, low	0.619	4	90	2.68%	5	37	2.72%	5	94	2.81%	4	221	2.74%
Pulmonary, high	7.062	16	2	0.06%	31	0	0.00%	11	4	0.12%	15	6	0.07%
Pulmonary, low to medium	0.502	2	364	10.85%	2	112	8.23%	2	330	9.86%	2	806	9.99%
Renal, extra high	13.306	35	0	0.00%	31	0	0.00%	38	0	0.00%	40	0	0.00%
Renal, very high	1.565	30	1	0.03%	23	2	0.15%	25	4	0.12%	27	7	0.09%
Renal, medium	0.837	32	1	0.03%	31	0	0.00%	35	1	0.03%	35	2	0.02%
Renal, low	0.295	25	21	0.63%	24	9	0.66%	22	28	0.84%	23	58	0.72%
Skeletal, medium	0.567	9	53	1.58%	8	26	1.91%	7	71	2.12%	7	150	1.86%
Skeletal, low	0.437	10	60	1.79%	15	15	1.10%	14	51	1.52%	12	126	1.56%
Skeletal, very low	0.278	8	117	3.49%	7	58	4.26%	8	125	3.73%	9	300	3.72%
Skin, high	1.516	35	0	0.00%	31	0	0.00%	33	1	0.03%	37	1	0.01%
Skin, very low to low	0.188	13	112	3.34%	12	40	2.94%	16	102	3.05%	14	254	3.15%
Substance abuse, very low to low	0.381	27	7	0.21%	27	3	0.22%	32	4	0.12%	33	14	0.17%
Population Statistics													
No Classified Disease Categories	N/A	N/A	2,136	63.65%	N/A	899	66.05%	N/A	2,138	63.86%	N/A	5,173	64.14%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	14	26.92%	N/A	11	33.33%	N/A	23	35.38%	N/A	48	32.00%
Age 6 to 12 Female	0.896	N/A	11	21.15%	N/A	9	27.27%	N/A	14	21.54%	N/A	34	22.67%
Age 13 to 18 Male	1.007	N/A	12	23.08%	N/A	6	18.18%	N/A	9	13.85%	N/A	27	18.00%
Age 13 to 18 Female	1.292	N/A	15	28.85%	N/A	7	21.21%	N/A	19	29.23%	N/A	41	27.33%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		3,356	1,361	3,348
Unadjusted Plan Factor		1.026	1.001	1.056
Budget Neutral Plan Factor		0.992	0.968	1.021
Unscored Members				
Member Months		52	33	65
Unadjusted Plan Factor		1.076	1.050	1.080
Budget Neutral Plan Factor		1.004	0.979	1.007
Total Members				
Member Months		3,408	1,394	3,413
Unadjusted Plan Factor		1.027	1.002	1.056
Budget Neutral Plan Factor		0.992	0.968	1.021

Exhibit 3L

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - South Region - Q3Q4 2022 Prospective Risk Scores

CY 2021 Diagnosis Period - April 2022 Snapshot Period

		Scored Members											
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	2,885	100.00%	N/A	1,422	100.00%	N/A	3,510	100.00%	N/A	7,817	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	732	25.37%	N/A	400	28.13%	N/A	830	23.65%	N/A	1,962	25.10%
Age 6 to 12 Female	0.049	N/A	687	23.81%	N/A	389	27.36%	N/A	864	24.62%	N/A	1,940	24.82%
Age 13 to 18 Male	0.000	N/A	709	24.58%	N/A	311	21.87%	N/A	931	26.52%	N/A	1,951	24.96%
Age 13 to 18 Female	0.297	N/A	757	26.24%	N/A	322	22.64%	N/A	885	25.21%	N/A	1,964	25.12%
Disease Categories													
Cancer, very high	27.677	32	0	0.00%	30	0	0.00%	12	1	0.03%	18	1	0.01%
Cancer, high	4.235	23	1	0.03%	30	0	0.00%	18	5	0.14%	21	6	0.08%
Cancer, medium	3.414	32	0	0.00%	20	1	0.07%	17	7	0.20%	20	8	0.10%
Cancer, low	0.629	31	1	0.03%	30	0	0.00%	35	2	0.06%	35	3	0.04%
Cardiovascular, very high	5.998	32	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Cardiovascular, medium	0.760	25	5	0.17%	27	2	0.14%	30	7	0.20%	29	14	0.18%
Cardiovascular, extra low to low	0.593	3	171	5.93%	3	63	4.43%	3	268	7.64%	3	502	6.42%
Cerebrovascular, low	0.316	30	2	0.07%	29	1	0.07%	36	1	0.03%	38	4	0.05%
CNS, high	10.392	32	0	0.00%	11	1	0.07%	37	0	0.00%	30	1	0.01%
CNS, medium	1.647	22	3	0.10%	21	2	0.14%	22	8	0.23%	23	13	0.17%
CNS, low	0.575	13	35	1.21%	14	14	0.98%	11	57	1.62%	11	106	1.36%
DD, low to medium	2.162	16	5	0.17%	12	4	0.28%	15	12	0.34%	14	21	0.27%
Diabetes, type 2 low	2.030	6	26	0.90%	6	8	0.56%	6	33	0.94%	6	67	0.86%
Eye, very low to low	0.349	24	12	0.42%	30	0	0.00%	28	19	0.54%	28	31	0.40%
Genital, extra low	0.361	20	17	0.59%	19	11	0.77%	26	21	0.60%	26	49	0.63%
Gastro, high	5.482	32	0	0.00%	30	0	0.00%	13	5	0.14%	19	5	0.06%
Gastro, medium	1.521	14	11	0.38%	18	3	0.21%	23	7	0.20%	15	21	0.27%
Gastro, low	0.386	7	92	3.19%	8	37	2.60%	7	138	3.93%	7	267	3.42%
Hematological, low to extra high	0.598	18	17	0.59%	22	5	0.35%	27	12	0.34%	25	34	0.43%
AIDS, high	1.527	27	1	0.03%	25	1	0.07%	32	2	0.06%	32	4	0.05%
HIV, medium	1.204	32	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Infectious, low to medium	0.197	26	8	0.28%	28	3	0.21%	33	9	0.26%	34	20	0.26%
Metabolic, medium to high	1.382	12	15	0.52%	13	6	0.42%	16	18	0.51%	13	39	0.50%
Metabolic, very low	0.506	17	21	0.73%	24	5	0.35%	19	36	1.03%	16	62	0.79%
Pregnancy, incomplete	2.708	15	5	0.17%	23	1	0.07%	25	3	0.09%	22	9	0.12%
Psychiatric, high	2.650	32	0	0.00%	30	0	0.00%	31	2	0.06%	33	2	0.03%
Psychiatric, medium	1.509	4	44	1.53%	5	14	0.98%	4	62	1.77%	4	120	1.54%
Psychiatric, medium low	1.218	1	469	16.26%	1	244	17.16%	1	668	19.03%	1	1,381	17.67%
Psychiatric, low	0.619	5	94	3.26%	4	44	3.09%	5	132	3.76%	5	270	3.45%
Pulmonary, high	7.062	19	1	0.03%	15	1	0.07%	20	2	0.06%	17	4	0.05%
Pulmonary, low to medium	0.502	2	235	8.15%	2	88	6.19%	2	329	9.37%	2	652	8.34%
Renal, extra high	13.306	32	0	0.00%	30	0	0.00%	21	1	0.03%	27	1	0.01%
Renal, very high	1.565	32	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Renal, medium	0.837	32	0	0.00%	30	0	0.00%	34	2	0.06%	36	2	0.03%
Renal, low	0.295	21	20	0.69%	17	18	1.27%	24	32	0.91%	24	70	0.90%
Skeletal, medium	0.567	9	52	1.80%	7	26	1.83%	9	73	2.08%	9	151	1.93%
Skeletal, low	0.437	10	58	2.01%	10	24	1.69%	10	86	2.45%	10	168	2.15%
Skeletal, very low	0.278	8	117	4.06%	9	47	3.31%	8	158	4.50%	8	322	4.12%
Skin, high	1.516	29	1	0.03%	30	0	0.00%	37	0	0.00%	37	1	0.01%
Skin, very low to low	0.188	11	114	3.95%	16	35	2.46%	14	138	3.93%	12	287	3.67%
Substance abuse, very low to low	0.381	28	4	0.14%	26	4	0.28%	29	14	0.40%	31	22	0.28%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,779	61.66%	N/A	920	64.70%	N/A	2,000	56.98%	N/A	4,699	60.11%

Unscored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	9	30.00%	N/A	16	31.37%	N/A	19	33.93%	N/A	44	32.12%
Age 6 to 12 Female	0.896	N/A	6	20.00%	N/A	11	21.57%	N/A	13	23.21%	N/A	30	21.90%
Age 13 to 18 Male	1.007	N/A	9	30.00%	N/A	11	21.57%	N/A	9	16.07%	N/A	29	21.17%
Age 13 to 18 Female	1.292	N/A	6	20.00%	N/A	13	25.49%	N/A	15	26.79%	N/A	34	24.82%

Risk Adjustment Results				
Scored Members		Magnolia	Molina	United
Member Months		2,885	1,422	3,510
Unadjusted Plan Factor		1.077	1.041	1.178
Budget Neutral Plan Factor		0.965	0.932	1.056
Unscored Members				
Member Months		30	51	56
Unadjusted Plan Factor		1.053	1.068	1.071
Budget Neutral Plan Factor		0.988	1.002	1.005
Total Members				
Member Months		2,915	1,473	3,566
Unadjusted Plan Factor		1.077	1.043	1.177
Budget Neutral Plan Factor		0.966	0.935	1.055

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
April 2022 Snapshot Period

North Region

			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	281	20.97%	108	47.58%	139	33.41%	528	26.63%
Money Code 3	Receiving IV-E Assistance	0.743	116	8.66%	46	20.26%	39	9.38%	201	10.14%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	874	65.22%	62	27.31%	201	48.32%	1,137	57.34%
Other	All other Money Codes	0.000	69	5.15%	11	4.85%	37	8.89%	117	5.90%
Unadjusted Plan Factor			0.744		1.035		0.846		0.799	
Member Months			1,340		227		416		1,983	
Budget Neutral Plan Factor			0.931		1.297		1.059		1.000	

Central Region

			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	372	27.02%	129	48.86%	138	36.03%	639	31.57%
Money Code 3	Receiving IV-E Assistance	0.743	193	14.02%	62	23.48%	60	15.67%	315	15.56%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	745	54.10%	63	23.86%	150	39.16%	958	47.33%
Other	All other Money Codes	0.000	67	4.87%	10	3.79%	35	9.14%	112	5.53%
Unadjusted Plan Factor			0.829		1.068		0.909		0.875	
Member Months			1,377		264		383		2,024	
Budget Neutral Plan Factor			0.947		1.221		1.039		1.000	

South Region

			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	325	16.78%	145	40.06%	177	30.31%	647	22.44%
Money Code 3	Receiving IV-E Assistance	0.743	252	13.01%	101	27.90%	87	14.90%	440	15.26%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	1,251	64.58%	105	29.01%	266	45.55%	1,622	56.26%
Other	All other Money Codes	0.000	109	5.63%	11	3.04%	54	9.25%	174	6.04%
Unadjusted Plan Factor			0.740		1.028		0.858		0.800	
Member Months			1,937		362		584		2,883	
Budget Neutral Plan Factor			0.925		1.286		1.073		1.000	

Exhibit 4A
Mississippi Division of Medicaid
Custom Risk Adjustment Weights Effective October 2018
Non-Newborn SSI / Disabled

	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.077	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 4	0.087	1.113
Age 5 to 14 Female	0.089	0.660
Age 5 to 14 Male	0.067	0.572
Age 15 to 24 Female	0.108	0.746
Age 15 to 24 Male	-	0.523
Age 25 to 44 Female	0.206	1.154
Age 25 to 44 Male	0.053	0.821
Age 45 to 64 Female	0.109	1.314
Age 45 to 64 Male	0.111	1.185
Age 65 and Older Male and Female	0.006	1.046
Duration Categories		
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A
Diagnosis Period Duration, 10 to 12 Months	-	N/A
Disease Categories		
Cancer, very high	4.640	N/A
Cancer, high	1.263	N/A
Cancer, medium	0.649	N/A
Cancer, low	0.148	N/A
Cardiovascular, very high	1.401	N/A
Cardiovascular, medium	0.570	N/A
Cardiovascular, medium - child	0.188	N/A
Cardiovascular, low	0.192	N/A
Cardiovascular, extra low	0.106	N/A
Cerebrovascular, low	0.153	N/A
CNS, medium to high	0.589	N/A
CNS, high - child	1.358	N/A
CNS, low	0.218	N/A
DD, low to medium	0.153	N/A
Diabetes, type 1 high	1.267	N/A
Diabetes, type 1 medium	0.683	N/A
Diabetes, type 2 medium	0.416	N/A
Diabetes, type 2 low	0.177	N/A
Eye, low	0.142	N/A
Eye, very low	0.107	N/A
Genital, extra low	0.070	N/A
Gastro, medium to high	0.523	N/A
Gastro, high - child	1.264	N/A
Gastro, low	0.127	N/A
Hematological, very high to extra high	1.633	N/A
Hematological, medium	0.705	N/A
Hematological, low	0.491	N/A
AIDS, high	1.699	N/A
HIV, medium	1.210	N/A
Infectious, low to medium	0.435	N/A
Metabolic, high	1.035	N/A
Metabolic, high - child	0.158	N/A
Metabolic, medium	0.396	N/A
Metabolic, very low	0.138	N/A
Pregnancy, incomplete	0.395	N/A
Psychiatric, high	0.677	N/A
Psychiatric, medium low to medium	0.264	N/A
Psychiatric, low	0.167	N/A
Pulmonary, very high	1.167	N/A
Pulmonary, very high - child	1.465	N/A
Pulmonary, high	0.593	N/A
Pulmonary, medium	0.475	N/A

Exhibit 4A
Mississippi Division of Medicaid
Custom Risk Adjustment Weights Effective October 2018
Non-Newborn SSI / Disabled

	Scored Member Cost Weights	Unscored Member Cost Weights
Pulmonary, low	0.178	N/A
Renal, extra high	3.856	N/A
Renal, very high	0.489	N/A
Renal, low to medium	0.132	N/A
Skeletal, medium	0.308	N/A
Skeletal, very low to low	0.149	N/A
Skin, low - high	0.254	N/A
Skin, very low	0.090	N/A
Substance abuse, very low to low	0.153	N/A

Exhibit 4B
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
Non-Newborn SSI / Disabled

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
CANVH	Cancer, very high	Cancer, very high	4.640
CANH	Cancer, high	Cancer, high	1.263
CANM	Cancer, medium	Cancer, medium	0.649
CANL	Cancer, low	Cancer, low	0.148
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.401
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.570
CCARM	Cardiovascular, medium - child	Cardiovascular, medium - child	0.188
CARL	Cardiovascular, low	Cardiovascular, low	0.192
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.106
CERL	Cerebrovascular, low	Cerebrovascular, low	0.153
CNSH	CNS, high	CNS, medium to high	0.589
CCNSH	CNS, high - child	CNS, high - child	1.358
CNSM	CNS, medium	CNS, medium to high	0.589
CNSL	CNS, low	CNS, low	0.218
DDM	DD, medium	DD, low to medium	0.153
DDL	DD, low	DD, low to medium	0.153
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	1.267
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	0.683
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	0.416
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.177
EYEL	Eye, low	Eye, low	0.142
EYEVL	Eye, very low	Eye, very low	0.107
GENEL	Genital, extra low	Genital, extra low	0.070
GIH	Gastro, high	Gastro, medium to high	0.523
CGIH	Gastro, high - child	Gastro, high - child	1.264
GIM	Gastro, medium	Gastro, medium to high	0.523
GIL	Gastro, low	Gastro, low	0.127
HEMEH	Hematological, extra high	Hematological, very high to extra high	1.633
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, very high to extra high	1.633
HEMM	Hematological, medium	Hematological, medium	0.705
HEML	Hematological, low	Hematological, low	0.491
AIDSH	AIDS, high	AIDS, high	1.699
INFH	Infectious, high	AIDS, high	1.699
HIVM	HIV, medium	HIV, medium	1.210
INFM	Infectious, medium	Infectious, low to medium	0.435
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.435
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	1.035
CMETH	Metabolic, high - child	Metabolic, high - child	0.158
METM	Metabolic, medium	Metabolic, medium	0.396
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.395
PSYH	Psychiatric, high	Psychiatric, high	0.677
PSYM	Psychiatric, medium	Psychiatric, medium low to medium	0.264
PSYML	Psychiatric, medium low	Psychiatric, medium low to medium	0.264
PSYL	Psychiatric, low	Psychiatric, low	0.167
PULVH	Pulmonary, very high	Pulmonary, very high	1.167
CPULVH	Pulmonary, very high - child	Pulmonary, very high - child	1.465
PULH	Pulmonary, high	Pulmonary, high	0.593
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium	0.475
PULL	Pulmonary, low	Pulmonary, low	0.178
RENEH	Renal, extra high	Renal, extra high	3.856
RENVH	Renal, very high	Renal, very high	0.489
RENM	Renal, medium	Renal, low to medium	0.132
RENL	Renal, low	Renal, low to medium	0.132

Exhibit 4B
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
Non-Newborn SSI / Disabled

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
SKCM	Skeletal, medium	Skeletal, medium	0.308
SKCL	Skeletal, low	Skeletal, very low to low	0.149
SKCVL	Skeletal, very low	Skeletal, very low to low	0.149
SKNH	Skin, high	Skin, low - high	0.254
SKNL	Skin, low	Skin, low - high	0.254
SKNVL	Skin, very low	Skin, very low	0.090
SUBL	Substance abuse, low	Substance abuse, very low to low	0.153
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.153
MRX1	Anti-coagulants	Cardiovascular, medium	0.570
MRX2	Cardiac	Cardiovascular, extra low	0.106
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.167
MRX4	Diabetes	Diabetes, type 2 low	0.177
MRX5	ESRD / Renal	Renal, very high	0.489
MRX6	Hemophilia / von Willebrands	Hematological, very high to extra high	1.633
MRX7	Hepatitis	HIV, medium	1.210
MRX8	HIV	HIV, medium	1.210
MRX9	Infections, high	AIDS, high	1.699
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.149
MRX11	Malignancies	Cancer, medium	0.649
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.589
MRX13	Parkinsons / Tremor	CNS, low	0.218
MRX14	Seizure disorders	CNS, low	0.218
MRX15	Tuberculosis	Pulmonary, low	0.178

Exhibit 4C
Mississippi Division of Medicaid
Custom Risk Adjustment Weights Effective July 2020
MA Adult

	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.142	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 15 to 24 Female	0.330	0.922
Age 15 to 24 Male	-	0.514
Age 25 to 44 Female	0.236	0.989
Age 25 to 44 Male	0.058	0.770
Age 45 and Older Female	0.245	1.353
Age 45 and Older Male	0.365	1.362
Duration Categories		
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A
Diagnosis Period Duration, 12 Months	-	N/A
Disease Categories		
Cancer, high to very high	3.752	N/A
Cancer, medium	0.997	N/A
Cancer, low	0.364	N/A
Cardiovascular, very high	1.914	N/A
Cardiovascular, medium	0.601	N/A
Cardiovascular, low	0.315	N/A
Cardiovascular, extra low	0.122	N/A
CNS, medium to high	0.836	N/A
CNS, low	0.419	N/A
Diabetes, type 1 high	2.432	N/A
Diabetes, type 1 medium	1.612	N/A
Diabetes, type 2 medium	1.043	N/A
Diabetes, type 2 low	0.375	N/A
DD, low to medium	0.613	N/A
Eye, very low to low	0.324	N/A
Genital, extra low	0.118	N/A
Gastro, medium to high	0.933	N/A
Gastro, low	0.224	N/A
Hematological, low to extra high	0.318	N/A
AIDS, high	1.445	N/A
HIV, medium	1.320	N/A
Infectious, low to medium	0.578	N/A
Metabolic, high	0.857	N/A
Metabolic, medium	0.393	N/A
Metabolic, very low	0.138	N/A
Pregnancy, complete	0.160	N/A
Pregnancy, incomplete	0.997	N/A
Psychiatric, high	0.972	N/A
Psychiatric, medium	0.513	N/A
Psychiatric, medium low	0.321	N/A
Psychiatric, low	0.212	N/A
Pulmonary, medium to high	0.600	N/A
Pulmonary, low	0.227	N/A
Renal, medium to extra high	0.855	N/A
Renal, low	0.304	N/A
Skeletal, medium	0.586	N/A
Skeletal, very low to low	0.362	N/A
Skin, low to high	0.941	N/A
Skin, very low	0.132	N/A
Substance abuse, low	0.289	N/A

Exhibit 4D
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Adult

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
CANVH	Cancer, very high	Cancer, high to very high	3.752
CANH	Cancer, high	Cancer, high to very high	3.752
CANM	Cancer, medium	Cancer, medium	0.997
CANL	Cancer, low	Cancer, low	0.364
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.914
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.601
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, low	0.315
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.122
CERL	Cerebrovascular, low	Not Used	Not Used
CNSH	CNS, high	CNS, medium to high	0.836
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium to high	0.836
CNSL	CNS, low	CNS, low	0.419
DDM	DD, medium	DD, low to medium	0.613
DDL	DD, low	DD, low to medium	0.613
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	2.432
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	1.612
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	1.043
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.375
EYEL	Eye, low	Eye, very low to low	0.324
EYEVL	Eye, very low	Eye, very low to low	0.324
GENEL	Genital, extra low	Genital, extra low	0.118
GIH	Gastro, high	Gastro, medium to high	0.933
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium to high	0.933
GIL	Gastro, low	Gastro, low	0.224
HEMEH	Hematological, extra high	Hematological, low to extra high	0.318
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.318
HEMM	Hematological, medium	Hematological, low to extra high	0.318
HEML	Hematological, low	Hematological, low to extra high	0.318
AIDSH	AIDS, high	AIDS, high	1.445
INFH	Infectious, high	AIDS, high	1.445
HIVM	HIV, medium	HIV, medium	1.320
INFM	Infectious, medium	Infectious, low to medium	0.578
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.578
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.857
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium	0.393
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.160
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.997
PSYH	Psychiatric, high	Psychiatric, high	0.972
PSYM	Psychiatric, medium	Psychiatric, medium	0.513
PSYML	Psychiatric, medium low	Psychiatric, medium low	0.321
PSYL	Psychiatric, low	Psychiatric, low	0.212
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, medium to high	0.600
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium to high	0.600
PULL	Pulmonary, low	Pulmonary, low	0.227
RENEH	Renal, extra high	Renal, medium to extra high	0.855
RENVH	Renal, very high	Renal, medium to extra high	0.855
RENM	Renal, medium	Renal, medium to extra high	0.855
RENL	Renal, low	Renal, low	0.304

Exhibit 4D
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Adult

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
SKCM	Skeletal, medium	Skeletal, medium	0.586
SKCL	Skeletal, low	Skeletal, very low to low	0.362
SKCVL	Skeletal, very low	Skeletal, very low to low	0.362
SKNH	Skin, high	Skin, low to high	0.941
SKNL	Skin, low	Skin, low to high	0.941
SKNVL	Skin, very low	Skin, very low	0.132
SUBL	Substance abuse, low	Substance abuse, low	0.289
SUBVL	Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.601
MRX2	Cardiac	Cardiovascular, extra low	0.122
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.212
MRX4	Diabetes	Diabetes, type 2 low	0.375
MRX5	ESRD / Renal	Renal, medium to extra high	0.855
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.318
MRX7	Hepatitis	HIV, medium	1.320
MRX8	HIV	HIV, medium	1.320
MRX9	Infections, high	AIDS, high	1.445
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.362
MRX11	Malignancies	Cancer, medium	0.997
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.836
MRX13	Parkinsons / Tremor	CNS, low	0.419
MRX14	Seizure disorders	CNS, low	0.419
MRX15	Tuberculosis	Pulmonary, low	0.227

Exhibit 4E
Mississippi Division of Medicaid
Custom Risk Adjustment Weights Effective October 2018
MA Children and Quasi-CHIP

	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.539	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 5 Male	0.133	0.953
Age 1 to 5 Female	0.068	0.833
Age 6 to 12 Male	0.047	1.046
Age 6 to 12 Female	0.049	0.896
Age 13 to 18 Male	-	1.007
Age 13 to 18 Female	0.297	1.292
Disease Categories		
Cancer, very high	27.677	N/A
Cancer, high	4.235	N/A
Cancer, medium	3.414	N/A
Cancer, low	0.629	N/A
Cardiovascular, very high	5.998	N/A
Cardiovascular, medium	0.760	N/A
Cardiovascular, extra low to low	0.593	N/A
Cerebrovascular, low	0.316	N/A
CNS, high	10.392	N/A
CNS, medium	1.647	N/A
CNS, low	0.575	N/A
DD, low to medium	2.162	N/A
Diabetes, type 2 low	2.030	N/A
Eye, very low to low	0.349	N/A
Genital, extra low	0.361	N/A
Gastro, high	5.482	N/A
Gastro, medium	1.521	N/A
Gastro, low	0.386	N/A
Hematological, low to extra high	0.598	N/A
AIDS, high	1.527	N/A
HIV, medium	1.204	N/A
Infectious, low to medium	0.197	N/A
Metabolic, medium to high	1.382	N/A
Metabolic, very low	0.506	N/A
Pregnancy, incomplete	2.708	N/A
Psychiatric, high	2.650	N/A
Psychiatric, medium	1.509	N/A
Psychiatric, medium low	1.218	N/A
Psychiatric, low	0.619	N/A
Pulmonary, high	7.062	N/A
Pulmonary, low to medium	0.502	N/A
Renal, extra high	13.306	N/A
Renal, very high	1.565	N/A
Renal, medium	0.837	N/A
Renal, low	0.295	N/A
Skeletal, medium	0.567	N/A
Skeletal, low	0.437	N/A
Skeletal, very low	0.278	N/A
Skin, high	1.516	N/A
Skin, very low to low	0.188	N/A
Substance abuse, very low to low	0.381	N/A

Exhibit 4F
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Children and Quasi-CHIP

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
CANVH	Cancer, very high	Cancer, very high	27.677
CANH	Cancer, high	Cancer, high	4.235
CANM	Cancer, medium	Cancer, medium	3.414
CANL	Cancer, low	Cancer, low	0.629
CARVH	Cardiovascular, very high	Cardiovascular, very high	5.998
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.760
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.593
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.593
CERL	Cerebrovascular, low	Cerebrovascular, low	0.316
CNSH	CNS, high	CNS, high	10.392
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium	1.647
CNSL	CNS, low	CNS, low	0.575
DDM	DD, medium	DD, low to medium	2.162
DDL	DD, low	DD, low to medium	2.162
DIA1H	Diabetes, type 1 high	Not Used	Not Used
DIA1M	Diabetes, type 1 medium	Not Used	Not Used
DIA2M	Diabetes, type 2 medium	Not Used	Not Used
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	2.030
EYEL	Eye, low	Eye, very low to low	0.349
EYEVL	Eye, very low	Eye, very low to low	0.349
GENEL	Genital, extra low	Genital, extra low	0.361
GIH	Gastro, high	Gastro, high	5.482
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium	1.521
GIL	Gastro, low	Gastro, low	0.386
HEMEH	Hematological, extra high	Hematological, low to extra high	0.598
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.598
HEMM	Hematological, medium	Hematological, low to extra high	0.598
HEML	Hematological, low	Hematological, low to extra high	0.598
AIDSH	AIDS, high	AIDS, high	1.527
INFH	Infectious, high	AIDS, high	1.527
HIVM	HIV, medium	HIV, medium	1.204
INFM	Infectious, medium	Infectious, low to medium	0.197
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.197
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, medium to high	1.382
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium to high	1.382
METVL	Metabolic, very low	Metabolic, very low	0.506
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	2.708
PSYH	Psychiatric, high	Psychiatric, high	2.650
PSYM	Psychiatric, medium	Psychiatric, medium	1.509
PSYML	Psychiatric, medium low	Psychiatric, medium low	1.218
PSYL	Psychiatric, low	Psychiatric, low	0.619
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, high	7.062
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, low to medium	0.502
PULL	Pulmonary, low	Pulmonary, low to medium	0.502
RENEH	Renal, extra high	Renal, extra high	13.306
RENVH	Renal, very high	Renal, very high	1.565
RENM	Renal, medium	Renal, medium	0.837
RENL	Renal, low	Renal, low	0.295
SKCM	Skeletal, medium	Skeletal, medium	0.567

Exhibit 4F
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Children and Quasi-CHIP

<u>CDPS + Rx Abbreviation</u>	<u>CDPS + Rx Description</u>	<u>MississippiCAN Risk Weight Category</u>	<u>MississippiCAN Risk Weight</u>
SKCL	Skeletal, low	Skeletal, low	0.437
SKCVL	Skeletal, very low	Skeletal, very low	0.278
SKNH	Skin, high	Skin, high	1.516
SKNL	Skin, low	Skin, very low to low	0.188
SKNVL	Skin, very low	Skin, very low to low	0.188
SUBL	Substance abuse, low	Substance abuse, very low to low	0.381
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.381
MRX1	Anti-coagulants	Cardiovascular, medium	0.760
MRX2	Cardiac	Cardiovascular, extra low to low	0.593
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.619
MRX4	Diabetes	Diabetes, type 2 low	2.030
MRX5	ESRD / Renal	Renal, very high	1.565
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.598
MRX7	Hepatitis	HIV, medium	1.204
MRX8	HIV	HIV, medium	1.204
MRX9	Infections, high	AIDS, high	1.527
MRX10	Inflammatory / Autoimmune	Skeletal, very low	0.278
MRX11	Malignancies	Cancer, medium	3.414
MRX12	Multiple Sclerosis / Paralysis	CNS, medium	1.647
MRX13	Parkinsons / Tremor	CNS, low	0.575
MRX14	Seizure disorders	CNS, low	0.575
MRX15	Tuberculosis	Pulmonary, low to medium	0.502

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2022

Region:	North

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	0.9999	\$1,070.00	\$1,069.93	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$1,249.93
Molina	0.9982	\$1,070.00	\$1,068.04	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$1,248.04
United	1.0006	\$1,070.00	\$1,070.63	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$1,250.63
MA Adult									
Magnolia	1.0114	\$490.00	\$495.56	\$50.00	\$60.00	\$10.00	TBD	\$120.00	\$615.56
Molina	0.9659	\$490.00	\$473.29	\$50.00	\$60.00	\$10.00	TBD	\$120.00	\$593.29
United	1.0112	\$490.00	\$495.48	\$50.00	\$60.00	\$10.00	TBD	\$120.00	\$615.48
MA Children									
Magnolia	1.0025	\$220.00	\$220.55	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$310.55
Molina	0.9379	\$220.00	\$206.34	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$296.34
United	1.0271	\$220.00	\$225.97	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$315.97
Quasi-CHIP									
Magnolia	1.0007	\$220.00	\$220.14	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$300.14
Molina	0.9678	\$220.00	\$212.93	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$292.93
United	1.0124	\$220.00	\$222.73	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$302.73
Foster Care									
Magnolia	0.9315	\$650.00	\$605.44	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$815.44
Molina	1.2965	\$650.00	\$842.73	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,052.73
United	1.0590	\$650.00	\$688.35	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$898.35

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2022

Region:	Central								
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0317	\$1,230.00	\$1,268.95	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,478.95
Molina	0.9725	\$1,230.00	\$1,196.23	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,406.23
United	0.9669	\$1,230.00	\$1,189.32	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,399.32
MA Adult									
Magnolia	1.0339	\$540.00	\$558.29	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$688.29
Molina	0.9505	\$540.00	\$513.28	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$643.28
United	1.0003	\$540.00	\$540.14	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$670.14
MA Children									
Magnolia	1.0141	\$220.00	\$223.11	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$313.11
Molina	0.9292	\$220.00	\$204.42	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$294.42
United	1.0202	\$220.00	\$224.45	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$314.45
Quasi-CHIP									
Magnolia	0.9923	\$230.00	\$228.22	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$308.22
Molina	0.9684	\$230.00	\$222.73	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$302.73
United	1.0206	\$230.00	\$234.75	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$314.75
Foster Care									
Magnolia	0.9469	\$680.00	\$643.90	\$180.00	\$60.00	\$10.00	TBD	\$250.00	\$893.90
Molina	1.2206	\$680.00	\$829.98	\$180.00	\$60.00	\$10.00	TBD	\$250.00	\$1,079.98
United	1.0389	\$680.00	\$706.43	\$180.00	\$60.00	\$10.00	TBD	\$250.00	\$956.43

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q3 to Q4 2022

Region:	South

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0309	\$1,220.00	\$1,257.68	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,467.68
Molina	0.9828	\$1,220.00	\$1,198.97	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,408.97
United	0.9747	\$1,220.00	\$1,189.08	\$140.00	\$60.00	\$10.00	TBD	\$210.00	\$1,399.08
MA Adult									
Magnolia	1.0120	\$530.00	\$536.38	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$666.38
Molina	0.9453	\$530.00	\$500.99	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$630.99
United	1.0276	\$530.00	\$544.62	\$60.00	\$60.00	\$10.00	TBD	\$130.00	\$674.62
MA Children									
Magnolia	1.0063	\$220.00	\$221.40	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$311.40
Molina	0.9364	\$220.00	\$206.01	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$296.01
United	1.0278	\$220.00	\$226.11	\$20.00	\$60.00	\$10.00	TBD	\$90.00	\$316.11
Quasi-CHIP									
Magnolia	0.9655	\$220.00	\$212.42	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$292.42
Molina	0.9349	\$220.00	\$205.68	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$285.68
United	1.0551	\$220.00	\$232.11	\$10.00	\$60.00	\$10.00	TBD	\$80.00	\$312.11
Foster Care									
Magnolia	0.9247	\$660.00	\$610.28	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$790.28
Molina	1.2856	\$660.00	\$848.47	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$1,028.47
United	1.0729	\$660.00	\$708.10	\$110.00	\$60.00	\$10.00	TBD	\$180.00	\$888.10

¹ Capitation rates reflect the removal of the quality withhold

² Includes associated premium tax

³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly

Caveats and Limitations
Mississippi Division of Medicaid
Q3 to Q4 2022 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q3 to Q4 2022 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters, FFS claims, and eligibility data from July 2022 to December 2022 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q3 to Q4 2022 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

Jill Bruckert is a Principal and Consulting Actuary for Milliman, 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 her knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.



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August 22, 2023

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

Re: Report19 - State Fiscal Year 2023 MississippiCAN Preliminary Rate Calculation and Certification - REVISED

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) has retained Milliman to develop actuarially sound capitation rates for state fiscal year (SFY) 2023 for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for Medicaid beneficiaries.

This report documents the preliminary capitation rates for all populations enrolled in MississippiCAN. Overall, the preliminary SFY 2023 capitation rates are 2.7% higher than the SFY 2022 capitation rates issued on July 18, 2023 (when compositing rates using CY 2019 membership). This report updates our preliminary capitation rates;¹ the following changes were made in this report relative to the prior certification:

- Unit cost trends for physician services were updated based on a restated simulation of the impact of changes in payment methodologies between CY 2019 and SFY 2023 performed by Conduent.
- Unit cost trends for inpatient, outpatient, physician, and other services were adjusted for fee schedule changes that occurred throughout SFY 2023.
 - Ambulatory Surgical Center (ASC)
 - Autism Spectrum Disorder (ASD)
 - Durable Medical Equipment (DME) / Medical Supplies
 - Home Health
 - Prescribed Pediatric Extended Care (PPEC)
 - Private Duty Nursing (PDN)
 - Psychiatric Residential Treatment Facilities (PRTF)
- A population adjustment for the Pregnant Women rate cell related to the extension of postpartum coverage from 60 days to 12 months effective April 1, 2023.
- COVID-19 population acuity adjustment was applied for the MA Adult, MA Children, and Quasi-CHIP rate cells to account for differences in actual and projected SFY 2023 enrollment.
- We removed a reimbursement adjustment related to certain rural hospitals opting out of APC reimbursement methodology, and instead being reimbursed at 101% of Medicare rates. This reimbursement adjustment will be applied to SFY 2024.

¹ "Wentworth12 - SFY 2023 Preliminary MississippiCAN Rate Calculation and Certification.pdf" dated July 18, 2023.



Table 1 summarizes the overall impact on capitation rates resulting from the changes noted above. The impact in Table 1 is based upon the membership distribution across rate cells in calendar year (CY) 2019. Each of these changes are described in more detail within the capitation report.

Table 1 MississippiCAN Capitation Rates Summary of SFY 2023 Rate Change Components	
Assumption Change	Change from July 18, 2023 Preliminary Rates
Restated SFY 2019 to SFY 2023 Unit Cost Trends	1.004
COVID-19 Population Acuity Adjustment	1.011
Postpartum Coverage Extension	0.999
Restated Administrative Costs	1.002
Total SFY 2023 Rate Change	1.016

No program experience from SFY 2023 was used to develop these rate adjustments other than actual enrollment for the acuity adjustment, as was outlined in the original rate certification.

Also consistent with the approaches outlined in the original rate certification, rates will be retroactively adjusted and recertified for the following items:

- Payments for the Mississippi Hospital Access Program (MHAP) Quality Incentive Payment Program (QIPP).
- Payments for the Mississippi Medicaid Access to Physician Services (MAPS) program.
- Payments for the Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) program.
- Actual membership to determine the final MHAP fee schedule adjustment (FSA) amounts.

This recertification will be done at one time for capitation rates for the entire SFY 2023 period. This recertification is anticipated to happen by June 2024.

As of the time of this report, the impact on capitation rates due to COVID-19 is uncertain for SFY 2023. As such, consistent with the original certification, a risk corridor will be used in SFY 2023 to reflect the uncertainty in the capitation rates due to COVID-19. The risk corridor is described in more detail in Section IV. In addition, explicit adjustments for COVID-19 are made in the rate development for the following:

- Fewer than 3.5 years of utilization trend was applied from CY 2019 to SFY 2023 in some situations. Total utilization trend applied varies by rate cell and is described in greater detail in Section IV.
- Medicaid enrollment remained elevated through the end of the Department of Health and Human Services (HHS) declared public health emergency (PHE). Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the PHE from coordinated care organizations (CCOs) into FFS Medicaid. Following the end of the PHE, these members' Medicaid eligibility is being redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely.

As SFY 2023 enrollment is materially different than the CY 2019 membership used to develop the base data underlying SFY 2023 capitation rates, Milliman applied a retrospective acuity adjustment for the MA Adult, MA Children, and Quasi-CHIP rate cells to reflect the differences between those populations.

Capitation rates include dampened emergency service projections, which reflect utilization pattern changes observed during the COVID-19 pandemic and expected to persist following the pandemic.

- The capitation rates include provisions for expected vaccination administration fees related to COVID-19 in SFY 2023.

Additionally, the SFY 2023 capitation rates use CY 2019 data as the basis for projections. Under normal circumstances, SFY 2023 capitation rates would be based on CY 2020 experience. However, given the large changes in member behavior in CY 2020, we do not find this experience to be a credible basis for SFY 2023 projections, as we expect



Jennifer Wentworth
Mississippi Office of the Governor, Division of Medicaid
August 22, 2023
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SFY 2023 will be more similar to CY 2019 than to CY 2020. However, CY 2020 and emerging 2021 experience is used to help inform trends and other targeted adjustments, where appropriate.



Jennifer, please call us at 262 784 2250 if you have questions. We look forward to discussing this report with you and the CCOs.

Sincerely,

A handwritten signature in black ink that reads 'Jill Bruckert'.

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

JAB/KNL/bl

Attachments

A handwritten signature in black ink that reads 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary

MILLIMAN REPORT

State of Mississippi Division of Medicaid

State Fiscal Year 2023 MississippiCAN Preliminary Rate Calculation and Certification - REVISED

August 22, 2023

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I. SUMMARY AND DISCUSSION OF RESULTS

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify to capitation rates for Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for targeted Medicaid beneficiaries, effective for state fiscal year (SFY) 2023. This report provides preliminary SFY 2023 capitation rates and documents their development. This report is structured as follows:

- Section I includes a high-level overview of the change in capitation rates relative to the July 1, 2021 to June 30, 2022 (SFY 2022) capitation rates
- Section II provides a short background of the MississippiCAN program
- Section III documents the development of the base data
- Section IV documents the rate setting process for SFY 2023 capitation rates
- Appendices A and B contain additional details on the SFY 2023 rate cell definitions and base period data sources and processing
- Appendices C and D provide responses to the CMS rate setting checklist and CMS managed care rate setting guide for all rate cells
- Appendix E contains an Actuarial Certification for all MississippiCAN rate cells
- Appendix F documents our reliance on DOM for data and other assumptions in the development of the capitation rates

SFY 2023 CAPITATION RATES

Table 1 includes per member per month (PMPM) preliminary capitation rates effective for SFY 2023, including all components that will be paid to the Coordinated Care Organizations (CCOs) on a monthly basis. Each CCO will be paid based on the distribution of members enrolled in each rate cell. In addition, CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions: North, Central, or South, as shown in Appendix A.

Table 1 Mississippi Division of Medicaid MississippiCAN Capitation Rates Per Member Per Month (PMPM)¹ Effective SFY 2023			
Rate Cell	North	Central	South
Non-Newborn SSI / Disabled	\$1,103.21	\$1,268.75	\$1,256.67
Breast and Cervical Cancer	\$3,541.76	\$4,073.22	\$4,034.43
MA Adult	\$524.15	\$577.45	\$561.35
Pregnant Women	\$1,090.72	\$1,201.64	\$1,168.14
SSI / Disabled Newborn	\$8,721.52	\$9,050.13	\$8,845.86
Non-SSI Newborns 0 to 2 Months	\$2,008.45	\$2,084.12	\$2,037.08
Non-SSI Newborns 3 to 12 Months	\$282.24	\$292.87	\$286.26
Foster Care	\$707.54	\$734.20	\$717.63
MYPAC	\$4,078.64	\$4,232.31	\$4,136.79
MA Children	\$229.67	\$238.33	\$232.95
Quasi-CHIP	\$232.19	\$240.93	\$235.50

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.

The MississippiCAN capitation rates include medical and pharmacy services that will be paid prospectively on a monthly basis in the capitation rates and directed payments that will require retrospective adjustments to the capitation rates. The PMPM capitation rates in Table 1 only include the amounts that will be paid prospectively in the capitation rates.

As outlined in the original certification, the capitation rates will be retrospectively adjusted for the following components, which are not included in Table 1:

- The Mississippi Hospital Access Program (MHAP) hospital fee schedule adjustment (FSA), which varies by rate cell on a PMPM basis based on projected utilization of inpatient and outpatient services and actual membership. The MHAP FSA payments will be \$313.1 million in SFY 2023, increased from \$285.6 million in SFY 2022. Please see Section IV of this report for additional details on the MHAP FSA.
- Payments for the MHAP quality incentive payment program (QIPP) are paid outside of the capitation rates on a quarterly basis. The MHAP QIPP payments will be \$288.1 million in SFY 2023, increased from \$247.5 million in SFY 2022. Please see Section IV of this report for additional details on the MHAP QIPP.
- The MAPS program will be included in MississippiCAN to enhance payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital, or who assigned Mississippi Medicaid payments to a qualifying hospital. The MAPS payments are estimated to be \$38.0 million in SFY 2023. Please see Section IV of this report for additional details on the MAPS program.
- The TREAT program will be included in MississippiCAN for SFY 2023 to enhance payments to eligible emergency ambulance providers. The TREAT payments are estimated to be \$14.7 million in SFY 2023. Please see Section IV of this report for additional details on the TREAT program.

In addition, the capitation rates will be adjusted on a CCO specific basis for the following rate adjustments:

- **Quality Withhold:** As in SFY 2022 rates, DOM will apply a quality withhold to MississippiCAN payments in SFY 2023 based on metrics reported by the CCOs. The PMPM capitation rates in Table 1 are prior to the application of this quality withhold. Please see Section IV for more information on the quality withhold for SFY 2023.
- **Risk Adjustment:** The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be risk adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO and will be budget-neutral to DOM. The CDPS + Rx demographic and disease category weights are calculated using Mississippi fee-for-service (FFS) and encounter data.

The capitation rates for the Foster Care rate cell will be risk adjusted using a custom risk adjustment model developed for this population. This custom model uses a member's eligibility for either state or federal financial assistance to assign a risk score. The risk adjustment for the Foster Care rate cell will be applied on a concurrent basis.

Please see Section IV for more information on the application of risk adjustment to the applicable rate cells.

- **Risk Corridor:** As outlined in the original certification, a risk corridor will be applied to recognize the uncertainty in determining rate setting assumptions for the impact of COVID-19 on the SFY 2023 rating period. Please see Section IV for more information on how the risk corridor settlements will be calculated.

Our Actuarial Certification of the SFY 2023 MississippiCAN capitation rates is included as Appendix E. It should be emphasized that capitation rates are a projection of future costs based on a set of starting data and assumptions. Actual costs will be dependent on each contracted CCO's situation, experience, and enrolled population.

SELECTION OF BASE DATA

Under normal circumstances, data from CY 2020 would be used as the primary base data for SFY 2023 capitation rates. Due to the emergence of COVID-19 in 2020, however, the CY 2020 encounter data shows significantly different utilization and cost patterns when compared with prior time periods. We expect claims and member behavior in SFY 2023 to be more similar to prior time periods than to CY 2020, therefore, we use CY 2019 data as our primary data source for the SFY 2023 capitation rates.

While CY 2020 encounter data is not the primary data source for SFY 2023 capitation rates, we use this data and emerging data from CY 2021 to inform assumptions used to develop the SFY 2023 capitation rates, such as trend assumptions or service mix changes expected to persist post-COVID-19. We validated the quality of the CY 2020 encounter data by comparing the data to financial reporting provided by the CCOs, similar to the validation process for the CY 2019 data described in Section III below. Based on our analysis, the CY 2020 encounter data and the CCOs' financial reporting align reasonably well, with the reported financial data being approximately 0.9% higher than the reported encounters.

COVID-19 CONSIDERATIONS IN SFY 2023 RATE DEVELOPMENT

As of the time of this report, the impact on SFY 2023 capitation rates due to COVID-19 is difficult to predict. As such, as outlined in the original certification, a risk corridor will be in effect in SFY 2023 to reflect the uncertainty in the capitation rates due to COVID-19. The risk corridor is described in more detail in Section IV.

In addition, explicit adjustments for COVID-19 are made in the rate development for the following, as described in Section IV:

- We apply no utilization trend, one year of utilization trend, or two years of utilization trend for the adult, children, and SSI rate cell groups, respectively, from CY 2019 to SFY 2023 (these groups are outlined in Table 4 below). The application of a 0% utilization trend for a portion of this 42-month period implicitly assumes that once services return to pre-pandemic levels, if not already there, they are not anticipated to reflect 42 months of utilization trend relative to CY 2019 levels.
- Capitation rates include dampened emergency service projections which reflect utilization pattern changes observed during the COVID-19 pandemic and expected to persist following the pandemic.
- The capitation rates include provisions for expected vaccination administration fees related to COVID-19 in SFY 2023.
- As SFY 2023 enrollment is materially different than the CY 2019 membership used to develop the base data underlying SFY 2023 capitation rates due, Milliman applied a retrospective acuity adjustment for the MA Adult, MA Children, and Quasi-CHIP rate cells to reflect the differences between those populations.

The SFY 2023 capitation rates do not include any explicit adjustments for the following:

- COVID-19 Testing and Treatment Cost: The infection rate for COVID-19 in SFY 2023 is dependent on many variables that are difficult to predict, limiting our ability to include an estimate for the cost of testing for and treating individuals with COVID-19. Some of the variables under consideration include, but are not limited to:
 - The take-up rate and timing of COVID-19 vaccinations.
 - The emergence of COVID-19 variants and the efficacy of vaccines upon these variants.
 - The implementation of social distancing measures.

To our knowledge, there is not a publicly available model that includes COVID-19 infection rates or hospital admissions through June 2023. In addition, the publicly available models have materially changed short-term and long-term projections of COVID-19 prevalence in reaction to emerging data as different variations of COVID-19 become the main strain of infections. Given the unpredictable patterns of COVID-19 prevalence to date in Mississippi and the changing national models there is a range of potential impacts on the SFY 2023 rates.

In addition, part of the rationale for not adding future COVID-19 related costs is that flu-related costs have also been dampened during the COVID-19 pandemic relative to the amounts that are included in the CY 2019 base period data. Similar to estimating future COVID-19 related costs, future flu-related costs are also difficult to predict. It is unknown if the dampened infection rates in the 2020 / 2021 and 2021 / 2022 flu seasons (as of the date of this report) will persist after the end of the PHE due to increased population adherence to precautionary measures (such as masking and hand washing), or if a “normal” flu season will return.

- **Deferred and Foregone Services:** The most significant fiscal impact of COVID-19 to date has been the deferral of non-essential services, either through government-enacted policies, the impact of social distancing on the administration of services, or personal choice to defer services. We have reviewed MississippiCAN emerging data by population type (to remove the impact of membership mix changes). As of September 2021, there was still measurable reductions in claim costs compared to the PMPMs in CY 2019 for some population types. However, it is difficult to use this historical data to project the impact of deferred services for SFY 2023 for many reasons.
 - We observed the change in service utilization has varied as the level of COVID-19 diagnoses and hospital admissions has changed in Mississippi over the course of the pandemic to date. Therefore, a key variable in predicting future service utilization changes relative to pre-pandemic levels is the future prevalence of COVID-19, which as noted above, is unknown.
 - Despite the availability of vaccines and loosening of restrictions in CY 2021, we still have not seen claims return to a pre-pandemic level or the impact of any warehousing of claims.
 - In the MississippiCAN data that we have reviewed it is difficult to isolate the impact of deferred services from changes in utilization due to other drivers, such as change in service mix.
 - The length of the pandemic to date means that some of the routine care services that may have been deferred will be foregone rather than made up at a later time. For example, an individual will not receive two physicals in one year if they missed their prior evaluation.
 - Even if demand for deferred services is higher in SFY 2023, the amount of these services that can be provided is limited by the capacity of the state’s medical infrastructure. Some delayed services may continue to be delayed or never performed if demand exceeds capacity.

CAPITATION RATE CHANGE SUMMARY

Compared to SFY 2022 capitation rates, the SFY 2023 rates are 2.7% higher excluding the impact of directed payments when composited across all rate cells using CY 2019 membership. Excluding the impact of program changes (noted by footnote 2 in Table 2), which increase or decrease total program costs concurrently with revenue for the CCOs, the rates are 3.4% higher than SFY 2022. Excluding the impact of COVID-19 adjustments (noted by footnote 1 in Table 2), the rates are 0.1% lower than SFY 2022.

Table 2 shows a summary of the main drivers of the rate changes aggregated across all MississippiCAN capitation rate cells, excluding the impact of directed payments. All compositing is based upon CY 2019 membership.

Table 2
MississippiCAN Capitation Rates
Summary of SFY 2023 Rate Change Components¹

	Aggregated with CY 2019 Membership
SFY 2022 Capitation Rate	\$472.10
Base Period Data Update	0.996
Restate TPL on CY 2019 Claims	0.999
Restate Benefits Exceeding Medicaid Limits	1.000
Restate CY 2018 to SFY 2022 Trends	0.976
Remove SFY 2021 to SFY 2022 Charge Trends	0.998
Restate CY 2019 to CY 2020 PDL Adjustment ²	0.997
COVID-19 Population Acuity Adjustments ³	1.019
Other Restated Assumptions	0.999
Restated SFY 2022 Rate	0.983
SFY 2022 to SFY 2023 Trends	1.047
SFY 2023 COVID-19 Population Acuity Adjustment ³	1.011
Emergency Services Savings Adjustment	0.993
PDL CY 2021 to CY 2022 Adjustment ²	0.998
SFY 2022 to SFY 2023 COVID-19 Vaccine Administration Change ^{2, 3}	0.998
SFY 2023 Preventative and Diagnostic Dental Reimbursement Change ²	1.001
SFY 2023 Restorative Dental Reimbursement Change ²	1.001
Postpartum Coverage Extension ²	0.999
Update Admin	0.998
Preliminary SFY 2023 Rate Change	1.027
SFY 2023 Rate Change - Excluding Program Changes²	1.034
SFY 2023 Rate Change - Excluding COVID-19 Adjustments³	0.999

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.

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

³ COVID-19 Adjustments include the COVID-19 Vaccine Administration Expense and the COVID-19 Population Acuity Adjustment.

The values quoted below are all based on CY 2019 membership composites.

- The development of SFY 2023 capitation rates is a ground-up approach where the base data and each assumption is evaluated separate from the SFY 2022 capitation rates. However, for the purposes of explaining the rate change from SFY 2022 to SFY 2023, we isolate the impact of rebasing the data and assumptions that result in a change in the projected SFY 2022 values. Overall, this rebasing decreased the projection of SFY 2022 costs by 1.7% from costs projected in the SFY 2022 capitation rates. This 1.7% decrease contains the following sub-components:
 - CY 2019 claims data developed for SFY 2022 rate setting included runout through April 2020 and an incurred but not reported (IBNR) estimation of additional runout, while restated claims used for SFY 2023 rate setting include runout through August 2021 with no IBNR estimations necessary. This data update, as shown in the “Base Period Data Update” row above, amounted to a rate decrease of 0.4% relative to SFY 2022 rates.
 - We reflected additional runout on collections related to third party liability (TPL) incurred in CY 2019, but not yet reflected in the base encounter data used for rate setting. This amounted to a 0.1% reduction to SFY 2023 rates relative to SFY 2022 rates.
 - In SFY 2022 rates, Milliman removed the cost of services exceeding service limits from CY 2018 and CY 2019 base data as reported by the CCOs in financial reporting. Milliman recalculated the costs of these services for SFY 2023 rate setting by querying encounter data. The resulting recalculation of non-covered services resulted in a negligible change in SFY 2023 rates relative to SFY 2022 rates.

- Milliman restated CY 2019 to SFY 2022 trend assumptions. This included the recalculation of annual trend assumptions based on reviewing restated data, changes to the lengths of time during which utilization trends were applied from CY 2019 to SFY 2022, and the restatement of CY 2019 to SFY 2022 pharmacy unit cost trends; all topics are discussed in Section IV. Overall, this trend restatement resulted in an overall 2.4% reduction to capitation rates.
- In SFY 2022 capitation rates, Milliman reflected anticipated changes to fee schedules effective July 1, 2021. Due to SB2799, fee schedules set to change at that time were instead frozen at the SFY 2021 levels. Milliman thus removed SFY 2021 to SFY 2022 charge trends seen in SFY 2022 capitation rates from the SFY 2023 capitation rates shown in this report. This removal of SFY 2021 to SFY 2022 unit cost changes results in a 0.2% reduction to capitation rates.

CMS did not approve the freezing of pharmacy reimbursement as of July 1, 2021. Therefore, SFY 2023 capitation rates assume pharmacy unit cost trends are applicable for the entire time period from the base period to SFY 2023. Additionally note, that FQHC and RHC reimbursement rates are set by the Federal government, and thus, cannot be modified by DOM. Therefore, Milliman continued to reflect all applicable FQHC and RHC reimbursement changes from the base period to SFY 2023 in these capitation rates.

- Milliman restated the impact of PDL changes effective January 1, 2020. This resulted in an additional 0.3% reduction to SFY 2023 rates relative to SFY 2022 rates.
 - SFY 2022 capitation rates included negative acuity adjustments for the MA Adult, MA Children, and Quasi-CHIP populations. These acuity adjustments reflected an increase in projected SFY 2022 enrollment relative to CY 2019 enrollment as of the initial certification of SFY 2022 capitation rates. The removal of this negative adjustment from SFY 2022 to SFY 2023 rates resulted in a 1.9% increase in SFY 2023 capitation rates relative to SFY 2022 capitation rates.
 - Various other assumptions were restated, most notably PRTF-related adjustments on CY 2018 data, NET-related changes (to incorporate a second CCO transitioning vendors), and various other adjustments which were recalculated using updated CY 2019 claims data. These restated assumptions net to a 0.1% reduction to SFY 2023 capitation rates.
- Composite utilization and unit cost trend assumptions from SFY 2022 to SFY 2023 increased projected costs 4.7%. This is driven by a large unit cost increase for physician services (primarily evaluation and management codes) effective July 1, 2022. In addition, there were other service specific fee schedules that had material changes on a population specific basis (e.g., PRTF increase result in large reimbursement change for the Foster Care rate cell) during SFY 2023 that we have incorporated.
 - An acuity adjustment for the MA Adult, MA Children, and Quash-CHIP rate cells was applied to account for decreased enrollment in SFY 2023 relative to CY 2019, which increased the capitation rates by 1.1%.
 - MississippiCAN has seen a decrease in the utilization of emergency services since the beginning of the COVID-19 pandemic. We expect that this shifted member behavior will persist into SFY 2023 and have thus projected a decrease to emergency service utilization relative to CY 2019 levels. Across all rate cells, this amounts to a 0.7% decrease to capitation rates.
 - Preferred drug list (PDL) updates effective January 1, 2022 are estimated to decrease gross pharmacy costs prior to DOM rebate collection by approximately 1.2%, resulting in an overall 0.2% decrease to capitation rates.
 - MississippiCAN CCOs will be responsible for expenses related to the administration of the COVID-19 vaccine. Milliman revised the estimate of these vaccine administration expenses from SFY 2022 to SFY 2023. Across all rate cells, SFY 2023 vaccine administration expenses average \$0.78 PMPM, down from \$1.71 in SFY 2022 rates, resulting in an overall 0.2% decrease to capitation rates.
 - Per SB2799, SFY 2023 MississippiCAN preventative and diagnostic dental services will be reimbursed at a rate 5% greater than in SFY 2022. Across all rate cells, this amounts to a 0.1% increase to capitation rates.

MILLIMAN REPORT

- Per HB657, SFY 2023 MississippiCAN restorative dental services will be reimbursed at a rate 5% greater than in SFY 2022. Across all rate cells, this amounts to a 0.1% increase to capitation rates.
- Per SB 2212, postpartum coverage extended from 60 days to 12 months effective April 1, 2023. Previously, members in the Pregnant Women rate cell were transitioned out of the rate cell after their 60 days of postpartum coverage concluded. An adjustment to account for the estimated cost differential between the prior coverage and the additional postpartum coverage decreased overall SFY 2023 capitation rates by 0.1% on a PMPM basis across all rate cells. However due to the additional membership introduced into the program, we estimate total program SFY 2023 costs increased by 0.5% due to the postpartum extension.
- Overall administrative expenses increased approximately 3.0% on a PMPM basis from SFY 2022 to SFY 2023. Total administrative expenses as a percentage of medical expenses remained approximately unchanged from SFY 2022 rates, and thus, administrative expense updates resulted in a small reduction to SFY 2023 capitation rates. Fixed administrative expenses increased from \$10.25 PMPM in SFY 2022 rates to \$10.56 PMPM in SFY 2023 rates, and variable administrative expenses decreased from 5.39% of SFY 2022 rates to 5.00% of SFY 2023 rates.

The total MHAP payment across all MississippiCAN members increased to \$601.15 million in SFY 2023 from \$533.11 million in SFY 2022. Please see Section IV of this report for more information on changes to the MHAP structure for SFY 2023.

CAPITATION RATE CHANGE BY RATE CELL

Rate changes vary by capitation rate cell as shown in Table 3, which compares SFY 2023 capitation rates to SFY 2022 capitation rates, on a similar basis as Table 2. The level of detail for the rate change included in Table 2 above is shown by rate cell in Exhibit 5.

Table 3 MississippiCAN Capitation Rates Summary of Statewide SFY 2023 Rate Change ¹			
Rate Cell	Overall Rate Change	Excluding Program Changes ²	Excluding COVID-19 Adjustments ³
Non-Newborn SSI / Disabled	0.6%	1.2%	0.6%
Breast and Cervical Cancer	1.4%	1.8%	1.4%
MA Adult	11.5%	12.1%	-0.1%
Pregnant Women	-3.0%	-1.2%	-3.1%
SSI / Disabled Newborn	1.3%	1.6%	1.3%
Non-SSI Newborns 0 to 2 Months	-2.6%	-2.6%	-2.6%
Non-SSI Newborns 3 to 12 Months	-0.3%	0.0%	-0.3%
Foster Care	4.4%	4.9%	4.6%
MYPAC	-2.2%	-2.1%	-2.2%
MA Children	5.0%	6.0%	-0.1%
Quasi-CHIP	5.2%	6.3%	0.0%
Total - Aggregated with CY 2019 MMs	2.7%	3.4%	-0.1%

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.

² PDL, Dental Reimbursement Changes, and Postpartum Coverage changes have been excluded from this calculation.

³ COVID-19 Adjustments include the COVID-19 Vaccine Administration Expense and the COVID-19 Population Acuity Adjustment.

DATA RELIANCE AND IMPORTANT CAVEATS

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

The models rely on data and information as input to the models. We used CCO encounter data and CCO financial reporting from January 2018 to September 2021 with runout through November 2021, FFS cost and eligibility data from January 2017 to December 2018, historical and projected reimbursement information, TPL recoveries, fee schedules,

pharmacy and dispensing fee pricing, and other information from DOM, MississippiCAN CCOs, Myers and Stauffer, Change Healthcare, and CMS to calculate the preliminary MississippiCAN capitation rates shown in this report. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete. Please see Appendix F for a full list of the data relied upon to develop the SFY 2023 capitation rates.

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

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

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

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

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

II. MISSISSIPPICAN BACKGROUND

MississippiCAN, a Coordinated Care Program for Mississippi Medicaid beneficiaries, was designed to address the following goals:

- Improve access to needed medical services – This goal is accomplished by connecting the targeted beneficiaries with a medical home, increasing access to providers, and improving beneficiaries' use of primary and preventive care services
- Improve quality of care – This goal is accomplished by providing systems and supportive services, including disease state management and other programs that will allow beneficiaries to take increased responsibility for their health care
- Improve efficiencies and cost effectiveness – This goal is accomplished by contracting with CCOs on a capitated basis to provide services through an efficient, cost effective system of care

TARGET POPULATION

MississippiCAN was implemented in all 82 counties in the State of Mississippi for all eligible beneficiaries beginning January 1, 2011 for targeted, high cost Medicaid beneficiaries defined by these categories of eligibility (COEs):

- COE001 – SSI via SDX
- COE019 – Disabled children at home
- COE025 – Working Disabled
- COE026 – DHS CWS Foster Care
- COE027 – Breast-Cervical

On December 1, 2012 the eligible population of MississippiCAN was expanded to include all Foster Care children, Non-SSI Newborns 0 to 12 months, MA Adults, and Pregnant Women, as defined by the following categories of eligibility and age requirements:

- COE003 – DHS-IV-E-Medicaid
- COE075 – Parents / Caretakers of minor children
- COE088 – Pregnant Women, 185% FPL – Ages 8+
- Non-SSI Newborns – Ages 0 to 12 months
 - COE003 – DHS IV-E Medicaid
 - COE026 – DHS Foster Care
 - COE071 – Newborn age 0 to 1 with income at or below 185% FPL
 - COE088 – Pregnant Women, 185% FPL

Effective December 1, 2012, all MississippiCAN populations were mandatory enrolled except SSI children, disabled children at home, Foster Care children, and members of the Mississippi Band of Choctaw Indians.

Between December 2014 and July 2015, the eligible population of MississippiCAN was expanded again to include children as defined by the following categories of eligibility, age, and income requirements:

- COE072 – Children age 1 to 5 with income at or below 133% FPL
- COE073 – Children age 6 to 19 with income at or below 100% FPL
- COE074 – Children age 6 to 19 with income between 100% and 133% FPL who would have qualified for CHIP under pre-Affordable Care Act rules

Effective January 1, 2014, COE074 children previously eligible for CHIP with income eligibility between 100% and 133% FPL became Medicaid eligible rather than CHIP eligible due to income eligibility outlined in the Affordable Care Act. These children were moved into MississippiCAN effective December 1, 2014 and referred to as “Quasi-CHIP” children.

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The children covered under the above COEs previously covered in the Medicaid program are called “MA Children.” DOM phased in enrollment from FFS into MississippiCAN by July 2015, with most children transitioned between May 2015 and July 2015.

Effective December 1, 2015, in conjunction with the movement of inpatient services into MississippiCAN, enrollment procedures were changed to enroll newborns in MississippiCAN on the day of their birth. Previously, newborns were not enrolled until, on average, their second month of life due to a delay in assigning a Medicaid identification number and the process to enroll them in a CCO.

Starting October 1, 2018, Severely Emotionally Disturbed (SED) Children were covered by MississippiCAN. These children are identified with the lock-in code of “SED,” which is effective for one year after determination. To receive Mississippi Youth Program Around the Clock (MYPAC) services, a child must have a SED lock-in code. This population was referred to as “SED Children” prior to SFY 2021. Starting in SFY 2021, this population is referred to as the “MYPAC” rate cell.

Throughout this report, we frequently apply the same adjustments to rate cells with similar demographics. The rate cell groups summarized in Table 4 identify the rate cells contained within each grouping referenced throughout this report.

Table 4 Mississippi Division of Medicaid Rate Cell Groupings	
Rate Cells	Rate Cell Grouping
Non-Newborn SSI / Disabled	SSI
Breast and Cervical Cancer	SSI
MA Adult	Adults
Deliveries - MA Adult	Deliveries
Pregnant Women	Adults
Deliveries - Pregnant Women	Deliveries
SSI / Disabled Newborn	Children
Non-SSI Newborns 0 to 2 Months	Children
Non-SSI Newborns 3 to 12 Months	Children
Foster Care	Children
MYPAC	Children
MA Children	Children
Quasi-CHIP	Children

COVERED SERVICES

When MississippiCAN was first established in January 2011, three key services were initially excluded from the program. Over time, each has been moved from being covered by FFS to MississippiCAN as follows:

- Behavioral health services – Rolled into MississippiCAN effective December 1, 2012
- Non-emergent transportation services – Rolled into MississippiCAN effective July 1, 2014
- Inpatient services – Rolled into MississippiCAN effective December 1, 2015

Effective October 1, 2018, MississippiCAN included costs for psychiatric residential treatment facility (PRTF) stays. Historically, these costs were carved out of MississippiCAN, although members were not dis-enrolled from MississippiCAN.

Starting July 1, 2019, services provided at institutions for mental disease (IMD) are covered as part of the MississippiCAN program.

CCOs historically have not provided services not covered under MississippiCAN “in lieu of” covered services.

ENROLLMENT PERIOD

All beneficiaries have the ability to choose the CCO in which to enroll. Enrolled beneficiaries will have an open enrollment period during the 90 days following their initial enrollment in a CCO, during which they can enroll in a different CCO “without cause” and an open enrollment period from October to December of each year. During this time period, beneficiaries may choose to change their CCO.

Various “for cause” reasons for disenrollment at other times incorporate federal requirements, such as: Providers that do not (for religious or moral reasons) offer needed services; not all related services are available in the plan's network; or the plan lacks providers experienced in dealing with the enrollee's health care needs.

Eligibility criteria for MississippiCAN are the same as the eligibility criteria for Mississippi Medicaid. To receive enhanced federal funding during the COVID-19 PHE, DOM paused disenrollment of members from the Mississippi Medicaid program who normally would no longer be eligible for Medicaid services. Where readily identifiable (e.g., individuals aging out of the program eligibility requirements or pregnant women reaching 60 days post-partum), individuals who would have lost normal Medicaid eligibility in the MississippiCAN program were transitioned to FFS for the remainder of the PHE. Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the PHE from coordinated care organizations (CCOs) into FFS Medicaid. Following the end of the PHE, these members Medicaid eligibility will be redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely.

The CCOs do not have the ability to directly market to targeted beneficiaries. DOM provides information about choice of CCOs and enrolls the beneficiaries into their chosen CCO. The Medicaid Fiscal Agent provides some specific services of an enrollment broker to accomplish these tasks.

III. BASE DATA DEVELOPMENT

This section of the report describes the development of the base data used for the preliminary SFY 2023 MississippiCAN capitation rates.

METHODOLOGY OVERVIEW

For the SFY 2023 capitation rates, CY 2019 experience forms the primary base data. For smaller MississippiCAN populations that were not credible based on CY 2019 experience alone (using a threshold of 150,000 member months), we blended CY 2018 and CY 2019 experience to form the base data. The rate cells using two years of base period data are Foster Care, Breast and Cervical Cancer, Pregnant Women (including related delivery costs), SSI / Disabled Newborn, Non-SSI Newborns 0 to 2 Months, and MYPAC.

The base data for the SFY 2023 capitation rates was developed using the following steps:

1. Summarize eligibility, encounter claims, and financial claim data for CY 2019 MississippiCAN enrollees.
2. Summarize eligibility, encounter claims, and financial claim data for CY 2018 MississippiCAN enrollees. This information is only used for low-credibility rate cells.
3. Summarize Q1 to Q3 2018 FFS and encounter data for the MYPAC rate cell. This data is then adjusted to be on a CY 2018 basis.
4. Blend 2018 and 2019 data (if applicable).

Each of the steps above is described in detail in the remainder of this report.

Exhibit 11 contains databooks summarizing encounter data for CY 2018 and CY 2019 for all rate cells except MYPAC. For MYPAC, the databooks include the same metrics summarized from FFS for Q1 to Q3 2018 and encounter data for CY 2019.

- Exhibit 11A and Exhibit 11E summarize total paid amounts for each MississippiCAN rate cell.
- Exhibit 11B and Exhibit 11F summarize PMPM paid amounts for each MississippiCAN rate cell.
- Exhibit 11C and Exhibit 11G summarize the percentage of total paid amounts within each specific service grouping for each MississippiCAN rate cell.
- Exhibit 11D and Exhibit 11H summarize utilization and average charge for services within the inpatient and pharmacy categories of service for each MississippiCAN rate cell. Utilization metrics for other categories of service are not shown in these exhibits due to differences in reporting methods for utilization metrics by the CCOs in the encounter data.

Please note, the total and PMPM costs shown in the 2019 databook tie to the starting totals on Exhibit 1A, excluding missing data. However, the 2018 databook values will not tie exactly to the starting totals on Exhibit 1B, since Exhibit 1B blends region-specific PMPM values using regional membership distributions from the 2019 enrollment data, whereas the 2018 databook uses the actual distribution by region seen in 2018 enrollment.

Step 1: Summarize CY 2019 Data

A high-level description of the processing for eligibility, encounter claim data, and financial claim data for CY 2019 MississippiCAN enrollees is included in this section. In addition, any adjustments made to the raw data are discussed in this section and shown in Exhibit 1A. Please refer to Appendices A and B of this report for additional information on the validation and processing of these data sources.

For SFY 2023 rates all CY 2019 data and data adjustments were restated using the most recent available eligibility and claims data compared to the CY 2019 data used in the development of SFY 2022 capitation rates.

Membership

Member months by rate cell and region in CY 2019 were summarized from the detailed Medicaid eligibility data, excluding populations not covered by MississippiCAN and individuals that opted out of the program (where applicable). These enrollment counts were validated against enrollment information provided by the CCOs. In total, the enrollment in the eligibility files is 0.05% lower than reported by the CCOs.

Row (a) of Exhibit 1A includes the CY 2019 member months included in base data development. Note, the delivery components of the MA Adult and Pregnant Women rate cells use member months for the members in the underlying rate cell rather than delivery counts. The count of deliveries is included for informational purposes as a footnote in Exhibit 1A.

Claim Data

DOM and Milliman go through extensive data validation processes to review CCO submitted encounter data. DOM regularly monitors encounter claims compared to cash disbursement journals (CDJs) to ensure the timeliness and completeness of submitted encounters and works with Myers and Stauffer to identify the correct original or final claim to keep in each claim string. Milliman relied on this claim status identification process to remove duplicates and identify denied claims that are anticipated to be resubmitted and accepted, as described in Appendix B.

As part of rate development, Milliman requests financial reporting data from each CCO. This financial reporting data was reconciled to each CCO's 2019 audited NAIC financial statement. After several rounds of questions to clarify, adjust, and confirm understanding of the reported financial information, Milliman compared the encounter data to the financial reporting data, together for paid claims and subcapitated claims. This comparison excludes estimates for IBNR claims and adjusts for expanded services, pharmacy rebates and any other claims that were identified as missing from the processed encounter data. To align the financial templates and encounter data on a comparable basis we performed this reconciliation exercise using CY 2019 data with run-out through April 2020. We did not update this validation from the analysis performed for SFY 2022 capitation rates. Please refer to the SFY 2022 capitation rate report² for more detail on this analysis.

In this prior analysis the following items were noted:

- Overall, the paid amounts in the encounters reconcile reasonably well to the paid amounts shown in the CCO financial reporting for the MississippiCAN populations. Encounter data was 0.9% lower than financial data.
- At a category of service and rate cell level, there was a greater variance between encounter data and financial reporting due to inconsistencies in allocations between the three CCOs in the financial reporting. Therefore, we grouped the encounter data consistently for all CCOs using the Milliman *Health Cost Guidelines*TM (HCGs) grouper before using the encounter data as the base data.
- We observed larger discrepancies between encounter data for subcapitated services than for non-subcapitated services. Costs associated with subcapitated vendors account for approximately 8.6% of the financial reporting.

Encounter data for all three CCOs is combined to summarize CY 2019 claim experience for MississippiCAN enrollees. Row (b) of Exhibit 1A includes the CY 2019 total service costs from the encounter data. Row (c) converts the total service costs to a PMPM basis. Claim data is summarized with runout through August 2021. To reflect the differences between claims in the financial reporting and the encounter data, the financial to encounter data adjustments are applied on row (d) of Exhibit 1A. These adjustments increase CY 2019 base data to account for 50% of the difference between financial and encounter non-subcapitated services and 100% of the difference between financial and encounter subcapitated services.

The financial reporting expenditures for all CCOs were combined to perform the encounter validation outlined above, as well as to develop the following adjustments to apply to the encounter data:

- Adjustment of costs to account for provider settlements that would be paid or recouped outside the encounter data

² "Report08 - Updates to SFY 2022 MississippiCAN and CHIP Preliminary Capitation Rates.pdf," dated April 21, 2021

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- Removal of pharmacy rebates collected by CCOs
- Addition of claims paid by the CCOs that are not yet reflected in the encounter system

Non-Covered Services

We excluded the value of expanded services exceeding CY 2019 service limits from the base data. These services, which totaled approximately 0.7% of CY 2019 MississippiCAN service costs, were removed from CY 2019 base data at the rate cell and region level of detail. Service limits do not apply up to age 21, thus, base period costs were not adjusted for these members.

The CCOs reported the costs of these services exceeding limits as part of CY 2019 financial reporting. However, due to significant variation by CCO and year, Milliman summarized the costs of services exceeding limits in the encounter data using the definitions provided by DOM, as detailed in Appendix B and Exhibit 20, rather than relying on costs as reported by CCOs.

For the purposes of this adjustment, we removed services that were enhanced relative to the state plan at the time of service. During CY 2019, state plan covered service limits to monthly pharmacy scripts and annual home health visits were increased. The expansion of these services is reflected as a separate program change adjustment applied on Exhibit 2A and described in Section IV.

The adjustment to remove non-covered services in CY 2019 is shown in Exhibit 1A in row (e).

Provider Reimbursement Adjustment

An adjustment was made to physician encounters to reflect the total provider settlements collected and paid by CCOs in CY 2019 as reflected in the CCO financial templates. These costs were converted to a percentage of base period physician costs and allocated across rate cell and region. These adjustments netted to a \$5.8 million increase to the physician category of service.

We similarly adjusted physician encounters by rate cell for enhanced payments paid by CCOs to primary care providers outside the encounter system in CY 2019. These claims totaled approximately \$1.6 million during CY 2019. Going forward these enhanced payments are expected to be included in the encounter data and not paid as a settlement.

Both adjustments sum to approximately a \$7.4 million increase in costs not reflected in CY 2019 encounters. The combined adjustment is shown on Exhibit 1A in row (f).

Zolgensma Carveout

On May 24, 2019, the FDA approved the drug Zolgensma, a gene therapy drug for children less than two years old with spinal muscular atrophy. Zolgensma will be carved out of capitation rates for SFY 2023, and the CCOs will be reimbursed outside of the capitation rate for costs associated with administering Zolgensma to approved members.

Zolgensma was administered to three patients in CY 2019 (all within the Non-Newborn SSI / Disabled rate cell) with expenses totaling approximately \$6.4 million. We removed these expenses from CY 2019 data in row (g) of Exhibit 1A.

Third Party Liability Recoveries

The CCOs provided Milliman with a summary of recoveries for TPL payments related to claims incurred from CY 2018 through CY 2020. Using CY 2018 data, Milliman calculated the portion of total CY 2018 TPL recoveries recovered after the end of CY 2018. We used this information in conjunction with TPL recoveries for claims incurred in CY 2019 and recovered through April 2021 to estimate CY 2019 recoveries not reflected in CY 2019 base data. DOM assumes these outstanding TPL recoveries will reduce ultimate CY 2019 CCO paid totals.

DOM additionally provided Milliman with a summary of CY 2019 TPL payments collected by DOM rather than the CCOs and not reflected in CY 2019 base data. We assume the CCOs will be able to avoid paying or recover similar additional amounts for claims incurred in SFY 2023 and removed these recovered amounts from the CY 2019 base data.

We removed the total TPL amounts across both sources as a percentage of total paid claims across all rate cells and categories of service from the CY 2019 base data. Across all rate cells, these TPL recoveries amounted to a 0.3% reduction to CY 2019 base data.

This adjustment is shown in Exhibit 1A in row (h).

5% Assessment - Provider Adjustment

During the development of SFY 2019 capitation rates, DOM learned that CCOs were not applying the 5% assessment on non-inpatient services consistently with DOM's payment methodology. DOM and Milliman worked closely with each CCO to identify the services and provider types to which the 5% assessment historically had been applied (or since had encounter data resubmitted to reflect recoupments of the 5% assessment), and which had not. We used this mapping to identify encounter claims in the CY 2019 base period data where the 5% assessment was not correctly applied.

Exhibit 12 includes the mapping of each service and provider type into the high-level category of service used for rate development. In addition, Exhibit 12 shows the percentage of base data identified where the 5% assessment was not applied in the CY 2019 encounter data, but should have been. The identified claims were then reduced by 5%, resulting in the adjustments across all rate cells at a category of service level shown in Table 5. These adjustments align CY 2019 encounters for all CCOs and all non-outpatient services with how the 5% assessment should have been applied.

An adjustment of 1.000 in Table 5 indicates that no change in provider reimbursement is expected as a result of implementing the 5% provider assessment, whereas an adjustment of 0.950 would indicate that the 5% provider assessment is applicable to all services within the category of service, but the assessment was not applied in the base period encounter data.

Table 5 MississippiCAN Capitation Rates 5% Assessment Adjustment by Category of Service	
Category of Service	5% Assessment Adjustment
Inpatient Hospital Services	1.000
Outpatient Hospital Services	0.998
Physician Services	0.993
Drug Services	1.000
Dental Services	0.986
Other Services	0.989
Total	0.997

Note, an adjustment of less than 1.000 is appropriate for outpatient hospital services, even though those services were exempt from the provider assessment effective July 1, 2018. The CCOs did not apply the assessment to certain services grouped into the outpatient hospital category of service that are reimbursed outside of the APC system, such as ambulatory surgical centers, during the base period. Therefore, we apply an adjustment to rates in this report to reflect the application of the assessment to those services.

The adjustment was calculated separately by rate cell, reflecting the mix of services and the applicability of the 5% provider assessment specific to the given population.

The inclusion of the 5% assessment on services not previously receiving the assessment is shown in row (i) in Exhibit 1A.

340B Pharmacy Pricing Adjustment

In CY 2019, some pharmacy claims dispensed by 340B-eligible providers were priced at an amount greater than the customary lesser-of pricing methodology used by the Medicaid program. This overpricing totaled approximately \$175,000 in CY 2019.

These costs were removed in row (j) of Exhibit 1A.

IMD (Institution for Mental Disease) Stays Beyond 15 Days

Per CMS regulations, services rendered at an IMD beyond 15 days in a given month for individuals aged 21 to 64 cannot be covered by Medicaid. CMS requires all non-covered IMD claims incurred by members and the enrollment records for those same months be removed from base data. The enrollment shown in row (a) of Exhibit 1A reflects the removal of these six member months. An additional adjustment was made to remove claims for these members in the impacted months, which totaled approximately \$51,000, from the CY 2019 encounter data.

This adjustment is shown in row (k) of Exhibit 1A.

IMD Unit Cost Adjustment

Some IMD stays for 15 days or fewer for individuals aged 21 to 64 will be covered under MississippiCAN effective July 1, 2019. We adjusted the unit cost for similar claims in the CY 2019 experience to use DOM's fee schedule for these services. These unit cost adjustments resulted in a cost increase of approximately \$33,000 in total.

This adjustment is shown in row (l) of Exhibit 1A.

SSI Children Formerly Moved to FFS Due to PRTF Stay

Beginning in October 2018, DOM moved certain SSI children from COE 001 to COE 005 due to a psychiatric residential treatment facility (PRTF) stay. In SFY 2023, these members will remain in COE 001 during their PRTF stay, and MississippiCAN CCOs will be responsible for expenses incurred during these stays.

We reviewed the CY 2019 data and found 22 members totaling 50 member months were moved to COE 005. The enrollment shown in row (a) of Exhibit 1A reflects the inclusion of these member months. An additional adjustment was made to add claims for these members in the impacted months to the Non-Newborn SSI / Disabled rate cell, which totaled approximately \$753,000, from the CY 2019 FFS data.

This adjustment is shown in row (m) of Exhibit 1A.

Drug Services Rebate Adjustment

An adjustment was made to pharmacy claims to reflect the average rebate collected by the CCOs in CY 2019 and not reflected in encounter data. Rebate costs were summarized by rate cell from the financial reporting. These rebates were then converted to a percentage of base period pharmacy costs and applied as a reduction to base period encounter pharmacy claims data at the regional level.

This adjustment is shown in Exhibit 1A in row (n).

Missing Data Adjustment

A separate adjustment was made to account for payments made by the CCOs that are not yet submitted to the encounter system or were denied due to a known issue with edits in the MMIS system. These claim amounts are not included in the detailed encounter data after the processing outlined in Appendix B.

Each CCO provided separate financial reporting and claim extracts to support and validate the amounts reported for claims not appearing in encounters. Milliman also performed a detailed review of the extracts to line the data up against the encounter data and remove any claims already included in the processed encounter data. The detailed claims extracts provided by the CCOs included splits by region and rate cell, which were used to allocate missing data on Exhibit 1A.

Overall, the base data is increased 0.03% on a PMPM basis for missing data. The aggregate adjustment for all missing data described above is shown in Exhibit 1A in row (o).

IBNR Adjustment

CY 2019 base data includes over 18 months of runout through August 2021. Based upon historical payment patterns we consider the base data to be complete and apply no IBNR adjustment.

This adjustment is shown in Exhibit 1A in row (p).

[Adjusted CY 2019 PMPM Costs](#)

Total 2019 base period PMPM costs by rate cell are shown in the final row of Exhibit 1A.

[Step 2: Summarize CY 2018 Data \(if Applicable\)](#)

For smaller MississippiCAN populations that were not credible based on CY 2019 experience alone (using a threshold of 150,000 member months), we used two years of base period data. These rate cells are the Foster Care, Breast and Cervical Cancer, Pregnant Women (including related delivery costs), SSI / Disabled Newborn, Non-SSI Newborns 0 to 2 Months, and MYPAC rate cells. The development of the CY 2018 base data for the MYPAC rate cell from FFS data is described in Step 3 below.

As the second year of base period data, we used CY 2018 eligibility and encounter data and applied similar adjustments from the SFY 2021 rates for program changes and trend between CY 2018 and CY 2019 to put the experience on a comparable basis to the CY 2019 base period data.

For SFY 2023 rates all CY 2018 data and certain data adjustments (non-covered services, IBNR, third party liability recoveries, utilization trend from CY 2018 to CY 2019, and the PRTF services adjustment) were restated using the most recent available eligibility and claims data compared to the CY 2018 data used in the development of SFY 2022 capitation rates.

Row (a) of Exhibit 1B includes the CY 2018 member months summarized from the detailed Medicaid eligibility data. As noted above, the delivery components of the Pregnant Women rate cells use member months for all members in the underlying rate cell rather than delivery counts. The counts of deliveries are included for informational purposes as a footnote in Exhibit 1B.

Row (b) of Exhibit 1B includes the CY 2018 total service costs from the encounter data. This data has been validated using the same process described above for the CY 2019 encounter data.

Row (c) converts the total service costs to a PMPM basis.

Rows (d) through (k) of Exhibit 1B adjust the CY 2018 base data costs and the factors in rows (l) through (u) of Exhibit 1B further adjust CY 2018 costs to a CY 2019 basis. All adjustments are described below.

[Non-Covered Services](#)

We excluded the value of expanded services exceeding CY 2018 service limits from the base data. These services, which totaled approximately 1.5% of CY 2018 MississippiCAN service costs, were removed from CY 2018 base data at the rate cell and region level of detail. Service limits do not apply to the children rate cells and, thus, base period costs were not adjusted for these members.

The CCOs reported the costs of these services exceeding limits as part of CY 2018 financial reporting. However, due to significant variation by CCO and year, Milliman summarized the costs of services exceeding limits in the encounter data using the definitions provided by DOM, as detailed in Appendix B and Exhibit 20, rather than relying on costs as reported by CCOs.

For the purposes of this adjustment, we removed services that were enhanced relative to the state plan effective for CY 2018. During CY 2019, some of these expanded services were incorporated into the state plan covered services. The expansion of these services are reflected as a separate program change below on Exhibit 1B (to put these services on a CY 2019 basis) and coverage changes from CY 2019 to SFY 2023 are adjusted for on Exhibit 2A.

This adjustment is shown in Exhibit 1B in row (d).

[Drug Services Rebate Adjustment](#)

An adjustment was made to pharmacy claims to reflect the average rebate collected by the CCOs in CY 2018 and not reflected in encounter data. Rebate costs were summarized by rate cell from the financial reporting. These rebates

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were then converted to a percentage of base period pharmacy costs and applied as a reduction to base period encounter pharmacy claims data at the regional and rate cell level.

This adjustment is shown in Exhibit 1B in row (e).

Provider Reimbursement Adjustment

An adjustment was made to physician claims to reflect the total provider settlements collected by CCOs in CY 2018 and not reflected in the encounter data. These costs were converted to a percentage of base period physician costs and allocated across rate cell and region. These adjustments totaled approximately \$3.1 million in reduced CY 2018 physician expenses.

We similarly adjusted physician claims by rate cell for enhanced payments paid by CCOs to primary care providers outside the encounter system in CY 2018. These claims totaled approximately \$4.4 million during CY 2018.

Both adjustments netted to approximately a \$1.3 million increase in costs not reflected in CY 2018 encounters. The combined adjustment is shown on Exhibit 1B in row (f).

HPE Newborn Adjustment

Prior to 2019, hospital presumptive eligibility (HPE) newborns were covered by DOM temporarily (up to two months) until they were enrolled with a CCO. DOM paid for these members under FFS until they were enrolled with a CCO and then collected a recoupment from the CCO for these costs. This recoupment was paid outside of the encounter system. These costs totaled approximately \$700,000 in 2018, split across the SSI / Disabled Newborn and Non-SSI Newborns 0 to 2 Months rate cells. Services for these newborns were identified using a list of impacted newborns and enrollment months provided by DOM. DOM changed how claims for these members are processed, so this recoupment is reflected in the encounter system in the CY 2019 data developed in Step 1.

This adjustment is shown on Exhibit 1B in row (g).

IBNR Adjustment

CY 2018 base data includes over 30 months of runout through August 2021. Based upon historical payment patterns we consider the base data to be complete and apply no IBNR adjustment.

This adjustment is shown in Exhibit 1B in row (h).

5% Assessment - Provider Adjustment

As described in Step 1, some payments to providers by CCOs did not historically reflect the 5% assessment consistently with DOM's payment methodology. We applied a similar methodology to that applied in Step 1 to develop adjustments to reflect the overpayment of claims due to not applying the 5% assessment for CY 2018 claims, as shown in Table 6. These adjustments align CY 2018 encounters for all CCOs and all non-outpatient services with how the 5% assessment should have been applied.

Table 6 Mississippi Division of Medicaid 5% Assessment Adjustment by Category of Service	
Category of Service	5% Assessment Adjustment
Inpatient Hospital Services	1.000
Outpatient Hospital Services	0.996
Physician Services	0.984
Drug Services	1.000
Dental Services	0.961
Other Services	0.979
Total	0.992

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The inclusion of the 5% assessment on services not previously receiving the assessment is shown in row (i) in Exhibit 1B.

5% Assessment - OPPS Adjustment

Based on discussions with the CCOs, we determined that some hospital outpatient spend during the first half of 2018 did not correctly reflect the application of the 5% assessment. We developed an adjustment to dampen these overpayments to 95% of the actual payment amounts, consistent with how these claims should have been paid.

Senate Bill 2836, signed into law April 12, 2018, "Exempts outpatient services from the 5% rate reduction established in Miss. Code Ann. § 43-13-117 (B)" effect July 1, 2018. As a result, the 5% assessment applied to hospital outpatient services is removed. We determined that CCOs correctly implemented this exemption from July to December 2018, so no additional adjustments were needed for that time period.

The adjustment developed for January to June 2018 is shown in row (j) of Exhibit 1B.

Third Party Liability Recoveries

DOM additionally provided Milliman with a summary of CY 2018 TPL payments collected by DOM rather than the CCOs and not reflected in CY 2018 base data. We assume the CCOs will be able to avoid paying or recover similar additional amounts for claims incurred in SFY 2023 and removed these recovered amounts from the CY 2018 base data.

We removed the TPL recovery amounts as a percentage of total paid claims across all rate cells and categories of service from the CY 2018 base data. Across all rate cells, these TPL recoveries amounted to a 0.1% reduction to CY 2018 base data.

This adjustment is shown in Exhibit 1B in row (k).

CY 2018 to CY 2019 Trends

Tables 7 and 8 show the annual utilization and unit cost trends applied to the CY 2018 adjusted experience data to put it on a CY 2019 basis. The CY 2018 experience is trended from the base period midpoint, July 1, 2018, to the midpoint of the second year of base data, July 1, 2019.

The overall adjustment for the given months of trend are shown in Exhibit 1B in rows (l) and (m).

Table 7
Mississippi Division of Medicaid
CY 2018 to CY 2019 Utilization and Unit Cost Trends

COS	SSI	Annualized Utilization Trend				Annualized Unit Cost Trend	
		Adults	Children	Delivery	MYPAC	Excluding MYPAC	MYPAC
Inpatient Hospital	2.00%	-1.00%	3.00%	1.00%	3.00%	0.00%	0.00%
Outpatient Hospital	2.00%	0.00%	1.00%	1.00%	1.00%	0.98%	0.98%
Physician	6.00%	0.00%	3.00%	0.00%	0.11%	0.12%	0.00%
Dental	-3.00%	-3.00%	-1.00%	0.00%	-1.00%	0.00%	0.00%
Other	6.00%	0.00%	3.00%	0.00%	3.00%	0.12%	0.12%

Table 8
Mississippi Division of Medicaid
Pharmacy Trends for CY 2018 to CY 2019

	SSI	MA	Children	Delivery
Annualized Utilization Trend	-0.50%	-0.50%	3.00%	1.00%
Annualized Unit Cost Trend	10.00%	9.50%	0.50%	9.50%

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[PRTF Services Adjustment](#)

Historically, costs associated with member stays at PRTFs were carved out of the MississippiCAN program and covered under FFS. Members receiving these services maintained enrollment in MississippiCAN during their stay at a PRTF to allow for better coordination of care when members were discharged from a PRTF. Effective October 1, 2018, services received at a PRTF are covered under MississippiCAN, rather than under FFS. CY 2018 base data only contains three months of PRTF expenses, while CY 2019 base data contains a full year PRTF expenses.

Row (n) on Exhibit 1B adds nine months of PRTF expenses from FFS data to CY 2018 base data to put it on the same basis as CY 2019 costs.

[Preferred Drug List \(PDL\) Revisions](#)

Major updates are made to the state PDL annually and take effect on January 1 of each year. We estimated the impact of these changes using detailed modeling provided by Change Healthcare, who is contracted by DOM to regularly update and maintain the state PDL. The modeling provided by Change Healthcare included drug level analyses of expected utilization and cost shifts due to updates to the PDL on January 1, 2019, for the entirety of the Mississippi Medicaid program. We applied the change in allowed costs on a percentage basis by therapeutic class to MississippiCAN encounter data to develop program specific impacts of PDL revisions. Table 9 shows the estimated impact of PDL revisions. In our reliance on the PDL modeling performed by Change Healthcare we reviewed the output of the models for reasonableness, but did not audit their analyses.

Table 9 Mississippi Division of Medicaid PDL Adjustment	
Rate Cell Grouping	2018 to 2019
SSI	0.989
Adults	0.998
Children	1.003
Deliveries	0.999

The adjustment for CY 2018 to CY 2019 PDL revisions is shown in row (o) of Exhibit 1B.

[Increase to Medicaid-Covered Service Limits](#)

Effective January 1, 2019, the physician visit limit currently in place for certain adult populations was increased from 12 visits to 16 visits. CY 2019 base data thus includes the coverage of up to 16 physician visits per year, while CY 2018 base data only includes the coverage of up to 12 physician visits per year.

Milliman summarized the costs of physician visits 13 through 16, using the definitions provided by DOM as detailed in Appendix B, in CY 2018 encounter data. Row (p) on Exhibit 1B adds the cost of these visits to CY 2018 base data to put it on the same basis as CY 2019 costs.

Effective July 1, 2019, the home health limit for certain adult populations was increased from 25 to 36 visits per year and the pharmacy script limit per member per month was increased from five to six scripts. As a result, CY 2019 base data contains half a year with these increased service limits, while CY 2018 base data excludes these services entirely.

Milliman summarized the cost of annual home health visits 26 through 36 and the cost of the sixth monthly pharmacy script, using the definitions provided by DOM as detailed in Appendix B, in Q3 to Q4 2018 encounter data. Rows (r) and (q) on Exhibit 1B, respectively, add the cost of six months of these service increases to CY 2018 base data to put it on the same basis as CY 2019 costs.

Service limits do not apply up to age 21 and we made no adjustment for these members accordingly.

[OP Dental Reimbursement Change](#)

Effective July 1, 2019 a multiple discounting policy applies to dental procedures billed on a hospital outpatient claim to price the highest allowed dental procedure at 100% of the allowed amount or published fee and to price all subsequent

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dental procedures at 25% of the allowed amount or published fee. As a result, CY 2019 base data contains half a year with this dental reimbursement change, while CY 2018 base data does not reflect this change at all.

We used simulations provided by Conduent that estimated the impact on outpatient dental claims to be a decrease of 58.1% from CY 2018 to July 1, 2021 as a result of this reimbursement change. This reduction was applied to only outpatient claims related to dental services. The resulting adjustment applied to all outpatient claims varies by rate cell according to the mix of dental versus other services in the outpatient service category.

Row (s) on Exhibit 1B applies this adjustment to six months of CY 2018 base data to put it on the same basis as CY 2019 costs.

NET Reimbursement Adjustment

Beginning in CY 2018, one CCO used a subcapitated vendor for NET services with considerably higher experience than the vendors used by other CCOs. In August 2019, that CCO switched to a different vendor with experience in line with that of other CCOs. For SFY 2023, this higher-cost vendor will not be used. As a result, CY 2019 base data contains five months of experience that reflect the lower cost for NET services that we anticipate going forward, while CY 2018 base data contains increased costs for the entire period.

We used NET data from the other CCOs to remove the impact of this higher cost vendor from the base data.

Row (t) on Exhibit 1B adjusts five months of CY 2018 base data to put it on the same basis as CY 2019 costs.

GME Carve Out

Effective October 1, 2019 all GME payments are made outside the DRG payment (rather than being paid per discharge) for utilization at applicable hospitals. As a result, CY 2019 base data contains three months of experience that reflect the exclusion of GME services, while CY 2018 base data contains GME expenses for the entire period.

DOM provided a split of historical GME payments made as part of the DRG payment on a SFY basis. We took the average of SFY 2018 and SFY 2019 CCO GME payments to estimate the GME amount paid in CY 2018 of \$23,448,991. Lastly, we compared the estimated CY 2018 GME to the CY 2018 inpatient costs to develop the adjustment to apply to inpatient services to remove GME from the capitation rates, as shown in Table 10.

Table 10 Mississippi Division of Medicaid GME Removal Adjustment Development		
CY 2018 GME	CY 2018 IP	GME Adjustment
\$23,448,991	\$472,689,188	0.950

Data for GME payments at a rate cell level was not available to calculate the adjustment at a more granular level. Since the adjustment is only applied to inpatient services, it will, however, have a bigger impact on rate cells with a higher proportion of inpatient services.

Row (u) on Exhibit 1B removes GME expenses from three months of CY 2018 base data to put it on the same basis as CY 2019 costs.

IMD Adjustments

Per CMS regulations, services rendered at an IMD beyond 15 days for individuals aged 21 to 64 cannot be covered by Medicaid. Additionally, Some IMD stays for 15 days or fewer for individuals aged 21 to 64 will be covered under MississippiCAN effective July 1, 2019. No applicable claims of either type occurred during CY 2018, so no IMD adjustments were made on Exhibit 1B.

Adjusted CY 2018 PMPM Costs

Total CY 2018 base period PMPM costs on a CY 2019 basis by rate cell (if applicable) are shown in the final row of Exhibit 1B.

Step 3: Summarize CY 2018 FFS and Encounter Data for MYPAC Members

Since the MYPAC rate cell is not credible based on CY 2019 experience alone (using a threshold of 150,000 member months), we used two years of base period data.

From January 2018 through September 2018, MYPAC members were enrolled in FFS Medicaid. Effective October 1, 2018, members with a SED waiver lock-in code were transitioned to the MississippiCAN program. Upon enrollment in MississippiCAN the count of MYPAC members significantly decreased from September 2018 to October 2018 and then rebounded to historical FFS levels in 2019. Therefore, the Q4 2018 encounter data may not be representative of the acuity level of anticipated SFY 2023 MYPAC members and is excluded from the base data.

The base data for the SFY 2023 MYPAC rate is comprised of FFS data for Q1 to Q3 2018 and MississippiCAN encounter data for CY 2019.

For SFY 2023 rates all CY 2018 data and certain data adjustments (non-covered services, IBNR, third party liability recoveries, utilization trend from CY 2018 to CY 2019, and the PRTF services adjustment) were restated using the most recent available eligibility and claims data compared to the CY 2018 data used in the development of SFY 2022 capitation rates.

Prior to October 2018, some MYPAC rate cell eligible members were enrolled in MississippiCAN for part of a month before receiving a SED lock-in code. For these members, some incurred claims during that month may have been reported as encounters from the CCOs. As these encounters represent valid claims for these individuals, we include these encounters with FFS data when developing the MYPAC base data.

Row (a) of Exhibit 1C includes the Q1 to Q3 2018 MYPAC member months included in capitation rate development.

Row (b) of Exhibit 1C includes the Q1 to Q3 2018 total claim costs from the FFS and encounter data.

Row (c) converts the total costs to a PMPM basis.

Rows (d) through (k) of Exhibit 1C adjust the CY 2018 base data costs and the factors in rows (l) through (q) of Exhibit 1C further adjust CY 2018 costs to a CY 2019 basis. All adjustments are described below.

Drug Services Rebate Adjustment

An adjustment was made to pharmacy claims to reflect the average rebate collected by the CCOs. Since no experience was available to develop an assumption specific to the MYPAC rate cell, we used the regional average rebate across all MississippiCAN rate cells from the financial reporting.

This adjustment is shown in Exhibit 1C row (d).

IBNR Adjustment

Q1 to Q3 2018 base data includes over 33 months of runout through August 2021. Based upon historical payment patterns we consider the base data to be complete and apply no IBNR adjustment.

This adjustment is shown in Exhibit 1C in row (e).

Third Party Liability Recoveries

DOM provided us with a summary of the aggregate TPL recoveries that are not reflected in the claims data. We summarized paid claims data by SFY for all Mississippi Medicaid FFS programs to develop a TPL adjustment factor, which averaged 0.80% in the most recent time periods. We assume that the CCOs will be at least as aggressive in capturing TPL recoveries as occurs in FFS, since they retain financial incentive to do so. Therefore, we used a downward adjustment of 0.80% to allowed costs in our capitation rate calculation.

This adjustment is shown in Exhibit 1C in row (f).

Q1 to Q3 2018 to CY 2018 Trends

As the data used for the MYPAC rate cell is for Q1 to Q3 2018, we applied an additional 1.5 months of trend to adjust the trend from the midpoint in the data (May 15, 2018) to the midpoint of CY 2018 (July 1, 2018). These trends match the annualized trends shown in Tables 7 and 8 above, but are applied for only the 1.5 month period.

The utilization and charge trends for the given months are shown in Exhibit 1C in rows (g) and (h), respectively.

5% Assessment - OPPS Adjustment

As discussed in Step 2 above, as of July 1, 2018, the 5% assessment was no longer applicable to outpatient hospital claims. The MYPAC base data includes six months of 2018 outpatient hospital data paid at the 95% level, and three months paid at the 100% level. The entire year of 2018 data contained three additional months paid at the 100% level.

The adjustment in row (i) of Exhibit 1C reflects the payment level that would have been present over the full CY 2018 compared to the nine months of data in the base data.

PRTF Services Adjustment

As noted in Step 2 above, services received at a PRTF are covered under MississippiCAN, rather than FFS, effective October 1, 2018. While the MYPAC rate cell uses FFS data for January to September 2018, claims for PRTF services were excluded from the underlying base data to be consistent with the MississippiCAN covered services for this time period. To put the Q1 to Q3 2018 experience on a CY 2018 basis it is appropriate to include PRTF costs for October to December 2018 once these services were moved to MississippiCAN. Thus, we adjusted the MYPAC data to include three months of PRTF services, estimated using actual PRTF services costs from January to September 2018.

This adjustment is seen in row (j) of Exhibit 1C.

MYPAC Seasonality Adjustment

The Q1 to Q3 2018 base data for the MYPAC rate cell includes claims for nine months, whereas the capitation rate will be effective for the entire SFY 2023 time period. Upon review of SFY 2017 and SFY 2018 MYPAC experience, we determined that MYPAC costs on a PMPM basis incurred throughout an entire SFY were approximately 1.1% lower than MYPAC costs incurred from January to September (after adjusting for trend and program changes). Table 11 displays the seasonal PMPM patterns by quarter for the MYPAC population for SFY 2017 and SFY 2018. Similar patterns were observed separately for each SFY. To calculate the seasonality to apply for Q4 the two SFYs were blended together to increase credibility.

Table 11 MississippiCAN Capitation Rates MYPAC Seasonality Factor Development MYPAC Costs - SFY 2017 and SFY 2018			
Step	Time Period	Member Months	Average PMPM
<i>A</i>	Q1	3,424	\$3,474.59
<i>B</i>	Q2	3,559	\$3,412.12
<i>C</i>	Q3	3,321	\$3,540.27
<i>D</i>	Q4	3,319	\$3,311.88
<i>e = member month-weighted total of a through d</i>	All	13,623	\$3,434.64
<i>f = member month-weighted total of a through c</i>	All Excluding Q4	10,304	\$3,474.18
<i>g = e / f</i>	Seasonality Factor		0.989

The seasonality adjustment is applied on row (k) of Exhibit 1C. Due to variance in seasonality factors year to year by category of service, the MYPAC seasonality factor was applied in aggregate across all service categories.

[CY 2018 to CY 2019 Trends](#)

Tables 7 and 8 above shows the annual utilization and unit cost trends applied to the CY 2018 adjusted experience data to put it on a CY 2019 basis. The CY 2018 experience is trended from the base period midpoint, July 1, 2018 to the midpoint of the second year of base data, July 1, 2019.

The overall adjustment of the given months of trend are shown in Exhibit 1C in rows (l) and (m).

[PRTF Services Adjustment](#)

As described in Step 2 above, costs associated with member stays at psychiatric residential treatment facilities (PRTFs) were historically carved out of the MississippiCAN program and covered under FFS. Effective October 1, 2018, services received at a PRTF are covered under MississippiCAN, rather than under FFS.

Row (n) on Exhibit 1C adds nine months of PRTF expenses to CY 2018 base data to put it on the same basis as CY 2019 costs.

[Preferred Drug List Revisions](#)

Major updates are made to the state PDL annually and take effect on January 1 of each year. As described in Step 2 above, we used a drug-level analysis from Change to estimate expected utilization and cost shifts due to updates to the PDL on January 1, 2019 for the entirety of the Mississippi Medicaid program.

The adjustment for CY 2018 to CY 2019 PDL revisions is shown in row (o) of Exhibit 1C.

[OP Dental Reimbursement Change](#)

As described in Step 2 above, a change in dental reimbursement policy effective July 1, 2019 resulted in a significant decrease to the cost of outpatient dental claims. As a result, CY 2019 base data contains half a year with this dental reimbursement change, while CY 2018 base data contains none of this change.

Row (p) on Exhibit 1C applies this adjustment to six months of CY 2018 base data to put it on the same basis as CY 2019 costs.

[GME Carve Out](#)

As described in Step 2 above, all GME payments are made outside the DRG payment (rather than being paid per discharge) for utilization at applicable hospitals effective October 1, 2019. As a result, CY 2019 base data contains three months of experience that reflect the exclusion of GME payments, while CY 2018 base data contains GME expenses for the entire period.

Row (q) on Exhibit 1C removes GME expenses from three months of CY 2018 base data to put it on the same basis as CY 2019 costs.

[Adjusted CY 2018 PMPM Costs](#)

Total CY 2018 base period PMPM costs for the MYPAC rate cell are shown in the bottom row of Exhibit 1C.

[Step 4: Blend CY 2018 and CY 2019 Data \(if Applicable\)](#)

For rate cells using two years of base period data, the final adjusted CY 2019 PMPM cost from Exhibit 1A is blended with the final adjusted CY 2018 PMPM cost from Exhibit 1B or 1C based on member months within each time period.

This final base period PMPM is shown in Exhibit 2A in row (a).

IV. PROJECTED SFY 2023 CAPITATION RATES

Many adjustments must be applied to the base period data to develop SFY 2023 capitation rates. This section describes the adjustments applied to the base period data described in Section III to develop SFY 2023 capitation rates. These adjustments are applied in nine steps:

1. Trend costs from base period to SFY 2023.
2. Apply adjustments for population, program, and reimbursement methodology changes.
3. Combine non-delivery costs and delivery costs for applicable rate cells.
4. Include an allowance for CCO non-service expenses.
5. Adjust rates to reflect differences in geographic area by rate cell.
6. Apply quality withhold.
7. Adjust for CCO specific risk scores (if applicable).
8. Retrospectively adjust for directed payments.
9. Calculate risk corridor settlements.

Step 1: Trend Costs from Base Period to SFY 2023

Starting with the blended base data developed in Section III, we apply trend adjustments to project the base period to SFY 2023. Below, we describe each trend adjustment shown on Exhibit 2A. The adjustments for non-pharmacy and pharmacy services are developed using differing methodologies and therefore described separately in this section.

Non-Pharmacy Trend Overview

Our general approach to trend development for non-pharmacy categories of service is to consider known recent changes in provider reimbursement, along with historical PMPM trend values. We then develop utilization / service mix trends that produce targeted PMPM trends. We utilize this approach because it is frequently difficult to directly measure changes in utilization for services other than inpatient hospital and pharmacy over time due to differences in counting utilization “units.”

Exhibits 7A to 7E include a historical trend summary of PMPM costs from January 2017 through December 2020 for each high-level population type and in total for the MississippiCAN program. This data has been normalized for the following to put it on a consistent basis across time:

- IBNR from the financial templates was added to the encounter data to review PMPM trends on a completed basis.
- Estimates of the impact of the following material program or reimbursement changes were removed for the applicable time periods. These changes are accounted for in separate adjustments in this report, and therefore, should not be included in data analyzed for trends.
 - Removal of Zolgensma claims
 - 5% assessment removal for OPPS services
 - Implementation of 5% assessment on non-OPPS services
 - OPPS reimbursement changes not related to the 5% assessment
 - PAD reimbursement changes
 - PDL changes
 - AAC pharmacy reimbursement changes
 - PRTF services
 - OP dental reimbursement change
 - GME carve out
 - NET reimbursement adjustment
 - Provider settlements
 - Financial to encounter adjustments
 - Emergency ambulance reimbursement increases

- PMPMs at a rate cell level were aggregated using December 2020 membership into higher level population groupings and MississippiCAN in total. This removes the impact of membership mix changes across rate cells over time on the aggregate PMPMs.
- Costs were adjusted for the MA Adult, MA Children, and Quasi-CHIP rate cells to remove the impact of average acuity changes resulting from membership changes.

As shown in Table 12, the annualized PMPM trends on a normalized basis for the MississippiCAN program averaged 3.1% from CY 2017 to CY 2019 prior to the beginning of the COVID-19 pandemic. Exhibits 7A through 7E show additional detail for the MississippiCAN program as a whole and each individual population grouping.

Table 12 MississippiCAN Capitation Rates MississippiCAN Annualized PMPM Trends January 2017 to December 2019		
Category of Service	CY 2017 to CY 2018	CY 2018 to CY 2019
Inpatient Hospital	3.4%	5.8%
Outpatient Hospital	0.1%	3.2%
Physician	2.1%	6.9%
Dental	-9.0%	-1.5%
Other	2.5%	7.1%
Non-Pharmacy Total	1.1%	5.1%

In addition, we carefully reviewed CY 2020 and emerging Q2 to Q3 2021 experience to understand to what level services have returned to pre-pandemic levels. We adjusted the emerging experience for the following:

- Similar to the values shown in Exhibits 7A through 7E and Table 12 we normalized for material program changes.
- We applied high level IBNR adjustment factors to the 2021 based on IBNR submitted by the CCOs in the 2021 emerging experience financial template to account for the fact that 2021 data is not complete (particularly Q3 2021).
- To remove the impact of seasonality we compared experience from 2019 to 2021 for similar calendar quarters.
- We removed emergency room, pharmacy, and dental services for all populations. We address emerging trends for each of these types of services separately, as outlined later in this section.

As shown in Table 13 there is variation by population type regarding the level of return of PMPMs to pre-pandemic levels:

- Non-Newborn SSI / Disabled: PMPMs had returned close to pre-pandemic levels in Q2 2021, but observed a decrease during Q3 2021 during the COVID-19 Omicron variant wave of infections in Mississippi.
- MA Adult: PMPMs have not yet returned to pre-pandemic levels, but have continued to increase back towards CY 2019 PMPMs throughout 2021.
- MA Children: Q3 2021 PMPMs have returned close to Q3 2019 levels. The significant increase in costs between Q2 2021 and Q3 2021 is driven by a spike in physician office visits in August 2021, likely driven by the beginning of the school year. Therefore, we do not expect to see continued upward cost increases at the same rate as that observed between Q2 2021 and Q3 2021.

Table 13
Mississippi Division of Medicaid
Recent Experience Excluding Emergency Room, Pharmacy, and Dental

Rate Cell	PMPM Costs ¹				Annualized Trends	
	Q2 2019	Q3 2019	Q2 2021	Q3 2021	Q2 2019 to Q2 2021	Q3 2019 to Q3 2021
Non-Newborn SSI / Disabled	\$617.45	\$620.25	\$615.31	\$579.85	-0.2%	-3.3%
MA Adult	\$283.91	\$290.94	\$261.69	\$271.75	-4.0%	-3.4%
MA Children	\$98.26	\$105.21	\$94.41	\$103.61	-2.0%	-0.8%

¹ PMPM costs reflect encounter data with runout through October 2021, completed using IBNR reported in CCO financial reporting.

Due to the continued dampened costs for all populations relative to where emerging 2021 experience would be expected to be given normal pre-pandemic trends, we are not applying full trends for the 42-month period between the mid-point of the base period, July 1, 2019, and the mid-point of the rating period, January 1, 2023. For application purposes we selected a number of years of utilization trend to apply between CY 2019 and SFY 2023, as shown in Table 14 below by population type.

In essence only applying utilization trend for a portion of the projection period acts as dampening the utilization trend applied for the full time period. However, to explain the rate change drivers shown in Table 2 and Exhibit 5 we applied the utilization trends as 0% for the first portion of the projection period and then selected utilization trends for the remainder of the projection period. For example, for the Non-Newborn SSI / Disabled rate cell we apply 0% trend for the first 30 months and selected utilization trend for the remaining 12 months.

Table 14 shows the resulting total PMPM change and annualized trends for the emerging 2021 experience and the adjustments from CY 2019 to SFY 2023. The selection of utilization and unit-charge trends for all services is detailed in the remainder of this step.

Table 14
Mississippi Division of Medicaid
Recent Experience Excluding Emergency Room, Pharmacy, and Dental

		Total PMPM Change				
Rate Cell	Months of Utilization Trend Applied	Actual Q2 2019 to Q2 2021	Actual Q3 2019 to Q3 2021	Projected CY 2019 to SFY 2023		
Non-Newborn SSI / Disabled	12 months	0.997	0.935	1.032		
MA Adult	0 months	0.922	0.934	0.998		
MA Children	12 months	0.961	0.985	1.032		
Annualized PMPM Trend						
Rate Cell	Months of Utilization Trend Applied	Actual Q2 2019 to Q2 2021	Actual Q3 2019 to Q3 2021	Projected Q2 2021 to SFY 2023	Projected Q3 2021 to SFY 2023	Projected CY 2019 to SFY 2023
Non-Newborn SSI / Disabled	12 months	-0.2%	-3.3%	3.2%	8.4%	0.9%
MA Adult	0 months	-4.0%	-3.4%	4.8%	2.8%	-0.1%
MA Children	12 months	-2.0%	-0.8%	8.6%	3.0%	0.9%

Table 15 shows the selected annual utilization trends applied for the portion of the projection period shown in Table 14 above and Table 16 shows the annual unit cost trends applied to the adjusted base period data for all services except pharmacy services to put the data on a SFY 2023 basis. Table 23 shows the annual utilization and unit cost trends applied to the adjusted base period data for drug services.

For the MYPAC rate cell, utilization and unit cost trends for physician services are dampened relative to the trends shown in Tables 15 and 16 for other children rate cells to reflect the high proportion of physician services obtained through the MYPAC providers, for which flat utilization and unit cost trends were assumed.

Table 15
Mississippi Division of Medicaid
Selected Utilization Trends

COS	Annualized Utilization Trend				
	SSI	Adults	Children	Delivery	MYPAC
Inpatient Hospital Services	2.00%	-1.00%	3.00%	1.00%	3.00%
Outpatient Hospital Services	2.00%	0.00%	1.00%	1.00%	1.00%
Physician Services	6.00%	0.00%	3.00%	0.00%	0.11%
Dental Services	-3.00%	-3.00%	-1.00%	0.00%	-1.00%
Other Services	6.00%	0.00%	3.00%	0.00%	3.00%

Table 16
Mississippi Division of Medicaid
CY 2019 to SFY 2023 Unit Cost Trends (Annualized)

Rate Cell	Category of Service					
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
Non-Newborn SSI / Disabled	-0.1%	-0.1%	1.3%	2.5%	0.0%	0.8%
Breast and Cervical Cancer	-0.1%	-0.2%	1.2%	2.5%	0.0%	0.6%
MA Adult	-0.1%	-0.1%	2.0%	3.0%	0.0%	0.6%
Deliveries - MA Adult	-0.1%	-0.1%	2.0%	3.0%	0.0%	0.6%
Pregnant Women	-0.1%	-0.2%	2.0%	3.0%	0.0%	0.6%
Deliveries - Pregnant Women	-0.1%	-0.2%	2.0%	3.0%	0.0%	0.6%
SSI / Disabled Newborn	-0.1%	0.0%	1.8%	1.5%	0.0%	1.1%
Non-SSI Newborns 0 to 2 Months	-0.1%	-0.1%	1.7%	1.5%	0.0%	0.6%
Non-SSI Newborns 3 to 12 Months	-0.1%	-0.2%	1.7%	1.5%	0.0%	0.6%
Foster Care	4.2%	-0.2%	1.7%	1.5%	0.0%	0.8%
MYPAC	1.0%	-0.2%	0.1%	1.5%	0.0%	0.6%
MA Children	1.1%	-0.2%	1.7%	1.5%	0.0%	0.6%
Quasi-CHIP	1.3%	-0.2%	1.7%	1.5%	0.0%	0.6%

The development of the trend assumptions in Tables 15 and 16 is described below.

Utilization Trend for Non-Pharmacy Costs

Utilization trend reflects expected changes in:

- Demand for medical services
- Intensity or mix of medical services
- Provider practice patterns
- Provider coding changes

The following data sources were used to develop the utilization trend assumptions.

- Encounter data and financial reporting experience for MississippiCAN members was reviewed to analyze PMPM and utilization trends by major service categories from CY 2017 through CY 2019. While we reviewed CY 2020 and Q1 through Q3 2021 experience, it was not directly used to select the trend assumptions applied for a portion of the projection period from CY 2019 to SFY 2023.
- Experience from similar programs in other states.

Dental services are excluded from Tables 13 and 14 above in reviewing emerging experience, but are summarized below in Table 17. We have continued to observe negative utilization trend over the past few years, even prior to the pandemic, as shown in Exhibits 7B through 7D. These trends are -8%, -17%, and -5% on an annualized basis from CY 2017 to CY 2019 for the SSI, Adult, and Children population groups, respectively. Therefore, we apply negative trends for the entire 42 month projection period from CY 2019 to SFY 2023 for all populations.

Table 17 Mississippi Division of Medicaid Recent Dental Experience						
Rate Cell	PMPM Costs ¹				Total Change	
	Q2 2019	Q3 2019	Q2 2021	Q3 2021	Q2 2019 to Q2 2021	Q3 2019 to Q3 2021
Non-Newborn SSI / Disabled	\$8.81	\$10.07	\$8.50	\$8.57	-3.6%	-14.9%
MA Adult	\$7.38	\$6.70	\$5.91	\$5.17	-20.0%	-22.8%
MA Children	\$24.17	\$27.79	\$20.63	\$23.45	-14.6%	-15.6%

¹ PMPM costs reflect encounter data with runout through October 2021, completed using IBNR reported in CCO financial reporting.

The adjustment resulting from these utilization trends is shown in Exhibit 2A in row (b).

Unit Charge Trends for Non-Pharmacy Costs

The hospital inpatient, hospital outpatient, physician, and dental Medicaid FFS fee schedules are updated on July 1 of each year consistent with the following sources. DOM does not mandate provider reimbursement levels other than to require that reimbursement be at least as great as FFS for network providers. We assume that CCO reimbursement levels will move in tandem with changes to FFS reimbursement. Pursuant to SB2799 that was passed into Mississippi law on April 19, 2021, changes in reimbursement after July 1, 2021 will require legislative action. HB657 was subsequently signed into law on April 19, 2022, allowing for changes in reimbursement rates as long as the payment methodology remains consistent. Based on direction from DOM we are modeling fee schedule changes for each service category as noted below. Coverage for new codes and prohibition for billing on discontinued codes is allowed. We assumed the net impact of these latter two issues will be budget neutral, but will reevaluate once data is available and adjust capitation rates if needed. Unless otherwise noted, the fee schedule changes for prior years remained unchanged.

- **Inpatient:** DOM reimburses hospital inpatient claims using an APR-DRG methodology based upon the 3M grouper and updated on July 1 of each year. For these services, consistent with SB2799, DOM is implementing no changes to reimbursement rates on July 1, 2021 or July 1, 2022. We continue to rely upon prior year simulations performed by Conduent to estimate reimbursement changes for prior time periods.

Since the original certification updates to the PRTF fee schedule occurred during SFY 2023. These reimbursement differences have been included in this revised certification. PRTFs are not paid using the APR-DRG methodology and instead rely on a separate fee schedule with per diem payment rates for each facility. To calculate the impact of payment rate changes between the base period and SFY 2023 we applied the increased payment rates for each facility to the applicable time periods. Please see Exhibit 15 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

Table 18 shows the assumed annualized inpatient charge trends from CY 2019 to SFY 2023 for all rate cells.

Table 18 Mississippi Division of Medicaid Inpatient Unit Cost Trends for CY 2019 to SFY 2023	
Population	Inpatient
All	-0.14%

- **Outpatient:** DOM reimburses hospital outpatient claims using the Medicare APC methodology and the Jackson area conversion factor and updated on July 1 of each year. For these services, consistent with SB2799, DOM is implementing no changes to reimbursement rates on July 1, 2021 or July 1, 2022. We continue to rely upon prior year simulations performed by Conduent to estimate reimbursement changes for prior time periods.

Since the original certification updates to home health and some ambulatory surgical center (ASC) service fee schedule occurred during SFY 2023. These reimbursement differences have been included in this revised certification. Fee schedule changes for home health and ASC services are also included in the outpatient service category. Table 19 shows the assumed annualized outpatient charge trends from CY 2019 to SFY 2023 for all rate cells. Similar to the process described above for PRTF, fee schedule changes for these services are reflected as a charge trend calculated by comparing the fee schedules in place during the base period and projection periods, weighted by the applicable procedure codes. Please see Exhibit 15 for more information about the percentage of base period data impacted and the annualized trend applied as a result of these fee schedule updates.

Table 19 Mississippi Division of Medicaid Outpatient Unit Cost Trends for CY 2019 to SFY 2023	
Population	Outpatient
All	-0.18%

- **Physician:** DOM formerly reimbursed many physician services as a percentage of Mississippi Medicare fee schedules and updated the FFS fee schedules on July 1 of each year for the Medicare fee schedule changes from January 1 of the given year. For these services, consistent with SB2799, DOM implemented no change to reimbursement rates on July 1, 2021, but is implementing a reimbursement change effective July 1, 2022.

Conduent performed a simulation of the impact of changes in the payment methodology effective July 1, 2022. Based on this analysis comparing projected SFY 2023 costs to SFY 2021 costs, we included unit cost trends ranging from approximately 4.2% to 7.0% by rate cell to physician services not associated with a FQHC or RHC. The majority of these increases are associated with evaluation and management codes, which received a large increase in the 2021 Medicare fee schedule. Note, the impact of these fee schedule changes was updated from the original certification due to a higher than anticipated impact of these reimbursement changes.

The per-encounter FQHC and RHC reimbursement is included in the MississippiCAN capitation rates to provide a steadier cash flow to the RHCs and FQHCs that serve the MississippiCAN population. The CCOs are expected to reimburse FQHCs and RHCs at DOM's per-encounter rates. DOM will monitor the utilization of services at FQHCs and RHCs under MississippiCAN to ensure services are not diverted from FQHCs and RHCs to other providers.

A 1.7% and 2.1% rate increase was implemented on FQHC and RHC per-encounter rates effective January 1, 2021 and January 1, 2022, respectively. In the CY 2019 base period experience approximately 12% of costs in the high-level physician category of service are for FQHCs and RHCs.

Table 20 below shows the combined physician unit cost trends incorporating the Conduent simulated changes, flat unit cost trends for services with no anticipated changes, and the appropriate trends for FQHC and RHC services.

Table 20 Mississippi Division of Medicaid Physician Unit Cost Trends for CY 2019 to SFY 2023	
Population	Physician
SSI	1.18%
Adult	2.01%
Children	1.69%

In addition to the physician unit costs trends included in Table 20, fee schedule changes for autism spectrum disorder (ASD), prescribed pediatric extended care (PPEC), and some ASC services are also included in the physician service category. These charge trends were calculated by comparing the CY 2019 payment rates with those in place during SFY 2023, composited based on the mix of services during CY 2019. See Exhibit 15 for additional details regarding the base period costs and applied trend.

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- **Dental:** Dental reimbursement changes due to SB2799 and HB657 are incorporated as a separate adjustment to rates. We assume no additional changes to the dental fee schedule between the base period and SFY 2023.
- **Other:** Per SB2799, no changes will be implemented to the fee schedule effective July 1, 2021 or July 1, 2022, except for the services noted below which were updated during SFY 2023 and not included in the original certification:
 - Durable Medical Equipment (DME) / Medical Supplies
 - Private Duty Nursing (PDN)

To calculate the impact of the DME and PDN fee schedule change, we calculated the average change for each services type based on the Medicaid FFS payment rates and applied that to the total CCO payments, assuming that CCO payments increase by a proportional amount. See Exhibit 15 for additional details regarding the base period costs and applied trend.

Row (c) in Exhibit 2A includes the aggregate unit cost adjustment factors from CY 2019 to SFY 2023.

Emergency Services Savings Adjustment

Milliman has identified persistently dampened emergency service utilization since the beginning of the COVID-19 pandemic, as shown by Table 21.

Table 21 Mississippi Division of Medicaid Recent Emergency Room Experience						
Rate Cell	PMPM Costs ¹				Total Change	
	Q2 2019	Q3 2019	Q2 2021	Q3 2021	Q2 2019 to Q2 2021	Q3 2019 to Q3 2021
Non-Newborn SSI / Disabled	\$49.19	\$49.46	\$42.94	\$40.13	-12.7%	-18.9%
MA Adult	\$46.24	\$46.75	\$36.23	\$33.89	-21.6%	-27.5%
MA Children	\$14.54	\$14.32	\$12.09	\$12.18	-16.8%	-14.9%

¹ PMPM costs reflect encounter data with runout through October 2021, completed using IBNR reported in CCO financial reporting.

We expect this shift in member behavior to persist into SFY 2023, as it has not returned to pre-pandemic levels at the same rate as other categories of service. In addition, two of the three CCOs have implemented review protocols to ensure that the correct level of care was coded for emergency room visits. If the level of care coded was higher than warranted by the services, the CCOs have been working with the providers to adjust to the appropriate level prior to reimbursing the claim. Therefore, we project decreases to emergency service utilization relative to CY 2019 levels, as shown in Table 22 below for each population grouping.

Table 22 Mississippi Division of Medicaid Emergency Services Utilization Dampening	
Rate Cell Group	Emergency Service Dampening Applied
SSI+	10%
Adults	20%
Children	10%
Deliveries	0%

Milliman identified emergency services as the claims classified as “Emergency Room” or “ER Visits and Observation Care” as shown in Exhibit 11. We then dampened total outpatient and physician service costs based on the proportion of total CY 2019 claims in these categories, using the dampening factors by rate cell as shown by Table 22.

This adjustment is shown in row (d) on Exhibit 2A.

Prescription Drug Trends

We developed pharmacy trends using the following sources:

- **MississippiCAN-Specific Data** – We analyzed October 2018 to September 2021 pharmacy experience for the eligible population and developed utilization and cost summaries by brand and generic drug types for the 25 top therapeutic classes for non-specialty prescriptions, and the 25 top therapeutic classes for specialty prescriptions. We developed cost projections for CY 2019 to SFY 2023 using those summaries, giving consideration for script utilization per 1,000 increases and average script cost increases for brand, generic, and specialty drugs.

Considerations were made when reviewing prescription drug experience for the estimated impacts of changes in annual updates to the state's uniform PDL.

- **Industry Research** – We reviewed recent drug trend reports from PBMs to benchmark the prospective list price and utilization trends used in our detailed modeling of MississippiCAN-specific data. Additionally, we compared the nationwide trends in these PBM reports to recent trends in the MississippiCAN program by calculating the state-specific NADAC trends. These state-specific NADAC trends were estimated by creating a market basket of products from recent MississippiCAN drug encounters. Historical NADAC prices were applied to this fixed market basket to determine the historical unit cost trends for the MississippiCAN program.
- **FDA Drug Approvals** – When developing prospective drug trends, we consider the FDA approval of various new therapies. Some of the therapies we expect to have higher frequency and / or cost include:
 - Rethymic®
 - Cibinqo®
 - Voxzogo®
 - Ciltacabtagene autoleucel
 - Palovarotene
 - Filsuvez®
 - Balstilimab
 - Omidenepag
 - Penpulimab
 - Leqvio®
 - Somatrogen
 - Livmarli™
 - Tivdak™
 - Exkivity™
 - Skytrofa™
 - Comirnaty®
 - Nexvazyme™
 - Bylvay™
 - Vaxneuvance™

However, building explicit additional trend into capitation rates for these products is difficult due to a lack of information on expected pricing and uptake among the various populations. Therefore, we build in modest additional trend to reflect the addition of new approvals for each population. We note, the historical experience reviewed in trend development also reflects the impact of FDA approvals that were new during those periods.

Based on our analyses, we estimate annualized utilization and unit cost trends from CY 2019 to SFY 2023 shown in Table 23. Difference in aggregate trends by population in Table 23 are due to each population's mix of brand and generic products. The utilization trends shown in Table 23 include the indirect impact of the change in mix of products due to pure utilization trends. Unlike utilization trends for non-pharmacy services, we apply utilization trend for the full projection time period for pharmacy services.

Table 23 Mississippi Division of Medicaid Pharmacy Trends for CY 2019 to SFY 2023				
	SSI	Adult	Children	Delivery
Annualized Unit Cost Trends	2.62%	2.81%	1.26%	2.81%
Annualized Utilization Trends	3.67%	4.01%	1.99%	1.00%

CMS did not approve (per SB2799) the request to freeze pharmacy reimbursement as of July 1, 2021. Unit cost trends shown in Tables 23 and 24 thus include full anticipated unit cost trends from CY 2019 to SFY 2023.

When developing prospective drug trends, no consideration was given for expected brand to generic shifts. These shifts are reflected separately as a change in the state PDL.

Rows (b) and (c) in Exhibit 2A include the aggregate utilization and cost adjustments from CY 2019 to SFY 2023 for the drug services.

Additional information on the development of utilization and unit cost trends is summarized below. Exhibits 8A through 8C show the CY 2019 experience and prospective utilization and unit cost trends applied by therapeutic class at a generic, brand, and specialty level. This exhibit is shown separately by the high-level population groupings: SSI, Adult, and Children.

Unit Cost Trends

The cost per script trends are based on an analysis of historical MississippiCAN data from October 2018 to September 2021 repriced to NADAC plus the Mississippi Medicaid dispensing fees of \$11.29 per script for brand and generic scripts and \$61.14 for specialty scripts. We mapped NADACs from CMS by NDC and analyzed the annual trends using a fixed market basket of drugs from the pharmacy data by population type. Reviewing the trends for a fixed market basket of drugs helps to normalize for PDL changes that have been implemented over time, which are adjusted for separately in the capitation rate development.

Based upon the results of log-normal regressions, the unit cost trends were selected by population grouping and therapeutic class. If results were not informative for a given therapeutic class, the "Other Classes" trend assumption was used. Table 24 displays the aggregated unit cost trend across all therapeutic classes. The specific therapeutic class trends are included in Exhibits 8A through 8C.

Table 24 Mississippi Division of Medicaid Annualized Prospective Unit Cost Pharmacy Trends				
Generic	SSI	Adult	Children	Delivery
Traditional	-1.1%	-0.8%	-2.5%	-0.8%
Specialty	-3.3%	2.0%	0.0%	2.0%
Brand				
Traditional	3.5%	3.7%	3.1%	3.7%
Specialty	2.9%	3.6%	3.7%	3.6%

Utilization Trends

Similar to the unit cost trends, utilization trends were calculated using log-normal regressions for each population and therapeutic class. Given PDL changes over time, utilization trends were selected at a therapeutic class level in aggregate across brand and generic utilization. If results were not informative for a given therapeutic class, the "Other Classes" trend assumption was used. Table 25 displays the aggregated utilization trend across all therapeutic classes. The specific therapeutic class trends are included in Exhibits 8A through 8C.

Table 25 Mississippi Division of Medicaid Annualized Prospective Utilization Pharmacy Trends				
Generic	SSI	Adult	Children	Delivery
Traditional	-0.1%	-0.2%	0.4%	1.0%
Specialty	0.6%	7.9%	0.2%	1.0%
Brand				
Traditional	2.2%	2.0%	0.3%	1.0%
Specialty	8.1%	11.9%	10.2%	1.0%

As noted above, an indirect change in costs for pharmacy services is caused by changes in the mix of therapeutic classes induced by the pure utilization trends. This mix component of trends is shown in Table 26. The trends shown in Tables 25 and Table 26 comprise the total utilization trends applied.

Table 26 Mississippi Division of Medicaid Annualized Prospective Utilization Pharmacy Trends – Mix Component				
Generic	SSI	Adult	Children	Delivery
Traditional	-0.1%	0.3%	0.3%	0.0%
Specialty	-1.7%	-1.6%	-0.3%	0.0%
Brand				
Traditional	0.4%	-0.4%	0.2%	0.0%
Specialty	-0.4%	-2.4%	4.1%	0.0%

Step 2: Apply Adjustments for Population, Program, and Reimbursement Methodology Changes

The following adjustments are applied to reflect changes in expected costs due to changes between the base period and rating period.

- Population Changes: Change in the mix of individuals already enrolled in MississippiCAN
- Program Changes: Changes to populations and / or services included in MississippiCAN
- Reimbursement Methodology Changes: Updates to Medicaid FFS reimbursement methodologies (assumes a parallel impact on MississippiCAN reimbursement), or changes in CCO reimbursement

Exhibit 13 summarizes the program, population, and reimbursement changes discussed in this section, the impacted rate cells for each change, and where the change is reflected in the rate development.

COVID-19 Population Acuity Adjustment

Due to uncertainty surrounding the COVID-19 pandemic and resulting PHE, we indicated in the preliminary SFY 2023 capitation rate report that we would update the acuity adjustments applied to the MA Adult, MA Children, and Quasi-CHIP rate cells if actual SFY 2023 membership was materially different than what was assumed in the preliminary rate report. Analyses developed for prior MississippiCAN rates have shown population acuity decreases as membership increases, and thus, we wanted to account for significant differences between CY 2019 membership and SFY 2023 membership (and therefore member acuity) in the SFY 2023 capitation rates.

To determine the relationship between risk scores and membership, we observed the last four iterations of semi-annual risk scores spanning the two years preceding the COVID-19 pandemic. For each risk score update, we compared the change in risk scores and the change in membership during the six-month period. As shown in Exhibit 17, risk score increases strongly correlated with membership decreases and vice versa (generally less costly members exiting the program, or, conversely, lower cost members joining the program). We developed regression models to predict the change in risk score associated with the change in membership for each period. For our regression models, we assumed a power model of the form where the variables A and B are estimated constants.

$$(\text{Change in Risk Score}) = A \times (\text{Change in Membership})^B$$

We created two regression models, one using the experience of the MA Adult rate cell and a second model using the combined experience of the MA Children and Quasi-CHIP rate cells (these two populations are similar, and the Quasi-CHIP experience is not sufficiently credible to develop a regression model specific to that population). The resulting regression models had R^2 values of 0.67 and 0.54 for the MA Adult and MA Children / Quasi-CHIP rate cells, respectively. Please note, the regression models are consistent with those used for the SFY 2022 acuity adjustments.

We applied the regression models to determine acuity adjustments for these rate cells from CY 2019 to SFY 2023. The application of these models is detailed in Exhibit 17 and summarized in Table 27 below.

Table 27 Mississippi Division of Medicaid Summary of CY 2019 to SFY 2023 Acuity Adjustments		
Rate Cell	Membership Change	Acuity Adjustment
MA Adult	-4.6%	1.023
MA Children / Quasi-CHIP	-14.0%	1.031

The acuity adjustments for CY 2019 to SFY 2023 are positive given the decreases in membership during that time.

Exhibit 17 details the development of the population acuity adjustment.

Row (e) in Exhibit 2A shows the adjustment for the population acuity adjustment.

Postpartum Coverage Extension

Per SB 2212, postpartum coverage extends from 60 days to 12 months effective April 1, 2023. Previously, at 60 days postpartum individuals in the Pregnant Women rate cell had their Medicaid eligibly redetermined and unless they had a qualifying reason to remain in Medicaid (such as meeting eligibility qualifications for the MA Adult rate cell) the member was disenrolled from MississippiCAN. Going forward this redetermination will not occur until the end of the 12 months of postpartum coverage. For SFY 2023, this only affects a subset of members that had postpartum coverage as of April 1, 2023.

While this program change has the largest impact on the Pregnant Women rate cell, other rate cells are also expected to have minor increases in enrollment due to extending the time until eligibility redetermination to 12 months postpartum (i.e., if someone would have been disenrolled during their annual redetermination they now will remain for the additional months until 12 months postpartum). We reviewed the impact of the coverage extension on all rate cells in the MississippiCAN program and believe the PMPM impact is minimal and did not include an adjustment for any rate cell except for the Pregnant Women rate cell, given its unique eligibility requirements and historical enrollment patterns. The projected membership in Exhibit 3 includes the impact of extending postpartum coverage for all rate cells.

While this program change will add membership and service costs to the Pregnant Women rate cell, these additional months of coverage are expected to be lower on a PMPM basis than the costs included in the CY 2019 base data. We developed separate adjustments to apply to the non-delivery costs and delivery costs included in Exhibit 2A.

- **Non-Delivery Costs:** The estimated PMPM for months 3 through 12 postpartum was developed by reviewing the relativity of the PMPMs for postpartum months 1 and 2 compared to months 3 through 12 for individuals that had a delivery while in the MA Adult rate cell in the blended CY 2018 and CY 2019 base data. We then applied this relativity to the PMPM cost for postpartum months 1 and 2 for the Pregnant Women rate cell in the blended CY 2018 and CY 2019 base data.
- **Delivery Costs:** Additional delivery costs will not be incurred for the additional months of membership added to the Pregnant Women rate cell. Therefore, we dampen the delivery cost PMPM to spread across the increased membership basis.

Exhibit 16 demonstrates the development of the population change factors.

Row (f) in Exhibit 2A shows this adjustment.

Addition of ASD Services

Starting in January 2017, MississippiCAN began offering additional screening and treatment services for MississippiCAN members with autism spectrum disorder (ASD). The ramp up of these services has been slow, while a provider network is established to handle the additional services. To help establish the necessary providers for these services a \$438.6(c) directed payment was first introduced in SFY 2020 MississippiCAN capitation rates to establish a minimum fee schedule on ASD services effective July 1, 2019. In addition, DOM updated the Medicaid FFS fee schedule for certain ASD services effective July 1, 2019.

ASD expenses totaled approximately \$580,000 in CY 2019. However, monthly costs for ASD services increased throughout the year and into CY 2020 after the implementation of the fee schedule increase and directed payment. We anticipate expenses for ASD services will stabilize near the levels seen in Q4 2019 to February 2020. We increased costs for ASD services in the SFY 2023 capitation rates by approximately \$220,000 to bring CY 2019 expenses up to this higher level of monthly costs. Given the impact of COVID-19 we were not able to review more recent data to estimate the ultimate level of services. We calculated adjustments to include the additional costs for these services by allocating the estimated costs between the Non-Newborn SSI / Disabled, Foster Care, MA Children, and Quasi-CHIP rate cells proportional to CY 2019 ASD claims for these members.

Row (g) in Exhibit 2A shows the adjustment for these additional costs.

The SFY 2023 ASD preprint is expected to be approved by CMS and the adjustment made in this report is consistent with the information included in that preprint.³

Increase to Medicaid-Covered Service Limits

Effective July 1, 2019, the pharmacy script limit per member per month was increased from five to six scripts and the home health limit for certain adult populations was increased from 25 to 36 visits per year.

Milliman summarized the cost of annual home health visits 26 through 36 and the cost of the sixth monthly pharmacy script, using the definitions provided by DOM as detailed in Appendix B, in Q1 to Q2 2019 encounter data.

Service limits do not apply up to age 21, and thus, costs were not adjusted for these members.

An adjustment reflecting these service limit increases is shown in Exhibit 2A in rows (h) and (i).

Preferred Drug List (PDL) Revisions

Updates are made to the state PDL annually and take effect on January 1 of each year. We estimated the impact of these changes using detailed modeling provided by Change Healthcare, who is contracted by DOM to regularly update and maintain the state PDL. In our reliance on the PDL modeling performed by Change Healthcare, we reviewed the output of the models for reasonableness, but did not audit their analyses.

The modeling provided by Change Healthcare included drug-level analyses of expected utilization shifts and resulting changes to pharmacy expenditures on a gross of rebate basis. This modeling uses data from both FFS and MississippiCAN populations, so we cannot directly use the output for rate development. Therefore, we applied the change in gross costs on a percentage basis by therapeutic class to MississippiCAN encounter data to develop program-specific impacts of PDL revisions. Separate PDL adjustments were developed for each population to account for the different mix of drugs used for each group.

Table 28 shows the estimated impact of PDL revisions. The CY 2019 to CY 2020 PDL changes shown below include the impact of significant May 2020 PDL changes in addition to January 2020 PDL changes. The full adjustment applied is a combination of the PDL changes from CY 2019 to SFY 2023.

³ This preprint is filed under the CMS control name "MS_Fee_Oth_Renewal_20220701-20230630"

Table 28 Mississippi Division of Medicaid PDL Adjustment			
Rate Cell Grouping	2019 to 2020	2020 to 2021	2021 to 2022
SSI	0.950	1.004	0.994
Adults	0.960	1.005	0.994
Children	0.965	1.006	0.977
Deliveries	0.993	1.001	1.000

PDL changes effective January 1, 2022, were minor and only impacted five therapeutic classes. Table 29 displays all five classes and outlines the shifting assumptions modeled by Change Healthcare for each class.

Table 29 Mississippi Division of Medicaid January 2022 PDL Adjustments					
Therapeutic Class	Utilization Shifts To	Utilization Shifts From	Modeled Shift	Estimated Increase (Decrease) in Gross Costs	% of Total PDL Change
ADHD AGENTS - AMPHETAMINES	GENERIC ADDERALL XR	VYVANSE CAPSULES VYVANSE CHEWABLE DYANAVEL XR	20% 10% 10%	(16.2%)	105.8%
MS AGENTS - TECFIDERA	DIMETHYL FUMARATE	TECFIDERA	90%	(83.3%)	6.7%
GOUT AGENTS	COLCHICINE TABLETS	COLCHICINE CAPSULES	90%	(75.4%)	5.0%
OPHTHALMICS - BRIMONIDINE	ALPHAGAN P	BRIMONIDINE	50%	16.1%	-0.4%
DERM – ATOPIC DERMATITIS	ELIDEL	PIMECROLIMUS	50%	52.0%	-17.0%

The shifting assumptions developed by Change Healthcare are meant to reflect the best estimate for how utilization will shift as certain products change preferred status effective January 1, 2022, recognizing that a full shift will not happen immediately. The estimated change in gross cost assumes the ultimate modeled shift shown in Table 29 is achieved two quarters after the PDL changes take effect and therefore, the January 2022 PDL updates will be applicable to all of SFY 2023.

The adjustment for PDL revisions is shown in row (j) of Exhibit 2A.

OP Dental Reimbursement Change

Effective July 1, 2019, a multiple discounting policy applies to dental procedures billed on a hospital outpatient claim to price the highest allowed dental procedure at 100% of the allowed amount or published fee and to price all subsequent dental procedures at 25% of the allowed amount or published fee.

We used simulations provided by Conduent that estimated the impact on outpatient dental claims to be a decrease of 58.1% from Q1 and Q2 2019 to July 1, 2022, as a result of this reimbursement change. This reduction was applied to only outpatient claims related to dental services. The resulting adjustment applied to all outpatient claims varies by rate cell according to the mix of dental vs. other services in the outpatient service category.

This adjustment is shown in row (k) on Exhibit 2A.

NET Reimbursement Adjustment

In CY 2019, two CCOs used a specific subcapitated vendor for NET services. By SFY 2023, both CCOs had transitioned to a far lower cost NET vendor. As a result, CY 2019 base data contains experience that reflects a higher cost of NET services than we anticipate in SFY 2023.

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One of these CCOs transitioned to the lower cost vendor in August 2019, while the other transitioned to the lower cost vendor in September of 2021. As a result, seven months of CY 2019 experience for the first CCO and 12 months of CY 2019 experience for the second CCO reflect a higher cost of NET services than we anticipate for SFY 2023.

We used NET costs as reported in the CCO financial templates following the NET vendor transitions to remove the impact of this higher cost vendor from CY 2019 data.

This adjustment is on Exhibit 2A in row (l).

GME Carve Out

Effective October 1, 2019, all GME payments are made outside the DRG payment (rather than being paid per discharge) for utilization at applicable hospitals. Thus, CY 2019 base data contains nine months of GME expenses that will not be incurred by the CCOs in SFY 2023.

DOM provided a summary of historical GME payments made by the CCOs from January through September 2019. As shown in Table 30, we calculated CY 2019 GME costs as a percentage of inpatient costs to remove GME from the capitation rates.

Table 30 Mississippi Division of Medicaid GME Removal Adjustment Development		
CY 2019 GME	CY 2019 IP	GME Adjustment
\$18,380,362	\$490,956,473	0.963

Data for GME payments at a rate cell level was not available to calculate the adjustment at a more granular level. Since the adjustment is only applied to inpatient services, it does, however, have a bigger impact on rate cells with a higher proportion of inpatient services.

The adjustment used to remove GME payments for inpatient services is shown in row (m) in Exhibit 2A.

Emergency Ambulance Payment Increase

Effective July 1, 2020, DOM increased reimbursement for emergency transportation services. This increase reimburses these services at 100% of the Medicare fee schedule, while these services were historically reimbursed at 70% of Medicare. We estimated the impact of this reimbursement change in SFY 2023 by applying the reimbursement change to emergency transportation services in CY 2019.

The adjustment to increase reimbursement for emergency transportation services is shown in row (n) in Exhibit 2A.

COVID-19 Vaccine Administration Expenses

Per CMS guidance, the cost of the COVID-19 vaccine for Medicaid recipients will be fully reimbursed by the federal government, and, thus, the CCOs will not be at risk for these costs. However, the CCOs will be responsible for expenses related to the administration of the COVID-19 vaccine. Consistent with DOM's provider bulletin issued on March 15, 2021, these expenses are set equal to the Mississippi adjusted Medicare rate of \$35.87 for each vaccine dose. All services covered under the MississippiCAN program, including the COVID-19 vaccine administration fee, are subject to a minimum fee schedule of the FFS rate. This minimum fee schedule is set in accordance with the provisions of §438.6(c). It is our understanding that this type of minimum fee schedule does not necessitate prior approval from CMS and no preprint is required.

To determine the count of members projected to receive a COVID-19 vaccination in SFY 2023, Milliman calculated the following, as shown by Exhibit 9:

- Starting vaccination rates within the MississippiCAN population. This was calculated as of December 1 using a list of vaccinated members provided by DOM.

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- The percentage of Mississippians vaccinated as of early February 2022 using publicly available information accessed from Mississippi's Department of Health (DOH) website.
- The additional vaccinations needed for MississippiCAN vaccination rates to increase to statewide vaccination rates.
- Average doses per non-booster vaccination. Current CDC guidance recommends two dose vaccinations, so we assume two doses per vaccination.
- The percentage of vaccinated members who receive booster shots. Based on the same DOH data source noted above, Milliman determined that approximately 25% of vaccinated Mississippians eligible for a booster shot had also received a booster shot. Thus, for SFY 2023, we projected that 25% of all projected vaccinated members will also receive booster shots.
- Average doses per booster vaccination. We assume booster shots would be obtained twice yearly, and thus, assume two booster shots per member receiving a booster shot.
- Queries of MississippiCAN data have shown almost no expenses related to vaccine administration in CY 2021. We project that third parties will continue to incur much of the vaccine administration expenses in SFY 2023, and thus assume that 50% of vaccine administration expenses for MississippiCAN members will be paid by entities other than MississippiCAN CCOs.

Exhibit 9A shows the development of SFY 2023 vaccine administration costs PMPM for all MississippiCAN rate cells. Exhibit 9B details the statewide Mississippi data used to develop target assumptions, as noted above. Exhibit 9C illustrates the calculation for the COVID-19 vaccination component of the quality withhold.

Given the uncertainty surrounding COVID-19 vaccine availability and uptake rates, Milliman and DOM will monitor vaccination rates and adjust the methodology if necessary.

The COVID-19 vaccine administration expenses are shown in row (o) in Exhibit 2A.

Removal of 5% Assessment

Per SB2799 that was passed into law on April 19, 2021, the 5% rate reduction previously established in Miss. Code Ann. § 43-13-117 (B) will be removed from all providers. This exemption, effective July 1, 2021, results in an increase from a 95% payment rate to a 100% payment rate for those services previously eligible for the 5% assessment.

Exhibit 12 lists all services previously eligible for the 5% assessment. For each of these services not performed at a UMMC-affiliated provider (which had already been exempt from the 5% assessment), we re-priced the CY 2019 experience from the 95% payment rate to the 100% payment rate. The overall adjustments by category of service are shown in Table 31.

An adjustment of 1.000 in Table 31 indicates that no change in provider reimbursement between the base period data and rating period is expected as a result of implementing the removal of the 5% provider assessment whereas an adjustment of 1.053 ($=1.000 / 0.950$) would indicate the removal of the 5% provider assessment is applicable to all services within the category of service.

Table 31 MississippiCAN Capitation Rates 5% Assessment Removal Adjustment by Category of Service	
Category of Service	5% Assessment Adjustment
Inpatient Hospital Services	1.000
Outpatient Hospital Services	1.005
Physician Services	1.023
Drug Services	1.000
Dental Services	1.050
Other Services	1.038
Total	1.011

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Additionally, the July 1, 2021 reimbursement increase for certain preventative and diagnostic dental services was capped at 5% of the prior payment rate, as described in the "Dental Reimbursement Change" section below. For these services, reimbursement was increased by 5% over the prior 95% payment rate to a new payment rate of 99.75% to comply with that requirement. Non-preventative and non-diagnostic dental services, along with all non-dental services, were increased from 95% to 100%.

The adjustment was calculated separately by rate cell, reflecting the mix of services and the applicability of the 5% provider assessment specific to the given population.

The removal of the 5% assessment is shown in row (p) in Exhibit 2A.

Preventative and Diagnostic Dental Reimbursement Change

Per SB2799 signed into law on April 19, 2021, DOM will increase the payment rate for preventative and diagnostic dental services by 5% effective July 1, 2021 and by an additional 5% effective July 1, 2022.

- **July 1, 2021 Dental Reimbursement Increase** – For dental services identified as preventative or diagnostic (defined as procedure codes D0100 through D1999) to which the 5% assessment were also applicable, the adjustment was already applied in the "Removal of 5% Assessment" section above. DOM provided guidance around how these two initiatives would be implemented.

For those preventative or diagnostic dental services not impacted by the 5% assessment, we determined the percentage of CY 2019 dental spend identified as diagnostic or preventative within each rate cell. We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the preventative and diagnostic services with a 0% reimbursement adjustment on other dental services.

- **July 1, 2022 Dental Reimbursement Increase** – We determined the proportion of CY 2019 dental claims identified as preventative or diagnostic (defined as procedure codes D0100 through D1999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on preventative and diagnostic dental services with a 0% reimbursement adjustment on other dental services.

The cumulative preventive and diagnostic dental reimbursement change is shown in row (q) in Exhibit 2A.

Restorative Dental Reimbursement Change

Per HB657 signed into law on April 19, 2022, DOM will increase the payment rate for restorative dental services by 5% effective July 1, 2022. We determined the proportion of CY 2019 dental claims identified as restorative (defined as procedure codes D2000 through D2999.) We calculated the overall dental reimbursement change within each rate cell as a blend of a 5% reimbursement adjustment on the restorative services with a 0% reimbursement adjustment on other dental services, after adjusting for the preventative and diagnostic reimbursement changes discussed above.

The cumulative restorative dental reimbursement change is shown in row (r) in Exhibit 2A.

Immaterial Program, Population, and Reimbursement Methodology Changes

There are several program, population, and reimbursement changes between the base period experience and SFY 2023 that we did not build an explicit adjustment into rates for, given the projected budget neutral or immaterial impact. These changes are described below.

- **Dental and Orthodontic Reimbursement** – Effective March 1, 2019, the reimbursement methodology for dental and orthodontic services was revised to be the lesser of: a) The provider's usual and customary charge, b) A fee from the Mississippi Medicaid statewide uniform dental fee schedule in effect July 1, 2018, or c) The fiftieth (50th) percentile fee reflected in the 2019 National Dental Advisory Service (NDAS) Fee Report. Overall, this reimbursement change is expected to have an immaterial impact to dental reimbursement and no adjustment was made in the SFY 2023 capitation rates.

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- IMD Services – Effective July 1, 2019, services provided at IMDs will be covered under MississippiCAN. Any material new utilization at these facilities is expected to represent shifting from general hospitals rather than new utilization in the system. No explicit adjustment is made for the additional utilization of these services in the SFY 2023 capitation rates. However, if long term stays transition from other facilities to IMDs we will revisit the materiality of the additional costs associated with these stays.
- U&C Overpayments – One CCO's PBM did not originally apply pharmacy reimbursement logic to account for usual and customary (U&C) pricing correctly. The CY 2018 encounter data supporting this report does not reflect the ongoing recoupments to correct this issue. We reviewed claims impacted by this and determined the impact of this overpayment on capitation rates was immaterial.
- DRG Overpayments – Similar to the U&C overpayments, one CCO applied a higher fee schedule than allowed for certain DRGs. The CY 2018 and CY 2019 claims impacted by this overpayment do not have a material impact on capitation rates.
- ICORT Reimbursement changes – per Medicaid State Plan Amendment (SPA) 20-0022 for Community Mental Health Services, DOM is revising the service definition and reimbursement for Intensive Community Outreach and Recovery Teams (ICORT) services effective April 1, 2021. We reviewed the fiscal estimates of this change and determined that the impact on capitation rates is projected to be immaterial.
- MYPAC reimbursement changes – DOM historically reimbursed providers for children receiving MYPAC services as a single combined payment on a per diem basis. Per guidance from CMS, the wraparound services and other ancillary therapeutic mental health services must be reimbursed separately effective July 1, 2021. Milliman estimates that these reimbursement changes will be budget neutral, and thus, are not including an adjustment for these reimbursement changes in capitation rates.
- PAD rate freeze – SB2799 stipulates all changes in reimbursement for any service after July 1, 2021 require legislative action. Consequently, DOM is required to freeze the unit cost for pharmacy products, including PADs, at the July 1, 2021 level. Milliman estimates that the impact of PAD unit cost freezing will have a negligible impact on unit cost trends for the physician category of service and thus are not adjusting trends to reflect this rate freeze.

Step 3: Incorporate Delivery Costs into MA Adult and Pregnant Women Rate Cells

Effective July 1, 2020, MississippiCAN no longer paid maternity deliveries using a kick payment methodology and instead included these costs in the MA Adult and Pregnant Women rate cells. To provide more transparency on this transition, we projected the costs historically covered by the delivery kick payment separately on Exhibits 1A, 1B, and 2A. These costs are also shown separately for the MA Adult and Pregnant Women rate cells. Exhibit 2B combines the costs for these deliveries into the MA Adult or Pregnant Women rate cell, as appropriate.

Step 4: Non-Service Expense Allowance

Administrative Expenses, Premium Tax, and Targeted Margin

The administrative allowance included in the capitation rate is intended to cover administrative costs, including the following:

- Case management
- Utilization management
- Claim processing and other IT functions
- Customer service
- Provider contracting and credentialing
- TPL and program integrity
- Member grievances and appeals
- Financial and other program reporting
- Local overhead costs
- Corporate overhead and business functions (e.g., legal, executive, human resources)

Exhibit 3 shows the build-up of the non-service expenses, comprised of the following components for SFY 2023:

- \$10.56 PMPM for fixed administrative costs
- 5.00% of non-MHAP revenue for variable administrative costs
- 1.80% of non-MHAP revenue for target underwriting margin and cost of capital
- 3.00% for the Mississippi premium tax

Table 32 displays the non-service expense allowance included in the SFY 2023 rates. All percentages of revenue are shown excluding MHAP and MAPS revenue, which are ultimately not at risk to the CCOs.

Table 32 Mississippi Division of Medicaid SFY 2023 MississippiCAN Non-Benefit Expenses		
	% of Revenue	PMPM
Fixed Costs ¹	2.14%	\$10.56
Variable Costs ²	5.00%	\$24.64
Premium Tax ²	3.00%	\$14.77
Margin ²	1.80%	\$8.86
Total	11.95%	\$58.82

¹ Included in the rate as a PMPM, equivalent % of revenue shown.

² Included in the rate as a % of Revenue, equivalent PMPM is shown.

The administrative expense allowance for SFY 2023 was developed by trending the fixed and variable allowances from SFY 2022 capitation rates (on a PMPM basis) by 3.0%. The 3.0% trend is based on a review of employment cost index (ECI) data and reflects expected changes in wages and other services that comprise a majority of administrative costs. We reviewed the CY 2020 administrative cost data submitted by the CCOs which also supports a trend of roughly 3.0% compared to the CY 2019 costs underlying SFY 2022 capitation rates.

The resulting SFY 2023 administrative costs, excluding taxes and fees, were compared to national benchmarks released by the Sherlock Company and Milliman's annual analysis of administrative costs for Medicaid managed care plans to ensure reasonability.

Step 5: Adjust for Geographic Area

CCO capitation payments will vary based on their members' county of residence. We assigned each county to one of the following regions (as defined in Appendix A): North, Central, or South. Table 33 shows the geographic area factor adjustments that are applied based on a beneficiary's region.

Table 33 Mississippi Division of Medicaid Area Factors			
Region	Area Factors		
	SSI	Adults and Deliveries	Children
North	0.913	0.944	0.982
Central	1.050	1.040	1.019
South	1.040	1.011	0.996

We developed the geographic area factors on a budget-neutral basis by blending projected claims PMPM across rate cell groupings weighted upon the statewide rate cell distribution for each region and reviewing the relative difference in PMPM cost for each region. We created three different rate cell groups (as shown in Table 4) to aggregate experience for similar rate cells, so that we could adequately reflect area factor differences among rate cells and still maintain credibility.

Exhibit 4 includes the resulting capitation rates for each region using these area factors.

Step 6: Adjust for Quality Withhold

Continuing in SFY 2023, a 1% quality withhold will be placed on capitation rates for the MississippiCAN program. The terms of the withhold arrangement are outlined in the contract with the CCOs. To earn back the withhold the CCOs must achieve HEDIS scores for the following conditions that are greater than or equal to 2.0% above the baseline HEDIS scores, with a percentage of the withhold assigned to each category. The benchmarks for SFY 2023 will be set based on the average of Magnolia and United's reported scores from calendar years 2019 and 2020, which are based on 2018 and 2019 claims, respectively.

Each of the following HEDIS measures will be used to earn back 10% of the quality withhold, for 70% total across all HEDIS measures:

- Well-Child First 30 months (W15 metrics impact the quality withhold; W30 is reporting only for SFY 2023):
 - Six or more visits for children 15 months of age
 - Two or more visits for children 30 months of age
- Immunization for Adolescents (IMA):
 - Combination 2: Meningococcal, Tdap, and HPV
- Anti-Depressant Management-Acute (AMM-AD):
 - Effective Acute Phase Treatment
- Prenatal and Postpartum Care (PPC-AD):
 - Timeliness of Prenatal Care
- Comprehensive Diabetes Care:
 - HbA1c Testing
- Adult and Children Asthma Control – Ages 5 to 64
- Adults Pharmacotherapy Management of COPD Exacerbation: Systemic Corticosteroid

DOM will be monitoring readmission rates reported as part of the QIPP in SFY 2023. For SFY 2023, this will be included as a scored metric for the quality withhold. DOM is requiring CCOs to improve their actual-to-expected potentially preventable hospital return (PPHR) rates by 2% compared to the baseline metrics from CY 2019 and CY 2020. This PPHR measure will be used to earn back 10% of the quality withhold.

In addition to the above HEDIS and QIPP measures, SFY 2023 rates include a COVID-19 vaccination requirement. DOM is requiring that 40% of MississippiCAN members aged 12 and older be vaccinated by the conclusion of CY 2022. Any children less than 12 years old will count towards the numerator, but not the denominator in calculating the MississippiCAN vaccination percentage. This COVID-19 vaccination measure will be used to earn back the final 20% of the quality withhold. Milliman believes that the 40% is reasonable using the definition outlined by DOM and include an illustrative calculation in Exhibit 9C.

If a CCO does not have sufficient data to consider its HEDIS scores credible, DOM will not hold the CCO liable for not meeting the measurement. In this case, the portion of the incentive withheld related to that measurement will be returned to the CCO. After discussions with DOM about the metric development and expectations, we believe that a return of 100% of the withhold is reasonably achievable by the CCOs.

Exhibit 4 includes the resulting capitation rates for each region net of the quality withhold.

Step 7: Adjust For CCO-Specific Risk Score (if Applicable)

Risk Adjustment for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP Rate Cells

The capitation rates for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rate cells will be further adjusted for each CCO using the combined Chronic Illness and Disability Payment System and Medicaid Rx risk adjuster (CDPS + Rx). Costs for the Breast and Cervical Cancer, Foster Care, and Pregnant Women populations are less variable, since they tend to utilize similar services across each population. In addition, some of the population sizes are too small from which to develop custom weights specific to the covered services and MississippiCAN reimbursement levels. Therefore, we do not risk adjust these populations. Since the risk adjustment is prospective, there is no historical diagnosis information from which to develop a risk score for newborns.

The CDPS + Rx risk adjuster will be used to adjust for the acuity differences between the enrolled populations of each CCO. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

To establish these risk scores, the CDPS + Rx risk adjuster will be run with risk weights consistent with services covered in MississippiCAN for the given time period. These risk weights are calculated using Mississippi FFS and encounter data for the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP populations. In addition, a beneficiary must have at least six months of eligibility in the data year to be scored. If a beneficiary does not have enough data, they will receive a score based on demographic information, such as age and gender. We will monitor the percentage of CCO enrollees who are not scored and adjust the methodology if necessary.

Risk adjustment for SFY 2023 capitation payments will be based on CY 2021 or SFY 2022 FFS and encounter diagnosis data. Each CCO's adjusted risk factor will be prospectively set using April 2022 as a proxy for the enrollment for July 1, 2022 to December 31, 2022 and September 2022 as a proxy for the enrollment from January 1, 2023 to June 30, 2023. The planned schedule for risk score data sources and calculations is shown in Table 34. In light of the COVID-19 pandemic, the diagnosis and enrollment dates stated below may change. We will continue to monitor the development of this pandemic and adjust these dates as needed.

Table 34 Mississippi Division of Medicaid CCO Capitation Rate Risk Adjustment Schedule SFY 2023 Capitation Payments			
Rate Cell	Capitation Payments	Diagnosis Source Data	Enrollment Source
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	July 2022 to December 2022	CY 2021 FFS and Encounters with runout through April 2022	April 2022
Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP	January 2023 to June 2023	June 2021 to May 2022 FFS and Encounters with runout through September 2022	September 2022

Risk Adjustment for the Foster Care Rate Cell

Starting in SFY 2021, the Foster Care rate cell is concurrently risk adjusted. The Foster Care rate cell will be risk adjusted using a custom risk adjustment model that does not depend on the CDPS + Rx risk adjuster. After testing the predictive ability of several potential models, we determined the member's eligibility for either state or federal financial assistance was the most accurate indicator of the member's risk score. This status is captured by the money code field on DOM's enrollment records. Risk factors associated with a member's money code were estimated using CY 2018 and CY 2019 experience for the Foster Care rate cell, consistent with the data used to support the SFY 2022 capitation rates for this rate cell.

Unlike the other risk-adjusted populations, risk adjustment for the Foster Care rate cell will be applied concurrently. Starting in early 2020, we noticed material changes in the composition of each CCO's membership by eligibility group, reflecting changes to how members are assigned to CCOs by DOM. The change in member mix has persisted through early 2022. As such, prospectively estimating the mix of members for each CCO will likely not be feasible in SFY 2023.

Moreover, given the small size of the Foster Care rate cell, small fluctuations in membership could have a material impact on risk adjustment if applied prospectively. Therefore, we intend to concurrently risk adjust the Foster Care rate cell in SFY 2023.

[Application of Risk Scores](#)

A CCO's capitation rate will be determined based upon the following formula:

$$\text{CCO Capitation Rate} = \text{Base Capitation Rate} \times \text{CCO Normalized Risk Factor}$$

The base capitation rates are found in Exhibit 4.

The CCO normalized risk factor will equal the average risk factor across all beneficiaries that a CCO enrolls divided by the average risk factor for the rate cell's population. Regional risk scores will be normalized to ensure the risk adjustment process is revenue neutral across all CCOs.

[Step 8: Retrospective Directed Payments](#)

DOM will process the capitation rate adjustments for multiple directed payments outside of the monthly capitation rate payment system in the form of payments to the CCOs for the actual amount paid to providers and the associated premium tax impact related to these payments. We will calculate and certify adjusted CCO-specific capitation rates at the conclusion of SFY 2023. This recertification is expected to be completed by June 2024.

[MHAP Overview](#)

Concurrent with the inclusion of inpatient hospital services in MississippiCAN capitation rates effective December 1, 2015, MHAP was established. This program helps to ensure sufficient access to inpatient hospital services for the Medicaid population by including enhanced hospital reimbursement in the capitation rates.

MHAP is funded through a broad-based hospital assessment for facilities in Mississippi, state general revenues, and an intergovernmental transfer (IGT) for a facility in Memphis (located within a county contiguous to Mississippi). This provider assessment is outlined in Miss. Code Ann §43-13-145.

Per CMS's approval on January 12, 2018, beginning in SFY 2018 MHAP began to transition to directed payments according to the specifications and requirements of 42 CFR 438.6 et seq. Table 35 displays the two components of MHAP (FSA and QIPP) and the total dollars in each component from SFY 2021 to SFY 2023.

Table 35 MississippiCAN Capitation Rates MHAP Distribution by SFY			
SFY	MHAP FSA	MHAP-QIPP	Total MHAP
2021	\$317,886,793	\$215,224,163	\$533,110,956
2022	\$285,603,168	\$247,507,788	\$533,110,956
2023	\$313,053,124	\$288,100,478	\$601,153,602

[MHAP FSA](#)

For SFY 2023, a payment of \$313.05 million is included as a directed FSA on inpatient and outpatient claims that will be paid monthly outside the capitation rates.

The preliminary FSA amounts are shown in column (c) of Exhibit 18, consistent with the program design that 70% of the \$313.05 million will be paid for inpatient hospital services, and 30% will be paid for outpatient hospital services using projected SFY 2023 membership, with the exception of \$40.25 million which will be paid exclusively for outpatient hospital services. These calculations were performed across all MississippiCAN rate cells with each of the inpatient and outpatient FSA percentage impacts applied uniformly. This results in a larger proportion of the FSA funding included in rate cells with higher inpatient and outpatient utilization.

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The estimated FSA is based on projected SFY 2023 membership and estimated inpatient and outpatient claim utilization. Due to actual vs. projected MississippiCAN membership and claim utilization, this estimated capitation adjustment may result in an overpayment or underpayment of the FSA in SFY 2023 if no adjustments are made. If membership and / or utilization is higher than expected, payments will be capped at the \$313.05 million funding amount. If membership and / or utilization is lower than expected, the final payments will be grossed up proportionally to meet the \$313.05 million funding amount. This reconciliation will be done on a PMPM basis at the end of SFY 2023, and the appropriate documentation will be provided to CMS.

The adjustments to capitation rates are consistent with the preprint⁴ approved by CMS for SFY 2023 on June 30, 2022 and amended⁵ on June 1, 2023.

The MHAP FSA additive adjustment is shown in column (c) in Exhibit 18. An additional allowance for premium tax on the MHAP FSA is included in column (d) in Exhibit 18.

MHAP QIPP

Beginning in SFY 2020, a quality incentive payment program (QIPP) will be a component of MHAP. Consistent with the preprint submitted to CMS, the QIPP will be paid as a uniform payment arrangement for SFY 2023. The goal of the QIPP is to utilize state and federal investments to improve the quality of care and health status of the Mississippi Medicaid population. The QIPP is envisioned to be a multi-year process with an increasing percentage of the payments linked to performance improvements achieved and maintained by the hospital industry.

For SFY 2023, the QIPP will consist of approximately \$288.10 million, which will be paid outside of the capitation rates on a quarterly basis. DOM will determine the payments made to facilities based on agreed upon performance measures. Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2023 to include a QIPP PMPM for each CCO, which will include a provision for premium tax.

The adjustments to capitation rates are consistent with the preprint approved by CMS for SFY 2023 on June 30, 2022.

The MHAP QIPP additive adjustment is shown in column (e) in Exhibit 18. An additional allowance for premium tax on the MHAP QIPP is included in column (f) in Exhibit 18.

TREAT Program

Beginning July 1, 2022, emergency ambulance reimbursement will be increased consistent with a \$438.6(c) directed payment for eligible providers. Payments for the TREAT program are estimated to be \$14.7 million for SFY 2023 and will be paid outside the capitation rate as a uniform payment arrangement.

Capitation rates will be retroactively adjusted once actual membership and utilization is known for SFY 2023 to include a TREAT PMPM for each CCO, which will include a provision for premium tax. The adjustments to capitation rates are consistent with the preprint⁶ that was approved by CMS for SFY 2023 on July 26, 2023.

The TREAT additive adjustment is shown in column (g) in Exhibit 18. An additional allowance for premium tax on the TREAT payments is included in column (h) in Exhibit 18.

Mississippi MAPS Program

Beginning in SFY 2020, the Mississippi Medicaid Access to Physician Services (MAPS) program will enhance payments to physicians and other eligible professional service practitioners who are employed by a qualifying hospital or who assigned Mississippi Medicaid payments to a qualifying hospital. The term "qualifying hospital" means a Mississippi state-owned academic health science center with a Level 1 trauma center, Level 4 neonatal intensive care nursery, an organ transplant program, and more than a four hundred (400) physician multispecialty practice group.

⁴ This preprint was approved on June 30, 2022 under the CMS control name "MS_Fee_IPH.OPH_Amend_20220701-20230630"

⁵ This preprint amendment was approved on June 1, 2023 under the CMS control name "MS_Fee_IPH.OPH_Amend2_20220701-20230630"

⁶ This preprint was approved on July 26, 2023 under the CMS control name "MS_Fee_Oth_New_20220701-20230630"

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DOM will require that CCOs provide the same supplemental percentage increase, equal to 58.8% of Medicare rates, to all qualifying providers. Payments in SFY 2023 are expected to be \$38,018,361. Similar to MHAP, capitation rates will be retroactively adjusted for SFY 2023 to include a MAPS PMPM including a provision for premium tax for each CCO and rate cell based on actual membership and utilization. The appropriate documentation will be submitted to CMS at the time of this retroactive adjustment.

This program is being made under a §438.6(c) payment arrangement consistent with the preprint⁷ approved by CMS for SFY 2023 on August 22, 2022.

The MAPS additive adjustment is shown in column (i) in Exhibit 18. An additional allowance for premium tax on the MAPS is included in column (j) in Exhibit 18.

Step 9: Calculate Risk Corridor Settlements

DOM will implement a symmetrical risk corridor to address the uncertainty of medical costs given the COVID-19 pandemic for SFY 2023.

The capitation rates in this report reflect a target medical loss ratio (MLR), which measures the projected medical service costs as a percentage of the total capitation rates paid to the CCOs. The risk corridor would limit CCO gains and losses if the actual MLR is different than the target MLR. Table 36 summarizes the share of gains and losses relative to the target MLR for each party.

Table 36 Mississippi Division of Medicaid Proposed Risk Corridor Parameters		
MLR Claims Corridor	CCO Share of Gain / Loss in Corridor	DOM Share of Gain / Loss in Corridor
Less than Target MLR -2.0%	0%	100%
Target MLR -2.0% to Target MLR +2.0%	100%	0%
Greater than Target MLR +2.0%	0%	100%

For the purposes of the SFY 2023 risk corridor, a different definition of MLR will be used than the Federal MLR definition.

Exhibit 19 illustrates the calculation of the target MLR for each CCO. The final target MLR will vary for each CCO and will depend on several currently unknown factors, including the final risk scores for each risk-adjusted rate cell and the results of the final settlements for MHAP and MAPS. To ensure continued quality incentives, we assume that 100% of the quality withhold will be returned for the calculation of the target MLR. **Exhibit 19 does not reflect the actual target MLR to be used for any CCO, but is shown for illustrative purposes.** Moreover, Exhibit 19 does not reflect regional variations in capitation rates and risk scores (for applicable rate cells), which will be considered in the final risk corridor calculation. More detailed templates will be provided to the CCOs demonstrating the actual calculation to be used when developing risk corridor settlements.

The risk corridor will be implemented using the following provisions:

- Actual and target MLRs will be calculated separately for each CCO based on their actual enrollment mix.
- The numerator of each CCO's actual MLR will include state plan covered services incurred during the period of SFY 2023 with payments made to providers as defined in Exhibit C of the CCO Contract, including fee for-service payments, subcapitation payments, and settlement payments. Non-covered services will be removed from the numerator.
- Payments and revenue related to MHAP and MAPS will be included in the numerator and denominator of each CCO's actual MLR.
- Adjustments to revenue and claims resulting from the MLR audit will be incorporated into the calculation of each CCO's actual MLR.

⁷ This preprint was approved on August 22, 2022 under the CMS control name "MS_Fee.VBP_AMC.PC.SP.Oth_Renewal_20220701-20230630"

The risk corridor settlement will occur after the contract year is closed, using six months of runout. An initial calculation will occur, but the final calculation will occur once the MLR audit has been completed. MLR audits are usually completed 12 to 18 months after the close of the SFY.

Other Program Considerations

The program includes a minimum federal MLR requirement of 87.5% of revenue. The sum of medical expenses and HCQI expenses must meet or exceed 87.5% of revenue. Revenue for premium taxes is excluded from the MLR calculation. If the 87.5% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism will be calculated after the application of the risk corridor. Due to the implementation of a 2% risk corridor for SFY 2023, the minimum MLR will be greater than 87.5% and will not trigger any additional payments as of a result of this provision.

EXHIBITS 1 THROUGH 17

(Provided in Excel Format Only)

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

State of Mississippi Division of Medicaid
SFY 2023 MississippiCAN Preliminary Rate Calculation and Certification

August 22, 2023

APPENDIX A

SFY 2023 Rate Cell Definitions

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

State of Mississippi Division of Medicaid
SFY 2023 MississippiCAN Preliminary Rate Calculation and Certification

August 22, 2023

APPENDIX A

SFY 2023 Rate Cell Definitions

This section of our report outlines the rate cell definitions to be used for SFY 2023 for the populations addressed in this report. These definitions are summarized in Table 1 below. Capitation rate cells for SFY 2023 were kept consistent with the SFY 2022 capitation rate cells.

Table 1 Mississippi Division of Medicaid Rate Cell Definitions			
Rate Cell Grouping for Assumption Development	Rate Cell	Age Requirement	Category of Eligibility (COE)
Children	SSI / Disabled Newborns	Ages 0 to 12 months (13 month duration)	01, 19
Children	Non-SSI Newborns – age 0 to 2 months	Ages 0 to 2 months (3 month duration)	03, 26, 71, 88
Children	Non-SSI Newborns – age 3 to 12 months	Ages 3 to 12 months (10 month duration)	03, 26, 71, 88
Children	MA Children	Ages 1 to 19	72, 73
Children	Quasi-CHIP	Ages 1 to 19	74
Children	MYPAC	Ages 1 to 20	N/A, Lckn_cd = SED
Children	Foster Care	Ages 1+	03, 26
Adult	Pregnant Women	Ages 8 to 64	88
Adult	MA Adult	Ages 19+	75
SSI	Non-Newborn SSI / Disabled	Ages 1+	01, 19, 25
SSI	Breast and Cervical Cancer	N/A	27

All rate cell eligibility excludes the following individuals not enrolled in MississippiCAN:

- Retroactive membership
- Dual eligible members
- Institutionalized beneficiaries in a long-term care facility
- Individuals in the following waiver programs: WAL, WED, WMR, or WTB
- Individuals diagnosed with Hemophilia or Von Willebrand disease

GEOGRAPHIC REGIONS

DOM uses regional payments to better reflect enrollment for CCOs that enroll a disproportionate number of members from higher-cost or lower-cost regions of the state. DOM uses the three regions of North, Central, and South based on the county where a beneficiary lives. Table 2 displays the counties included in each region.

APPENDIX A

SFY 2023 Rate Cell Definitions

Table 2 Mississippi Division of Medicaid Geographic Regions by County		
North Region	Central Region	South Region
Alcorn	Calhoun	Adams
Attala	Chickasaw	Amite
Benton	Choctaw	Covington
Bolivar	Claiborne	Forrest
Carroll	Clarke	Franklin
Coahoma	Clay	George
DeSoto	Copiah	Greene
Grenada	Hinds	Hancock
Holmes	Issaquena	Harrison
Humphreys	Jasper	Jackson
Itawamba	Kemper	Jefferson
Lafayette	Lauderdale	Jefferson Davis
Lee	Leake	Jones
LeFlore	Lowndes	Lamar
Marshall	Madison	Lawrence
Montgomery	Monroe	Lincoln
Panola	Neshoba	Marion
Pontotoc	Newton	Pearl River
Prentiss	Noxubee	Perry
Quitman	Oktibbeha	Pike
Sunflower	Rankin	Stone
Tallahatchie	Scott	Walthall
Tate	Sharkey	Wayne
Tippah	Simpson	Wilkinson
Tishomingo	Smith	
Tunica	Warren	
Union	Webster	
Washington	Winston	
Yalobusha	Yazoo	

To determine a beneficiary's county, we used the following approach:

1. County code included on a beneficiary's enrollment record in a given month.
2. Absent (a), we mapped zip codes in the enrollment file to counties. In cases where a zip code is present in more than one county, we assumed that a zip code maps to a given county if:
 - a. The zip code shows up most frequently for a given county in the enrollment file (assuming a minimum of five occurrences).
 - b. Census information indicating the portion of a zip code's population that resides in each county. County is assigned to a zip code based on the county that includes the largest portion of a zip code's population.

If a beneficiary could not be assigned to a region, we excluded their eligibility and claim experience from the base data. This accounts for less than 0.1% of all current MississippiCAN eligible members in CY 2019.

APPENDIX B

Data Sources and Processing

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

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APPENDIX B

Data Sources and Processing

A number of data sources are used to develop the base data for the SFY 2023 MississippiCAN capitation rates.

- Medicaid eligibility data
- FFS claim data
- CCO encounter data
- CCO financial data

CY 2019 experience forms the primary base data for the SFY 2023 capitation rates. For smaller MississippiCAN populations that are not credible based on CY 2019 experience alone (using a threshold of 150,000 member months), we blend CY 2019 and CY 2018 experience to form the base data. The rate cells using two years of data are the Foster Care, Breast and Cervical Cancer, Pregnant Women, SSI / Disabled Newborn, Non-SSI Newborns 0 to 2 Months, and MYPAC rate cells.

For SFY 2023 rates all CY 2018 and CY 2019 data was restated using the most recent available eligibility and claims data compared to the CY 2018 and CY 2019 data used in the development of SFY 2022 capitation rates.

This section of the report outlines each data source and steps to process the data.

MEDICAID ELIGIBILITY

DOM's MMIS vendor provided detailed Medicaid eligibility data for CY 2018 and CY 2019. Before analyzing claims, we pared down the eligibility data to groups that are eligible to enroll in MississippiCAN, as defined in Appendix A of our report. In order to isolate data only for this group, we applied various filters as described in the rest of this appendix.

If the population was enrolled in MississippiCAN at the time, we relied upon the 'CAN' lock-in code for each eligibility span to include individuals enrolled in MississippiCAN in the base period, and did not apply most of the additional filters described below. This assumes that MMIS-calculated enrollment criteria in the base period is consistent with SFY 2023. In addition, this removes opt-outs from voluntary populations (SSI children and Mississippi Band of Choctaw Indians) from the base data used to develop capitation rates. The opt-out rates for these populations have been stable in recent experience.

In addition, adjustments were made for the removal of retroactive eligibility periods and records not able to map to a geographic area.

Removal of Retroactive Eligibility Periods

Beneficiary enrollment in the FFS program can occur retroactively. When some individuals apply and qualify for Medicaid coverage, DOM reimburses claims, which occurred during the retroactive qualification period prior to their application. DOM backdates the eligibility of the individual to accommodate the retroactive coverage.

There is also a lag between the first date of eligibility and the date of enrollment in a CCO because Medicaid eligibility begins on the first day of the month in which the application was received. Once a Medicaid beneficiary signs up for a CCO, they will be enrolled on the first day of the subsequent month. The retroactive enrollment period is not covered by the CCO, so we removed retroactive eligibility included in the data provided to us using the following criteria:

- Eligibility months prior to the date that a beneficiary was added to the Medicaid enrollment file were removed. For example, if a beneficiary is active January 15, 2019, but they were added to the enrollment file February 1, 2019, we only included data on or after February 1, 2019 to exclude any retroactivity that may have occurred.

As of December 2015, newborns are enrolled in MississippiCAN at the time of their birth. Therefore, the retroactive eligibility exclusion is not applicable to these populations.

Geographic Area

If a beneficiary could not be assigned to a region, we excluded them from the base data. This accounts for less than 0.1% of all current MississippiCAN eligible member months in CY 2019. See Appendix A for additional information on the assignment of a geographic region.

APPENDIX B

Data Sources and Processing

FFS DATA

FFS claims are provided by DOM's MMIS vendor. These claims include any populations and / or services not included in MississippiCAN. Q1 to Q3 2018 FFS claims experience for members with a 'SED' lock-in code forms the base period data for the MYPAC rate cell.

We reviewed the FFS data for reasonability for several considerations, including the following, and verified it was consistent with monthly DOM cost reporting:

- Monthly claim counts per member
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Monthly units and payments by rate cell

ENCOUNTER DATA

Encounter claims are included in the data provided by DOM's MMIS vendor. This data represents the actual amounts paid to the provider, so no repricing was done as part of the development of capitation rates. A claim processed by a CCO and submitted to DOM can be identified in the data using the following definition. Please note, the field names may vary from those provided in the encounter data submission from the CCOs.

- The 6th character of claim_id is '5' and cl_type is 'R,' or
- The 6th character of claim_id is '0' and cl_type is not 'R'

For all service categories we used CY 2019 encounter data with runout through August 2021. The CY 2018 encounter data used only by smaller populations, as noted above, also includes runout through August 2021 for all service categories.

Only encounter claims for members flagged as a MississippiCAN enrollee in the eligibility data were included in the base data. Encounter claims, which failed to be mapped to a MississippiCAN CCO enrollee were removed.

CCO encounters are rigorously vetted by Myers and Stauffer as part of their reconciliation of encounters against CCOs' cash disbursement journals (CDJs). As part of this reconciliation, Myers and Stauffer identifies encounter claims that are duplicates, voids, or replacements for other encounter claims. Myers and Stauffer shares these findings with CCOs at a claim level to ensure they are accurately determining the final, non-duplicated version of each paid claim. As a result of their analysis, Myers and Stauffer are able to reconcile closely to the CCOs' CDJs (historically within 2% on a paid basis). We use summaries provided by Myers and Stauffer to identify final, non-duplicative claims consistent with their CDJ reconciliation.

Lastly, the encounter data is run through Milliman's *Health Cost Guidelines*TM (HCGs) grouper to map the encounter data into detailed categories of service. These categories of service are then rolled up into six high level categories of service: inpatient, outpatient, physician, pharmacy, dental, and other. This mapping from detailed category of service to broad category of service is included as Exhibit 6.

After processing the data, we review the encounter data for several considerations, including:

- Monthly encounter counts per member (including and excluding \$0 payments)
- Monthly payments per member
- Average cost per unit
- Monthly units and payments by COS
- Quarterly units and payments relative to financials by COS
- Frequency of diagnosis completion by COS

FINANCIAL REPORTING DATA

For base data development, each CCO submitted a financial report reconciled to their organization's audited CY 2018 and CY 2019 financial statements for Mississippi. Separate reports were submitted for CY 2018 and CY 2019 including earned premium, claim experience with runout through June 2019 or August 2021 for CY 2018 and CY 2019 data, respectively, best estimate IBNR claim amounts, subcapitated arrangements, non-service expenses, and membership.

APPENDIX B

Data Sources and Processing

The reported membership was close in total to the MMIS enrollment, so we utilized the MMIS enrollment for rate development.

We worked with each CCO to validate that their reports were filled out consistently with the category of service and non-medical definitions used in the capitation rate development. Adjustments were made to the original submissions to help align these definitions.

CLAIMS ABOVE STATE-PLAN COVERED SERVICE LIMITS

When processing encounter data, we identify claims above Mississippi's state-plan covered service limits. These services are provided by some CCOs as an expanded benefit. However, as they are not state-plan-covered, these services are excluded from base data when setting capitation rates. We identified three types of benefits offered by CCOs that are above state-plan covered service limits, described below. Children receiving EPSDT services, identified as individuals under the age of 21, are exempt from the service limits described below.

- **Physician Visits** – Members are limited to 16 physician visits within a state fiscal year. This limit is applied separately for psychiatric and non-psychiatric visits. Prior to January 1, 2019, physician visits were limited to 12 visits per state fiscal year.

To identify physician visits, claims are required to have a claim type of "C" (Clinics), "E" (Vision / Hearing), "K" (Services), or "P" (Practitioner / Physician). Additionally, the claim must have one of a list of specific procedure codes. Exhibits 20A and 20B show the required procedure codes for non-psychiatric and psychiatric physician visits, respectively.

- **Pharmacy Scripts** – The Mississippi state plan covers up to six per month (formerly up to five scripts per month before July 1, 2019). Scripts beyond the limit are identified by counting claims for the pharmacy category of service by member by month. Some scripts do not apply to the coverage limit, including:
 - Vaccinations
 - Clinician Administered Drugs and Implantable Drug System Devices (CADDs)
 - Insect Repellants
 - Insulin testing and other supplies
 - Tablet splitters
 - Sodium chloride for inhalation
 - Omnipod Dash 5 pack

Additionally, all monthly fills of Clozapine after the first fill do not apply to the script limit. Only the first script within each GCN category applies for Clozapine.

Exhibit 20C includes a list of all NDCs for the exclusions listed above.

- **Home Health Visits** – Up to 36 home health visits per state fiscal year are covered under Mississippi's state plan (formerly up to 24 visits before July 1, 2019). Home health visits are identified as claims with a claim type of "V" (Home Health) and a revenue code of 421, 441, 551, 571, or 589.

APPENDIX C

CMS Rate Setting Checklist

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

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CMS Rate Setting Checklist

This section of the report lists each item in the November 10, 2014 CMS checklist and discusses how DOM addresses each issue and / or directs the reader to other parts of this report. CMS uses the rate setting checklist to review and approve a state's Medicaid capitation rates.

AA.1.0 – Overview of Rates Being Paid under the Contract

The MississippiCAN state fiscal year (SFY) 2023 capitation rates are developed using Mississippi FFS Medicaid data, CCO encounter data, and CCO financial reporting data for a comparable population to that enrolled in CCOs. DOM calculates state-set rates by rate category on a statewide basis with area adjustments based on an enrolled member's county of residence.

AA.1.1 – Actuarial Certification

Please refer to Appendix E for our Actuarial Certification of the SFY 2023 capitation rates. The SFY 2023 MississippiCAN capitation rates have been developed in accordance with generally accepted actuarial principles and practices and are appropriate for the populations to be covered and the services to be furnished under the contract.

AA.1.2 – Projection of Expenditures

Exhibit 18 includes a projection of total expenditures and Federal-only expenditures based on projected SFY 2023 CCO enrollment and the SFY 2023 capitation rates. The fiscal impact of the SFY 2023 capitation rates is \$2.926 billion, with \$2.376 billion in federal funding. This is an estimated \$260.0 million decrease in federal funding over capitation rates for SFY 2022.

AA.1.3 – Risk Contracts

The MississippiCAN program meets the criteria of a risk contract.

AA.1.4 – Modifications

The SFY 2023 rates documented in this report are the preliminary capitation rates for the SFY 2023 MississippiCAN contracts. They will need to be updated to address certain items outlined in the rate narrative.

Note: There is no AA.1.5 on the Rate Setting Checklist

AA.1.6 – Limit on Payment to Other Providers

It is our understanding that no payments are made to providers other than those made by participating CCOs for services available under the contract.

AA.1.7 – Risk and Profit

Targeted margin is considered as part of final rate development.

AA.1.8 – Family Planning Enhanced Match

DOM claims an enhanced match for family planning services for the populations covered under this program. The PMPM value of services included in the MississippiCAN capitation rates are included in Exhibit 10.

AA.1.9 – Indian Health Service (IHS) Facility Enhanced Match

DOM claims an enhanced match for Indian Health Services (IHS) for the populations covered under this program. The PMPM value of services included in the MississippiCAN capitation rates are included in Exhibit 10.

AA.1.10 – Newly Eligible Enhanced Match

Mississippi did not expand eligibility as part of the Affordable Care Act.

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CMS Rate Setting Checklist

AA.1.11 – Retroactive Adjustments

The SFY 2023 rates documented in this report are the preliminary capitation rates for the SFY 2023 MississippiCAN contracts. They will need to be updated to address certain items outlined in the rate narrative.

AA.2.0 – Based Only Upon Services Covered Under the State Plan

The base data utilization and cost data is Medicaid FFS, CCO encounter, and CCO financial reporting data only for populations that are eligible to enroll in a CCO.

Only State Plan services that are covered under the MississippiCAN contract have been included in the rate development.

AA.2.1 – Provided Under the Contract to Medicaid-eligible Individuals

Data for FFS populations not eligible to enroll in the MississippiCAN program has been excluded from the base data used in rate development. Please refer to Appendices A and B for details.

AA.2.2 – Data Sources

The base year utilization and cost data is calendar year (CY) 2018 and CY 2019 CCO encounter and financial reporting data for all populations with the exception of the MYPAC rate cell. Q1 to Q3 2018 FFS and CY 2019 encounter data is used as the base period data for the MYPAC rate cell.

AA.3.0 – Adjustments to Base Year Data

All adjustments to the base data are discussed in Section III. In addition, each item in the checklist is addressed in items AA.3.1 to AA.3.17 below.

AA.3.1 – Benefit Differences

The base data used to calculate the capitation rates has been adjusted to only include services covered under the CCO contracts.

AA.3.2 – Administrative Cost Allowance Calculations

The CCO capitation rates include explicit administrative allowances by rate cell. Please see Section IV for more details.

AA.3.3 – Special Populations' Adjustments

The base data used to calculate the capitation rates is consistent with the CCO population and no special population adjustment was necessary.

AA.3.4 – Eligibility Adjustments

The base CCO financial reporting data and encounter data only reflect experience for time periods where members were enrolled in a CCO. FFS experience was limited to reflect only individuals that will be eligible for MississippiCAN. See Appendix A for a discussion of eligibility criterion applied.

AA.3.5 – Third Party Liability (TPL)

The CCOs are responsible for the collection of any TPL recoveries for all services. The capitation rates include a 0.999 adjustment to reflect additional TPL recoveries that are not reflected in the base year encounter data, consistent with recent DOM experience. The capitation rates also include a 0.992 adjustment to reflect additional TPL recoveries that are not reflected in the Q1 to Q3 2018 FFS data underlying the MYPAC rate cell, consistent with recent DOM experience.

AA.3.6 – Indian Health Care Provider Payments

The CCOs are responsible for the entirety of the Indian Health Care payments, which are fully reflected in encounters.

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CMS Rate Setting Checklist

AA.3.7 – DSH Payments

DSH payments will continue to be paid outside of capitation rates for members enrolled in MississippiCAN.

AA.3.8 – FQHC and RHC Reimbursement

DOM has chosen to include the per-encounter FQHC and RHC reimbursement in the MississippiCAN capitation rates to provide a steadier cash flow to the RHCs and FQHCs that serve the MississippiCAN population. The CCOs are expected to reimburse FQHCs and RHCs at DOM's per-encounter rates. DOM will monitor the utilization of services at FQHCs and RHCs under MississippiCAN to ensure services are not diverted from FQHCs and RHCs to other providers.

AA.3.9 – Graduate Medical Education (GME)

GME costs were historically included in the DRG payment methodology for inpatient services. Effective October 1, 2019, all GME payments are made outside of MississippiCAN capitation rates by DOM. An adjustment is included in rate development to remove these costs since they are included in the base period data.

AA.3.10 – Copayments, Coinsurance, and Deductibles in Capitated Rates

One CCO implemented a member copay of \$1 on pharmacy scripts effective January 1, 2020. Since the base data used to calculate capitation rates is from before this time no adjustment was made to the base period data for this. All FFS member cost sharing amounts were added back into the capitation rate calculation.

AA.3.11 – Medical Cost / Trend Inflation

The utilization and unit cost trends used to project expenditures from the base period to SFY 2023 are based on projections of future medical cost inflation.

We are comfortable that the trend rates represent an appropriate expected change in per capita cost between the base period and SFY 2023.

AA.3.12 – Utilization Adjustments

Utilization trend is included in AA.3.11. In addition, a directed fee schedule adjustment is applied for inpatient and outpatient services to provide total directed payments of \$313.1 million for SFY 2023 as a component of the Mississippi Hospital Access Program (MHAP).

AA.3.13 – Utilization and Cost Assumptions

The SFY 2023 capitation rates will use the CDPS + Rx risk adjuster to risk adjust the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rates for each participating CCO. CDPS + Rx uses beneficiaries' medical and prescription drug claim information to develop a risk score for each individual. A custom risk adjustment model was developed for the Foster Care rate cell using information from members' enrollment information. Section IV: Step 6 explains how the risk scores are calculated and applied to the base capitation rate to calculate separate rates for each participating CCO reflecting their member population.

AA.3.14 – Post-Eligibility Treatment of Income (PETI)

Not applicable.

AA.3.15 – Incomplete Data Adjustment

The capitation rates do not include an adjustment to reflect Incurred but Not Reported (IBNR) claims. We assume the encounter data from CY 2018 and CY 2019 is complete with over 30 months and 18 months of runout, respectively.

Please see Section III: Step 1 for a discussion of the comparison of encounter data to financial reporting and resulting adjustments applied.

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AA.3.16 – Primary Care Rate Enhancement

No adjustment was made to reimbursement for primary care services, as DOM's reimbursement methodology for these services is consistent between the base period and SFY 2023.

AA.3.17 – Health Homes

Not applicable.

AA.4.0 – Establish Rate Category Groupings

Please refer to Appendix A of the report.

AA.4.1 – Eligibility Categories

Please refer to Appendix A of the report. Rates vary by broad eligibility category.

AA.4.2 – Age

Please refer to Appendix A of the report. Rates generally do not vary by age beyond differences for newborns, children, and adults. Age and gender, however, are components of the CDPS + Rx risk adjuster.

AA.4.3 – Gender

Please refer to Appendix A of the report. Rates do not vary by gender. Age and gender, however, are components of the CDPS + Rx risk adjuster.

AA.4.4 – Locality / Region

Please refer to Appendix A of this report. Rates vary across three regions.

AA.4.5 – Risk Adjustments

The SFY 2023 capitation rates will use the CDPS + Rx risk adjuster to risk adjust the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rates for each participating CCO. CDPS + Rx uses beneficiaries' medical and prescription drug claim information to develop a risk score for each individual. A custom risk adjustment model was developed for the Foster Care rate cell using information from members' enrollment information. Section IV: Step 6 explains how the risk scores are calculated and applied to the base capitation rate to calculate separate rates for each CCO reflecting their member population. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

AA.5.0 – Data Smoothing

We did not perform any data smoothing.

AA.5.1 – Cost-Neutral Data Smoothing Adjustment

We did not perform any data smoothing.

AA.5.2 – Data Distortion Assessment

Our review of the base CCO financial reporting and encounter data did not detect any material distortions or outliers.

AA.5.3 – Data Smoothing Techniques

Area adjustments of statewide rates are incorporated into the rate structure to account for potential variation in regional enrollment between CCOs.

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AA.5.4 – Risk Adjustments

The SFY 2023 capitation rates will use the CDPS + Rx risk adjuster to risk adjust the Non-Newborn SSI / Disabled, MA Adult, MA Children, and Quasi-CHIP rates for each participating CCO. CDPS + Rx uses beneficiaries' medical and prescription drug claim information to develop a risk score for each individual. A custom risk adjustment model was developed for the Foster Care rate cell using information from members' enrollment information. Section IV: Step 6 explains how the risk scores are calculated and applied to the base capitation rate to calculate separate rates for each CCO reflecting their member population. Risk adjustment will be budget-neutral to DOM. This risk sharing mechanism is developed in accordance with generally accepted actuarial principles and practices.

AA.6.0 – Stop Loss, Reinsurance, or Risk Sharing Arrangements

The program includes a minimum MLR requirement of 87.5% of revenue. The sum of medical expenses and health care quality initiative (HCQI) expenses must meet or exceed 87.5% of revenue. Revenue for premium taxes and HIF are excluded from the MLR calculation. If the 87.5% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices.

AA.6.1 – Commercial Reinsurance

DOM does not require entities to purchase commercial reinsurance.

AA.6.2 – Stop-Loss Program

Please see AA.6.0.

AA.6.3 – Risk Corridor Program

Capitation rates for SFY 2023 will be subject to a risk corridor program. The risk corridor is designed to protect against uncertainty in the capitation rates due to COVID-19. Section IV: Step 8 describes how the risk corridor will be applied in SFY 2023 and the calculation of the risk corridor settlements.

AA.7.0 – Incentive Arrangements

Not applicable.

AA.7.1 – Electronic Health Records (EHR) Incentive Payments

Not applicable.

APPENDIX D

CMS Managed Care Rate Setting Guide Response

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

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Responses to 2022-2023 CMS Managed Care Rate Development Guide

I. RESPONSES TO 2022-2023 CMS MANAGED CARE RATE DEVELOPMENT GUIDE

SECTION I. MEDICAID MANAGED CARE RATES

1. General Information

- Rate period – This report documents and certifies capitation rates in effect from July 1, 2022 to June 30, 2023 (SFY 2023).
- Actuarial rate certification – See Appendix E.
- Final capitation rates – See Exhibit 4.
- Program descriptions – Please refer to the following sections:
 - Section II – MississippiCAN program background
 - Appendix A – Rate cell definitions
 - Section IV: Step 4 – Background on the quality withhold applied in SFY 2023
- Medical Loss Ratio (MLR) – The program includes a minimum MLR requirement of 87.5% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses must meet or exceed 87.5% of revenue. Revenue for premium taxes and HIF are excluded from the MLR calculation. If the 87.5% threshold is not met, CCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices.
- Federal Medical Assistance Percentage (FMAP) – DOM receives an enhanced FMAP for COVID-19 vaccination administration fees, family planning services, breast and cervical cancer services, Indian health services, home health services, rehabilitation services, private duty nursing services, and Quasi-CHIP members that prior to the Affordable Care Act were covered under the CHIP program. Any differences in capitation rates according to covered populations are based on valid rate development standards and not based on the FMAP associated with the covered populations.
- Cross-subsidies – Rate cells do not cross-subsidize other rate cells.
- Rate change from SFY 2022 capitation rates – See Section I.
- Known rate amendments – The capitation rates included in this report will require recertification to account for the following:
 - CCO specific MHAP, MAPS, and TREAT payments made to providers. This initial certification includes a PMPM estimate of these amounts across all CCOs.
 - We anticipate that these adjustments will be made at the same time and an amendment will be submitted by February 2024.
- Impact of COVID-19 – See Section I.

2. Data

- Service data sources – See Appendix B.
- Validation and quality adjustments – See Section III for encounter data and financial reporting validation.
- Changes in data sources – Base period FFS, CCO encounter, and CCO financial data again used CY 2018 and CY 2019 data sources. FFS and encounter data were restated relative to SFY 2022 rates.
- Potential Future Data improvements – We anticipate no major enhancements to data collection in the future.

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- Other data adjustments – See Appendix B for descriptions of reallocations of financial data using encounter data relationships for subcapitated claims and maternity costs. See Section III: Step 1 for a description of adjustments applied to encounter data. No adjustments were applied to the data other than those outlined in that section.
- Blending of data sources – See Section III: Step 4.
- Data reliance – See Appendix F.

3. Projected Benefit Costs and Trends

- Assumptions used to project benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Projected benefit cost trends:
 - Annual trend assumptions – Section III: Steps 2 and 3 outline the trend assumptions used from CY 2018 to CY 2019 for populations using two years of claims experience. Section IV: Step 1 outlines the trend assumptions from CY 2019 to the rating period. Negative dental utilization trends and inpatient utilization trends for the Adult population groups for CY 2019 to SFY 2023 reflect historical trend patterns. Please refer to Exhibits 7A to 7E for more information. Negative unit cost trends for CY 2019 to the rating period for inpatient hospital services, outpatient hospital services, and physician services shown in Table 16 are due to decreases in fee schedules over time.

Additionally, negative utilization and unit cost trend assumptions for pharmacy services are shown in Tables 8, 23, 24, 25, and 26. These trends reflect recent historical patterns in pharmacy experience.

- Reimbursement changes – Section IV: Step 1 describes the reimbursement changes between the base period and rating period.
- In-lieu-of services – CCOs do not provide any material amounts of in-lieu-of services.
- IMD services – IMD services are covered beginning in SFY 2020. However, material amounts of in-lieu of services are not anticipated to be provided through IMDs. Adjustments were made to the base period data for IMD services since they were not covered during the base period in Section III: Step 1 of the capitation rate report.
- Mental Health Parity and Addiction Equity Act – No additional services were necessary to add to the program to achieve compliance with the act.
- Retrospective eligibility periods – No consideration for retroactive eligibility periods is included in the base data or rate development, because such services are covered under FFS.
- Overpayments to providers – Section III, Step 1 summarizes recoveries for overpayments to providers by CCOs and how these recoveries are accounted for when summarizing the base data used to develop SFY 2023 capitation rates.
- Changes in covered services and benefits:
 - Effective January 1, 2019, limits on physician visits are increased from 12 visits to 16 visits. Please see Section III: Steps 2 and 3 for a description of how these services are included in capitation rates.
 - Effective July 1, 2019, limits on pharmacy scripts will increase from 5 scripts per member per month to six scripts per member per month and limits on home health services will increase from 25 visits to 36 visits. Please see Section IV: Step 1 for a description of how these services are included in capitation rates.
 - Starting January 2017, MississippiCAN began offering additional screening and treatment services for MississippiCAN members with autism spectrum disorder (ASD). However, utilization of those services

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Responses to 2022-2023 CMS Managed Care Rate Development Guide

has been slow to materialize. An adjustment is included in SFY 2023 capitation rates to reflect expected additional utilization of these services due to increases in provider fees. Please see Section IV: Step 1 for a description of this adjustment.

- Effective October 1, 2018, stays in psychiatric residential treatment facilities (PRTF) are covered as part of the MississippiCAN program. Please see Section III: Steps 2 and 3 for a description of how these services are included in capitation rates.
- Other adjustments:
 - A population change adjustment was applied to reflect that some children in the Non-Newborn SSI / Disabled rate cell were historically moved into FFS after a PRTF stay. Starting in SFY 2022, these individuals will remain in the MississippiCAN program. This adjustment was applied in Section III: Step 1.
 - Managed care savings were applied to the FFS experience used to develop the PRTF adjustments as documented in Section IV: Step 2 and 3.
 - Managed care savings were applied to CY 2019 IP hospital experience to reflect potentially preventable hospital readmissions as documented in Section IV: Step 1.
 - Area relativity factors – Please see Section IV: Step 3 for a discussion of the area factor development for the North, Central, and South regions.
- Final projected benefit costs – See Exhibit 4.
- Conditions of any litigation to which the state is subjected – Not applicable; no impact on rates.

4. Special Contract Provisions Related to Payment

- Incentive Arrangements – Not applicable.
- Withhold Arrangements – A quality withhold will be implemented for the SFY 2023 capitation rates. Please see Section IV: Step 4 for a description of the quality withhold.
- Risk sharing
 - The program includes a minimum MLR requirement of 87.5% of revenue. The sum of medical expenses, directed payments, and health care quality initiative (HCQI) expenses, must meet or exceed 87.5% of revenue. Revenue for premium taxes and HIF are excluded from the MLR calculation. If the 87.5% threshold is not met, MCOs return revenue to DOM until the threshold is met. This mechanism has been developed in accordance with applicable regulation and generally accepted actuarial principles and practices.
 - For SFY 2023 the program is subject to a risk corridor. Please see Section IV: Step 8 for details of the implementation of this risk corridor.
 - Any risk-sharing arrangements are consistent with pricing assumptions and no remittance / payment is calculated using pricing assumptions.
- Delivery System and Provider Payment Initiatives – Not applicable.
- State Directed Payments

The SFY 2023 capitation rates included in this certification reflect four directed payment arrangements that will be in effect for SFY 2023. The necessary information for the four state directed payment arrangements included in these preliminary capitation rates is summarized below.

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Summary of All State Directed Payments

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

Summary of State Directed Payments Included as a Separate Payment Term

Control Name of the State Directed Payment	Aggregate Amount Included in the Certification	Statement that the Actuary is Certifying the Separate Payment Term	The Magnitude on a PMPM Basis	Confirmation the Rate Development is Consistent with the Preprint	Confirmation that the State and Actuary will Submit Required Documentation at the End of the Rating Period
			See Exhibit 18		
MS_Fee_IPH.OPH_Amend2_20220701-20230630	FSA component of MHAP: \$313.1 million QIPP component of MHAP: \$288.1 million	Confirmed the actuarial certification covers this separate payment term	FSA component of MHAP: allocated across rate cells based on projected IP / OP spend. 70% is allocated based on projected IP spend and 30% is allocated based on projected OP spend. Ranges from \$16.30 to \$2,629.57 PMPM. QIPP component of MHAP: allocated as a fixed PMPM of \$62.81 across all rate cells.	Confirmed	Confirmed
MS_Fee.VBP_AMC.PC.SP.Oth_Renewal_20220701-20230630	\$38.0 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 18 Allocated as a fixed PMPM of \$8.29 across all rate cells	Confirmed	Confirmed
MS_Fee_Oth_New_20220701-20230630	\$14.7 million	Confirmed the actuarial certification covers this separate payment term	See Exhibit 18 Allocated as a fixed PMPM of \$3.21 across all rate cells	Confirmed	Confirmed

APPENDIX D

Responses to 2022-2023 CMS Managed Care Rate Development Guide

Summary of State Directed Payments Included as a Rate Adjustment

Control Name of the State Directed Payment	Rate Cells Affected	Impact	Description of the Adjustment	Confirmation the Rate Development is Consistent with the Preprint	For Maximum Fee Schedules, Provide Information Requested
MS_Fee_Oth_Renewal_20220701-20230630	Non-Newborn SSI / Disabled, Foster Care, MA Children, Quasi-CHIP	See Exhibit 2A	Increased estimated costs for services related to autism spectrum disorder to reflect increased fee schedule and higher utilization of services	Confirmed	N/A

All services covered under the MississippiCAN program are subject to a minimum fee schedule of the FFS rate. This minimum fee schedule is set in accordance with the provisions of §438.6(c). It is our understanding that this type of minimum fee schedule does not necessitate prior approval from CMS and no preprint is required.

DOM has confirmed that there are no additional directed payments in the program that are not addressed in the certification.

DOM has also confirmed that there are no requirements regarding the reimbursement rates the managed care plans must pay to any providers unless specifically specified in the certification as a state directed payment or authorized under applicable law, regulation, or waiver.

- Pass Through Payments – Not applicable.

5. Projected Non-Benefit Costs

- Assumptions used to project non-benefit costs do not vary based on the rate of federal financial participation associated with the covered populations.
- Administrative cost data, projected costs, premium tax and margin – See Section IV: Step 2.
- Health Insurer Fee (HIF) treatment – Not applicable for SFY 2023.

6. Risk Adjustment and Acuity Adjustments

- Risk adjustment – See Section IV: Step 6. During the development of the custom Mississippi risk adjustment model we measured an R-squared value of 11% for MA Children and Quasi-CHIP, 17% for MA Adults, and 26% for Non-Newborn SSI / Disabled. These weights were used in the most recent risk adjustment results (effective for January 2022 to June 2022) which resulted in risk scores that ranged from 0.93 to 1.04 depending on CCO, region and rate cell.

A custom risk adjustment model was developed for the Foster Care rate cell using information from members' enrollment information. This model was used in the most recent risk adjustment results (effective for January 2022 to June 2022) which resulted in risk scores that ranged from 0.94 to 1.29 depending on CCO, region and rate cell.

- Acuity Adjustments – See Section IV: Step 2. Medicaid enrollment remained elevated through the end of the Department of Health and Human Services (HHS) declared public health emergency (PHE). Beginning in June 2021, DOM began transitioning individuals for whom Medicaid eligibility would have lapsed absent the PHE from coordinated care organizations (CCOs) into FFS Medicaid. Following the end of the PHE, these members' Medicaid eligibility is being redetermined; members may be re-enrolled in managed care or may be disenrolled from Medicaid entirely.

APPENDIX D

Responses to 2022-2023 CMS Managed Care Rate Development Guide

As SFY 2023 enrollment is materially different than the CY 2019 membership used to develop the base data underlying SFY 2023 capitation rates, Milliman applied a retrospective acuity adjustment for the MA Adult, MA Children, and Quasi-CHIP rate cells to reflect the differences between those populations.

SECTION II. MEDICAID MANAGED CARE RATES WITH LONG-TERM SERVICES

This section does not apply as MississippiCAN is not a long-term care service program.

SECTION III. NEW ADULT POPULATION CAPITATION RATES

This section does not apply as the state of Mississippi has not expanded coverage as a result of the Affordable Care Act.

APPENDIX E

Actuarial Certification of SFY 2023 MississippiCAN Capitation Rates

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

State of Mississippi Division of Medicaid
SFY 2023 MississippiCAN Preliminary Rate Calculation and Certification

August 22, 2023



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

jill.bruckert@milliman.com

August 22, 2023

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

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

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

I examined the actuarial assumptions and actuarial methods used in setting the capitation rates for SFY 2023 dated August 22, 2023 and accompanying this certification.

To the best of my information, knowledge, and belief, for the SFY 2023 period, the capitation rates offered by DOM are in compliance with the relevant requirements of 42 CFR 438.4. The attached letter, revised certification dated April 11, 2023, and the full report dated September 14, 2022 describe the capitation rate setting methodology.

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

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

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

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



Mississippi Division of Medicaid
Capitated Contracts Ratesetting
Actuarial Certification
SFY 2023 MississippiCAN Capitation Rates
August 22, 2023
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This Opinion assumes the reader is familiar with the MississippiCAN program, Medicaid coordinated care programs, and actuarial rating techniques. The Opinion is intended for the State of Mississippi and the Centers for Medicare and Medicaid Services and should not be relied on by other parties. The reader should be advised by actuaries or other professionals competent in the area of actuarial rate projections of the type in this Opinion, so as to properly interpret the projection results.

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

Jill A. Bruckert
Member, American Academy of Actuaries
Principal and Consulting Actuary
August 22, 2023

APPENDIX F

Data Reliance Letter

This report assumes the reader is familiar with the State of Mississippi's MississippiCAN program, its benefits, and rate setting principles. The report was prepared solely to provide assistance to DOM to set SFY 2023 capitation rates for the MississippiCAN program. It may not be appropriate for other purposes. Milliman does not intend to benefit, and assumes no duty or liability to, other parties who receive this work. This material should only be reviewed in its entirety.

State of Mississippi Division of Medicaid
SFY 2023 MississippiCAN Preliminary Rate Calculation and Certification

August 22, 2023

OFFICE OF THE GOVERNOR

Walter Sillers Building | 550 High Street, Suite 1000 | Jackson, Mississippi 39201



August 17, 2023

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

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

Dear Jill:

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

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

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

4. Supporting documentation provided by DOM:

a. Data identification logic:

- i. Logic for identifying members eligible for the MYPAC rate cell.
- ii. Logic for identifying psychiatric residential treatment facility (PRTF) claims to be included for MississippiCAN members and estimated 10% savings due to the inclusion in MississippiCAN.
- iii. Fee schedule for PRTF claims by facility effective January 1, 2021 provided on March 7, 2022.
- iv. Logic for identifying Institution for Mental Disease (IMD) facilities.
- v. Logic for identifying claims above state plan covered service limits.
- vi. Detailed mapping of services and providers previously eligible for the 5% assessment.
- vii. List of products reimbursed as clinician administered drugs and implantable drug system devices (CADDs).

b. Reimbursement and / or program changes:

- i. SB 2799 passed March 30, 2021.
 1. Removal of 5% provider assessment effective July 1, 2021.
 2. Preventative and diagnostic dental reimbursement increases of 5% effective July 1, 2021 and July 1, 2022, achieved through the removal of the 5% provider assessment.
 3. No reimbursement changes on or after July 1, 2021, unless federally required.
- ii. HB 657 passed April 18, 2022.
 1. Restorative dental reimbursement increase of 5% effective July 1, 2022.
 2. Unfreezing of pharmacy reimbursement effective July 1, 2021.
 3. Unfreezing of physician fee schedules effective July 1, 2022.
- iii. SB 2212 signed into law on March 16, 2023.
 1. Postpartum coverage for eligible members extended from 60 days to 12 months.
- iv. Estimated increase in autism spectrum disorder (ASD) services costs for SFY 2023 compared to CY 2019 due to the ramp up of services after the fee schedule change.
- v. Inpatient DRG, outpatient APC, and professional fee re-pricing impacts for July 2019 and July 2020 prepared by Conduent.
- vi. Professional fee re-pricing impacts for July 2022 prepared by Conduent.

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Milliman, Inc.
August 17, 2023
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- vii. OPPS reimbursement methodology changes for July 2018, including the removal of the 5% provider assessment on outpatient hospital services.
- viii. Estimate of the impact of OP dental reimbursement changes provided by Conduent.
- ix. Estimated fee schedule increase for the ambulance reimbursement change effective July 1, 2020.
- x. Fee schedule for COVID-19 vaccine administration costs for SFY 2023 and vaccine uptake rates by population.
- xi. Fee schedule updates for the following categories of service:
 - 1. Psychiatric Residential Treatment Facilities (PRTF) – January 2023
 - 2. Home Health Agency (HHA) – October 2022
 - 3. Prescribed Pediatric Extended Care (PPEC) – October 2022
 - 4. Private Duty Nursing (PDN) – October 2022
 - 5. Ambulatory Surgical Center (ASC) – January 2023
 - 6. Autism Spectrum Disorder (ASD) – January 2023
 - 7. Federally Qualified Health Centers (FQHC) – January 2023
 - 8. Rural Health Clinics (RHC) – January 2023
- xii. 2019 fee schedules for the following categories of service:
 - 1. Psychiatric Residential Treatment Facilities (PRTF)
 - 2. Home Health Agency (HHA)
 - 3. Prescribed Pediatric Extended Care (PPEC)
 - 4. Private Duty Nursing (PDN)
 - 5. Ambulatory Surgical Center (ASC)
 - 6. Autism Spectrum Disorder (ASD)
 - 7. Federally Qualified Health Centers (FQHC)
 - 8. Rural Health Clinics (RHC)
- c. Directed payments:
 - i. SFY 2023 Mississippi Hospital Access Program (MHAP) total funding amount of \$601,153,602 along with splits for the quality incentive payment program (QIPP) amount of \$288,100,478, the inpatient fee schedule adjustment (FSA) amount of \$190,965,371, and the outpatient FSA amount of \$122,087,753 to be used in capitation rate development.
 - ii. SFY 2023 Mississippi Medicaid Access to Physician Services (MAPS) funding amount of \$38,018,361.
 - iii. ASD minimum fee schedule.
 - iv. SFY 2023 Transforming Reimbursement for Emergency Ambulance Transportation (TREAT) funding amount of \$14,740,472.
- d. Historical data:
 - i. Documentation of historical FFS third party liability (TPL) recoveries.
 - ii. Documentation of \$2.7 million of TPL recoveries by DOM for MississippiCAN claims incurred in calendar year (CY) 2019.

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 Milliman, Inc.
 August 17, 2023
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- iii. Files summarizing claims for Hospital Presumptive Eligibility (HPE) newborns provided December 16, 2020.
- iv. Files summarizing individuals in the Non-Newborn SSI / Disabled rate cell moved to FFS due to a PRTF stay in CY 2019.
- v. Estimated costs for graduate medical education (GME) in SFY 2018, SFY 2019, and January to September 2019.
- vi. MLR reports for January 2018 through June 2023.
- vii. Capitation reports and detailed enrollment reports showing monthly membership through July 2023.
- viii. COVID-19 vaccination status for each MississippiCAN enrollee as of December 2021.
- e. Other data:
 - i. Quality withhold parameters for SFY 2023.
 - ii. Potentially preventable hospital readmissions analysis prepared by Conduent provided July 25, 2022.
 - iii. April 2022 QIPP Statewide and CCO PPHR reports provided April 12, 2022.
 - iv. Confirmation DOM is carving costs related to Zolgensma out of MississippiCAN for SFY 2023 and no other drugs are expected to be carved out of MississippiCAN for SFY 2023.
 - v. Risk corridor parameters for SFY 2023.
 - vi. Other computer files and clarifying correspondence.

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

Jennifer Westworth

Name

Deputy Administrator for Finance

Title

August 17, 2023

Date

For more information about Milliman,
please visit us at:

milliman.com



Milliman is among the world's largest providers of actuarial and related products and services. The firm has consulting practices in life insurance and financial services, property & casualty insurance, healthcare, and employee benefits. Founded in 1947, Milliman is an independent firm with offices in major cities around the globe.

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Exhibit 1
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
July 2022 to December 2022 Enrollment Period

North Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	1,531	18.58%	686	43.09%	922	31.59%	3,139	24.62%
Money Code 3	Receiving IV-E Assistance	0.743	881	10.69%	367	23.05%	423	14.49%	1,671	13.11%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	5,427	65.88%	479	30.09%	1,313	44.98%	7,219	56.62%
Other	All other Money Codes	0.000	399	4.84%	60	3.77%	261	8.94%	720	5.65%
Unadjusted Plan Factor			0.739		1.019		0.866		0.803	
Member Months			8,238		1,592		2,919		12,749	
Budget Neutral Plan Factor			0.920		1.269		1.078		1.000	

Central Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	2,005	24.71%	803	46.60%	861	36.53%	3,669	30.09%
Money Code 3	Receiving IV-E Assistance	0.743	1,175	14.48%	438	25.42%	401	17.01%	2,014	16.52%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	4,633	57.11%	432	25.07%	916	38.86%	5,981	49.05%
Other	All other Money Codes	0.000	300	3.70%	50	2.90%	179	7.59%	529	4.34%
Unadjusted Plan Factor			0.814		1.064		0.923		0.871	
Member Months			8,113		1,723		2,357		12,193	
Budget Neutral Plan Factor			0.935		1.222		1.061		1.000	

South Region										
Description			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	1,718	15.40%	975	39.63%	1,172	30.84%	3,865	22.20%
Money Code 3	Receiving IV-E Assistance	0.743	1,383	12.40%	664	26.99%	646	17.00%	2,693	15.47%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	7,486	67.12%	770	31.30%	1,661	43.71%	9,917	56.95%
Other	All other Money Codes	0.000	566	5.07%	51	2.07%	321	8.45%	938	5.39%
Unadjusted Plan Factor			0.725		1.019		0.877		0.800	
Member Months			11,153		2,460		3,800		17,413	
Budget Neutral Plan Factor			0.906		1.275		1.097		1.000	

Exhibit 2
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q3 to Q4 2022 Risk Scores
July 2022 to December 2022 Enrollment Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	8,238	0.739	0.920
Molina	1,592	1.019	1.269
United	2,919	0.866	1.078
Total	12,749	0.803	1.000

Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	8,113	0.814	0.935
Molina	1,723	1.064	1.222
United	2,357	0.923	1.061
Total	12,193	0.871	1.000

South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	11,153	0.725	0.906
Molina	2,460	1.019	1.275
United	3,800	0.877	1.097
Total	17,413	0.800	1.000

Caveats and Limitations
Mississippi Division of Medicaid

READ BEFORE PROCEEDING

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

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

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

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

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

The authors of these exhibits and appendices are actuaries employed by Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion.

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

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

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

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

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

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

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

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

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

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

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

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

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

		Non-SSI Newborns 0 to 2 Months Rate Cell						
		Category of Service						
Calculation Step	CY 2019 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2019 Member Months	75,312	75,312	75,312	75,312	75,312	75,312	75,312
b	Total Allowed Dollars	\$104,016,734	\$4,012,403	\$25,499,948	\$669,632	\$49,420	\$1,102,277	\$135,350,413
c = b / a	CY 2019 PMPM Costs'	\$1,381.14	\$53.28	\$338.59	\$8.89	\$0.66	\$14.64	\$1,797.20
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.008
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.013	1.000	1.000	1.000	1.002
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.997	0.995	1.000
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
o	Missing Data	1.002	1.000	1.000	1.001	1.000	1.000	1.001
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of c through p Adjusted CY 2019 PMPM Costs		\$1,390.98	\$53.57	\$344.18	\$8.87	\$0.66	\$14.64	\$1,812.89

Exhibit 1A
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CY 2019 Encounter Data

		Non-SSI Newborns 3 to 12 Months Rate Cell						
		Category of Service						
Calculation Step	CY 2019 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
a	CY 2019 Member Months	252,667	252,667	252,667	252,667	252,667	252,667	252,667
b	Total Allowed Dollars	\$9,650,331	\$14,738,237	\$27,081,847	\$6,016,033	\$249,559	\$1,361,943	\$59,097,951
c = b / a	CY 2019 PMPM Costs	\$38.19	\$58.33	\$107.18	\$23.81	\$0.99	\$5.39	\$233.90
d	Encounter to Financial Adjustment	1.008	1.008	1.008	1.002	1.008	1.008	1.007
e	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.015	1.000	1.000	1.000	1.007
g	Zolgensma Carveout	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	TPL Adjustment	0.997	0.997	0.997	0.997	0.997	0.997	0.997
i	5% Assessment - Provider Adjustment	1.000	1.000	0.994	1.000	0.990	0.990	0.997
j	340B Pharmacy Pricing Adjustment	1.000	1.000	1.000	0.999	1.000	1.000	1.000
k	IMD Removal	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	IMD Additions	1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	SSI Children - COE Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
n	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
o	Missing Data	1.000	1.000	1.000	1.001	1.000	1.000	1.000
p	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of c through p	Adjusted CY 2019 PMPM Costs	\$38.40	\$58.66	\$108.67	\$23.75	\$0.98	\$5.37	\$235.83

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

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

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

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CY 2019 Encounter Data

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

Exhibit 1B Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2018 Encounter Data								
Breast and Cervical Cancer Rate Cell								
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	1,090	1,090	1,090	1,090	1,090	1,090	1,090
b	Total Allowed Dollars	\$216,492	\$1,593,617	\$1,021,306	\$423,271	\$8,377	\$51,999	\$3,315,063
c	CY 2018 PMPM Costs	\$198.62	\$1,462.03	\$936.98	\$388.32	\$7.69	\$47.71	\$3,041.34
d	Non-Covered Services	1.000	1.000	0.981	0.959	1.000	1.000	0.989
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	0.994	1.000	1.000	1.000	0.998
g	HPE Newborn Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	1.000	0.998	1.000	0.959	0.994	0.999
j	5% Assessment - OPPS Adjustment	1.000	0.995	1.000	1.000	1.000	1.000	0.998
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Product of c through k	Subtotal: CY 2018 Adjusted Costs	\$198.50	\$1,453.67	\$910.81	\$371.10	\$7.36	\$47.39	\$2,988.83
CY 2018 to CY 2019 Trends								
l	Utilization Trend 2018 to 2019	1.020	1.020	1.060	0.995	0.970	1.060	1.030
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.100	1.000	1.001	1.017
CY 2018 to CY 2019 Program Changes								
n	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
o	PDL Adjustment	1.000	1.000	1.000	0.989	1.000	1.000	0.999
p	Physician Limit Expansion Adjustment	1.000	1.000	1.010	1.000	1.000	1.000	1.003
q	Rx Limit Adjustment	1.000	1.000	1.000	1.021	1.000	1.000	1.003
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
CY 2018 to CY 2019 Reimbursement Methodology Change:								
s	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.853	0.998
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.999
Product of c through u	CY 2018 PMPM Costs - Adjusted to CY 2019	\$199.94	\$1,497.24	\$976.69	\$410.12	\$7.14	\$42.90	\$3,134.04

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

		Pregnant Women Rate Cell - Non-Deliveries						
		Category of Service						
Calculation Step	CY 2018 PMPM Cost Development	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
<i>a</i>	CY 2018 Member Months	135,337	135,337	135,337	135,337	135,337	135,337	135,337
<i>b</i>	Total Allowed Dollars	\$5,688,263	\$14,980,639	\$27,189,605	\$7,260,185	\$842,120	\$1,345,194	\$67,306,007
<i>c</i>	CY 2018 PMPM Costs	\$42.03	\$110.69	\$200.90	\$53.65	\$6.22	\$9.94	\$423.43
<i>d</i>	Non-Covered Services	1.000	1.000	0.998	0.989	1.000	1.000	0.997
<i>e</i>	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
<i>f</i>	Provider Reimbursement Adjustment	1.000	1.000	0.997	1.000	1.000	1.000	0.998
<i>g</i>	HPE Newborn Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>h</i>	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>i</i>	5% Assessment - Provider Adjustment	1.000	1.000	0.994	1.000	0.964	0.983	0.996
<i>j</i>	5% Assessment - OPPS Adjustment	1.000	0.990	1.000	1.000	1.000	1.000	0.997
<i>k</i>	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
<i>Product of c through k</i>	Subtotal: CY 2018 Adjusted Costs	\$42.00	\$109.46	\$198.53	\$52.85	\$5.99	\$9.76	\$418.60
	CY 2018 to CY 2019 Trends							
<i>l</i>	Utilization Trend 2018 to 2019	0.990	1.000	1.000	0.995	0.970	1.000	0.998
<i>m</i>	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.095	1.000	1.001	1.015
	CY 2018 to CY 2019 Program Changes							
<i>n</i>	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
<i>o</i>	PDL Adjustment	1.000	1.000	1.000	0.998	1.000	1.000	1.000
<i>p</i>	Physician Limit Expansion Adjustment	1.000	1.000	1.002	1.000	1.000	1.000	1.001
<i>q</i>	Rx Limit Adjustment	1.000	1.000	1.000	1.006	1.000	1.000	1.001
<i>r</i>	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
	CY 2018 to CY 2019 Reimbursement Methodology Change:							
<i>s</i>	OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000	1.000
<i>t</i>	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.985	1.000
<i>u</i>	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.999
<i>Product of c through u</i>	CY 2018 PMPM Costs - Adjusted to CY 2019	\$41.06	\$110.41	\$199.14	\$57.82	\$5.81	\$9.63	\$423.87

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

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

Exhibit 1B Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2018 Encounter Data								
SSI / Disabled Newborn Rate Cell								
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	6,311	6,311	6,311	6,311	6,311	6,311	6,311
b	Total Allowed Dollars	\$32,864,910	\$2,416,812	\$8,931,077	\$3,081,961	\$3,714	\$2,315,469	\$49,613,945
c	CY 2018 PMPM Costs	\$5,207.56	\$382.95	\$1,415.16	\$488.35	\$0.59	\$366.89	\$7,861.50
d	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.998	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.029	1.000	1.000	1.000	1.005
g	HPE Newborn Adjustment	1.001	1.000	1.000	1.000	1.000	1.000	1.001
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	1.000	0.997	1.000	0.971	0.972	0.998
j	5% Assessment - OPPS Adjustment	1.000	0.996	1.000	1.000	1.000	1.000	1.000
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Product of c through k	Subtotal: CY 2018 Adjusted Costs	\$5,210.24	\$381.33	\$1,451.42	\$486.84	\$0.57	\$356.25	\$7,886.65
CY 2018 to CY 2019 Trends								
l	Utilization Trend 2018 to 2019	1.030	1.010	1.030	1.030	0.990	1.030	1.029
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.005	1.000	1.001	1.001
CY 2018 to CY 2019 Program Changes								
n	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
o	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	1.000
p	Physician Limit Expansion Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
q	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
CY 2018 to CY 2019 Reimbursement Methodology Change:								
s	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.990	1.000
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.992
Product of c through u	CY 2018 PMPM Costs - Adjusted to CY 2019	\$5,299.48	\$388.91	\$1,496.84	\$505.26	\$0.57	\$363.85	\$8,054.90

Exhibit 1B Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2018 Encounter Data								
Non-SSI Newborns 0 to 2 Months Rate Cell								
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	76,100	76,100	76,100	76,100	76,100	76,100	76,100
b	Total Allowed Dollars	\$101,925,618	\$3,851,733	\$25,111,112	\$644,480	\$43,105	\$1,369,822	\$132,945,870
c	CY 2018 PMPM Costs	\$1,339.36	\$50.61	\$329.98	\$8.47	\$0.57	\$18.00	\$1,746.99
d	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
f	Provider Reimbursement Adjustment	1.000	1.000	1.023	1.000	1.000	1.000	1.004
g	HPE Newborn Adjustment	1.006	1.001	1.002	1.000	1.001	1.004	1.005
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	1.000	0.992	1.000	0.987	0.985	0.998
j	5% Assessment - OPPS Adjustment	1.000	0.992	1.000	1.000	1.000	1.000	1.000
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Product of c through k	Subtotal: CY 2018 Adjusted Costs	\$1,346.31	\$50.20	\$335.15	\$8.44	\$0.56	\$17.79	\$1,758.45
CY 2018 to CY 2019 Trends								
l	Utilization Trend 2018 to 2019	1.030	1.010	1.030	1.030	0.990	1.030	1.029
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.005	1.000	1.001	1.001
CY 2018 to CY 2019 Program Changes								
n	PRTF Services Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
o	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	1.000
p	Physician Limit Expansion Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
q	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
CY 2018 to CY 2019 Reimbursement Methodology Change:								
s	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.997	1.000
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.990
Product of c through u	CY 2018 PMPM Costs - Adjusted to CY 2019	\$1,369.37	\$51.19	\$345.64	\$8.76	\$0.55	\$18.29	\$1,793.81

Exhibit 1B Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2018 Encounter Data								
Foster Care Rate Cell								
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	77,192	77,192	77,192	77,192	77,192	77,192	77,192
b	Total Allowed Dollars	\$8,923,087	\$3,382,849	\$9,121,108	\$5,629,705	\$2,290,780	\$713,690	\$30,061,218
c	CY 2018 PMPM Costs	\$115.60	\$43.82	\$118.16	\$72.93	\$29.68	\$9.25	\$389.43
d	Non-Covered Services	1.000	1.000	1.000	1.000	1.000	1.000	1.000
e	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	0.999
f	Provider Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
g	HPE Newborn Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	5% Assessment - Provider Adjustment	1.000	0.987	0.967	1.000	0.956	0.961	0.984
j	5% Assessment - OPPS Adjustment	1.000	0.989	1.000	1.000	1.000	1.000	0.999
k	TPL Adjustment	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Product of c through k Subtotal: CY 2018 Adjusted Costs		\$115.53	\$42.76	\$114.23	\$72.67	\$28.34	\$8.88	\$382.41
CY 2018 to CY 2019 Trends								
l	Utilization Trend 2018 to 2019	1.030	1.010	1.030	1.030	0.990	1.030	1.025
m	Charge Trend 2018 to 2019	1.000	1.010	1.001	1.005	1.000	1.001	1.002
CY 2018 to CY 2019 Program Changes								
n	PRTF Services Adjustment	2.381	1.000	1.000	1.000	1.000	1.000	1.418
o	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	1.000
p	Physician Limit Expansion Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
q	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
r	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
CY 2018 to CY 2019 Reimbursement Methodology Change:								
s	OP Dental Adjustment	1.000	0.985	1.000	1.000	1.000	1.000	0.999
t	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
u	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.994
Product of c through u CY 2018 PMPM Costs - Adjusted to CY 2019		\$279.76	\$42.95	\$117.80	\$75.42	\$28.06	\$9.16	\$553.15

Exhibit 1C Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development CY 2018 FFS Data for MYPAC Rate Cell								
MYPAC Rate Cell								
Calculation Step	CY 2018 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	CY 2018 Member Months	5,469	5,469	5,469	5,469	5,469	5,469	5,469
b	Total Allowed Dollars	\$1,444,616	\$260,218	\$16,192,576	\$874,965	\$163,588	\$133,103	\$19,069,065
c	CY 2018 PMPM Costs	\$264.15	\$47.58	\$2,960.79	\$159.99	\$29.91	\$24.34	\$3,486.76
d	Drug Services Rebate Adjustment	1.000	1.000	1.000	0.997	1.000	1.000	1.000
e	IBNR Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	TPL Adjustment	0.992	0.992	0.992	0.992	0.992	0.992	0.992
g	Utilization Trend Q1 to Q3 2018 to CY 2018	1.004	1.001	1.000	1.004	0.999	1.004	1.001
h	Charge Trend Q1 to Q3 2018 to CY 2018	1.000	1.001	1.000	1.001	1.000	1.000	1.000
i	5% Assessment - OPPS Adjustment	1.000	1.004	1.000	1.000	1.000	1.000	1.000
j	PRTF Append Q4 2018 Experience	1.026	1.000	1.000	1.000	1.000	1.000	1.002
k	MYPAC Seasonality Adjustment	0.989	0.989	0.989	0.989	0.989	0.989	0.989
Product of c through k	Subtotal: CY 2018 Adjusted Costs	\$266.84	\$46.96	\$2,904.10	\$157.13	\$29.30	\$23.96	\$3,428.30
CY 2018 to CY 2019 Trends								
l	Utilization Trend 2018 to 2019	1.030	1.010	1.001	1.030	0.990	1.030	1.005
m	Charge Trend 2018 to 2019	1.000	1.010	1.000	1.005	1.000	1.001	1.000
CY 2018 to CY 2019 Program Changes								
n	PRTF Adjusting to CY 2019 Basis	1.076	1.000	1.000	1.000	1.000	1.000	1.006
o	PDL Adjustment	1.000	1.000	1.000	1.003	1.000	1.000	1.000
CY 2018 to CY 2019 Reimbursement Methodology Change:								
p	OP Dental Adjustment	1.000	0.997	1.000	1.000	1.000	1.000	1.000
q	GME Adjustment	0.988	1.000	1.000	1.000	1.000	1.000	0.999
Product of c through q	CY 2018 PMPM Costs - Trended to CY 2019	\$292.14	\$47.74	\$2,907.51	\$163.08	\$29.00	\$24.71	\$3,464.18

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions							
Non-Newborn SSI / Disabled Rate Cell							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
	Base Period Summaries						
a	CY 2019 PMPM Costs	\$194.50	\$207.18	\$216.77	\$296.79	\$9.28	\$61.78
	Trends						
b	Utilization Trend Factors CY 2019 to SFY 2023	1.018	1.018	1.053	1.128	0.899	1.053
c	Charge Trend Factors CY 2019 to SFY 2023	0.997	0.997	1.045	1.090	1.000	1.027
d	Emergency Services Savings Adjustment	1.000	0.982	0.995	1.000	1.000	1.000
	Population Changes						
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000		1.000	1.000	1.000
	Program Changes						
g	ASD Adjustment	1.000	1.000	1.001	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.031	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000
	Reimbursement Changes						
k	OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.966
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.071
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.005	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.007	1.023	1.000	1.048	1.036
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.019	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.009	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$189.99	\$207.65	\$244.19	\$356.92	\$8.99	\$71.57

Breast and Cervical Cancer Rate Cell							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
	Base Period Summaries						
	CY 2018 MMs	1,090	1,090	1,090	1,090	1,090	1,090
	CY 2018 PMPM Costs - Trended to CY 2019	\$199.94	\$1,497.24	\$976.69	\$410.12	\$7.14	\$42.90
	CY 2019 MMs	1,187	1,187	1,187	1,187	1,187	1,187
	CY 2019 PMPM Costs	\$193.10	\$1,566.99	\$1,018.87	\$490.82	\$8.03	\$41.23
a	Blended CY 2018 & CY 2019 PMPM Costs	\$196.37	\$1,533.60	\$998.68	\$452.19	\$7.60	\$42.03
	Trends						
b	Utilization Trend Factors CY 2019 to SFY 2023	1.018	1.018	1.053	1.128	0.899	1.053
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.042	1.090	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	0.998	0.999	1.000	1.000	1.000
	Population Changes						
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000		1.000	1.000	1.000
	Program Changes						
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.122	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000
	Reimbursement Changes						
k	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.987
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.044
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.001	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.004	1.000	1.051	1.027
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.011	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$191.38	\$1,549.89	\$1,100.59	\$591.42	\$7.27	\$47.78

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions							
MA Adult Rate Cell - Non-Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
a	Base Period Summaries CY 2019 PMPM Costs	\$43.05	\$112.46	\$122.14	\$111.02	\$6.93	\$12.49
b	Trends Utilization Trend Factors CY 2019 to SFY 2023	0.965	1.000	1.000	1.147	0.899	1.000
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.072	1.109	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	0.937	0.983	1.000	1.000	1.000
e	Population Changes COVID-19 Population Acuity Adjustment	1.023	1.023	1.023	1.023	1.023	1.023
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
g	Program Changes ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.034	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.959	1.000	1.000
k	Reimbursement Changes OP Dental Adjustment	1.000	0.999	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.932
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.126
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.012	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.001	1.018	1.000	1.047	1.038
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.017	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.001	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$40.71	\$107.22	\$135.53	\$143.26	\$6.79	\$14.19

MA Adult Rate Cell - Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
a	Base Period Summaries CY 2019 PMPM Costs	\$32.91	\$0.12	\$8.67	\$0.16	\$0.00	\$0.19
b	Trends Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.035	1.000	1.035	1.000	1.000
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.072	1.109	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
e	Population Changes COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
g	Program Changes ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.034	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.995	1.000	1.000
k	Reimbursement Changes OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.910
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.401
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.008	1.000	1.051	1.045
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.001	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$32.63	\$0.12	\$9.37	\$0.19	\$0.00	\$0.25

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

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions							
Pregnant Women Rate Cell - Non-Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
	Base Period Summaries						
	CY 2018 MMs	135,337	135,337	135,337	135,337	135,337	135,337
	CY 2018 PMPM Costs - Trended to CY 2019	\$41.06	\$110.41	\$199.14	\$57.82	\$5.81	\$9.83
	CY 2019 MMs	137,224	137,224	137,224	137,224	137,224	137,224
	CY 2019 PMPM Costs	\$35.43	\$116.54	\$198.96	\$51.19	\$4.99	\$9.27
a	Blended CY 2018 & CY 2019 PMPM Costs	\$38.23	\$113.50	\$199.05	\$54.48	\$5.40	\$9.45
	Trends						
b	Utilization Trend Factors CY 2019 to SFY 2023	0.965	1.000	1.000	1.147	0.899	1.000
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.072	1.109	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	0.936	0.988	1.000	1.000	1.000
	Population Changes						
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	0.990	0.990	0.990	0.990	0.990	0.990
	Program Changes						
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.008	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.959	1.000	1.000
	Reimbursement Changes						
k	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.970
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.181
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.008	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.010	1.000	1.048	1.039
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.006	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$34.98	\$104.52	\$212.41	\$66.29	\$5.16	\$11.36

Pregnant Women Rate Cell - Deliveries							
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
	Base Period Summaries						
	CY 2018 MMs	135,337	135,337	135,337	135,337	135,337	135,337
	CY 2018 PMPM Costs - Trended to CY 2019	\$479.11	\$0.88	\$133.24	\$2.45	\$0.00	\$1.77
	CY 2019 MMs	137,224	137,224	137,224	137,224	137,224	137,224
	CY 2019 PMPM Costs	\$461.30	\$1.40	\$125.36	\$2.30	\$0.00	\$1.48
a	Blended CY 2018 & CY 2019 PMPM Costs	\$470.14	\$1.14	\$129.27	\$2.37	\$0.00	\$1.62
	Trends						
b	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.035	1.000	1.035	1.000	1.000
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.072	1.109	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
	Population Changes						
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	0.975	0.975	0.975	0.975	0.975	0.975
	Program Changes						
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.008	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.995	1.000	1.000
	Reimbursement Changes						
k	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.970
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.398
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.008	1.000	1.047	1.048
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.018	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.007	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$454.60	\$1.15	\$136.16	\$2.66	\$0.00	\$2.29

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

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions									
SSI / Disabled Newborn Rate Cell									
Calculation Step		SFY 2023 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	Base Period Summaries								
	CY 2018 MMs		6,311	6,311	6,311	6,311	6,311	6,311	6,311
	CY 2018 PMPM Costs - Trended to CY 2019		\$5,299.48	\$388.91	\$1,496.84	\$505.26	\$0.57	\$363.85	\$8,054.90
	CY 2019 MMs		6,340	6,340	6,340	6,340	6,340	6,340	6,340
	CY 2019 PMPM Costs		\$4,909.13	\$227.69	\$1,576.10	\$584.17	\$0.71	\$262.73	\$7,560.52
	Blended CY 2018 & CY 2019 PMPM Costs		\$5,103.86	\$308.11	\$1,536.56	\$544.81	\$0.64	\$313.17	\$7,807.15
	Trends								
	Utilization Trend Factors CY 2019 to SFY 2023		1.035	1.018	1.035	1.072	0.965	1.035	1.037
	Charge Trend Factors CY 2019 to SFY 2023		0.995	0.999	1.063	1.053	1.000	1.037	1.014
	Emergency Services Savings Adjustment		1.000	0.976	0.999	1.000	1.000	1.000	0.999
e	Population Changes								
	COVID-19 Population Acuity Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Postpartum Coverage Extension		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Program Changes								
	ASD Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Rx Limit Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Home Health Limit Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	PDL Adjustment		1.000	1.000	1.000	0.948	1.000	1.000	0.996
	Reimbursement Changes								
	OP Dental Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	NET Reimbursement Adjustment		1.000	1.000	1.000	1.000	1.000	0.945	0.998
	GME Adjustment		0.963	1.000	1.000	1.000	1.000	1.000	0.976
	Emergency Ambulance Payment Increase		1.000	1.000	1.000	1.000	1.000	1.060	1.002
	COVID-19 Vaccine Administration Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	5% Assessment Removal Adjustment		1.000	1.001	1.005	1.000	1.038	1.041	1.003
	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.059	1.000	1.000
	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Product of a through r		\$5,061.45	\$306.20	\$1,697.81	\$583.15	\$0.67	\$350.73	\$8,000.01

Non-SSI Newborns 0 to 2 Months Rate Cell									
Calculation Step		SFY 2023 PMPM Cost Development	Category of Service						Total
			Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
a	Base Period Summaries								
	CY 2018 MMs		76,100	76,100	76,100	76,100	76,100	76,100	76,100
	CY 2018 PMPM Costs - Trended to CY 2019		\$1,369.37	\$51.19	\$345.64	\$8.76	\$0.55	\$18.29	\$1,793.81
	CY 2019 MMs		75,312	75,312	75,312	75,312	75,312	75,312	75,312
	CY 2019 PMPM Costs		\$1,390.98	\$53.57	\$344.18	\$8.87	\$0.66	\$14.64	\$1,812.89
	Blended CY 2018 & CY 2019 PMPM Costs		\$1,380.12	\$52.37	\$344.91	\$8.81	\$0.61	\$16.47	\$1,803.30
	Trends								
	Utilization Trend Factors CY 2019 to SFY 2023		1.035	1.018	1.035	1.072	0.965	1.035	1.035
	Charge Trend Factors CY 2019 to SFY 2023		0.995	0.995	1.060	1.053	1.000	1.020	1.008
	Emergency Services Savings Adjustment		1.000	0.954	0.998	1.000	1.000	1.000	0.998
e	Population Changes								
	COVID-19 Population Acuity Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Postpartum Coverage Extension		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Program Changes								
	ASD Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Rx Limit Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Home Health Limit Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	PDL Adjustment		1.000	1.000	1.000	0.948	1.000	1.000	1.000
	Reimbursement Changes								
	OP Dental Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
m	NET Reimbursement Adjustment		1.000	1.000	1.000	1.000	1.000	0.964	1.000
	GME Adjustment		0.963	1.000	1.000	1.000	1.000	1.000	0.972
	Emergency Ambulance Payment Increase		1.000	1.000	1.000	1.000	1.000	1.334	1.003
	COVID-19 Vaccine Administration Adjustment		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	5% Assessment Removal Adjustment		1.000	1.000	1.011	1.000	1.024	1.030	1.003
	Preventative and Diagnostic Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.064	1.000	1.000
	Restorative Dental Reimbursement Change		1.000	1.000	1.000	1.000	1.000	1.000	1.000
	Product of a through r		\$1,368.65	\$50.61	\$381.80	\$9.43	\$0.64	\$23.03	\$1,834.16

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions								
Non-SSI Newborns 3 to 12 Months Rate Cell								
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
	Base Period Summaries							
a	CY 2019 PMPM Costs	\$38.40	\$58.66	\$108.67	\$23.75	\$0.98	\$5.37	\$235.83
	Trends							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.034
c	Charge Trend Factors CY 2019 to SFY 2023	0.995	0.995	1.061	1.053	1.000	1.020	1.032
d	Emergency Services Savings Adjustment	1.000	0.951	0.992	1.000	1.000	1.000	0.984
	Population Changes							
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000		1.000	1.000	1.000	1.000
	Program Changes							
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.994
	Reimbursement Changes							
k	OP Dental Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.964	0.999
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.994
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.183	1.004
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.000	1.021	1.000	1.036	1.041	1.011
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.063	1.000	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Product of a through r	Projected SFY 2023 PMPM Costs	\$38.08	\$56.45	\$120.94	\$25.42	\$1.04	\$6.73	\$248.67

Foster Care Rate Cell								
Calculation Step	SFY 2023 PMPM Cost Development	Category of Service						Total
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	
	Base Period Summaries							
	CY 2018 MMs	77,192	77,192	77,192	77,192	77,192	77,192	77,192
	CY 2018 PMPM Costs - Trended to CY 2019	\$279.76	\$42.95	\$117.80	\$75.42	\$28.06	\$9.16	\$553.15
	CY 2019 MMs	78,904	78,904	78,904	78,904	78,904	78,904	78,904
	CY 2019 PMPM Costs	\$300.01	\$43.19	\$129.53	\$73.66	\$26.67	\$11.92	\$584.98
a	Blended CY 2018 & CY 2019 PMPM Costs	\$289.99	\$43.07	\$123.73	\$74.53	\$27.36	\$10.56	\$569.24
	Trends							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035	1.035
c	Charge Trend Factors CY 2019 to SFY 2023	1.155	0.994	1.063	1.053	1.000	1.030	1.100
d	Emergency Services Savings Adjustment	1.000	0.978	0.998	1.000	1.000	1.000	0.998
	Population Changes							
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000		1.000	1.000	1.000	1.000
	Program Changes							
g	ASD Adjustment	1.000	1.000	1.001	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000	0.993
	Reimbursement Changes							
k	OP Dental Adjustment	1.000	0.996	1.000	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.998	1.000
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000	0.980
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.053	1.001
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.004	1.000	1.000	1.000	1.001
p	5% Assessment Removal Adjustment	1.000	1.015	1.037	1.000	1.049	1.048	1.012
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.022	1.000	1.001
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.013	1.000	1.001
Product of a through r	Projected SFY 2023 PMPM Costs	\$333.82	\$43.07	\$141.56	\$79.78	\$28.69	\$12.39	\$639.31

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions							
MYPAC Rate Cell							
Calculation Step		Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
SFY 2023 PMPM Cost Development		Total					
Base Period Summaries							
	CY 2018 MMs	5,469	5,469	5,469	5,469	5,469	5,469
	CY 2018 PMPM Costs - Trended to CY 2019	\$292.14	\$47.74	\$2,907.51	\$163.08	\$29.00	\$24.71
	CY 2019 MMs	7,776	7,776	7,776	7,776	7,776	7,776
	CY 2019 PMPM Costs	\$511.75	\$53.83	\$2,833.82	\$163.43	\$31.35	\$18.77
a	Blended CY 2018 & CY 2019 PMPM Costs	\$421.07	\$51.31	\$2,864.25	\$163.28	\$30.38	\$21.22
Trends							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.001	1.072	0.965	1.035
c	Charge Trend Factors CY 2019 to SFY 2023	1.034	0.994	1.002	1.053	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	0.954	1.000	1.000	1.000	1.000
Population Changes							
e	COVID-19 Population Acuity Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
Program Changes							
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000
Reimbursement Changes							
k	OP Dental Adjustment	1.000	0.993	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.921
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.219
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.001	1.050	1.000	1.049	1.039
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.021	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.013	1.000
Product of a through r		\$434.06	\$49.20	\$3,019.60	\$174.77	\$31.82	\$26.15
Projected SFY 2023 PMPM Costs							\$3,735.60

MA Children Rate Cell							
Calculation Step		Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
SFY 2023 PMPM Cost Development		Total					
Base Period Summaries							
a	CY 2019 PMPM Costs	\$18.73	\$35.84	\$62.27	\$34.67	\$25.55	\$4.91
Trends							
b	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035
c	Charge Trend Factors CY 2019 to SFY 2023	1.037	0.994	1.061	1.053	1.000	1.021
d	Emergency Services Savings Adjustment	1.000	0.966	0.994	1.000	1.000	1.000
Population Changes							
e	COVID-19 Population Acuity Adjustment	1.031	1.031	1.031	1.031	1.031	1.031
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
Program Changes							
g	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000
Reimbursement Changes							
k	OP Dental Adjustment	1.000	0.989	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.981
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.093
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.009	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.007	1.027	1.000	1.050	1.043
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.020	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.014	1.000
Product of a through r		\$19.96	\$35.99	\$72.61	\$38.25	\$27.60	\$5.99
Projected SFY 2023 PMPM Costs							\$200.39

Exhibit 2A Mississippi Division of Medicaid All Regions SFY 2023 MississippiCAN Capitation Rate Development Final Base Data and Projection Assumptions							
Quasi-CHIP Rate Cell							
Calculation Step		Category of Service					
		Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other
	SFY 2023 PMPM Cost Development						
a	Base Period Summaries						
	CY 2019 PMPM Costs	\$16.23	\$27.32	\$58.59	\$43.31	\$32.45	\$5.53
							\$183.42
b	Trends						
	Utilization Trend Factors CY 2019 to SFY 2023	1.035	1.018	1.035	1.072	0.965	1.035
c	Charge Trend Factors CY 2019 to SFY 2023	1.047	0.994	1.061	1.053	1.000	1.020
d	Emergency Services Savings Adjustment	1.000	0.969	0.996	1.000	1.000	1.000
							0.994
e	Population Changes						
	COVID-19 Population Acuity Adjustment	1.031	1.031	1.031	1.031	1.031	1.031
f	Postpartum Coverage Extension	1.000	1.000	1.000	1.000	1.000	1.000
							1.000
g	Program Changes						
	ASD Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
h	Rx Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
i	Home Health Limit Adjustment	1.000	1.000	1.000	1.000	1.000	1.000
j	PDL Adjustment	1.000	1.000	1.000	0.948	1.000	1.000
							0.987
k	Reimbursement Changes						
	OP Dental Adjustment	1.000	0.994	1.000	1.000	1.000	1.000
l	NET Reimbursement Adjustment	1.000	1.000	1.000	1.000	1.000	0.986
m	GME Adjustment	0.963	1.000	1.000	1.000	1.000	1.000
n	Emergency Ambulance Payment Increase	1.000	1.000	1.000	1.000	1.000	1.060
o	COVID-19 Vaccine Administration Adjustment	1.000	1.000	1.009	1.000	1.000	1.000
p	5% Assessment Removal Adjustment	1.000	1.006	1.026	1.000	1.050	1.048
q	Preventative and Diagnostic Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.020	1.000
r	Restorative Dental Reimbursement Change	1.000	1.000	1.000	1.000	1.010	1.000
							1.002
Product of a through r							
	Projected SFY 2023 PMPM Costs	\$17.45	\$27.59	\$68.36	\$47.79	\$34.94	\$6.58
							\$202.70

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

MA Adult Rate Cell							
Projected SFY 2023 PMPM Cost Development	Category of Service						
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
Projected SFY 2023 PMPM Costs Net of Deliveries	\$40.71	\$107.22	\$135.53	\$143.26	\$6.79	\$14.19	\$447.68
Projected Delivery Costs PMPM	\$32.63	\$0.12	\$9.37	\$0.19	\$0.00	\$0.25	\$42.56
Projected SFY 2023 PMPM Costs Including Deliveries	\$73.34	\$107.34	\$144.89	\$143.44	\$6.79	\$14.44	\$490.24

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

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

Pregnant Women Rate Cell							
Projected SFY 2023 PMPM Cost Development	Category of Service						
	Inpatient Hospital	Outpatient Hospital	Physician	Drug	Dental	Other	Total
Projected SFY 2023 PMPM Costs Net of Deliveries	\$34.98	\$104.52	\$212.41	\$66.29	\$5.16	\$11.36	\$434.72
Projected Delivery Costs PMPM	\$454.60	\$1.15	\$136.16	\$2.66	\$0.00	\$2.29	\$596.86
Projected SFY 2023 PMPM Costs Including Deliveries	\$489.58	\$105.66	\$348.57	\$68.95	\$5.16	\$13.65	\$1,031.58

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

Exhibit 3										
Mississippi Division of Medicaid										
SFY 2023 MississippiCAN Capitation Rate Development										
Statewide Non-Service Expense Allocation Development										
	a	b	c	d	e = d × j	f	g = f × j	h	i = h × j	j = (b + c) / (1 - d - f - h)
Rate Cell	Projected SFY 2023 Membership	SFY 2023 PMPM Cost	Fixed Non-Service Expense Load	Non-Service Percentage	Non-Service PMPM	Margin Percentage	Margin PMPM	Premium Tax Percentage	Premium Tax PMPM	Total
Non-Newborn SSI / Disabled	719,345	\$1,079.30	\$10.56	5.00%	\$60.48	1.80%	\$21.75	3.00%	\$36.25	\$1,208.34
Breast and Cervical Cancer	992	\$3,488.34	\$10.56	5.00%	\$194.16	1.80%	\$69.83	3.00%	\$116.38	\$3,879.26
MA Adult	469,546	\$490.24	\$10.56	5.00%	\$27.79	1.80%	\$9.99	3.00%	\$16.66	\$555.24
Pregnant Women	91,902	\$1,031.58	\$10.56	5.00%	\$57.83	1.80%	\$20.80	3.00%	\$34.66	\$1,155.43
SSI / Disabled Newborn	4,066	\$8,000.01	\$10.56	5.00%	\$444.51	1.80%	\$159.86	3.00%	\$266.44	\$8,881.39
Non-SSI Newborns 0 to 2 Months	74,603	\$1,834.16	\$10.56	5.00%	\$102.36	1.80%	\$36.81	3.00%	\$61.36	\$2,045.26
Non-SSI Newborns 3 to 12 Months	215,942	\$248.67	\$10.56	5.00%	\$14.38	1.80%	\$5.17	3.00%	\$8.62	\$287.41
Foster Care	86,381	\$639.31	\$10.56	5.00%	\$36.06	1.80%	\$12.97	3.00%	\$21.62	\$720.51
MYPAC	5,177	\$3,735.60	\$10.56	5.00%	\$207.88	1.80%	\$74.76	3.00%	\$124.60	\$4,153.40
MA Children	2,631,991	\$200.39	\$10.56	5.00%	\$11.71	1.80%	\$4.21	3.00%	\$7.02	\$233.88
Quasi-CHIP	287,026	\$202.70	\$10.56	5.00%	\$11.83	1.80%	\$4.26	3.00%	\$7.09	\$236.44
Total	4,586,971	\$433.42	\$10.56	5.00%	\$24.64	1.80%	\$8.86	3.00%	\$14.77	\$492.24

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

Rate Cell	a SFY 2023 Statewide Capitation Rates	b Area Adjustments	c = a × b SFY 2023 Regional Capitation Rates	d = c × -1.00% Quality Withhold	e = c + d Total Rate at 1.0 Risk Score after Withhold	f Projected SFY 2023 Member Months
Non-Newborn SSI / Disabled	\$1,208.34					
North Region		0.913	\$1,103.21	(\$12.08)	\$1,196.25	719,345
Central Region		1.050	1,268.75	(\$11.03)	\$1,092.18	247,720
South Region		1.040	1,256.67	(\$12.69)	\$1,256.07	263,013
				(\$12.57)	\$1,244.10	208,612
Breast and Cervical Cancer	\$3,879.26					
North Region		0.913	\$3,541.76	(\$38.79)	\$3,840.47	992
Central Region		1.050	4,073.22	(\$35.42)	\$3,506.35	195
South Region		1.040	4,034.43	(\$40.73)	\$4,032.49	301
				(\$40.34)	\$3,994.08	496
MA Adult	\$555.24					
North Region		0.944	\$524.15	(\$5.55)	\$549.69	469,546
Central Region		1.040	577.45	(\$5.24)	\$518.91	150,542
South Region		1.011	561.35	(\$5.77)	\$571.68	157,913
				(\$5.61)	\$555.74	161,091
Pregnant Women	\$1,155.43					
North Region		0.944	\$1,090.72	(\$11.55)	\$1,143.87	91,902
Central Region		1.040	1,201.64	(\$10.91)	\$1,079.82	28,371
South Region		1.011	1,168.14	(\$12.02)	\$1,189.63	33,901
				(\$11.68)	\$1,156.46	29,631
SSI / Disabled Newborn	\$8,881.39					
North Region		0.982	\$8,721.52	(\$88.81)	\$8,792.57	4,066
Central Region		1.019	9,050.13	(\$87.22)	\$8,634.31	1,256
South Region		0.996	8,845.86	(\$90.50)	\$8,959.63	1,764
				(\$88.46)	\$8,757.40	1,046
Non-SSI Newborns 0 to 2 Months	\$2,045.26					
North Region		0.982	\$2,008.45	(\$20.45)	\$2,024.81	74,603
Central Region		1.019	2,084.12	(\$20.08)	\$1,988.36	23,436
South Region		0.996	2,037.08	(\$20.84)	\$2,063.28	27,413
				(\$20.37)	\$2,016.71	23,753
Non-SSI Newborns 3 to 12 Months	\$287.41					
North Region		0.982	\$282.24	(\$2.87)	\$284.54	215,942
Central Region		1.019	292.87	(\$2.82)	\$279.42	67,161
South Region		0.996	286.26	(\$2.93)	\$289.94	79,800
				(\$2.86)	\$283.40	68,981
Foster Care	\$720.51					
North Region		0.982	\$707.54	(\$7.21)	\$713.31	86,381
Central Region		1.019	734.20	(\$7.08)	\$700.47	23,841
South Region		0.996	717.63	(\$7.34)	\$726.86	25,095
				(\$7.18)	\$710.46	37,445
MYPAC	\$4,153.40					
North Region		0.982	\$4,078.64	(\$41.53)	\$4,111.86	5,177
Central Region		1.019	4,232.31	(\$40.79)	\$4,037.85	1,619
South Region		0.996	4,136.79	(\$42.32)	\$4,189.99	1,712
				(\$41.37)	\$4,095.42	1,845
MA Children	\$233.88					
North Region		0.982	\$229.67	(\$2.34)	\$231.54	2,631,991
Central Region		1.019	238.33	(\$2.30)	\$227.38	839,490
South Region		0.996	232.95	(\$2.38)	\$235.94	959,763
				(\$2.33)	\$230.62	832,738
Quasi-CHIP	\$236.44					
North Region		0.982	\$232.19	(\$2.36)	\$234.08	287,026
Central Region		1.019	240.93	(\$2.32)	\$229.86	92,667
South Region		0.996	235.50	(\$2.41)	\$238.52	107,652
				(\$2.35)	\$233.14	86,707
Total Capitation Dollars						
Statewide Capitation Rates			\$2,257,895,690			
Regional Capitation Rates			\$2,257,760,645			

Exhibit 5 Mississippi Division of Medicaid SFY 2022 to SFY 2023 Rate Change¹													
Membership	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi- CHIP	Total - Aggregated with Actual CY 2019 MMs	Total - Aggregated with Projected SFY 2023 MMs
Actual CY 2019 MMs	765,558	1,187	493,779	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251	N/A
Projected SFY 2023 MMs	719,345	992	469,546	91,902	4,066	74,603	215,942	86,381	5,177	2,631,991	287,026	N/A	4,586,971
SFY 2022 Capitation Rate	\$1,200.70	\$3,824.19	\$498.08	\$1,190.95	\$8,765.03	\$2,099.14	\$288.32	\$690.44	\$4,248.00	\$222.66	\$224.76	\$472.10	\$479.08
Base Period Data Update	0.998	0.999	0.991	0.989	1.028	0.991	1.004	0.987	0.989	0.997	0.997	0.996	0.996
Restate TPL on CY 2019 Claims	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999	0.999
Restate Benefits Exceeding Medicaid Limits	0.999	1.007	1.001	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.000
Restate CY 2018 to SFY 2022 Trends	0.975	0.970	1.001	0.997	0.953	0.951	0.968	0.959	0.991	0.972	0.973	0.976	0.975
Remove SFY 2021 to SFY 2022 Charge Trends	1.002	1.001	0.995	0.988	0.997	0.997	0.995	0.997	0.999	0.996	0.997	0.998	0.998
Restate CY 2019 to CY 2020 PDL Adjustment²	0.996	0.998	0.994	0.999	0.999	1.000	0.999	0.998	0.999	0.998	0.997	0.997	0.997
Remove SFY 2022 Population Acuity Adjustments³	1.000	1.000	1.093	1.000	1.000	1.000	1.000	1.000	1.000	1.031	1.031	1.019	1.019
Other Restated Assumptions	0.999	1.000	0.999	1.000	0.999	1.000	0.999	0.998	0.994	1.000	0.999	0.999	0.999
Restated SFY 2022 Rate	0.967	0.974	1.070	0.972	0.975	0.940	0.963	0.940	0.972	0.992	0.993	0.983	0.983
SFY 2022 to SFY 2023 Trends	1.050	1.047	1.037	1.030	1.046	1.044	1.055	1.118	1.013	1.046	1.044	1.047	1.047
SFY 2023 COVID-19 Population Acuity Adjustment¹	1.000	1.000	1.019	1.000	1.000	1.000	1.000	1.000	1.000	1.027	1.027	1.011	1.010
Emergency Services Savings Adjustment	0.996	0.999	0.982	0.991	0.999	0.998	0.986	0.998	0.999	0.992	0.995	0.993	0.993
PDL CY 2021 to CY 2022 Adjustment²	0.998	0.999	0.998	1.000	0.998	1.000	0.998	0.997	0.999	0.996	0.995	0.998	0.998
SFY 2022 to SFY 2023 COVID-19 Vaccine Administration Change²³	1.000	1.000	1.002	1.001	1.000	1.000	1.000	0.998	1.000	0.993	0.993	0.998	0.998
SFY 2023 Preventative and Diagnostic Dental Reimbursement Change²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.003	1.001	1.001
SFY 2023 Restorative Dental Reimbursement Change²	1.000	1.000	1.000	1.000	1.000	1.000	1.000	1.001	1.000	1.002	1.002	1.001	1.001
Postpartum Coverage Extension²	1.000	1.000	1.000	0.982	1.000	1.000	1.000	1.000	1.000	1.000	1.000	0.999	0.999
Update Admin	0.997	0.997	1.002	0.995	0.997	0.995	0.997	0.999	0.995	1.000	1.000	0.998	0.998
Preliminary SFY 2023 Rate Change	1.006	1.014	1.115	0.970	1.013	0.974	0.997	1.044	0.978	1.050	1.052	1.027	1.027
SFY 2023 Rate Change - Excluding Program Changes¹	1.012	1.018	1.121	0.988	1.016	0.974	1.000	1.049	0.979	1.060	1.063	1.034	1.035
SFY 2023 Rate Change - Excluding COVID-19 Adjustments¹	1.006	1.014	0.999	0.969	1.013	0.974	0.997	1.046	0.978	0.999	1.000	0.999	1.000

¹ Rate changes exclude MHAP, MAPS, TREAT, and the quality withhold.
² Program change that increases or decreases total program costs outside of the control of the CCOs.
³ COVID-19 Adjustments include the COVID-19 Vaccine Administration Expense and the COVID-19 Population Acuity Adjustment.

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

Broad Category			Broad Category		
MR Line	of Service	Description	MR Line	of Service	Description
I11a	Inpatient Facility	Medical - General	P37d	Physician	Miscellaneous Medical - Otorhinolaryngology
I11b	Inpatient Facility	Medical - Rehabilitation	P37e	Physician	Miscellaneous Medical - Vestibular Function Tests
I12	Inpatient Facility	Surgical	P37f	Physician	Miscellaneous Medical - Non-Invas. Vasc. Diag. Studies
I13a	Inpatient Facility	Psychiatric - Hospital	P37g	Physician	Miscellaneous Medical - Pulmonology
I13b	Inpatient Facility	Psychiatric - Residential	P37h	Physician	Miscellaneous Medical - Neurology
I14a	Inpatient Facility	Alcohol and Drug Abuse - Hospital	P37i	Physician	Miscellaneous Medical - Central Nervous System Tests
I14b	Inpatient Facility	Alcohol and Drug Abuse - Residential	P37j	Physician	Miscellaneous Medical - Dermatology
I21a	Inpatient Facility	Mat Norm Delivery	P37k	Physician	Miscellaneous Medical - Dialysis
I21b	Inpatient Facility	Mat Norm Delivery - Mom / Baby Combined	P40a	Physician	Preventive Other - General
I22a	Inpatient Facility	Mat Csect Delivery	P40b	Physician	Preventive Other - Colonoscopy
I22b	Inpatient Facility	Mat Csect Delivery - Mom / Baby Combined	P40c	Physician	Preventive Other - Mammography
I23a	Inpatient Facility	Well Newborn - Normal Delivery	P40d	Physician	Preventive Other - Lab
I23b	Inpatient Facility	Well Newborn - Csect Delivery	P41	Physician	Preventive Immunizations
I23c	Inpatient Facility	Well Newborn - Unknown Delivery	P42	Physician	Preventive Well Baby Exams
I24	Inpatient Facility	Other Newborn	P43	Physician	Preventive Physical Exams
I25	Inpatient Facility	Maternity Non-Delivery	P44	Physician	Vision Exams
I31	Inpatient Facility	SNF	P45	Physician	Hearing and Speech Exams
O10a	Outpatient Facility	Observation - Without ED	P51a	Physician	ER Visits and Observation Care - Observation Care
O10b	Outpatient Facility	Observation - With ED	P51b	Physician	ER Visits and Observation Care - ER Visits
O11	Outpatient Facility	Emergency Room	P53	Physician	Physical Therapy
O12a	Outpatient Facility	Surgery - Hospital Outpatient	P54	Physician	Cardiovascular
O12b	Outpatient Facility	Surgery - Ambulatory Surgery Center	P55b	Physician	Radiology IP - CT Scan
O13a	Outpatient Facility	Radiology General - Therapeutic	P55c	Physician	Radiology IP - MRI
O13b	Outpatient Facility	Radiology General - Diagnostic	P55d	Physician	Radiology IP - PET
O14a	Outpatient Facility	Radiology - CT/MRI/PET - CT Scan	P55e	Physician	Radiology IP - General - Therapeutic
O14b	Outpatient Facility	Radiology - CT/MRI/PET - MRI	P55f	Physician	Radiology IP - General - Diagnostic
O14c	Outpatient Facility	Radiology - CT/MRI/PET - PET	P56a	Physician	Radiology OP - General - Therapeutic
O15	Outpatient Facility	Pathology/Lab	P56b	Physician	Radiology OP - General - Diagnostic
O16a	Outpatient Facility	Pharmacy - General	P57a	Physician	Radiology OP- CT/MRI/PET - CT Scan
O16b	Outpatient Facility	Pharmacy - Chemotherapy	P57b	Physician	Radiology OP- CT/MRI/PET - MRI
O17	Outpatient Facility	Cardiovascular	P57c	Physician	Radiology OP- CT/MRI/PET - PET
O18	Outpatient Facility	PT/OT/ST	P58c	Physician	Radiology Office - General - Therapeutic
O31a	Outpatient Facility	Psychiatric - Partial Hospitalization	P58d	Physician	Radiology Office - General - Diagnostic
O31b	Outpatient Facility	Psychiatric - Intensive Outpatient	P58e	Physician	Radiology Office - General - Radiology Center - Therapeutic
O32a	Outpatient Facility	Alcohol & Drug Abuse - Partial Hospitalization	P58f	Physician	Radiology Office - General - Radiology Center - Diagnostic
O32b	Outpatient Facility	Alcohol & Drug Abuse - Intensive Outpatient	P59a	Physician	Radiology Office - CT/MRI/PET - CT Scan
O41a	Outpatient Facility	Other - General	P59b	Physician	Radiology Office - CT/MRI/PET - MRI
O41b	Outpatient Facility	Other - Blood	P59c	Physician	Radiology Office - CT/MRI/PET - PET
O41d	Outpatient Facility	Other - Clinic	P59d	Physician	Radiology Office - CT/MRI/PET - CT Scan - Radiology Center
O41e	Outpatient Facility	Other - Diagnostic	P59e	Physician	Radiology Office - CT/MRI/PET - MRI - Radiology Center
O41f	Outpatient Facility	Other - Dialysis	P59f	Physician	Radiology Office - CT/MRI/PET - PET - Radiology Center
O41g	Outpatient Facility	Other - DME/Supplies	P61a	Physician	Pathology/Lab - Inpatient & Outpatient - Inpatient
O41h	Outpatient Facility	Other - Trtmt/Spclty Svcs	P61b	Physician	Pathology/Lab - Inpatient & Outpatient - Outpatient
O41j	Outpatient Facility	Other - Pulmonary	P63a	Physician	Pathology/Lab - Office - General
O41l	Outpatient Facility	Other - Urgent Care	P63b	Physician	Pathology/Lab - Office - Venipuncture
O51a	Outpatient Facility	Preventive - General	P63c	Physician	Pathology/Lab - Office - Independent Lab
O51b	Outpatient Facility	Preventive - Colonoscopy	P65	Physician	Chiropractor
O51c	Outpatient Facility	Preventive - Mammography	P66	Physician	Outpatient Psychiatric
O51d	Outpatient Facility	Preventive - Lab	P67	Physician	Outpatient Alcohol & Drug Abuse
P11	Physician	Inpatient Surgery	P81a	Pharmacy	Prescription Drugs - Non-Specialty Generic
P13	Physician	Inpatient Anesthesia	P81b	Pharmacy	Prescription Drugs - Non-Specialty Multi Source Brand
P14	Physician	Outpatient Surgery	P81c	Pharmacy	Prescription Drugs - Non-Specialty Single Source Brand
P15	Physician	Office Surgery	P81e	Pharmacy	Prescription Drugs - OTC
P16	Physician	Outpatient Anesthesia	P81g	Pharmacy	Prescription Drugs - Specialty
P21a	Physician	Maternity - Normal Deliveries	P82a	Other	Private Duty Nursing/Home Health - HH
P21b	Physician	Maternity - Cesarean Deliveries	P82b	Other	Private Duty Nursing/Home Health - Hospice
P21c	Physician	Maternity - Non-Deliveries	P83	Other	Ambulance
P21d	Physician	Maternity - Ancillary	P84	Other	DME and Supplies
P21e	Physician	Maternity - Anesthesia	P85	Other	Prosthetics
P31d	Physician	Inpatient Visits - Medical	P89	Other	Glasses/Contacts
P31e	Physician	Inpatient Visits - Psychiatric	P99a	Other	Other - General
P31f	Physician	Inpatient Visits - Alcohol and Drug Abuse	P99b	Other	Other - Hearing Aids
P32c	Physician	Office/Home Visits - PCP	P99c	Dental	Other - Dental
P32d	Physician	Office/Home Visits - Specialist	P99d	Other	Other - Acupuncture
P33	Physician	Urgent Care Visits	P99e	Physician	Other - Reproductive Medicine
P34a	Physician	Office Administered Drugs - General	P99f	Physician	Other - Temporary Codes
P34b	Physician	Office Administered Drugs - Chemotherapy	P99g	Physician	Other - Documentation/Unclassified
P35	Physician	Allergy Testing	P99h	Other	Other - Non-Emergency Transportation
P36	Physician	Allergy Immunotherapy	P99z	Physician	Other - Unclassified
P37a	Physician	Miscellaneous Medical - General			
P37b	Physician	Miscellaneous Medical - Gastroenterology			
P37c	Physician	Miscellaneous Medical - Ophthalmology			

Exhibit 7A
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
All Populations
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	488,894	\$72.99	\$64.96	\$95.68	\$22.73	\$13.11	\$269.46
February 2017	488,069	\$71.87	\$62.72	\$94.59	\$21.47	\$12.29	\$262.94
March 2017	487,638	\$77.29	\$68.28	\$99.43	\$23.51	\$14.13	\$282.63
April 2017	486,695	\$72.00	\$63.73	\$88.85	\$20.37	\$12.98	\$257.93
May 2017	486,717	\$77.61	\$64.32	\$92.76	\$20.26	\$13.83	\$268.80
June 2017	487,844	\$73.14	\$65.53	\$86.20	\$21.92	\$13.35	\$260.15
July 2017	485,763	\$71.16	\$64.73	\$84.65	\$22.00	\$13.10	\$255.64
August 2017	483,228	\$73.77	\$67.95	\$104.07	\$25.44	\$14.16	\$285.40
September 2017	480,198	\$75.29	\$65.81	\$94.27	\$21.92	\$13.31	\$270.59
October 2017	479,517	\$74.67	\$69.12	\$101.59	\$24.18	\$14.35	\$283.91
November 2017	479,334	\$74.36	\$67.22	\$96.56	\$22.32	\$13.19	\$273.65
December 2017	474,479	\$75.19	\$65.37	\$87.18	\$17.64	\$12.37	\$257.75
CY 2017²	484,031	\$74.11	\$65.81	\$93.82	\$21.98	\$13.35	\$269.07
January 2018	469,721	\$80.51	\$68.21	\$99.90	\$20.14	\$13.23	\$281.99
February 2018	463,513	\$73.37	\$65.04	\$97.90	\$19.97	\$12.34	\$268.63
March 2018	456,311	\$75.54	\$66.70	\$95.62	\$21.47	\$13.45	\$272.77
April 2018	452,014	\$74.02	\$66.56	\$97.54	\$20.71	\$13.61	\$272.44
May 2018	450,874	\$77.73	\$68.73	\$95.36	\$18.99	\$13.98	\$274.80
June 2018	446,592	\$77.11	\$68.15	\$84.71	\$19.85	\$13.56	\$263.38
July 2018	440,538	\$74.20	\$63.01	\$91.23	\$21.86	\$14.80	\$265.10
August 2018	434,107	\$77.48	\$67.11	\$105.66	\$22.86	\$15.12	\$288.23
September 2018	429,738	\$70.01	\$62.07	\$91.92	\$18.67	\$13.86	\$256.53
October 2018	428,967	\$80.72	\$68.82	\$107.14	\$22.05	\$14.72	\$293.46
November 2018	430,443	\$76.99	\$64.46	\$95.85	\$18.48	\$12.82	\$268.60
December 2018	434,997	\$81.82	\$61.33	\$86.41	\$15.06	\$12.65	\$257.28
CY 2018²	444,818	\$76.63	\$65.85	\$95.77	\$20.01	\$13.68	\$271.93
January 2019	437,158	\$80.76	\$73.14	\$110.27	\$21.65	\$14.50	\$300.32
February 2019	435,711	\$75.45	\$70.78	\$106.62	\$18.88	\$13.52	\$285.26
March 2019	434,378	\$79.68	\$66.07	\$99.57	\$19.27	\$14.13	\$278.73
April 2019	434,409	\$81.55	\$69.35	\$104.33	\$20.32	\$14.76	\$290.31
May 2019	435,803	\$84.22	\$68.39	\$99.13	\$17.34	\$14.29	\$283.37
June 2019	436,693	\$76.87	\$67.25	\$88.08	\$18.09	\$13.51	\$263.81
July 2019	435,305	\$82.20	\$68.59	\$97.96	\$22.24	\$15.30	\$286.30
August 2019	432,317	\$80.46	\$65.66	\$106.50	\$21.33	\$16.05	\$289.99
September 2019	431,774	\$81.67	\$65.09	\$103.35	\$19.85	\$15.19	\$285.15
October 2019	432,441	\$89.83	\$70.77	\$112.63	\$22.95	\$15.38	\$311.55
November 2019	433,570	\$76.34	\$63.92	\$100.86	\$18.25	\$14.64	\$274.01
December 2019	435,872	\$83.39	\$66.25	\$99.73	\$16.24	\$14.59	\$280.20
CY 2019³	434,619	\$81.03	\$67.94	\$102.42	\$19.70	\$14.66	\$285.75
January 2020	434,836	\$83.56	\$71.63	\$113.50	\$20.49	\$15.99	\$305.16
February 2020	431,864	\$74.54	\$66.75	\$105.95	\$18.80	\$14.61	\$280.65
March 2020	430,053	\$77.09	\$54.47	\$89.27	\$12.04	\$14.56	\$247.41
April 2020	430,222	\$68.28	\$34.70	\$66.16	\$1.31	\$11.37	\$181.82
May 2020	434,732	\$75.34	\$47.64	\$76.13	\$10.05	\$12.47	\$221.62
June 2020	443,217	\$81.38	\$56.50	\$90.90	\$16.24	\$13.70	\$258.72
July 2020	450,697	\$81.65	\$56.98	\$91.91	\$17.38	\$13.20	\$261.12
August 2020	456,712	\$79.35	\$55.17	\$92.51	\$17.24	\$14.00	\$258.28
September 2020	460,699	\$76.08	\$56.87	\$94.31	\$17.42	\$13.87	\$258.55
October 2020	465,019	\$77.18	\$58.93	\$98.62	\$17.98	\$14.45	\$267.15
November 2020	470,298	\$71.43	\$55.20	\$89.34	\$15.69	\$13.64	\$245.29
December 2020	474,990	\$77.95	\$55.04	\$89.87	\$15.54	\$13.89	\$252.29
CY 2020³	448,612	\$76.99	\$55.82	\$91.54	\$15.01	\$13.81	\$253.17
Annual PMPM Trends							
CY 2017 to CY 2018		3.4%	0.1%	2.1%	-9.0%	2.5%	1.1%
CY 2018 to CY 2019		5.8%	3.2%	6.9%	-1.5%	7.1%	5.1%
CY 2019 to CY 2020		-5.0%	-17.8%	-10.6%	-23.8%	-5.8%	-11.4%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPDS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.

² CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 7B
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
SSI+ Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	64,675	\$179.01	\$191.88	\$196.59	\$11.64	\$58.35	\$637.48
February 2017	64,516	\$172.38	\$185.62	\$187.58	\$10.83	\$53.63	\$610.04
March 2017	64,529	\$187.06	\$207.91	\$207.60	\$11.92	\$62.25	\$676.74
April 2017	64,477	\$159.15	\$188.22	\$185.34	\$9.80	\$57.82	\$600.33
May 2017	64,406	\$195.46	\$193.51	\$202.28	\$10.21	\$61.88	\$663.34
June 2017	64,492	\$172.56	\$197.50	\$197.95	\$10.88	\$60.37	\$639.25
July 2017	64,412	\$162.96	\$198.01	\$185.10	\$10.18	\$55.84	\$612.09
August 2017	64,439	\$153.04	\$207.24	\$218.37	\$12.83	\$61.02	\$652.50
September 2017	64,346	\$180.54	\$199.64	\$199.02	\$11.07	\$57.68	\$647.95
October 2017	64,474	\$172.80	\$206.04	\$213.88	\$12.43	\$61.51	\$666.66
November 2017	64,549	\$166.74	\$196.35	\$194.98	\$10.90	\$57.01	\$625.99
December 2017	64,562	\$178.71	\$186.48	\$174.98	\$9.18	\$53.56	\$602.91
CY 2017²	64,490	\$173.37	\$196.53	\$196.97	\$10.99	\$58.41	\$636.28
January 2018	64,468	\$187.21	\$202.36	\$207.52	\$10.36	\$57.68	\$665.13
February 2018	64,351	\$171.53	\$194.02	\$202.13	\$10.13	\$53.49	\$631.31
March 2018	64,286	\$183.55	\$203.10	\$206.97	\$10.63	\$59.41	\$663.65
April 2018	64,208	\$169.94	\$203.18	\$212.52	\$10.58	\$61.15	\$657.36
May 2018	64,357	\$177.07	\$216.18	\$214.56	\$10.30	\$63.85	\$681.96
June 2018	64,050	\$167.18	\$209.49	\$194.72	\$9.92	\$61.46	\$642.77
July 2018	64,219	\$172.93	\$199.12	\$211.12	\$9.66	\$63.75	\$656.58
August 2018	64,087	\$187.71	\$212.46	\$233.75	\$11.12	\$64.38	\$709.42
September 2018	63,974	\$166.91	\$192.52	\$203.76	\$9.38	\$60.47	\$633.04
October 2018	63,957	\$177.21	\$212.20	\$232.93	\$10.68	\$63.56	\$696.59
November 2018	63,969	\$176.05	\$199.35	\$203.05	\$9.71	\$55.33	\$643.49
December 2018	63,998	\$173.48	\$178.94	\$180.23	\$7.47	\$55.60	\$595.73
CY 2018²	64,160	\$175.90	\$201.91	\$208.60	\$10.00	\$60.01	\$656.42
January 2019	63,950	\$198.55	\$229.13	\$235.10	\$10.35	\$62.70	\$735.83
February 2019	63,920	\$174.52	\$214.58	\$216.09	\$8.93	\$60.70	\$674.81
March 2019	63,698	\$179.52	\$207.73	\$220.33	\$9.04	\$63.03	\$679.65
April 2019	63,889	\$184.20	\$217.69	\$229.03	\$9.79	\$64.57	\$705.28
May 2019	63,755	\$193.42	\$220.09	\$226.57	\$8.66	\$64.86	\$713.61
June 2019	63,925	\$162.58	\$210.76	\$208.73	\$7.85	\$61.90	\$651.84
July 2019	64,022	\$184.28	\$211.74	\$222.11	\$10.19	\$65.18	\$693.50
August 2019	63,859	\$176.24	\$209.17	\$232.56	\$10.26	\$67.80	\$696.02
September 2019	63,883	\$198.08	\$203.48	\$221.67	\$9.59	\$65.87	\$698.69
October 2019	63,882	\$218.41	\$219.32	\$241.03	\$11.01	\$67.02	\$756.79
November 2019	63,905	\$184.39	\$186.38	\$203.65	\$8.42	\$65.42	\$648.26
December 2019	64,012	\$191.10	\$195.87	\$206.00	\$7.60	\$63.74	\$664.31
CY 2019³	63,892	\$187.11	\$210.49	\$221.91	\$9.31	\$64.40	\$693.22
January 2020	63,825	\$196.67	\$230.98	\$237.82	\$10.34	\$69.93	\$745.74
February 2020	63,815	\$172.64	\$209.94	\$218.36	\$9.39	\$63.82	\$674.16
March 2020	63,560	\$189.61	\$182.21	\$198.84	\$5.45	\$68.19	\$644.31
April 2020	63,477	\$141.70	\$142.69	\$150.08	\$1.42	\$56.73	\$492.61
May 2020	63,612	\$173.45	\$173.86	\$171.89	\$4.78	\$58.90	\$582.88
June 2020	63,837	\$195.53	\$196.17	\$208.35	\$7.49	\$63.67	\$671.21
July 2020	63,760	\$182.57	\$193.69	\$201.08	\$7.88	\$58.22	\$643.44
August 2020	63,722	\$172.69	\$183.49	\$201.06	\$8.42	\$60.64	\$626.30
September 2020	63,702	\$172.73	\$191.68	\$206.04	\$8.47	\$61.98	\$640.90
October 2020	63,619	\$181.21	\$197.00	\$211.92	\$8.83	\$65.01	\$663.96
November 2020	63,603	\$162.68	\$181.58	\$188.82	\$7.16	\$61.71	\$601.95
December 2020	63,427	\$178.61	\$186.46	\$190.04	\$7.39	\$64.67	\$627.18
CY 2020³	63,663	\$176.67	\$189.15	\$198.69	\$7.25	\$62.79	\$634.55
Annual PMPM Trends							
CY 2017 to CY 2018		1.5%	2.7%	5.9%	-9.0%	2.7%	3.2%
CY 2018 to CY 2019		6.4%	4.3%	6.4%	-6.9%	7.3%	5.6%
CY 2019 to CY 2020		-5.6%	-10.1%	-10.5%	-22.1%	-2.5%	-8.5%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.

² CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 7C
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Adults Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	60,149	\$39.01	\$107.84	\$137.09	\$9.45	\$12.12	\$305.50
February 2017	60,044	\$43.34	\$96.16	\$125.92	\$8.51	\$10.97	\$284.91
March 2017	60,362	\$54.13	\$112.30	\$143.29	\$10.28	\$12.07	\$332.08
April 2017	59,813	\$49.14	\$106.18	\$129.94	\$9.54	\$11.69	\$306.50
May 2017	59,843	\$47.76	\$110.02	\$140.42	\$8.88	\$12.10	\$319.18
June 2017	60,204	\$44.25	\$107.93	\$136.65	\$8.65	\$12.62	\$310.10
July 2017	60,025	\$48.09	\$109.38	\$128.44	\$7.54	\$11.90	\$305.35
August 2017	59,608	\$44.95	\$118.64	\$148.02	\$10.39	\$12.60	\$334.59
September 2017	59,041	\$44.48	\$109.01	\$128.04	\$9.03	\$11.47	\$302.03
October 2017	58,835	\$46.55	\$112.41	\$136.93	\$10.03	\$12.93	\$318.85
November 2017	58,450	\$41.38	\$105.84	\$129.99	\$8.17	\$11.33	\$296.71
December 2017	57,762	\$37.16	\$99.83	\$115.55	\$6.74	\$10.55	\$269.83
CY 2017²	59,511	\$45.02	\$107.96	\$133.36	\$8.94	\$11.86	\$307.14
January 2018	56,854	\$41.80	\$109.83	\$136.60	\$8.04	\$11.98	\$308.26
February 2018	55,841	\$32.00	\$100.41	\$124.60	\$7.41	\$10.13	\$274.55
March 2018	55,036	\$38.42	\$110.99	\$132.84	\$8.61	\$10.96	\$301.81
April 2018	54,406	\$45.92	\$113.34	\$134.20	\$8.50	\$11.47	\$313.43
May 2018	54,659	\$41.07	\$115.13	\$136.51	\$8.14	\$11.40	\$312.26
June 2018	54,110	\$37.56	\$112.15	\$125.35	\$7.44	\$11.53	\$294.03
July 2018	53,669	\$38.06	\$110.69	\$132.16	\$6.65	\$12.77	\$300.33
August 2018	52,766	\$44.74	\$115.02	\$141.25	\$8.01	\$13.29	\$322.31
September 2018	52,073	\$35.60	\$105.08	\$120.51	\$5.97	\$12.27	\$279.43
October 2018	51,923	\$45.62	\$112.56	\$136.77	\$7.64	\$13.10	\$315.70
November 2018	51,978	\$39.57	\$101.03	\$120.31	\$6.18	\$11.64	\$278.73
December 2018	52,527	\$41.65	\$99.19	\$111.64	\$4.88	\$11.21	\$268.57
CY 2018²	53,820	\$40.17	\$108.79	\$129.39	\$7.29	\$11.81	\$297.45
January 2019	52,768	\$34.01	\$115.77	\$141.90	\$7.69	\$12.64	\$312.00
February 2019	52,343	\$32.57	\$103.37	\$126.21	\$6.39	\$11.48	\$280.02
March 2019	52,150	\$37.40	\$104.62	\$125.67	\$6.40	\$10.95	\$285.05
April 2019	52,058	\$41.79	\$110.16	\$132.84	\$7.69	\$11.68	\$304.17
May 2019	52,619	\$44.10	\$108.40	\$134.67	\$6.41	\$12.32	\$305.88
June 2019	52,923	\$37.27	\$105.30	\$123.35	\$5.54	\$11.59	\$283.05
July 2019	53,124	\$39.60	\$116.18	\$134.20	\$5.81	\$12.45	\$308.24
August 2019	52,726	\$38.07	\$107.81	\$136.54	\$6.51	\$13.56	\$302.49
September 2019	52,789	\$37.64	\$101.65	\$128.80	\$5.64	\$12.69	\$286.41
October 2019	52,673	\$41.49	\$111.64	\$141.70	\$6.60	\$13.58	\$315.02
November 2019	52,416	\$35.64	\$95.88	\$120.52	\$4.82	\$12.52	\$269.38
December 2019	52,415	\$33.38	\$100.92	\$124.21	\$4.75	\$12.27	\$275.53
CY 2019³	52,584	\$37.75	\$106.81	\$130.88	\$6.19	\$12.31	\$293.94
January 2020	51,771	\$46.35	\$110.51	\$145.14	\$6.06	\$13.71	\$321.77
February 2020	51,104	\$39.30	\$99.26	\$129.83	\$5.68	\$12.34	\$286.43
March 2020	50,857	\$31.22	\$85.35	\$118.68	\$5.17	\$11.44	\$251.86
April 2020	50,734	\$25.64	\$56.04	\$97.11	\$2.59	\$9.29	\$190.67
May 2020	51,945	\$37.03	\$79.90	\$114.07	\$4.38	\$11.24	\$246.62
June 2020	53,638	\$39.32	\$96.65	\$133.75	\$6.68	\$11.66	\$288.06
July 2020	55,515	\$40.92	\$100.82	\$134.24	\$6.26	\$12.01	\$294.25
August 2020	56,432	\$53.62	\$98.02	\$129.09	\$5.83	\$12.14	\$298.71
September 2020	57,081	\$37.40	\$93.44	\$131.05	\$6.03	\$11.89	\$279.81
October 2020	57,499	\$34.34	\$96.64	\$133.37	\$5.80	\$12.70	\$282.85
November 2020	58,167	\$35.72	\$95.73	\$121.14	\$4.96	\$11.71	\$269.27
December 2020	58,730	\$37.17	\$93.74	\$129.47	\$5.01	\$11.60	\$276.99
CY 2020³	54,456	\$38.17	\$92.18	\$126.41	\$5.37	\$11.81	\$273.94
Annual PMPM Trends							
CY 2017 to CY 2018		-10.8%	0.8%	-3.0%	-18.4%	-0.4%	-3.2%
CY 2018 to CY 2019		-6.0%	-1.8%	1.2%	-15.1%	4.2%	-1.2%
CY 2019 to CY 2020		1.1%	-13.7%	-3.4%	-13.2%	-4.1%	-6.8%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.

² CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 7D
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Children Population
PMPM Costs by Month¹

Month	Member Months	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	364,070	\$43.27	\$34.97	\$65.79	\$26.93	\$5.03	\$176.00
February 2017	363,509	\$42.42	\$35.02	\$67.72	\$25.55	\$4.99	\$175.69
March 2017	362,747	\$44.96	\$35.82	\$67.59	\$27.79	\$5.72	\$181.88
April 2017	362,405	\$43.62	\$34.25	\$59.63	\$24.08	\$5.06	\$166.64
May 2017	362,468	\$45.13	\$33.45	\$60.25	\$23.96	\$5.39	\$168.19
June 2017	363,148	\$43.42	\$34.73	\$52.58	\$26.12	\$4.93	\$161.77
July 2017	361,326	\$42.13	\$33.31	\$54.32	\$26.54	\$5.53	\$161.82
August 2017	359,181	\$48.00	\$34.45	\$71.28	\$30.22	\$5.91	\$189.85
September 2017	356,811	\$45.40	\$34.52	\$64.95	\$26.01	\$5.53	\$176.42
October 2017	356,208	\$45.19	\$37.26	\$70.63	\$28.65	\$5.98	\$187.70
November 2017	356,335	\$46.45	\$37.56	\$68.39	\$26.73	\$5.55	\$184.68
December 2017	352,155	\$46.40	\$37.84	\$61.81	\$20.98	\$5.17	\$172.20
CY 2017²	360,030	\$44.70	\$35.26	\$63.74	\$26.13	\$5.40	\$175.24
January 2018	348,399	\$51.01	\$37.14	\$69.51	\$23.91	\$5.33	\$186.91
February 2018	343,321	\$45.63	\$35.94	\$69.81	\$23.83	\$5.15	\$180.37
March 2018	336,989	\$45.94	\$34.76	\$64.49	\$25.56	\$5.48	\$176.23
April 2018	333,400	\$44.21	\$34.16	\$65.75	\$24.56	\$5.29	\$173.97
May 2018	331,858	\$48.99	\$34.46	\$62.12	\$22.35	\$5.25	\$173.17
June 2018	328,432	\$51.01	\$35.39	\$53.24	\$23.70	\$5.14	\$168.49
July 2018	322,650	\$46.20	\$30.58	\$58.17	\$26.58	\$6.24	\$167.77
August 2018	317,254	\$46.50	\$32.98	\$71.95	\$27.45	\$6.44	\$185.32
September 2018	313,691	\$41.68	\$31.43	\$62.28	\$22.45	\$5.57	\$163.42
October 2018	313,087	\$52.64	\$35.73	\$74.88	\$26.49	\$6.08	\$195.82
November 2018	314,496	\$48.93	\$34.10	\$67.72	\$22.10	\$5.25	\$178.10
December 2018	318,472	\$55.08	\$33.86	\$60.79	\$18.12	\$5.07	\$172.91
CY 2018²	326,837	\$48.15	\$34.21	\$65.06	\$23.93	\$5.53	\$176.87
January 2019	320,440	\$50.54	\$37.98	\$77.80	\$26.00	\$6.07	\$198.39
February 2019	319,448	\$48.09	\$39.46	\$79.04	\$22.75	\$5.31	\$194.64
March 2019	318,530	\$51.97	\$34.15	\$68.93	\$23.25	\$5.79	\$184.08
April 2019	318,462	\$53.19	\$35.84	\$72.58	\$24.32	\$6.21	\$192.14
May 2019	319,429	\$53.95	\$34.40	\$65.56	\$20.72	\$5.43	\$180.05
June 2019	319,845	\$51.42	\$35.06	\$55.98	\$22.02	\$5.04	\$169.53
July 2019	318,159	\$54.56	\$34.88	\$65.08	\$27.15	\$6.74	\$188.40
August 2019	315,732	\$53.74	\$32.80	\$74.13	\$25.78	\$7.07	\$193.51
September 2019	315,102	\$51.24	\$34.06	\$73.10	\$24.06	\$6.42	\$188.89
October 2019	315,886	\$57.50	\$37.20	\$79.73	\$27.81	\$6.30	\$208.53
November 2019	317,249	\$46.92	\$36.52	\$74.19	\$22.26	\$5.76	\$185.65
December 2019	319,445	\$55.16	\$37.13	\$71.65	\$19.71	\$6.05	\$189.70
CY 2019³	318,144	\$52.36	\$35.79	\$71.48	\$23.82	\$6.02	\$189.46
January 2020	319,240	\$51.84	\$36.44	\$81.00	\$24.71	\$6.60	\$200.59
February 2020	316,945	\$45.36	\$35.55	\$76.91	\$22.67	\$6.03	\$186.52
March 2020	315,636	\$46.98	\$26.31	\$59.91	\$14.36	\$5.35	\$152.91
April 2020	316,011	\$44.86	\$11.69	\$41.14	\$1.07	\$3.48	\$102.24
May 2020	319,175	\$46.44	\$19.51	\$47.66	\$11.94	\$4.24	\$129.78
June 2020	325,742	\$50.52	\$24.65	\$57.80	\$19.40	\$4.98	\$157.35
July 2020	331,422	\$52.89	\$25.06	\$60.28	\$20.94	\$5.24	\$164.40
August 2020	336,558	\$48.73	\$24.92	\$61.84	\$20.73	\$5.86	\$162.07
September 2020	339,916	\$47.82	\$26.52	\$63.33	\$20.92	\$5.48	\$164.07
October 2020	343,901	\$48.47	\$27.78	\$67.42	\$21.65	\$5.57	\$170.88
November 2020	348,528	\$43.96	\$25.67	\$61.39	\$19.00	\$5.22	\$155.25
December 2020	352,833	\$49.47	\$24.93	\$60.39	\$18.76	\$5.07	\$158.61
CY 2020³	330,492	\$48.11	\$25.75	\$61.59	\$18.01	\$5.26	\$158.72
Annual PMPM Trends							
CY 2017 to CY 2018		7.7%	-3.0%	2.1%	-8.4%	2.3%	0.9%
CY 2018 to CY 2019		8.7%	4.6%	9.9%	-0.4%	8.9%	7.1%
CY 2019 to CY 2020		-8.1%	-28.0%	-13.8%	-24.4%	-12.6%	-16.2%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPDS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR, and blend MississippiCAN rate cells using consistent enrollment from December 2020 to be directly comparable by month.

² CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 7E
Mississippi Division of Medicaid
MississippiCAN Historical Completed Non-Pharmacy PMPM Costs and Trends
Deliveries

Per-Delivery Costs by Month¹

Month	Deliveries	Inpatient Hospital Services	Outpatient Hospital Services	Physician Services	Dental Services	Other Services	Non-Pharmacy Total
January 2017	1,689	\$3,867.36	\$6.97	\$1,153.77	\$0.03	\$25.84	\$5,053.96
February 2017	1,496	\$3,825.11	\$8.70	\$1,173.53	\$0.00	\$20.62	\$5,027.95
March 2017	1,545	\$3,903.46	\$5.66	\$1,206.98	\$0.00	\$23.23	\$5,139.33
April 2017	1,294	\$3,914.71	\$7.26	\$1,193.78	\$0.00	\$18.91	\$5,134.66
May 2017	1,520	\$3,856.76	\$9.60	\$1,160.45	\$0.00	\$21.64	\$5,048.45
June 2017	1,486	\$3,950.50	\$5.61	\$1,219.67	\$0.00	\$21.38	\$5,197.16
July 2017	1,646	\$3,881.34	\$6.78	\$1,181.62	\$0.06	\$21.07	\$5,090.87
August 2017	1,869	\$3,871.29	\$6.29	\$1,168.19	\$0.04	\$19.61	\$5,065.42
September 2017	1,732	\$3,815.61	\$7.40	\$1,153.82	\$0.00	\$26.13	\$5,002.96
October 2017	1,639	\$3,916.63	\$12.05	\$1,161.72	\$0.00	\$29.22	\$5,119.61
November 2017	1,671	\$3,980.71	\$6.46	\$1,164.49	\$0.00	\$17.26	\$5,168.92
December 2017	1,748	\$3,915.51	\$5.40	\$1,153.01	\$0.00	\$21.16	\$5,095.08
CY 2017²	1,611	\$3,891.58	\$7.35	\$1,174.25	\$0.01	\$22.17	\$5,095.37
January 2018	1,692	\$3,974.00	\$6.12	\$1,168.85	\$0.00	\$26.78	\$5,175.74
February 2018	1,496	\$4,026.70	\$6.57	\$1,163.32	\$0.00	\$40.55	\$5,237.13
March 2018	1,565	\$3,878.17	\$9.44	\$1,167.48	\$0.00	\$30.30	\$5,085.39
April 2018	1,514	\$4,091.26	\$13.67	\$1,189.96	\$0.11	\$28.30	\$5,323.30
May 2018	1,555	\$4,026.45	\$10.79	\$1,178.37	\$0.08	\$46.64	\$5,262.33
June 2018	1,566	\$3,909.70	\$6.30	\$1,169.08	\$0.09	\$34.79	\$5,119.95
July 2018	1,689	\$3,856.00	\$6.91	\$1,111.78	\$0.05	\$25.51	\$5,000.24
August 2018	1,820	\$3,939.42	\$5.90	\$1,129.05	\$0.00	\$28.69	\$5,103.06
September 2018	1,666	\$3,944.94	\$6.00	\$1,132.83	\$0.00	\$39.39	\$5,123.16
October 2018	1,642	\$3,931.58	\$7.71	\$1,119.02	\$0.00	\$31.85	\$5,090.17
November 2018	1,617	\$3,909.22	\$7.31	\$1,135.38	\$0.00	\$29.69	\$5,081.61
December 2018	1,682	\$4,018.55	\$7.00	\$1,081.57	\$0.00	\$25.92	\$5,133.04
CY 2018²	1,625	\$3,958.83	\$7.81	\$1,145.56	\$0.03	\$32.37	\$5,144.59
January 2019	1,696	\$3,989.84	\$6.74	\$1,128.04	\$0.05	\$19.19	\$5,143.86
February 2019	1,414	\$3,957.96	\$12.92	\$1,101.04	\$0.04	\$17.58	\$5,089.53
March 2019	1,508	\$3,983.83	\$11.12	\$1,088.80	\$0.00	\$19.61	\$5,103.36
April 2019	1,468	\$3,919.07	\$11.53	\$1,086.50	\$0.08	\$27.15	\$5,044.32
May 2019	1,493	\$4,106.97	\$16.44	\$1,124.98	\$0.00	\$23.10	\$5,271.50
June 2019	1,450	\$3,943.40	\$16.34	\$1,075.50	\$0.00	\$21.77	\$5,057.01
July 2019	1,797	\$3,883.88	\$13.85	\$1,074.62	\$0.00	\$16.61	\$4,988.96
August 2019	1,721	\$3,928.22	\$11.36	\$1,116.25	\$0.06	\$21.44	\$5,077.34
September 2019	1,717	\$3,991.61	\$15.36	\$1,123.56	\$0.17	\$18.13	\$5,148.83
October 2019	1,732	\$4,092.67	\$14.55	\$1,180.21	\$0.00	\$22.64	\$5,310.08
November 2019	1,521	\$3,976.26	\$15.42	\$1,165.48	\$0.00	\$25.81	\$5,182.97
December 2019	1,741	\$4,074.26	\$10.74	\$1,163.23	\$0.00	\$22.01	\$5,270.25
CY 2019³	1,605	\$3,987.33	\$13.03	\$1,119.02	\$0.03	\$21.25	\$5,140.67
January 2020	1,684	\$4,169.84	\$15.78	\$1,157.14	\$0.07	\$17.02	\$5,359.85
February 2020	1,416	\$4,128.79	\$11.38	\$1,151.69	\$0.00	\$27.09	\$5,318.95
March 2020	1,479	\$4,152.51	\$12.08	\$1,129.06	\$0.00	\$20.20	\$5,313.84
April 2020	1,404	\$4,107.97	\$10.73	\$1,134.01	\$0.21	\$19.40	\$5,272.32
May 2020	1,449	\$4,182.57	\$17.18	\$1,171.10	\$0.00	\$20.11	\$5,390.97
June 2020	1,554	\$4,113.50	\$14.11	\$1,150.95	\$0.00	\$20.03	\$5,298.59
July 2020	1,667	\$4,126.04	\$13.73	\$1,177.44	\$0.00	\$15.05	\$5,332.26
August 2020	1,705	\$4,299.50	\$11.59	\$1,201.48	\$0.00	\$17.73	\$5,530.29
September 2020	1,691	\$4,110.02	\$6.91	\$1,132.24	\$0.07	\$15.32	\$5,264.56
October 2020	1,552	\$4,064.53	\$12.29	\$1,196.71	\$0.00	\$18.94	\$5,292.47
November 2020	1,527	\$4,031.32	\$13.87	\$1,133.20	\$0.00	\$22.72	\$5,201.11
December 2020	1,488	\$4,071.23	\$9.66	\$1,158.01	\$0.00	\$18.42	\$5,257.31
CY 2020³	1,551	\$4,129.82	\$12.44	\$1,157.75	\$0.03	\$19.33	\$5,319.38
Annual PMPM Trends							
CY 2017 to CY 2018		1.7%	6.3%	-2.4%	145.9%	46.0%	1.0%
CY 2018 to CY 2019		0.7%	66.9%	-2.3%	22.6%	-34.3%	-0.1%
CY 2019 to CY 2020		3.6%	-4.5%	3.5%	-11.0%	-9.0%	3.5%

¹ MississippiCAN PMPM figures have been adjusted for: the carveout of Zolgensma claims, adjustments related to the 5% assessment application and removal, OPSS reimbursement changes not related to the 5% assessment, PAD reimbursement changes, annual PDL changes to drug costs, AAC inclusion in drug pricing logic, PRTF inclusion in managed care, OP Dental reimbursement changes, GME removal from capitation rates, NET subcapitation changes, provider settlements, emergency ambulance reimbursement increases, financial to encounter adjustments, population acuity, and IBNR.

² CY 2017, CY 2018, and CY 2019 assumed to be fully complete with no explicit IBNR adjustment.

³ CY 2020 IBNR as reported by CCOs in financial templates.

Exhibit 8A Mississippi Division of Medicaid MississippiCAN Historical and Projected Pharmacy Utilization and Cost SSI Rate Grouping																					
Traditional Top 25		Cost / Script			CY 2019 Util / 1000			PMPM Cost			Annualized Prospective Trends				Utilization'				Projected PMPM		
GPI4	GPI Description	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Months of Trend	Generic	Brand	Total	Months of Trend	Generic	Brand	Total
1210	Antiretrovirals	\$582.92	\$2,237.51	\$1,899.89	33.6	131.0	164.6	\$1.63	\$24.43	\$26.06	1.0%	5.0%	4.8%	24	-2.0%	-2.0%	-2.0%	42	\$1.55	\$25.09	\$26.65
5907	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$35.96	\$2,346.94	\$614.22	279.6	93.3	372.9	\$0.84	\$18.25	\$19.08	5.0%	5.0%	5.0%	24	2.0%	2.0%	2.0%	42	\$0.99	\$21.56	\$22.55
7260	Fibromyalgia Agents	\$24.72	\$720.59	\$106.21	1,513.8	200.8	1,714.6	\$3.12	\$12.06	\$15.18	1.0%	3.0%	2.6%	24	0.0%	0.0%	0.0%	42	\$3.18	\$12.79	\$15.97
2710L	Insulin - Long Acting	\$0.00	\$548.30	\$548.30	0.0	280.6	280.6	\$0.00	\$12.82	\$12.82	-1.0%	0.0%	0.0%	24	1.0%	1.0%	1.0%	42	\$0.00	\$13.27	\$13.27
4420	Sympathomimetics	\$31.87	\$170.57	\$140.85	215.0	788.2	1,003.1	\$0.57	\$11.20	\$11.77	7.0%	1.0%	1.3%	24	1.0%	1.0%	1.0%	42	\$0.68	\$11.83	\$12.51
5925	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$24.31	\$2,027.31	\$453.71	207.3	56.6	263.9	\$0.42	\$9.56	\$9.98	-1.0%	4.0%	3.8%	24	8.0%	8.0%	8.0%	42	\$0.54	\$13.53	\$14.07
2710S	Insulin - Short / Intermediate Acting	\$0.00	\$612.20	\$612.20	0.0	211.9	211.9	\$0.00	\$10.81	\$10.81	-1.0%	-10.0%	-10.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$8.76	\$8.76
5940	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$32.57	\$1,313.36	\$755.00	45.1	58.3	103.4	\$0.12	\$6.38	\$6.50	-1.0%	3.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.12	\$6.77	\$6.89
2717	Incretin Mimetic Agents (GLP-1 Receptor Agonists)	\$0.00	\$740.76	\$740.76	0.0	90.1	90.1	\$0.00	\$5.56	\$5.56	-1.0%	5.0%	5.0%	24	9.0%	9.0%	9.0%	42	\$0.00	\$8.29	\$8.29
6110	Amphetamine Stimulants	\$70.61	\$293.64	\$178.45	215.5	201.7	417.2	\$1.27	\$4.94	\$6.20	-10.0%	5.0%	2.1%	24	0.0%	0.0%	0.0%	42	\$1.03	\$5.44	\$6.47
2770	SGLT-2 Agents	\$0.00	\$545.19	\$545.19	0.0	70.1	70.1	\$0.00	\$3.18	\$3.18	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$6.65	\$6.65
8337	Anticoagulants	\$0.00	\$443.91	\$443.91	0.0	102.7	102.7	\$0.00	\$3.80	\$3.80	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$7.93	\$7.93
2755	DPP-IV Agents	\$0.00	\$503.25	\$503.25	0.0	96.9	96.9	\$0.00	\$4.06	\$4.06	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$4.48	\$4.48
6140	Stimulants - Misc.	\$127.98	\$351.63	\$218.03	150.1	101.2	251.3	\$1.60	\$2.97	\$4.57	-15.0%	4.0%	-2.2%	24	0.0%	0.0%	0.0%	42	\$1.16	\$3.21	\$4.36
2799	Antidiabetic Combinations	\$23.96	\$471.45	\$379.65	16.2	62.8	79.0	\$0.03	\$2.47	\$2.50	-1.0%	5.0%	4.9%	24	0.0%	0.0%	0.0%	42	\$0.03	\$2.72	\$2.75
4410	Bronchodilators - Anticholinergics	\$21.46	\$424.82	\$383.82	7.9	69.9	77.8	\$0.01	\$2.47	\$2.49	-1.0%	6.0%	6.0%	24	-3.0%	-3.0%	-3.0%	42	\$0.01	\$2.50	\$2.51
4099	Cardiovascular Agents Misc. - Combinations	\$109.33	\$493.37	\$478.62	1.7	41.9	43.6	\$0.02	\$1.72	\$1.74	-1.0%	7.0%	6.9%	24	20.0%	20.0%	20.0%	42	\$0.03	\$3.74	\$3.76
5915	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$19.93	\$883.58	\$67.15	424.1	21.3	445.3	\$0.70	\$1.56	\$2.27	0.0%	0.0%	0.0%	24	2.0%	2.0%	2.0%	42	\$0.75	\$1.68	\$2.43
5812	Modified Cyclics	\$15.13	\$371.46	\$70.73	306.8	56.7	363.6	\$0.39	\$1.76	\$2.14	-1.0%	5.0%	3.9%	24	0.0%	0.0%	0.0%	42	\$0.38	\$1.94	\$2.32
6520	Opioid Partial Agonists	\$212.47	\$406.42	\$385.30	7.1	57.8	64.8	\$0.12	\$1.96	\$2.08	-1.0%	3.0%	2.8%	24	3.0%	3.0%	3.0%	42	\$0.14	\$2.30	\$2.44
6510	Opioid Agonists	\$37.85	\$1,128.87	\$89.15	326.4	16.1	342.5	\$1.03	\$1.52	\$2.54	-3.0%	15.0%	8.1%	24	-10.0%	-10.0%	-10.0%	42	\$0.67	\$1.39	\$2.06
4927	Proton Pump Inhibitors	\$18.15	\$329.63	\$23.18	915.0	15.0	930.0	\$1.38	\$0.41	\$1.80	1.0%	4.0%	1.7%	24	0.0%	0.0%	0.0%	42	\$1.41	\$0.45	\$1.86
7210	Anticonvulsants - Benzodiazepines	\$21.72	\$1,032.69	\$116.24	189.5	19.5	209.1	\$0.34	\$1.68	\$2.03	-1.0%	6.0%	4.8%	24	0.0%	0.0%	0.0%	42	\$0.34	\$1.89	\$2.23
8120	Nutritional Supplements	\$107.03	\$283.74	\$283.29	0.2	73.6	73.7	\$0.00	\$1.74	\$1.74	-1.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$2.06	\$2.07
5120	Digestive Enzymes	\$0.00	\$1,475.22	\$1,475.22	0.0	11.0	11.0	\$0.00	\$1.35	\$1.35	-1.0%	6.0%	6.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$1.80	\$1.80
Other Traditional		\$21.89	\$146.79	\$30.89	17,947.6	1,393.6	19,341.2	\$32.73	\$17.05	\$49.78	-1.0%	7.0%	1.8%	24	0.0%	0.0%	0.0%	42	\$32.08	\$19.52	\$51.60
Total Traditional		\$24.39	\$460.01	\$93.80	22,802.3	4,322.3	27,124.6	\$46.34	\$165.69	\$212.03	-1.2%	3.4%	2.5%	24	-0.09%	2.24%	1.74%	42	\$45.08	\$191.56	\$236.65
Specialty Top 25																					
6627	Autoimmune Agents	\$0.00	\$6,123.06	\$6,123.06	0.0	21.8	21.8	\$0.00	\$11.11	\$11.11	0.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$17.75	\$17.75
2153	Antineoplastic Enzyme Inhibitors	\$430.05	\$12,082.88	\$10,832.50	1.1	9.4	10.5	\$0.04	\$9.44	\$9.48	0.0%	5.0%	5.0%	24	12.0%	12.0%	12.0%	42	\$0.06	\$15.47	\$15.53
4530	Cystic Fibrosis Agents	\$0.00	\$10,895.05	\$10,895.05	0.0	6.5	6.5	\$0.00	\$5.93	\$5.93	0.0%	0.0%	0.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$11.22	\$11.22
9310	Antidotes - Chelating Agents	\$4,748.61	\$10,910.66	\$10,827.81	0.1	9.2	9.3	\$0.05	\$8.35	\$8.40	0.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.07	\$11.66	\$11.73
6240	Multiple Sclerosis Agents	\$854.74	\$7,194.82	\$6,036.53	2.1	9.3	11.4	\$0.15	\$5.58	\$5.73	0.0%	4.0%	3.9%	24	-10.0%	-10.0%	-10.0%	42	\$0.10	\$4.18	\$4.28
1235C	Hepatitis C Agents	\$88.47	\$13,794.90	\$13,635.06	0.1	5.3	5.4	\$0.00	\$6.10	\$6.10	0.0%	-10.0%	-10.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.00	\$3.42	\$3.42
9025	Antipsoriatics	\$196.83	\$8,100.67	\$6,607.22	1.0	4.4	5.4	\$0.02	\$2.95	\$2.96	0.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.03	\$6.15	\$6.18
6629	Autoimmune Agents	\$0.00	\$4,802.51	\$4,802.51	0.0	10.4	10.4	\$0.00	\$4.15	\$4.15	0.0%	8.0%	8.0%	24	4.0%	4.0%	4.0%	42	\$0.00	\$5.55	\$5.55
6238	Movement Disorder Drug Therapy	\$1,871.29	\$6,398.05	\$5,720.47	0.7	4.2	4.9	\$0.11	\$2.23	\$2.34	0.0%	5.0%	4.8%	24	5.0%	5.0%	5.0%	42	\$0.14	\$2.91	\$3.05
7217	GABA Modulators	\$8,369.66	\$9,014.65	\$8,508.04	3.4	0.9	4.3	\$2.36	\$0.69	\$3.05	-5.0%	9.0%	-1.6%	24	-5.0%	-5.0%	-5.0%	42	\$1.78	\$0.69	\$2.47
1910	Immune Serums	\$0.00	\$9,243.04	\$9,243.04	0.0	2.7	2.7	\$0.00	\$2.11	\$2.11	0.0%	0.0%	0.0%	24	25.0%	25.0%	25.0%	42	\$0.00	\$4.61	\$4.61
9939	Immunomodulators	\$0.00	\$14,695.68	\$14,695.68	0.0	1.6	1.6	\$0.00	\$1.94	\$1.94	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.94	\$1.94
3090	Metabolic Modifiers	\$183.31	\$3,666.90	\$706.41	24.4	4.3	28.8	\$0.37	\$1.32	\$1.69	0.0%	5.0%	3.9%	24	1.0%	1.0%	1.0%	42	\$0.39	\$1.51	\$1.89
4016	Pulmonary Arterial Hypertension	\$3,270.44	\$9,546.77	\$8,318.79	0.6	2.3	2.9	\$0.15	\$1.84	\$2.00	0.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.21	\$2.57	\$2.79
3010	Growth Hormones	\$0.00	\$3,197.59	\$3,197.59	0.0	6.5	6.5	\$0.00	\$1.72	\$1.72	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$2.50	\$2.50
3030	Corticotropin	\$0.00	\$57,665.34	\$57,665.34	0.0	0.3	0.3	\$0.00	\$1.58	\$1.58	0.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$1.87	\$1.87
6646	Interleukin-1 Blockers	\$0.00	\$25,378.21	\$25,378.21	0.0	0.8	0.8	\$0.00	\$1.66	\$1.66	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.66	\$1.66
6660	Autoimmune Agents	\$0.00	\$4,330.00	\$4,330.00	0.0	3.2	3.2	\$0.00	\$1.14	\$1.14	0.0%	8.0%	8.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$3.33	\$3.33
2140	Antineoplastic - Hormonal Agents	\$103.17	\$8,863.20	\$414.28	51.4	1.9	53.3	\$0.44	\$1.40	\$1.84	0.0%	6.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.44	\$1.57	\$2.01
9027	Atopic Dermatitis - Monoclonal Antibodies	\$0.00	\$3,085.38	\$3,085.38	0.0	2.8	2.8	\$0.00	\$0.72	\$0.72	0.0%	2.0%	2.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$3.10	\$3.10
5640	Cystinosis Agents	\$0.00	\$65,744.47	\$65,744.47	0.0	0.3	0.3	\$0.00	\$1.63	\$1.63	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.63	\$1.63
4014	Pulmonary Arterial Hypertension	\$1,617.01	\$8,053.65	\$3,084.75	5.1	1.5	6.6	\$0.69	\$1.01	\$1.69	-10.0%	2.0%	-2.7%	24	10.0%	10.0%	10.0%	42	\$0.78	\$1.46	\$2.24
5253	Short Bowel Syndrome (SBS) Agents	\$0.00	\$39,047.06	\$39,047.06	0.0	0.2	0.2	\$0.00	\$0.61	\$0.61	0.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$0.72	\$0.72
8240	Erythropoietin Agents	\$0.00	\$4,714.50	\$4,714.50	0.0	1.7	1.7	\$0.00	\$0.68	\$0.68	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.99	\$0.99
8580	Hereditary Angioedema Agents	\$0.00	\$40,241.92	\$40,241.92	0.0	0.2	0.2														

* Composite utilization trends include mix component of trends.

Exhibit 8B Mississippi Division of Medicaid MississippiCAN Historical and Projected Pharmacy Utilization and Cost Adult Rate Grouping																					
Traditional Top 25		Cost / Script			CY 2019			PMPM Cost			Annualized Prospective Trends				Utilization¹				Projected PMPM		
					Util / 1000						Cost / Script				Utilization¹						
GPI4	GPI Description	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Months of Trend	Generic	Brand	Total	Months of Trend	Generic	Brand	Total
1210	Antiretrovirals	\$502.46	\$2,329.50	\$2,105.86	4.7	33.8	38.5	\$0.20	\$6.56	\$6.76	-1.0%	5.0%	4.8%	24	0.0%	0.0%	0.0%	42	\$0.19	\$7.24	\$7.43
2600	Progestins	\$51.36	\$3,231.14	\$1,335.99	42.5	28.8	71.3	\$0.18	\$7.76	\$7.94	-1.0%	0.0%	0.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.12	\$5.37	\$5.49
6520	Opioid Partial Agonists	\$156.36	\$398.36	\$349.09	36.3	142.0	178.3	\$0.47	\$4.71	\$5.19	-1.0%	2.0%	1.7%	24	0.0%	0.0%	0.0%	42	\$0.46	\$4.90	\$5.37
2710L	Insulin - Long Acting	\$0.00	\$501.31	\$501.31	0.0	95.9	95.9	\$0.00	\$4.01	\$4.01	-1.0%	0.0%	0.0%	24	3.0%	3.0%	3.0%	42	\$0.00	\$4.44	\$4.44
2710S	Insulin - Short / Intermediate Acting	\$0.00	\$496.67	\$496.67	0.0	98.2	98.2	\$0.00	\$4.07	\$4.07	-1.0%	-5.0%	-5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$3.67	\$3.67
2717	Incretin Mimetic Agents (GLP-1 Receptor Agonists)	\$0.00	\$732.04	\$732.04	0.0	44.4	44.4	\$0.00	\$2.71	\$2.71	-1.0%	5.0%	5.0%	24	15.0%	15.0%	15.0%	42	\$0.00	\$4.87	\$4.87
7260	Fibromyalgia Agents	\$18.67	\$597.65	\$81.42	602.0	73.2	675.2	\$0.94	\$3.64	\$4.58	1.0%	5.0%	4.2%	24	-2.0%	-2.0%	-2.0%	42	\$0.89	\$3.74	\$4.63
4420	Sympathomimetics	\$30.36	\$129.60	\$116.34	41.2	267.4	308.6	\$0.10	\$2.89	\$2.99	-1.0%	0.0%	0.0%	24	5.0%	5.0%	5.0%	42	\$0.12	\$3.43	\$3.55
5940	Dibenzapines / Quinolinone Derivatives / Benzisoxazoles	\$31.43	\$1,216.31	\$903.57	8.5	23.6	32.1	\$0.02	\$2.39	\$2.41	-1.0%	4.0%	4.0%	24	0.0%	0.0%	0.0%	42	\$0.02	\$2.59	\$2.61
5812	Modified Cyclics	\$14.58	\$357.43	\$128.66	120.7	60.2	180.8	\$0.15	\$1.79	\$1.94	-1.0%	5.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.14	\$1.98	\$2.12
2770	SGLT-2 Agents	\$0.00	\$528.38	\$528.38	0.0	26.1	26.1	\$0.00	\$1.15	\$1.15	-1.0%	5.0%	5.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$3.18	\$3.18
5925	Dibenzapines / Quinolinone Derivatives / Benzisoxazoles	\$21.32	\$1,704.29	\$286.32	48.4	9.1	57.5	\$0.09	\$1.29	\$1.37	-1.0%	4.0%	3.7%	24	15.0%	15.0%	15.0%	42	\$0.14	\$2.27	\$2.41
6110	Amphetamine Stimulants	\$43.32	\$291.48	\$99.33	111.2	32.4	143.7	\$0.40	\$0.79	\$1.19	-1.0%	5.0%	3.0%	24	15.0%	15.0%	15.0%	42	\$0.64	\$1.42	\$2.06
6610	Nonsteroidal Anti-inflammatory Agents (NSAIDs)	\$14.66	\$216.33	\$14.87	1,013.2	1.0	1,014.3	\$1.24	\$0.02	\$1.26	1.0%	7.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$1.26	\$0.02	\$1.28
2755	DPP-IV Agents	\$0.00	\$489.44	\$489.44	0.0	26.4	26.4	\$0.00	\$1.08	\$1.08	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.19	\$1.19
6599	Opioid Agonists	\$15.13	\$0.00	\$15.13	974.2	0.0	974.2	\$1.23	\$0.00	\$1.23	-1.0%	0.0%	-1.0%	24	-10.0%	-10.0%	-10.0%	42	\$0.83	\$0.00	\$0.83
2599	Combination Contraceptives - Oral	\$20.41	\$192.90	\$42.00	275.9	39.5	315.4	\$0.47	\$0.63	\$1.10	-1.0%	8.0%	4.3%	24	0.0%	0.0%	0.0%	42	\$0.46	\$0.74	\$1.20
8337	Anticoagulants	\$0.00	\$444.75	\$444.75	0.0	18.5	18.5	\$0.00	\$0.69	\$0.69	-1.0%	5.0%	5.0%	24	20.0%	20.0%	20.0%	42	\$0.00	\$1.43	\$1.43
2799	Antidiabetic Combinations	\$21.53	\$465.53	\$404.13	3.3	20.5	23.8	\$0.01	\$0.80	\$0.80	-1.0%	5.0%	5.0%	24	0.0%	0.0%	0.0%	42	\$0.01	\$0.88	\$0.88
4927	Proton Pump Inhibitors	\$15.51	\$305.90	\$18.06	432.2	3.8	436.0	\$0.56	\$0.10	\$0.66	-1.0%	7.0%	0.2%	24	2.0%	2.0%	2.0%	42	\$0.59	\$0.12	\$0.71
2596	Combination Contraceptives - Transdermal	\$135.12	\$0.00	\$135.12	59.2	0.0	59.2	\$0.67	\$0.00	\$0.67	0.0%	7.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.67	\$0.00	\$0.67
6770	Migraine Products - Monoclonal Antibodies	\$0.00	\$578.28	\$578.28	0.0	6.6	6.6	\$0.00	\$0.32	\$0.32	-1.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.51	\$0.51
5816	Selective Serotonin Reuptake Inhibitors (SSRIs)	\$13.38	\$0.00	\$13.38	573.0	0.0	573.0	\$0.64	\$0.00	\$0.64	0.0%	7.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.64	\$0.00	\$0.64
5907	Dibenzapines / Quinolinone Derivatives / Benzisoxazoles	\$18.24	\$2,238.11	\$210.82	18.6	1.8	20.4	\$0.03	\$0.33	\$0.36	-1.0%	7.0%	6.4%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.38	\$0.41
5255	Irritable Bowel Syndrome (IBS) Agents	\$0.00	\$437.59	\$437.59	0.0	14.3	14.3	\$0.00	\$0.52	\$0.52	-1.0%	7.0%	7.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.83	\$0.83
Other Traditional		\$19.60	\$96.08	\$25.59	9,733.7	827.2	10,560.9	\$15.90	\$6.62	\$22.52	-1.0%	10.0%	2.4%	24	0.0%	0.0%	0.0%	42	\$15.58	\$8.01	\$23.60
Total Traditional		\$19.82	\$347.45	\$58.63	14,098.9	1,894.8	15,993.7	\$23.29	\$54.86	\$78.15	-0.8%	3.6%	2.4%	24	-0.16%	2.05%	1.40%	42	\$22.80	\$63.20	\$86.01
Specialty Top 25																					
6627	Autoimmune Agents	\$0.00	\$6,243.72	\$6,243.72	0.0	12.6	12.6	\$0.00	\$6.53	\$6.53	2.0%	7.0%	7.0%	24	15.0%	15.0%	15.0%	42	\$0.00	\$12.19	\$12.19
1235C	Hepatitis C Agents	\$330.58	\$14,412.00	\$14,329.17	0.0	3.2	3.2	\$0.00	\$3.86	\$3.86	2.0%	-10.0%	-10.0%	24	-5.0%	-5.0%	-5.0%	42	\$0.00	\$2.61	\$2.61
9025	Antipsoriatrics	\$211.40	\$7,170.82	\$6,210.90	0.3	1.9	2.2	\$0.01	\$1.14	\$1.14	2.0%	5.0%	5.0%	24	40.0%	40.0%	40.0%	42	\$0.02	\$4.07	\$4.09
6240	Multiple Sclerosis Agents	\$1,403.13	\$7,043.92	\$6,245.45	0.6	3.6	4.2	\$0.07	\$2.10	\$2.17	2.0%	1.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.07	\$2.14	\$2.21
3030	Corticotropin	\$0.00	\$41,731.14	\$41,731.14	0.0	0.3	0.3	\$0.00	\$0.93	\$0.93	2.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.93	\$0.93
6629	Autoimmune Agents	\$0.00	\$5,148.90	\$5,148.90	0.0	3.7	3.7	\$0.00	\$1.58	\$1.58	2.0%	7.0%	7.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$1.81	\$1.81
1910	Immune Serums	\$0.00	\$8,815.01	\$8,815.01	0.0	0.4	0.4	\$0.00	\$0.29	\$0.29	2.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.29	\$0.29
2153	Antineoplastic Enzyme Inhibitors	\$462.75	\$12,786.84	\$11,165.24	0.1	0.6	0.7	\$0.00	\$0.67	\$0.67	2.0%	5.0%	5.0%	24	12.0%	12.0%	12.0%	42	\$0.01	\$1.10	\$1.10
9027	Atopic Dermatitis - Monoclonal Antibodies	\$0.00	\$3,004.09	\$3,004.09	0.0	1.8	1.8	\$0.00	\$0.45	\$0.45	2.0%	3.0%	3.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$1.98	\$1.98
5250	Inflammatory Bowel Agents	\$115.18	\$1,910.12	\$1,084.07	2.5	3.0	5.5	\$0.02	\$0.47	\$0.50	2.0%	5.0%	4.9%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.52	\$0.55
6660	Autoimmune Agents	\$0.00	\$4,361.77	\$4,361.77	0.0	1.3	1.3	\$0.00	\$0.48	\$0.48	2.0%	8.0%	8.0%	24	50.0%	50.0%	50.0%	42	\$0.00	\$2.30	\$2.30
8582	Hereditary Angioedema Agents	\$0.00	\$50,235.70	\$50,235.70	0.0	0.3	0.3	\$0.00	\$1.19	\$1.19	2.0%	0.0%	0.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$1.67	\$1.67
3045	Vasopressin Receptor Antagonists	\$0.00	\$14,290.82	\$14,290.82	0.0	0.2	0.2	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.35	\$0.35
9942	Systemic Lupus Erythematosus Agents	\$0.00	\$3,712.42	\$3,712.42	0.0	0.8	0.8	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.36	\$0.36
5253	Short Bowel Syndrome (SBS) Agents	\$0.00	\$39,333.02	\$39,333.02	0.0	0.1	0.1	\$0.00	\$0.25	\$0.25	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.36	\$0.36
4460	Antithymatic - Monoclonal Antibodies	\$0.00	\$2,589.93	\$2,589.93	0.0	1.0	1.0	\$0.00	\$0.22	\$0.22	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.32	\$0.32
6640	Autoimmune Agents	\$0.00	\$4,263.29	\$4,263.29	0.0	0.5	0.5	\$0.00	\$0.19	\$0.19	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.27	\$0.27
2140	Antineoplastic - Hormonal Agents	\$80.87	\$3,428.28	\$204.34	13.4	0.5	13.9	\$0.09	\$0.15	\$0.24	2.0%	1.0%	1.4%	24	10.0%	10.0%	10.0%	42	\$0.13	\$0.21	\$0.34
8584	Hereditary Angioedema Agents	\$0.00	\$79,452.00	\$79,452.00	0.0	0.1	0.1	\$0.00	\$0.50	\$0.50	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.72	\$0.72
2730	Diabetic Other	\$0.00	\$267.48	\$267.48	0.0	1.4	1.4	\$0.00	\$0.03	\$0.03	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.04	\$0.04
6238	Movement Disorder Drug Therapy	\$0.00	\$5,154.74	\$5,154.74	0.0	0.4	0.4	\$0.00	\$0.17	\$0.17	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.24	\$0.24
3090	Metabolic Modifiers	\$26.80	\$0.00	\$26.80	2.2	0.0	2.2	\$0.00	\$0.00	\$0.00	2.0%	1.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.01	\$0.00	\$0.01
6670	Autoimmune Agents	\$0.00	\$3,350.65	\$3,350.65	0.0	0.5	0.5	\$0.00	\$0.13	\$0.13	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.19	\$0.19
4555	Pulmonary Fibrosis Agents	\$0.00	\$9,952.21	\$9,952.21	0.0	0.0	0.0	\$0.00	\$0.03	\$0.03	2.0%	1.0%	1.0%	24	10.0%	10.0%	10.0%	42	\$0.00	\$0.04	\$0.04
9940	Immunosuppressive Agents	\$74.79	\$1,246.20	\$98.64	7.3	0.2	7.5	\$0.05	\$0.02	\$0.06	2.0%	1.0%	1.7%	24	10.0%	10.0%	10.0%	42	\$0.07	\$0.02	\$0.09
Other Specialty		\$40.79	\$3,077.41	\$534.04	15.7	3.0	18.7	\$0.0													

* Composite utilization trends include mix component of trends.

Exhibit 8C Mississippi Division of Medicaid MississippiCAN Historical and Projected Pharmacy Utilization and Cost Children Rate Grouping																					
Traditional Top 25		Cost / Script			CY 2019			PMPM Cost			Annualized Prospective Trends				Utilization¹				Projected PMPM		
					Util / 1000						Cost / Script				Utilization¹						
GPI4	GPI Description	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Generic	Brand	Total	Months of Trend	Generic	Brand	Total	Months of Trend	Generic	Brand	Total
6110	Amphetamine Stimulants	\$77.47	\$295.36	\$209.89	141.9	219.8	361.7	\$0.92	\$5.41	\$6.33	-10.0%	5.0%	3.0%	24	0.0%	0.0%	0.0%	42	\$0.74	\$5.97	\$6.71
6140	Stimulants - Misc.	\$128.29	\$351.77	\$218.94	139.4	95.1	234.5	\$1.49	\$2.79	\$4.28	-20.0%	4.0%	-3.7%	24	0.0%	0.0%	0.0%	42	\$0.95	\$3.02	\$3.97
4420	Sympathomimetics	\$26.46	\$110.46	\$70.81	153.6	171.8	325.4	\$0.34	\$1.58	\$1.92	3.0%	0.0%	0.5%	24	0.0%	0.0%	0.0%	42	\$0.36	\$1.58	\$1.94
4440	Steroid Inhalants	\$99.89	\$209.23	\$153.25	35.0	33.3	68.3	\$0.29	\$0.58	\$0.87	-5.0%	4.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$0.26	\$0.63	\$0.94
1250	Influenza Agents	\$100.44	\$239.15	\$102.12	205.6	2.5	208.1	\$1.72	\$0.05	\$1.77	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$1.72	\$0.05	\$1.77
2710S	Insulin - Short / Intermediate Acting	\$0.00	\$647.00	\$647.00	0.0	16.7	16.7	\$0.00	\$0.90	\$0.90	0.0%	-10.0%	-10.0%	24	0.0%	3.0%	3.0%	42	\$0.00	\$0.81	\$0.81
8799	Otic Combinations	\$62.59	\$234.26	\$220.80	3.4	40.0	43.4	\$0.02	\$0.78	\$0.80	0.0%	1.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.80	\$0.81
4155	Antihistamines - Non-Sedating	\$16.40	\$32.37	\$16.40	574.2	0.0	574.2	\$0.78	\$0.00	\$0.78	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.78	\$0.00	\$0.78
4927	Proton Pump Inhibitors	\$81.54	\$337.65	\$87.07	57.3	1.3	58.6	\$0.39	\$0.04	\$0.42	0.0%	5.0%	0.4%	24	2.0%	2.0%	2.0%	42	\$0.42	\$0.04	\$0.46
4399	Cough/Cold/Allergy Combinations	\$20.38	\$14.76	\$15.33	47.4	418.8	466.2	\$0.08	\$0.52	\$0.60	0.0%	5.0%	4.3%	24	0.0%	0.0%	0.0%	42	\$0.08	\$0.57	\$0.65
9055	Corticosteroids - Topical	\$24.15	\$229.49	\$25.94	220.8	1.9	222.8	\$0.44	\$0.04	\$0.48	-3.0%	5.0%	-2.4%	24	0.0%	0.0%	0.0%	42	\$0.42	\$0.04	\$0.46
0120	Penicillin	\$13.63	\$0.00	\$13.63	443.4	0.0	443.4	\$0.50	\$0.00	\$0.50	1.0%	5.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.51	\$0.00	\$0.51
9005	Acne Products	\$76.83	\$206.14	\$114.89	40.5	16.9	57.3	\$0.26	\$0.29	\$0.55	-5.0%	5.0%	0.4%	24	2.0%	2.0%	2.0%	42	\$0.25	\$0.34	\$0.59
4450	Leukotriene Modulators	\$17.80	\$239.59	\$17.81	286.3	0.0	286.3	\$0.42	\$0.00	\$0.42	-2.0%	5.0%	-2.0%	24	0.0%	0.0%	0.0%	42	\$0.41	\$0.00	\$0.41
2599	Combination Contraceptives - Oral	\$20.53	\$188.72	\$42.03	87.4	12.8	100.2	\$0.15	\$0.20	\$0.35	0.0%	5.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.15	\$0.22	\$0.37
0340	Macrolides	\$20.43	\$205.12	\$20.44	246.3	0.0	246.3	\$0.42	\$0.00	\$0.42	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.42	\$0.00	\$0.42
7260	Fibromyalgia Agents	\$23.12	\$820.82	\$51.48	65.9	2.4	68.3	\$0.13	\$0.17	\$0.29	0.0%	5.0%	2.9%	24	0.0%	0.0%	0.0%	42	\$0.13	\$0.18	\$0.31
2710L	Insulin - Long Acting	\$0.00	\$366.10	\$366.10	0.0	10.1	10.1	\$0.00	\$0.31	\$0.31	0.0%	5.0%	5.0%	24	5.0%	5.0%	5.0%	42	\$0.00	\$0.40	\$0.40
3890	Anaphylaxis Therapy Agents	\$287.54	\$611.40	\$294.81	14.2	0.3	14.6	\$0.34	\$0.02	\$0.36	0.0%	5.0%	0.2%	24	10.0%	10.0%	10.0%	42	\$0.48	\$0.03	\$0.50
5915	Dibenzapines / Quinolone Derivatives / Benzisoxazoles	\$15.09	\$738.53	\$139.51	19.6	4.1	23.7	\$0.02	\$0.25	\$0.28	0.0%	5.0%	4.6%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.28	\$0.30
2210	Glucocorticosteroids	\$15.57	\$409.12	\$15.61	259.3	0.0	259.3	\$0.34	\$0.00	\$0.34	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.34	\$0.00	\$0.34
9090	Scabicides & Pediculicides	\$41.51	\$269.02	\$159.68	12.2	13.2	25.3	\$0.04	\$0.30	\$0.34	0.0%	5.0%	4.4%	24	0.0%	0.0%	0.0%	42	\$0.04	\$0.33	\$0.37
4220	Nasal Antiallergy	\$17.16	\$231.89	\$27.64	155.9	8.0	163.8	\$0.22	\$0.15	\$0.38	0.0%	5.0%	2.1%	24	0.0%	0.0%	0.0%	42	\$0.22	\$0.17	\$0.39
3620	Antiadrenergic Antihypertensives	\$17.89	\$210.71	\$17.91	175.3	0.0	175.4	\$0.26	\$0.00	\$0.26	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.26	\$0.00	\$0.26
0230	Cephalosporin	\$23.03	\$0.00	\$23.03	159.2	0.0	159.2	\$0.31	\$0.00	\$0.31	0.0%	5.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.31	\$0.00	\$0.31
Other Traditional		\$24.13	\$115.98	\$33.28	2,031.6	224.9	2,256.6	\$4.08	\$2.17	\$6.26	0.0%	3.0%	1.1%	24	0.0%	0.0%	0.0%	42	\$4.08	\$2.31	\$6.39
Total Traditional		\$30.08	\$153.36	\$53.30	5,575.7	1,294.1	6,869.8	\$13.98	\$16.54	\$30.51	-2.8%	3.0%	0.4%	24	0.37%	0.32%	0.34%	42	\$13.38	\$17.75	\$31.13
Specialty Top 25																					
6627	Autoimmune Agents	\$0.00	\$6,339.62	\$6,339.62	0.0	1.5	1.5	\$0.00	\$0.79	\$0.79	0.0%	8.0%	8.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$2.30	\$2.30
4530	Cystic Fibrosis Agents	\$0.00	\$10,135.43	\$10,135.43	0.0	0.7	0.7	\$0.00	\$0.56	\$0.56	0.0%	0.0%	0.0%	24	30.0%	30.0%	30.0%	42	\$0.00	\$1.40	\$1.40
1950	Monoclonal Antibodies	\$0.00	\$2,289.65	\$2,289.65	0.0	4.4	4.4	\$0.00	\$0.84	\$0.84	0.0%	0.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.84	\$0.84
3010	Growth Hormones	\$0.00	\$4,422.66	\$4,422.66	0.0	2.0	2.0	\$0.00	\$0.74	\$0.74	0.0%	8.0%	8.0%	24	2.0%	2.0%	2.0%	42	\$0.00	\$0.93	\$0.93
3090	Metabolic Modifiers	\$70.57	\$17,266.58	\$4,003.97	0.8	0.2	1.1	\$0.00	\$0.35	\$0.36	0.0%	2.0%	2.0%	24	10.0%	10.0%	10.0%	42	\$0.01	\$0.51	\$0.52
9027	Atopic Dermatitis - Monoclonal Antibodies	\$0.00	\$3,356.71	\$3,356.71	0.0	0.9	0.9	\$0.00	\$0.25	\$0.25	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.26	\$0.26
6629	Autoimmune Agents	\$0.00	\$4,727.88	\$4,727.88	0.0	0.8	0.8	\$0.00	\$0.33	\$0.33	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.34	\$0.34
3030	Corticotropin	\$0.00	\$62,258.43	\$62,258.43	0.0	0.1	0.1	\$0.00	\$0.33	\$0.33	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.34	\$0.34
3008	LHRH/GnRH Agonist Analog Pituitary Suppressants	\$0.00	\$6,785.29	\$6,785.29	0.0	0.3	0.3	\$0.00	\$0.18	\$0.18	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.18	\$0.18
2153	Antineoplastic Enzyme Inhibitors	\$0.00	\$14,490.14	\$14,490.14	0.0	0.1	0.1	\$0.00	\$0.10	\$0.10	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.10	\$0.10
6646	Interleukin-1 Blockers	\$0.00	\$16,066.30	\$16,066.30	0.0	0.1	0.1	\$0.00	\$0.11	\$0.11	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.11	\$0.11
9025	Antipsoriatics	\$137.21	\$7,644.51	\$5,204.63	0.0	0.1	0.1	\$0.00	\$0.05	\$0.05	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06
7217	GABA Modulators	\$7,016.77	\$8,828.18	\$7,036.90	0.3	0.0	0.3	\$0.16	\$0.00	\$0.17	0.0%	2.0%	0.0%	24	0.0%	0.0%	0.0%	42	\$0.16	\$0.00	\$0.17
4460	Antihistaminic - Monoclonal Antibodies	\$0.00	\$3,387.22	\$3,387.22	0.0	0.6	0.6	\$0.00	\$0.17	\$0.17	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.18	\$0.18
5250	Inflammatory Bowel Agents	\$36.14	\$734.11	\$462.13	0.5	0.8	1.3	\$0.00	\$0.05	\$0.05	0.0%	2.0%	1.9%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.05	\$0.05
2170	Antineoplastics Misc.	\$28.57	\$54,661.87	\$1,474.74	1.0	0.0	1.1	\$0.00	\$0.13	\$0.13	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.13	\$0.14
8580	Hereditary Angioedema Agents	\$0.00	\$13,063.14	\$13,063.14	0.0	0.0	0.0	\$0.00	\$0.02	\$0.02	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.02	\$0.02
9310	Antidotes - Chelating Agents	\$0.00	\$8,781.45	\$8,781.45	0.0	0.1	0.1	\$0.00	\$0.11	\$0.11	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.11	\$0.11
1235C	Hepatitis C Agents	\$0.00	\$28,617.70	\$28,617.70	0.0	0.0	0.0	\$0.00	\$0.06	\$0.06	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06
2730	Diabetic Other	\$0.00	\$366.86	\$366.86	0.0	1.9	1.9	\$0.00	\$0.06	\$0.06	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.06	\$0.06
6240	Multiple Sclerosis Agents	\$0.00	\$7,195.36	\$7,195.36	0.0	0.1	0.1	\$0.00	\$0.05	\$0.05	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.05	\$0.05
4014	Pulmonary Arterial Hypertension	\$2,551.77	\$7,033.77	\$3,758.46	0.1	0.0	0.2	\$0.03	\$0.03	\$0.05	0.0%	2.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.03	\$0.03	\$0.05
1910	Immune Serums	\$0.00	\$3,713.97	\$3,713.97	0.0	0.1	0.1	\$0.00	\$0.04	\$0.04	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.04	\$0.04
0700	Aminoglycosides	\$1,508.99	\$5,959.07	\$2,749.17	0.1	0.1	0.2	\$0.02	\$0.03	\$0.04	0.0%	2.0%	1.2%	24	0.0%	0.0%	0.0%	42	\$0.02	\$0.03	\$0.04
8240	Erythropoietin Agents	\$0.00	\$3,517.80	\$3,517.80	0.0	0.1	0.1	\$0.00	\$0.04	\$0.04	0.0%	2.0%	2.0%	24	0.0%	0.0%	0.0%	42	\$0.00	\$0.05	\$0.05
Other Specialty		\$54.85	\$1,151.97	\$102.95	15.1	0.7	15.8	\$0.07	\$0.07	\$0.14	0.0%	2.0%	1.0%	24	0.0%	0.0%	0.0%	42	\$0.07	\$0.07	\$0.14
Total Specialty		\$189.28	\$4,145.03	\$2,037.01	18.0	15.8	33.9	\$0.28	\$5.46	\$5.75	0.0%	3.6%	3.5%	24	0.19%	10.24%	9.8				

* Composite utilization trends include mix component of trends.

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

		Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult	Pregnant Women	SSI / Disabled Newborn	Rate Cell Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP
Age Distribution ¹												
a1	Newborn	0.0%	0.0%	0.0%	0.0%	89.6%	100.0%	90.0%	0.0%	0.0%	0.0%	0.0%
a2	Children 1-4	3.7%	0.0%	0.0%	0.0%	10.4%	0.0%	10.0%	20.3%	1.2%	25.2%	0.0%
a3	Children 5-11	11.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	42.4%	30.5%	37.7%	41.8%
a4	Children 12-17	10.6%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%	33.9%	65.6%	32.3%	50.6%
a5	Non-Children	74.3%	100.0%	100.0%	99.5%	0.0%	0.0%	0.0%	3.3%	2.6%	4.8%	7.7%
Starting Vaccine % ¹												
b1	Newborn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
b2	Children 1-4	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
b3	Children 5-11	3.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.2%	3.1%	2.6%	3.5%
b4	Children 12-17	21.8%	0.0%	0.0%	21.3%	0.0%	0.0%	0.0%	22.4%	26.1%	22.4%	29.0%
b5	Non-Children	31.6%	42.7%	22.7%	16.3%	0.0%	0.0%	0.0%	17.8%	23.5%	23.3%	28.6%
c = sum(a × b)	Rate-Cell Specific	26.1%	42.7%	22.7%	16.3%	0.0%	0.0%	0.0%	10.4%	18.7%	9.3%	18.3%
Vaccine Target % ²												
d1	Newborn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
d1	Children 1-4	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%
d2	Children 5-11	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%	15.0%
d3	Children 12-17	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%	40.0%
d4	Non-Children	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%	60.0%
e = sum(a × d)	Rate-Cell Specific	50.9%	60.0%	60.0%	59.9%	1.0%	0.0%	1.0%	24.0%	32.5%	24.0%	31.1%
Baseline Vaccinations												
f = max (e - c, 0)	Vaccination % to Increase	24.8%	17.3%	37.3%	43.6%	1.0%	0.0%	1.0%	13.5%	13.9%	14.6%	12.8%
g	Doses Per Baseline Vaccination	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
h = f × g	Base Doses Per Member	0.495	0.345	0.746	0.871	0.021	0.000	0.020	0.271	0.277	0.292	0.255
% of Members Getting Boosted ³												
i1 = d1 × 25%	Newborn	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
i2 = d2 × 25%	Children 1-4	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%
i3 = d3 × 25%	Children 5-11	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%	3.75%
i4 = d4 × 25%	Children 12-17	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%	10.00%
i5 = d5 × 25%	Non-Children	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%	15.00%
j = sum(a × i)	Rate-Cell Specific	12.72%	15.00%	15.00%	14.97%	0.26%	0.00%	0.25%	5.99%	8.13%	5.99%	7.77%
Booster Vaccinations												
k	Doses per Booster Vaccination	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
l = j × k	Booster Doses per Member	0.254	0.300	0.300	0.299	0.005	0.000	0.005	0.120	0.163	0.120	0.155
Baseline + Booster Calculations												
m = h + l	Total Doses per Member	0.750	0.645	1.046	1.171	0.026	0.000	0.025	0.391	0.440	0.412	0.411
n	Cost per Dose	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87	\$35.87
o = m × n	Cost per Member	\$26.90	\$23.15	\$37.52	\$42.00	\$0.93	\$0.00	\$0.90	\$14.01	\$15.79	\$14.79	\$14.74
p = o / 12	Cost PMPM	\$2.24	\$1.93	\$3.13	\$3.50	\$0.08	\$0.00	\$0.07	\$1.17	\$1.32	\$1.23	\$1.23
TPL Impact												
q	TPL Paid %	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%
r = p × (1 - q)	Cost PMPM - Net of TPL	\$1.12	\$0.96	\$1.56	\$1.75	\$0.04	\$0.00	\$0.04	\$0.58	\$0.66	\$0.62	\$0.61

¹ Calculated as of December 2021.
² Based on statewide Mississippi vaccination rates as of Feb 23, 2022. See Exhibit 9b row 'e' for more information.
³ Assuming 25% of vaccinated members will receive booster shots in SFY 2023. See Exhibit 9b row 'h' (18 to 64 age category) for more information.

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

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

¹ Based on source, updated as of February 23, 2022: https://msdh.ms.gov/msdhsite/_static/resources/12130.pdf.

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

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

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

² Calculated as of December 2021.

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

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

	Medical Portion of Capitation Rate	COVID-19 Vaccine Administration	Family Planning (Non-waiver)	Breast and Cervical Cancer	Indian Health Services	Home Health Services	Rehab Services	Private Duty Nursing
Non-Newborn SSI / Disabled	\$1,079.30	\$1.12	\$0.84	\$0.13	\$0.34	\$2.22	\$28.13	\$6.66
North Region	985.40	1.02	0.77	0.12	0.31	2.02	25.68	6.08
Central Region	1,133.27	1.18	0.88	0.14	0.35	2.33	29.54	6.99
South Region	1,122.47	1.17	0.87	0.14	0.35	2.31	29.26	6.93
Breast and Cervical Cancer	\$3,488.34	\$0.96	\$0.35	\$3,487.03	\$0.00	\$0.00	\$0.00	\$0.00
North Region	3,184.85	0.88	0.32	3,183.66	0.00	0.00	0.00	0.00
Central Region	3,662.76	1.01	0.36	3,661.38	0.00	0.00	0.00	0.00
South Region	3,627.87	1.00	0.36	3,626.51	0.00	0.00	0.00	0.00
MA Adult	\$490.24	\$1.56	\$5.81	\$0.00	\$0.27	\$0.26	\$1.09	\$0.00
North Region	462.79	1.48	5.49	0.00	0.26	0.25	1.03	0.00
Central Region	509.85	1.63	6.05	0.00	0.28	0.27	1.14	0.00
South Region	495.63	1.58	5.88	0.00	0.28	0.27	1.10	0.00
Pregnant Women	\$1,031.58	\$1.75	\$15.74	\$0.00	\$0.01	\$0.18	\$0.24	\$0.00
North Region	973.81	1.65	14.86	0.00	0.01	0.17	0.23	0.00
Central Region	1,072.84	1.82	16.37	0.00	0.01	0.19	0.25	0.00
South Region	1,042.93	1.77	15.92	0.00	0.01	0.18	0.25	0.00
SSI / Disabled Newborn	\$8,000.01	\$0.04	\$0.00	\$0.00	\$0.10	\$4.66	\$0.00	\$111.81
North Region	7,856.01	0.04	0.00	0.00	0.10	4.58	0.00	109.80
Central Region	8,152.01	0.04	0.00	0.00	0.10	4.75	0.00	113.94
South Region	7,968.01	0.04	0.00	0.00	0.10	4.64	0.00	111.37
Non-SSI Newborns 0 to 2 Months	\$1,834.16	\$0.00	\$0.00	\$0.00	\$1.96	\$0.17	\$0.00	\$0.13
North Region	1,801.15	0.00	0.00	0.00	1.92	0.17	0.00	0.13
Central Region	1,869.01	0.00	0.00	0.00	2.00	0.18	0.00	0.13
South Region	1,826.83	0.00	0.00	0.00	1.95	0.17	0.00	0.13
Non-SSI Newborns 3 to 12 Months	\$248.67	\$0.04	\$0.00	\$0.00	\$2.20	\$0.06	\$0.00	\$0.02
North Region	244.20	0.04	0.00	0.00	2.16	0.06	0.00	0.02
Central Region	253.40	0.04	0.00	0.00	2.25	0.06	0.00	0.02
South Region	247.68	0.04	0.00	0.00	2.19	0.06	0.00	0.02
Foster Care	\$639.31	\$0.58	\$1.25	\$0.00	\$0.02	\$0.02	\$19.49	\$2.24
North Region	627.80	0.57	1.23	0.00	0.02	0.02	19.14	2.20
Central Region	651.46	0.59	1.28	0.00	0.02	0.02	19.86	2.29
South Region	636.75	0.58	1.25	0.00	0.02	0.02	19.41	2.23
MYPAC	\$3,735.60	\$0.66	\$3.42	\$0.00	\$0.00	\$0.00	\$4.50	\$0.00
North Region	3,668.36	0.65	3.35	0.00	0.00	0.00	4.42	0.00
Central Region	3,806.58	0.67	3.48	0.00	0.00	0.00	4.58	0.00
South Region	3,720.66	0.66	3.40	0.00	0.00	0.00	4.48	0.00
MA Children	\$200.39	\$0.62	\$1.06	\$0.00	\$0.36	\$0.01	\$6.69	\$0.10
North Region	196.78	0.61	1.04	0.00	0.35	0.01	6.57	0.10
Central Region	204.20	0.63	1.08	0.00	0.37	0.01	6.82	0.10
South Region	199.59	0.61	1.05	0.00	0.36	0.01	6.67	0.10
Quasi-CHIP	\$202.70	\$0.61	\$1.74	\$0.00	\$0.15	\$0.01	\$4.35	\$0.03
North Region	199.05	0.60	1.71	0.00	0.15	0.01	4.27	0.02
Central Region	206.55	0.63	1.77	0.00	0.16	0.01	4.43	0.03
South Region	201.89	0.61	1.73	0.00	0.15	0.01	4.33	0.03

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

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non- Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$48,435,074	\$104,104	\$5,442,913	\$0	\$343,640	\$6,901	\$1,693,358	\$2,682,624	\$5,150,631	\$461,889	\$52,927	\$10,055,941	\$795,279	\$75,225,279
Surgical	\$65,321,875	\$118,200	\$11,684,562	\$0	\$716,881	\$9,556	\$5,219,189	\$7,005,471	\$4,096,276	\$937,606	\$52,495	\$12,191,552	\$1,098,197	\$108,451,860
Maternity / Deliveries	\$2,867,588	\$0	\$1,900,233	\$16,215,238	\$4,373,883	\$65,015,599	\$25,948,640	\$92,276,515	\$50,676	\$89,871	\$7,420	\$3,871,404	\$425,563	\$213,042,630
Psychiatric / Substance Abuse	\$24,553,589	\$0	\$3,837,268	\$0	\$252,661	\$0	\$0	\$0	\$0	\$7,429,710	\$1,448,523	\$20,091,900	\$1,897,200	\$59,510,851
Skilled Nursing Facility	\$1,429	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,429
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Inpatient Behavioral Health Total	\$4,535,758	\$0	\$57,619	\$0	\$13,890	\$0	\$0	\$0	\$0	\$5,974,164	\$841,403	\$13,960,748	\$1,269,806	\$26,653,386
Inpatient Facility Total	\$141,179,556	\$222,304	\$22,864,976	\$16,215,238	\$5,687,066	\$65,032,056	\$32,861,187	\$101,964,610	\$9,297,582	\$8,919,076	\$1,561,366	\$46,210,797	\$4,216,238	\$456,232,050
Outpatient Facility Services														
Emergency Room	\$27,884,653	\$34,872	\$17,537,158	\$10,344	\$4,788,306	\$33,989	\$344,960	\$1,803,984	\$6,916,309	\$701,113	\$105,560	\$35,238,374	\$2,696,968	\$98,096,592
Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$153	\$1,007	\$0	\$0	\$2,761	\$47	\$3,968
Radiology / Pathology	\$24,633,878	\$433,441	\$11,205,120	\$5,996	\$3,501,878	\$28,979	\$177,860	\$642,311	\$2,171,543	\$402,864	\$50,318	\$14,137,765	\$1,431,788	\$58,823,740
Psychiatric / Alcohol & Drug Abuse	\$6,550,059	\$0	\$6,336	\$0	\$113	\$0	\$0	\$0	\$0	\$948,196	\$847	\$16,326,373	\$884,669	\$24,716,592
Pharmacy	\$30,547,093	\$725,032	\$6,196,219	\$4,373	\$1,479,330	\$22,192	\$952,594	\$95,510	\$600,204	\$82,282	\$4,734	\$4,711,039	\$383,072	\$45,803,673
Other	\$61,787,364	\$334,367	\$22,240,524	\$8,858	\$5,199,431	\$32,716	\$946,988	\$1,313,654	\$4,506,204	\$1,247,577	\$98,795	\$38,012,865	\$3,236,112	\$138,965,456
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Outpatient Behavioral Health Total	\$6,601,420	\$0	\$6,366	\$0	\$113	\$0	\$0	\$0	\$0	\$948,968	\$847	\$16,416,431	\$890,515	\$24,864,660
Outpatient Facility Total	\$151,403,046	\$1,527,712	\$57,185,357	\$29,572	\$14,969,058	\$117,876	\$2,422,403	\$3,855,612	\$14,195,265	\$3,382,032	\$260,254	\$108,429,177	\$8,632,656	\$366,410,021
Physician Services														
IP Visits	\$11,944,032	\$17,018	\$1,697,120	\$53,574	\$406,404	\$199,271	\$6,925,645	\$11,460,127	\$1,518,430	\$331,878	\$76,829	\$2,727,389	\$231,414	\$37,589,131
IP Surgery	\$4,599,885	\$24,869	\$1,203,205	\$30,823	\$119,077	\$100,908	\$409,078	\$469,939	\$328,176	\$47,682	\$1,339	\$1,039,952	\$101,709	\$8,476,641
Office / Home Visits	\$35,248,846	\$111,559	\$18,356,126	\$639	\$1,386,626	\$4,727	\$404,424	\$2,885,824	\$9,296,952	\$1,916,983	\$147,522	\$64,074,393	\$6,258,566	\$140,093,187
Preventive Exams & Immunizations	\$4,854,763	\$14,664	\$7,336,040	\$160,969	\$14,172,797	\$535,841	\$225,656	\$8,684,093	\$9,250,573	\$698,145	\$37,479	\$21,121,093	\$1,553,947	\$68,646,061
Urgent Care Visits	\$240,165	\$89	\$386,294	\$0	\$42,442	\$86	\$654	\$1,225	\$102,610	\$57,244	\$1,194	\$1,898,376	\$204,644	\$2,935,023
ER Visits and Observation Care	\$8,607,132	\$11,337	\$5,180,261	\$16,559	\$1,616,289	\$71,645	\$110,808	\$563,487	\$2,171,764	\$202,094	\$34,795	\$10,602,353	\$798,112	\$29,986,637
OP Surgery	\$11,827,398	\$120,434	\$6,547,683	\$1,188	\$471,617	\$2,373	\$95,016	\$204,153	\$1,046,199	\$389,796	\$22,422	\$12,626,715	\$1,277,557	\$34,632,551
Physical Therapy	\$5,839,514	\$16,095	\$1,141,257	\$0	\$33,596	\$95	\$106,266	\$8,580	\$266,853	\$472,004	\$15,918	\$7,085,492	\$515,540	\$15,501,210
Psychiatric / Substance Abuse	\$31,626,509	\$4,919	\$3,023,869	\$809	\$157,142	\$772	\$115	\$0	\$2,930	\$3,611,333	\$15,761,452	\$30,423,156	\$2,642,606	\$87,255,614
Radiology / Pathology	\$13,958,987	\$146,370	\$9,477,856	\$157,176	\$7,002,857	\$630,921	\$180,960	\$406,786	\$1,152,715	\$300,861	\$42,644	\$11,014,053	\$1,191,044	\$45,663,229
Vision, Hearing, and Speech Exams	\$3,748,914	\$6,999	\$2,120,518	\$142	\$444,105	\$481	\$36,523	\$24,217	\$93,244	\$393,744	\$33,455	\$11,109,971	\$1,477,406	\$19,489,718
Other	\$35,918,219	\$583,024	\$5,903,911	\$4,016,253	\$1,338,344	\$16,660,554	\$455,927	\$413,214	\$638,607	\$687,844	\$32,374	\$7,436,087	\$1,006,576	\$75,090,934
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Physician Behavioral Health Total	\$44,614,846	\$5,750	\$4,173,051	\$556	\$198,667	\$708	\$4,796	\$7,359	\$60,453	\$4,037,834	\$15,766,787	\$33,645,151	\$2,957,585	\$105,473,542
Physician Total	\$168,414,364	\$1,057,378	\$62,374,141	\$4,438,132	\$27,191,294	\$18,207,673	\$8,951,073	\$25,121,646	\$25,869,052	\$9,109,609	\$16,207,422	\$181,159,031	\$17,259,121	\$565,359,937
Pharmacy Services														
Pharmacy	\$213,067,045	\$443,592	\$52,581,793	\$69,669	\$7,257,950	\$302,281	\$3,083,773	\$644,595	\$6,551,721	\$5,631,821	\$877,813	\$106,350,231	\$14,063,633	\$410,925,917
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Pharmacy Total	\$213,067,045	\$443,592	\$52,581,793	\$69,669	\$7,257,950	\$302,281	\$3,083,773	\$644,595	\$6,551,721	\$5,631,821	\$877,813	\$106,350,231	\$14,063,633	\$410,925,917
Dental Services														
Dental	\$7,986,259	\$8,606	\$4,261,392	\$153	\$842,570	\$372	\$3,712	\$42,736	\$274,952	\$2,291,896	\$163,621	\$84,579,993	\$11,012,096	\$111,468,358
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Dental Total	\$7,986,259	\$8,606	\$4,261,392	\$153	\$842,570	\$372	\$3,712	\$42,736	\$274,952	\$2,291,896	\$163,621	\$84,579,993	\$11,012,096	\$111,468,358
Other Services														
Ambulance	\$8,108,634	\$5,581	\$1,975,858	\$65,865	\$537,840	\$226,651	\$234,412	\$1,043,198	\$658,340	\$117,961	\$31,672	\$3,250,411	\$231,159	\$16,487,583
Non-Emergency Transportation	\$11,127,992	\$27,075	\$1,694,657	\$7,764	\$428,716	\$14,853	\$202,704	\$76,817	\$220,043	\$56,243	\$0	\$2,232,564	\$95,602	\$16,185,030
DME	\$15,229,992	\$18,411	\$1,485,459	\$722	\$206,111	\$2,743	\$734,099	\$236,503	\$507,226	\$271,329	\$15,055	\$3,655,661	\$604,117	\$22,967,429
Glasses / Contacts	\$1,215,312	\$1,884	\$757,182	\$0	\$169,140	\$173	\$180	\$152,715	\$173	\$152,715	\$17,172	\$4,028,936	\$573,170	\$6,917,676
Other	\$9,591,836	\$1,289	\$149,621	\$0	\$2,439	\$74	\$1,144,476	\$10,828	\$77,087	\$114,473	\$62,868	\$727,517	\$74,791	\$11,957,299
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Other Behavioral Health Total	\$606,611	\$166	\$72,511	\$0	\$2,219	\$74	\$0	\$0	\$0	\$22,291	\$368	\$421,316	\$38,278	\$1,163,834
Other Total	\$45,273,767	\$54,241	\$6,062,776	\$74,351	\$1,344,247	\$244,494	\$2,315,870	\$1,367,385	\$1,464,469	\$77,121	\$126,767	\$13,895,089	\$1,578,839	\$74,515,017
Total Behavioral Health	\$56,358,635	\$5,916	\$4,309,547	\$556	\$214,889	\$781	\$4,796	\$7,359	\$60,453	\$10,983,257	\$16,609,404	\$64,443,646	\$5,156,184	\$158,155,422
Grand Total	\$727,324,037	\$3,313,833	\$205,330,435	\$20,827,115	\$57,292,185	\$83,904,752	\$49,638,019	\$132,996,584	\$57,653,042	\$30,047,155	\$19,197,244	\$540,624,317	\$56,762,583	\$1,984,911,301

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

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

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
PMPM Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$63.00	\$95.51	\$10.66	\$0.00	\$2.54	\$0.05	\$268.32	\$35.25	\$19.90	\$5.98	\$9.68	\$3.17	\$2.38	\$14.08
Surgical	\$84.96	\$108.44	\$22.89	\$0.00	\$5.30	\$0.07	\$827.00	\$92.06	\$15.83	\$12.15	\$9.60	\$3.85	\$3.29	\$20.30
Maternity / Deliveries	\$3.73	\$0.00	\$3.72	\$31.76	\$32.32	\$480.40	\$4,111.65	\$1,212.57	\$0.20	\$1.16	\$1.36	\$1.22	\$1.27	\$39.87
Psychiatric / Substance Abuse	\$31.94	\$0.00	\$7.52	\$0.00	\$1.87	\$0.00	\$0.00	\$0.00	\$0.00	\$96.25	\$264.86	\$6.34	\$5.68	\$11.14
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Inpatient Behavioral Health Total	\$5.90	\$0.00	\$0.11	\$0.00	\$0.10	\$0.00	\$0.00	\$0.00	\$0.00	\$77.39	\$153.85	\$4.40	\$3.80	\$4.99
Inpatient Facility Total	\$183.63	\$203.95	\$44.79	\$31.76	\$42.02	\$480.52	\$5,206.97	\$1,339.88	\$35.93	\$115.54	\$285.49	\$14.58	\$12.62	\$85.38
Outpatient Facility Services														
Emergency Room	\$36.27	\$31.99	\$34.35	\$0.02	\$35.38	\$0.25	\$54.66	\$23.71	\$26.73	\$9.08	\$19.30	\$11.12	\$8.07	\$18.36
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$32.04	\$397.65	\$21.95	\$0.01	\$25.88	\$0.21	\$28.18	\$8.44	\$8.39	\$5.22	\$9.20	\$4.46	\$4.28	\$11.01
Psychiatric / Alcohol & Drug Abuse	\$8.52	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.28	\$0.15	\$5.15	\$2.65	\$4.63
Pharmacy	\$39.73	\$665.17	\$12.14	\$0.01	\$10.93	\$0.16	\$150.94	\$1.26	\$2.32	\$1.07	\$0.87	\$1.49	\$1.15	\$8.57
Other	\$80.37	\$306.76	\$43.57	\$0.02	\$38.42	\$0.24	\$150.05	\$17.26	\$17.41	\$16.16	\$18.06	\$11.99	\$9.68	\$26.01
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Outpatient Behavioral Health Total	\$8.59	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.29	\$0.15	\$5.18	\$2.66	\$4.65
Outpatient Facility Total	\$196.93	\$1,401.57	\$112.02	\$0.06	\$110.61	\$0.87	\$383.84	\$50.67	\$54.85	\$43.81	\$47.59	\$34.21	\$25.83	\$68.57
Physician Services														
IP Visits	\$15.54	\$15.61	\$3.32	\$0.10	\$3.00	\$1.47	\$1,097.39	\$150.59	\$5.87	\$4.30	\$14.05	\$0.86	\$0.69	\$7.03
IP Surgery	\$5.98	\$22.82	\$2.36	\$0.06	\$0.88	\$0.75	\$64.82	\$6.18	\$1.27	\$0.62	\$0.24	\$0.33	\$0.30	\$1.59
Office / Home Visits	\$45.85	\$102.35	\$35.96	\$0.00	\$10.25	\$0.03	\$64.08	\$37.92	\$35.92	\$24.83	\$26.97	\$20.22	\$18.73	\$26.22
Preventive Exams & Immunizations	\$6.31	\$13.45	\$14.37	\$0.32	\$104.72	\$3.96	\$35.76	\$114.11	\$35.75	\$9.04	\$6.85	\$6.66	\$4.65	\$12.85
Urgent Care Visits	\$0.31	\$0.08	\$0.76	\$0.00	\$0.31	\$0.00	\$0.10	\$0.02	\$0.40	\$0.74	\$0.22	\$0.60	\$0.61	\$0.55
ER Visits and Observation Care	\$11.20	\$10.40	\$10.15	\$0.03	\$11.94	\$0.53	\$17.56	\$7.40	\$8.39	\$2.62	\$6.36	\$3.35	\$2.39	\$5.61
OP Surgery	\$15.38	\$110.49	\$12.83	\$0.00	\$3.48	\$0.02	\$15.06	\$2.68	\$4.04	\$5.05	\$4.10	\$3.98	\$3.82	\$6.48
Physical Therapy	\$7.60	\$14.77	\$2.24	\$0.00	\$0.25	\$0.00	\$16.84	\$0.11	\$1.03	\$6.11	\$2.91	\$2.24	\$1.54	\$2.90
Psychiatric / Substance Abuse	\$41.14	\$4.51	\$5.92	\$0.00	\$1.16	\$0.01	\$0.02	\$0.00	\$0.01	\$46.78	\$2,881.96	\$9.60	\$7.91	\$16.33
Radiology / Pathology	\$18.16	\$134.28	\$18.57	\$0.31	\$51.74	\$4.66	\$28.67	\$5.35	\$4.45	\$3.90	\$7.80	\$3.48	\$3.56	\$8.55
Vision, Hearing, and Speech Exams	\$4.88	\$6.42	\$4.15	\$0.00	\$3.28	\$0.00	\$5.79	\$0.32	\$0.36	\$5.10	\$6.12	\$3.51	\$4.42	\$3.65
Other	\$46.72	\$534.88	\$11.56	\$7.87	\$9.89	\$123.10	\$72.24	\$5.43	\$2.47	\$8.91	\$5.92	\$2.35	\$3.01	\$14.05
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Physician Behavioral Health Total	\$58.03	\$5.28	\$8.17	\$0.00	\$1.47	\$0.01	\$0.76	\$0.10	\$0.23	\$52.31	\$2,882.94	\$10.62	\$8.85	\$19.74
Physician Total	\$219.05	\$970.07	\$122.18	\$8.69	\$200.92	\$134.54	\$1,418.33	\$330.11	\$99.96	\$118.01	\$2,963.51	\$57.16	\$51.64	\$105.81
Pharmacy Services														
Pharmacy	\$277.13	\$406.97	\$103.00	\$0.14	\$53.63	\$2.23	\$488.63	\$8.47	\$25.32	\$72.96	\$160.51	\$33.55	\$42.08	\$76.91
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Pharmacy Total	\$277.13	\$406.97	\$103.00	\$0.14	\$53.63	\$2.23	\$488.63	\$8.47	\$25.32	\$72.96	\$160.51	\$33.55	\$42.08	\$76.91
Dental Services														
Dental	\$10.39	\$7.90	\$8.35	\$0.00	\$6.23	\$0.00	\$0.59	\$0.56	\$1.06	\$29.69	\$29.92	\$26.69	\$32.95	\$20.86
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dental Total	\$10.39	\$7.90	\$8.35	\$0.00	\$6.23	\$0.00	\$0.59	\$0.56	\$1.06	\$29.69	\$29.92	\$26.69	\$32.95	\$20.86
Other Services														
Ambulance	\$10.55	\$5.12	\$3.87	\$0.13	\$3.97	\$1.67	\$37.14	\$13.71	\$2.54	\$1.53	\$5.79	\$1.03	\$0.69	\$3.09
Non-Emergency Transportation	\$14.47	\$24.84	\$3.32	\$0.02	\$3.17	\$0.11	\$32.12	\$1.01	\$0.85	\$0.73	\$0.00	\$0.70	\$0.29	\$3.03
DME	\$19.81	\$16.89	\$2.91	\$0.00	\$1.52	\$0.02	\$116.32	\$3.11	\$1.96	\$3.51	\$2.75	\$1.15	\$1.81	\$4.30
Glasses / Contacts	\$1.58	\$1.73	\$1.48	\$0.00	\$1.25	\$0.00	\$0.00	\$0.00	\$0.01	\$1.98	\$3.14	\$1.27	\$1.72	\$1.29
Other	\$12.48	\$1.18	\$0.29	\$0.00	\$0.02	\$0.00	\$181.35	\$0.14	\$0.30	\$1.48	\$11.50	\$0.23	\$0.22	\$2.24
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Behavioral Health Total	\$0.79	\$0.15	\$0.14	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.29	\$0.07	\$0.13	\$0.11	\$0.22
Other Total	\$58.89	\$49.76	\$11.88	\$0.15	\$9.93	\$1.81	\$366.96	\$17.97	\$5.66	\$9.23	\$23.18	\$4.38	\$4.72	\$13.95
Total Behavioral Health	\$73.30	\$5.43	\$8.44	\$0.00	\$1.59	\$0.01	\$0.76	\$0.10	\$0.23	\$142.28	\$3,037.01	\$20.33	\$15.43	\$29.60
Grand Total	\$946.01	\$3,040.21	\$402.21	\$40.80	\$423.33	\$619.97	\$7,865.32	\$1,747.66	\$222.78	\$389.25	\$3,510.19	\$170.57	\$169.85	\$371.48

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

Exhibit 11C Mississippi Division of Medicaid Summary of CY 2018* MississippiCAN Encounter and FFS Claims Summary of Total Costs by Rate Cell														
Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
% of Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	6.7%	3.1%	2.7%	0.0%	0.6%	0.0%	3.4%	2.0%	8.9%	1.5%	0.3%	1.9%	1.4%	3.8%
Surgical	9.0%	3.6%	5.7%	0.0%	1.3%	0.0%	10.5%	5.3%	7.1%	3.1%	0.3%	2.3%	1.9%	5.5%
Maternity / Deliveries	0.4%	0.0%	0.9%	77.9%	7.6%	77.5%	52.3%	69.4%	0.1%	0.3%	0.0%	0.7%	0.7%	10.7%
Psychiatric / Substance Abuse	3.4%	0.0%	1.9%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	24.7%	7.5%	3.7%	3.0%	3.0%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Inpatient Behavioral Health Total	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	19.9%	4.4%	2.6%	2.2%	1.3%
Inpatient Facility Total	19.4%	6.7%	11.1%	77.9%	9.9%	77.5%	66.2%	76.7%	16.1%	29.7%	8.1%	8.5%	7.4%	23.0%
Outpatient Facility Services														
Emergency Room	3.8%	1.1%	8.5%	0.0%	8.4%	0.0%	0.7%	1.4%	12.0%	2.3%	0.5%	6.5%	4.8%	4.9%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.4%	13.1%	5.5%	0.0%	6.1%	0.0%	0.4%	0.5%	3.8%	1.3%	0.3%	2.6%	2.5%	3.0%
Psychiatric / Alcohol & Drug Abuse	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	3.2%	0.0%	3.0%	1.6%	1.2%
Pharmacy	4.2%	21.9%	3.0%	0.0%	2.6%	0.0%	1.9%	0.1%	1.0%	0.3%	0.0%	0.9%	0.7%	2.3%
Other	8.5%	10.1%	10.8%	0.0%	9.1%	0.0%	1.9%	1.0%	7.8%	4.2%	0.5%	7.0%	5.7%	7.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Outpatient Behavioral Health Total	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	3.2%	0.0%	3.0%	1.6%	1.3%
Outpatient Facility Total	20.8%	46.1%	27.9%	0.1%	26.1%	0.1%	4.9%	2.9%	24.6%	11.3%	1.4%	20.1%	15.2%	18.5%
Physician Services														
IP Visits	1.6%	0.5%	0.8%	0.3%	0.7%	0.2%	14.0%	8.6%	2.6%	1.1%	0.4%	0.5%	0.4%	1.9%
IP Surgery	0.6%	0.8%	0.6%	0.1%	0.2%	0.1%	0.8%	0.4%	0.6%	0.2%	0.0%	0.2%	0.2%	0.4%
Office / Home Visits	4.8%	3.4%	8.9%	0.0%	2.4%	0.0%	0.8%	2.2%	16.1%	6.4%	0.8%	11.9%	11.0%	7.1%
Preventive Exams & Immunizations	0.7%	0.4%	3.6%	0.8%	24.7%	0.6%	0.5%	6.5%	16.0%	2.3%	0.2%	3.9%	2.7%	3.5%
Urgent Care Visits	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.2%	0.0%	0.4%	0.4%	0.1%
ER Visits and Observation Care	1.2%	0.3%	2.5%	0.1%	2.8%	0.1%	0.2%	0.4%	3.8%	0.7%	0.2%	2.0%	1.4%	1.5%
OP Surgery	1.6%	3.6%	3.2%	0.0%	0.8%	0.0%	0.2%	0.2%	1.8%	1.3%	0.1%	2.3%	2.3%	1.7%
Physical Therapy	0.8%	0.5%	0.6%	0.0%	0.1%	0.0%	0.2%	0.0%	0.5%	1.6%	0.1%	1.3%	0.9%	0.8%
Psychiatric / Substance Abuse	4.3%	0.1%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	12.0%	82.1%	5.6%	4.7%	4.4%
Radiology / Pathology	1.9%	4.4%	4.6%	0.8%	12.2%	0.8%	0.4%	0.3%	2.0%	1.0%	0.2%	2.0%	2.1%	2.3%
Vision, Hearing, and Speech Exams	0.5%	0.2%	1.0%	0.0%	0.8%	0.0%	0.1%	0.0%	0.2%	1.3%	0.2%	2.1%	2.6%	1.0%
Other	4.9%	17.6%	2.9%	19.3%	2.3%	19.9%	0.9%	0.3%	1.1%	2.3%	0.2%	1.4%	1.8%	3.8%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Physician Behavioral Health Total	6.1%	0.2%	2.0%	0.0%	0.3%	0.0%	0.0%	0.0%	0.1%	13.4%	82.1%	6.2%	5.0%	5.3%
Physician Total	23.2%	31.9%	30.4%	21.3%	47.5%	21.7%	18.0%	18.9%	44.9%	30.3%	84.4%	33.5%	30.4%	28.5%
Pharmacy Services														
Pharmacy	29.3%	13.4%	25.6%	0.3%	12.7%	0.4%	6.2%	0.5%	11.4%	18.7%	4.6%	19.7%	24.8%	20.7%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pharmacy Total	29.3%	13.4%	25.6%	0.3%	12.7%	0.4%	6.2%	0.5%	11.4%	18.7%	4.6%	19.7%	24.8%	20.7%
Dental Services														
Dental	1.1%	0.3%	2.1%	0.0%	1.5%	0.0%	0.0%	0.0%	0.5%	7.6%	0.9%	15.6%	19.4%	5.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dental Total	1.1%	0.3%	2.1%	0.0%	1.5%	0.0%	0.0%	0.0%	0.5%	7.6%	0.9%	15.6%	19.4%	5.6%
Other Services														
Ambulance	1.1%	0.2%	1.0%	0.3%	0.9%	0.3%	0.5%	0.8%	1.1%	0.4%	0.2%	0.6%	0.4%	0.8%
Non-Emergency Transportation	1.5%	0.8%	0.8%	0.0%	0.7%	0.0%	0.4%	0.1%	0.4%	0.2%	0.0%	0.4%	0.2%	0.8%
DME	2.1%	0.6%	0.7%	0.0%	0.4%	0.0%	1.5%	0.2%	0.9%	0.9%	0.1%	0.7%	1.1%	1.2%
Glasses / Contacts	0.2%	0.1%	0.4%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.5%	0.1%	0.7%	1.0%	0.3%
Other	1.3%	0.0%	0.1%	0.0%	0.0%	0.0%	2.3%	0.0%	0.1%	0.4%	0.3%	0.1%	0.1%	0.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other Behavioral Health Total	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.1%	0.1%
Other Total	6.2%	1.6%	3.0%	0.4%	2.3%	0.3%	4.7%	1.0%	2.5%	2.4%	0.7%	2.6%	2.8%	3.8%
Total Behavioral Health	7.7%	0.2%	2.1%	0.0%	0.4%	0.0%	0.0%	0.0%	0.1%	36.6%	86.5%	11.9%	9.1%	8.0%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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

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

Member Months	768,834	1,090	510,505	510,505	135,337	135,337	6,311	76,100	258,792	77,192	5,469	3,169,462	334,192	5,343,284
Utilization/1000														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	101.7	55.0	22.5	0.0	5.3	0.0	294.7	71.1	50.3	10.1	17.6	7.7	5.0	25.8
Surgical	52.4	121.1	20.7	0.0	3.8	0.1	193.9	38.6	10.2	6.5	6.6	2.7	2.0	12.7
Maternity / Deliveries	6.5	0.0	6.8	65.5	70.0	1,103.1	427.8	3,093.5	0.4	3.0	4.4	2.7	3.1	84.0
Psychiatric / Substance Abuse	52.6	0.0	16.2	0.0	4.4	0.0	0.0	0.0	0.0	82.9	449.8	9.3	8.0	16.9
Skilled Nursing Facility	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Inpatient Behavioral Health Total	8.6	0.0	0.2	0.0	0.2	0.0	0.0	0.0	0.0	53.2	247.9	6.0	5.0	6.1
Inpatient Facility Total	213.2	176.1	66.2	65.5	83.5	1,103.2	916.5	3,203.3	60.9	102.4	478.3	22.4	18.0	139.4
Pharmacy Services														
Pharmacy	27,768.0	38,587.2	17,546.2	98.1	9,717.8	1,601.2	13,709.4	3,367.6	7,568.9	10,804.9	24,065.8	6,456.8	6,362.6	10,815.2
Pharmacy Total	27,768.0	38,587.2	17,546.2	98.1	9,717.8	1,601.2	13,709.4	3,367.6	7,568.9	10,804.9	24,065.8	6,456.8	6,362.6	10,815.2
Average Charge														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$7,434.39	\$20,820.76	\$5,675.61	\$0.00	\$5,727.33	\$0.00	\$10,924.89	\$5,948.17	\$4,751.50	\$7,105.98	\$6,615.92	\$4,919.74	\$5,762.89	\$6,550.44
Surgical	\$19,470.01	\$10,745.46	\$13,293.02	\$0.00	\$16,671.66	\$9,555.72	\$51,168.52	\$28,593.76	\$18,619.43	\$22,323.94	\$17,498.40	\$17,416.50	\$19,967.21	\$19,174.66
Maternity / Deliveries	\$6,860.26	\$0.00	\$6,552.53	\$5,818.17	\$5,543.58	\$5,225.91	\$115,327.29	\$4,703.67	\$5,630.62	\$4,730.08	\$3,709.79	\$5,347.24	\$5,006.62	\$5,695.26
Psychiatric / Substance Abuse	\$7,290.26	\$0.00	\$5,561.26	\$0.00	\$5,053.23	\$0.00	\$0.00	\$0.00	\$0.00	\$13,939.42	\$7,065.97	\$8,184.07	\$8,545.94	\$7,910.52
Skilled Nursing Facility	\$1,429.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$714.61
Inpatient Behavioral Health Total	\$8,276.93	\$0.00	\$6,402.07	\$0.00	\$6,945.03	\$0.00	\$0.00	\$0.00	\$0.00	\$17,468.32	\$7,446.04	\$8,813.60	\$9,201.49	\$9,741.73
Inpatient Facility Total	\$10,337.52	\$13,893.99	\$8,113.90	\$5,818.17	\$6,037.22	\$5,226.82	\$68,176.74	\$5,019.43	\$7,081.17	\$13,534.26	\$7,162.23	\$7,800.61	\$8,432.48	\$7,350.05
Pharmacy Services														
Pharmacy	\$119.76	\$126.56	\$70.44	\$16.69	\$66.22	\$16.74	\$427.71	\$30.18	\$40.14	\$81.03	\$80.03	\$62.36	\$79.37	\$85.33
Pharmacy Total	\$119.76	\$126.56	\$70.44	\$16.69	\$66.22	\$16.74	\$427.71	\$30.18	\$40.14	\$81.03	\$80.03	\$62.36	\$79.37	\$85.33

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

Exhibit 11E Mississippi Division of Medicaid Summary of CY 2019 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell														
Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non- Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$49,048,956	\$93,607	\$5,696,101	\$4,774	\$290,622	\$0	\$1,384,220	\$2,440,819	\$4,087,342	\$385,662	\$69,248	\$8,766,093	\$647,376	\$72,914,821
Surgical	\$69,917,176	\$134,344	\$10,592,345	\$0	\$423,608	\$11,995	\$7,016,284	\$6,299,626	\$5,023,959	\$605,211	\$564,472	\$14,245,804	\$1,194,170	\$116,028,994
Maternity / Deliveries	\$2,255,061	\$0	\$1,737,145	\$16,136,004	\$3,973,247	\$62,926,649	\$22,541,756	\$95,276,289	\$522,479	\$78,494	\$33,605	\$3,831,013	\$388,667	\$209,700,410
Psychiatric / Substance Abuse	\$26,261,596	\$0	\$3,081,700	\$0	\$145,728	\$0	\$11,489	\$0	\$16,551	\$22,447,128	\$3,290,286	\$30,363,369	\$3,137,090	\$88,754,937
Skilled Nursing Facility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Missing Data	\$901	\$0	\$28,702	\$19,398	\$1,260	\$16,442	\$0	\$169,012	\$0	\$26,057	\$0	\$6,716	\$0	\$268,488
Inpatient Behavioral Health Total	\$7,263,528	\$0	\$188,241	\$0	\$25,424	\$0	\$0	\$0	\$0	\$21,257,226	\$2,331,344	\$24,849,047	\$2,610,178	\$58,524,988
Inpatient Facility Total	\$147,483,689	\$227,951	\$21,135,993	\$16,160,176	\$4,834,465	\$62,955,087	\$30,953,749	\$104,185,746	\$9,650,331	\$23,542,551	\$3,957,611	\$57,212,995	\$5,367,303	\$487,667,649
Outpatient Facility Services														
Emergency Room	\$28,467,029	\$34,884	\$17,397,827	\$12,061	\$5,117,500	\$40,245	\$344,227	\$1,840,069	\$7,273,334	\$735,853	\$192,379	\$37,237,670	\$2,797,528	\$101,490,605
Urgent Care	\$173	\$0	\$103	\$0	\$0	\$0	\$0	\$0	\$1,351	\$0	\$0	\$2,171	\$192	\$3,990
Radiology / Pathology	\$24,538,892	\$396,253	\$10,779,802	\$5,867	\$3,750,480	\$27,745	\$187,279	\$710,413	\$2,364,271	\$435,073	\$90,570	\$15,222,433	\$1,566,005	\$60,075,083
Psychiatric / Alcohol & Drug Abuse	\$6,036,510	\$0	\$1,862	\$0	\$0	\$0	\$0	\$0	\$0	\$958,661	\$7,264	\$14,886,062	\$927,553	\$22,817,911
Pharmacy	\$36,791,153	\$1,111,201	\$5,867,515	\$6,622	\$1,645,719	\$27,379	\$35,077	\$109,766	\$372,728	\$53,810	\$11,848	\$5,090,180	\$579,933	\$51,702,932
Other	\$62,147,002	\$307,765	\$21,160,888	\$32,169	\$5,356,824	\$95,753	\$869,263	\$1,352,154	\$4,726,551	\$1,237,456	\$114,452	\$37,277,488	\$3,173,802	\$137,851,568
Missing Data	\$57,075	\$0	\$23,481	\$14	\$34,460	\$261	\$57	\$28	\$1,226	\$104	\$0	\$14,122	\$169	\$130,997
Outpatient Behavioral Health Total	\$6,081,195	\$0	\$1,722	\$0	\$0	\$0	\$0	\$0	\$0	\$960,774	\$7,423	\$14,957,416	\$932,732	\$22,941,262
Outpatient Facility Total	\$158,037,834	\$1,850,103	\$55,231,478	\$56,733	\$15,904,982	\$191,383	\$1,435,903	\$4,012,431	\$14,739,463	\$3,420,956	\$416,512	\$109,730,127	\$9,045,181	\$374,073,086
Physician Services														
IP Visits	\$12,735,356	\$12,184	\$1,624,765	\$46,674	\$352,803	\$190,485	\$7,373,070	\$11,828,265	\$1,875,115	\$377,959	\$166,445	\$2,718,673	\$210,103	\$39,511,897
IP Surgery	\$4,934,763	\$27,264	\$1,149,585	\$36,341	\$115,445	\$83,905	\$439,383	\$496,311	\$330,372	\$43,634	\$29,965	\$1,351,492	\$136,756	\$9,175,215
Office / Home Visits	\$35,414,626	\$123,452	\$18,076,527	\$437	\$1,423,904	\$3,358	\$431,054	\$3,008,137	\$9,451,806	\$2,154,300	\$241,654	\$68,030,028	\$6,823,981	\$145,183,262
Preventive Exams & Immunizations	\$4,812,262	\$12,092	\$7,139,031	\$165,458	\$14,104,940	\$474,677	\$220,184	\$8,377,947	\$9,220,359	\$729,482	\$72,326	\$21,675,379	\$1,611,657	\$68,615,793
Urgent Care Visits	\$311,680	\$328	\$492,612	\$0	\$46,952	\$0	\$1,538	\$2,664	\$125,828	\$81,436	\$6,718	\$2,502,109	\$273,479	\$3,845,343
ER Visits and Observation Care	\$8,973,379	\$12,448	\$5,228,836	\$17,757	\$1,687,160	\$68,918	\$112,620	\$587,489	\$2,213,469	\$230,813	\$64,492	\$11,467,520	\$849,875	\$31,514,774
OP Surgery	\$11,830,790	\$90,957	\$6,180,337	\$2,269	\$446,410	\$3,473	\$132,470	\$213,296	\$1,032,759	\$457,798	\$41,199	\$12,405,290	\$1,210,666	\$34,047,714
Physical Therapy	\$6,798,634	\$5,719	\$1,109,538	\$0	\$26,735	\$0	\$199,541	\$3,936	\$285,003	\$549,010	\$43,965	\$6,861,486	\$533,781	\$16,417,346
Psychiatric / Substance Abuse	\$31,733,693	\$3,700	\$3,108,629	\$575	\$169,637	\$538	\$113	\$1,555	\$477	\$3,843,569	\$21,336,734	\$31,392,413	\$3,021,992	\$94,613,624
Radiology / Pathology	\$13,726,173	\$138,649	\$9,133,239	\$152,508	\$7,083,465	\$557,542	\$205,024	\$477,032	\$1,651,171	\$377,897	\$66,289	\$13,326,825	\$1,447,394	\$48,343,209
Vision, Hearing, and Speech Exams	\$3,778,979	\$6,518	\$2,048,567	\$0	\$433,688	\$0	\$34,673	\$21,327	\$90,609	\$405,072	\$43,626	\$10,862,569	\$1,472,382	\$19,198,011
Other	\$35,628,709	\$774,615	\$5,413,444	\$3,877,530	\$1,236,251	\$15,701,192	\$715,131	\$481,988	\$804,879	\$1,018,501	\$85,231	\$7,552,275	\$1,715,893	\$75,005,639
Missing Data	\$37,990	\$0	\$11,588	\$677	\$558	\$388	\$0	\$210	\$1,522	\$4,435	\$498	\$43,141	\$4,256	\$105,264
Physician Behavioral Health Total	\$36,073,150	\$4,952	\$3,781,353	\$423	\$197,451	\$712	\$2,487	\$9,113	\$70,617	\$4,243,636	\$21,357,713	\$34,892,907	\$3,374,708	\$104,009,220
Physician Total	\$170,717,035	\$1,207,925	\$60,716,697	\$4,300,224	\$27,127,947	\$17,084,477	\$9,864,800	\$25,500,158	\$27,083,369	\$10,273,904	\$22,199,141	\$190,189,200	\$19,312,214	\$585,577,092
Pharmacy Services														
Pharmacy	\$236,660,714	\$627,794	\$56,566,654	\$79,816	\$7,075,967	\$317,743	\$3,717,886	\$669,632	\$6,016,033	\$5,836,415	\$1,276,733	\$106,880,645	\$14,449,149	\$440,175,181
Missing Data	\$89,566	\$12	\$15,168	\$18	\$2,163	\$89	\$157	\$612	\$7,817	\$101	\$463	\$33,330	\$9,003	\$158,501
Pharmacy Total	\$236,750,280	\$627,806	\$56,581,822	\$79,834	\$7,078,131	\$317,833	\$3,718,043	\$670,244	\$6,023,850	\$5,836,516	\$1,277,196	\$106,913,975	\$14,458,152	\$440,333,682
Dental Services														
Dental	\$7,166,959	\$9,718	\$3,443,218	\$323	\$686,206	\$324	\$4,494	\$49,420	\$249,559	\$2,145,298	\$245,929	\$79,120,267	\$10,862,854	\$103,984,570
Missing Data	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$328	\$328
Dental Total	\$7,166,959	\$9,718	\$3,443,218	\$323	\$686,206	\$324	\$4,494	\$49,420	\$249,559	\$2,145,298	\$245,929	\$79,120,267	\$10,863,182	\$103,984,898
Other Services														
Ambulance	\$7,843,235	\$4,994	\$1,817,679	\$86,109	\$537,961	\$188,481	\$235,937	\$858,893	\$581,810	\$118,720	\$75,076	\$3,304,100	\$257,947	\$15,910,940
Non-Emergency Transportation	\$10,482,618	\$24,320	\$1,491,484	\$4,922	\$323,884	\$9,259	\$186,284	\$68,031	\$180,461	\$45,797	\$29,433	\$1,918,173	\$83,973	\$14,848,640
DME	\$18,322,669	\$17,247	\$1,983,188	\$1,066	\$239,677	\$5,096	\$637,979	\$166,909	\$590,534	\$417,109	\$20,596	\$5,104,971	\$848,289	\$28,355,329
Glasses / Contacts	\$1,192,871	\$1,942	\$721,485	\$0	\$167,646	\$105	\$947	\$155,979	\$19,245	\$1,568	\$155,979	\$3,962,384	\$580,960	\$6,805,132
Other	\$9,668,055	\$496	\$184,631	\$0	\$3,969	\$0	\$615,277	\$8,444	\$7,571	\$221,302	\$2,382	\$892,500	\$79,861	\$11,684,489
Missing Data	\$12,274	\$0	\$394	\$4	\$0	\$0	\$0	\$0	\$0	\$37	\$0	\$12,364	\$0	\$25,073
Other Behavioral Health Total	\$592,014	\$160	\$61,186	\$0	\$2,098	\$0	\$0	\$0	\$0	\$26,134	\$2,346	\$450,188	\$52,519	\$1,186,644
Other Total	\$47,521,722	\$48,999	\$6,198,861	\$92,100	\$1,273,137	\$202,941	\$1,676,424	\$1,102,277	\$1,361,943	\$958,944	\$146,732	\$15,194,493	\$1,851,030	\$77,629,604
Total Behavioral Health	\$50,009,887	\$5,111	\$4,032,501	\$423	\$224,973	\$712	\$2,487	\$9,113	\$70,617	\$26,487,770	\$23,698,826	\$75,149,558	\$6,970,136	\$186,662,114
Grand Total	\$767,677,519	\$3,972,503	\$203,308,069	\$20,689,391	\$56,904,869	\$80,752,044	\$47,653,414	\$135,520,276	\$59,108,516	\$46,178,169	\$28,243,122	\$558,361,057	\$60,897,062	\$2,069,266,011

Exhibit 11F Mississippi Division of Medicaid Summary of CY 2019 MississippiCAN Encounter Claims Summary of Allowed PMPM by Rate Cell														
Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
MPPM Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$64.07	\$78.86	\$11.54	\$0.01	\$2.12	\$0.00	\$218.33	\$32.41	\$16.18	\$4.89	\$8.91	\$2.85	\$1.95	\$13.96
Surgical	\$91.33	\$113.18	\$21.45	\$0.00	\$3.09	\$0.09	\$1,106.67	\$83.65	\$19.88	\$7.67	\$72.59	\$4.64	\$3.59	\$22.21
Maternity / Deliveries	\$2.95	\$0.00	\$3.52	\$32.68	\$28.95	\$458.57	\$3,555.48	\$1,265.09	\$2.07	\$0.99	\$4.32	\$1.25	\$1.17	\$40.15
Psychiatric / Substance Abuse	\$34.30	\$0.00	\$6.24	\$0.00	\$1.06	\$0.00	\$1.81	\$0.00	\$0.07	\$284.49	\$423.13	\$9.88	\$9.43	\$16.99
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Missing Data	\$0.00	\$0.00	\$0.06	\$0.04	\$0.01	\$0.12	\$0.00	\$2.24	\$0.00	\$0.33	\$0.00	\$0.00	\$0.00	\$0.05
Inpatient Behavioral Health Total	\$9.49	\$0.00	\$0.38	\$0.00	\$0.19	\$0.00	\$0.00	\$0.00	\$0.00	\$269.41	\$299.81	\$8.09	\$7.85	\$11.20
Inpatient Facility Total	\$192.65	\$192.04	\$42.80	\$32.73	\$35.23	\$458.78	\$4,882.29	\$1,383.39	\$38.19	\$298.37	\$508.95	\$18.62	\$16.14	\$93.36
Outpatient Facility Services														
Emergency Room	\$37.18	\$29.39	\$35.23	\$0.02	\$37.29	\$0.29	\$54.29	\$24.43	\$28.79	\$9.33	\$24.74	\$12.12	\$8.41	\$19.43
Urgent Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Radiology / Pathology	\$32.05	\$333.83	\$21.83	\$0.01	\$27.33	\$0.20	\$29.54	\$9.43	\$9.36	\$5.51	\$11.65	\$4.96	\$4.71	\$11.50
Psychiatric / Alcohol & Drug Abuse	\$7.89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.15	\$0.93	\$4.85	\$2.79	\$4.37
Pharmacy	\$48.06	\$936.14	\$11.88	\$0.01	\$11.99	\$0.20	\$5.53	\$1.46	\$1.48	\$0.68	\$1.52	\$1.66	\$1.74	\$9.90
Other	\$81.18	\$259.28	\$42.85	\$0.07	\$39.04	\$0.70	\$137.11	\$17.95	\$18.71	\$15.68	\$14.72	\$12.13	\$9.54	\$26.39
Missing Data	\$0.07	\$0.00	\$0.05	\$0.00	\$0.25	\$0.00	\$0.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.03
Outpatient Behavioral Health Total	\$7.94	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.18	\$0.95	\$4.87	\$2.81	\$4.39
Outpatient Facility Total	\$206.43	\$1,558.64	\$111.85	\$0.11	\$115.91	\$1.39	\$226.48	\$53.28	\$58.34	\$43.36	\$53.56	\$35.72	\$27.20	\$71.62
Physician Services														
IP Visits	\$16.64	\$10.26	\$3.29	\$0.09	\$2.57	\$1.39	\$1,162.94	\$157.06	\$7.42	\$4.79	\$21.41	\$0.88	\$0.63	\$7.56
IP Surgery	\$6.45	\$22.97	\$2.33	\$0.07	\$0.84	\$0.61	\$69.30	\$6.59	\$1.31	\$0.55	\$3.85	\$0.44	\$0.41	\$1.76
Office / Home Visits	\$46.26	\$104.00	\$36.61	\$0.00	\$10.38	\$0.02	\$67.99	\$39.94	\$37.41	\$27.30	\$31.08	\$22.15	\$20.52	\$27.80
Preventive Exams & Immunizations	\$6.29	\$10.19	\$14.46	\$0.34	\$102.79	\$3.46	\$34.73	\$111.24	\$36.49	\$9.25	\$9.30	\$7.06	\$4.85	\$13.14
Urgent Care Visits	\$0.41	\$0.28	\$1.00	\$0.00	\$0.34	\$0.00	\$0.24	\$0.04	\$0.50	\$1.03	\$0.86	\$0.81	\$0.82	\$0.74
ER Visits and Observation Care	\$11.72	\$10.49	\$10.59	\$0.04	\$12.29	\$0.50	\$17.76	\$7.80	\$8.76	\$2.93	\$8.29	\$3.73	\$2.56	\$6.03
OP Surgery	\$15.45	\$76.63	\$12.52	\$0.00	\$3.25	\$0.03	\$20.89	\$2.83	\$4.09	\$5.80	\$5.30	\$4.04	\$3.64	\$6.52
Physical Therapy	\$8.88	\$4.82	\$2.25	\$0.00	\$0.19	\$0.00	\$31.47	\$0.05	\$1.13	\$6.96	\$5.65	\$2.23	\$1.61	\$3.14
Psychiatric / Substance Abuse	\$41.45	\$3.12	\$6.30	\$0.00	\$1.24	\$0.00	\$0.02	\$0.02	\$0.00	\$48.71	\$2,743.92	\$10.22	\$9.09	\$18.11
Radiology / Pathology	\$17.93	\$116.81	\$18.50	\$0.31	\$51.62	\$4.06	\$32.34	\$6.33	\$6.53	\$4.79	\$8.52	\$4.34	\$4.35	\$9.26
Vision, Hearing, and Speech Exams	\$4.94	\$5.49	\$4.15	\$0.00	\$3.16	\$0.00	\$5.47	\$0.28	\$0.36	\$5.13	\$5.61	\$3.54	\$4.43	\$3.68
Other	\$46.54	\$652.58	\$10.96	\$7.85	\$9.01	\$114.42	\$112.80	\$6.40	\$3.19	\$12.91	\$10.96	\$2.46	\$5.16	\$14.36
Missing Data	\$0.05	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.01	\$0.06	\$0.06	\$0.01	\$0.01	\$0.02
Physician Behavioral Health Total	\$47.12	\$4.17	\$7.66	\$0.00	\$1.44	\$0.01	\$0.39	\$0.12	\$0.28	\$53.78	\$2,746.62	\$11.36	\$10.15	\$19.91
Physician Total	\$223.00	\$1,017.63	\$122.96	\$8.71	\$197.69	\$124.50	\$1,555.96	\$338.59	\$107.19	\$130.21	\$2,854.83	\$61.91	\$58.08	\$112.11
Pharmacy Services														
Pharmacy	\$309.13	\$528.89	\$114.56	\$0.16	\$51.57	\$2.32	\$586.42	\$8.89	\$23.81	\$73.97	\$164.19	\$34.79	\$43.45	\$84.27
Missing Data	\$0.12	\$0.01	\$0.03	\$0.00	\$0.02	\$0.00	\$0.02	\$0.01	\$0.03	\$0.00	\$0.06	\$0.01	\$0.03	\$0.03
Pharmacy Total	\$309.25	\$528.90	\$114.59	\$0.16	\$51.58	\$2.32	\$586.44	\$8.90	\$23.84	\$73.97	\$164.25	\$34.80	\$43.48	\$84.30
Dental Services														
Dental	\$9.36	\$8.19	\$6.97	\$0.00	\$5.00	\$0.00	\$0.71	\$0.66	\$0.99	\$27.19	\$31.63	\$25.76	\$32.67	\$19.91
Missing Data	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Dental Total	\$9.36	\$8.19	\$6.97	\$0.00	\$5.00	\$0.00	\$0.71	\$0.66	\$0.99	\$27.19	\$31.63	\$25.76	\$32.67	\$19.91
Other Services														
Ambulance	\$10.25	\$4.21	\$3.68	\$0.17	\$3.92	\$1.37	\$37.21	\$11.40	\$2.30	\$1.50	\$9.65	\$1.08	\$0.78	\$3.05
Non-Emergency Transportation	\$13.69	\$20.49	\$3.02	\$0.01	\$2.36	\$0.07	\$29.38	\$0.90	\$0.71	\$0.58	\$3.79	\$0.62	\$0.25	\$2.84
DME	\$23.93	\$14.53	\$4.02	\$0.00	\$1.75	\$0.04	\$100.63	\$2.22	\$2.34	\$5.29	\$2.65	\$1.66	\$2.55	\$5.43
Glasses / Contacts	\$1.56	\$1.64	\$1.46	\$0.00	\$1.22	\$0.00	\$0.00	\$0.15	\$0.00	\$1.98	\$2.47	\$1.29	\$1.75	\$1.30
Other	\$12.63	\$0.42	\$0.37	\$0.00	\$0.03	\$0.00	\$97.05	\$0.11	\$0.03	\$2.80	\$0.31	\$0.29	\$0.24	\$2.24
Missing Data	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Behavioral Health Total	\$0.77	\$0.13	\$0.12	\$0.00	\$0.02	\$0.00	\$0.00	\$0.00	\$0.00	\$0.33	\$0.30	\$0.15	\$0.16	\$0.23
Other Total	\$62.07	\$41.28	\$12.55	\$0.19	\$9.28	\$1.48	\$264.42	\$14.64	\$5.39	\$12.15	\$18.87	\$4.95	\$5.57	\$14.86
Total Behavioral Health	\$65.32	\$4.31	\$8.17	\$0.00	\$1.64	\$0.01	\$0.39	\$0.12	\$0.28	\$335.70	\$3,047.69	\$24.46	\$20.96	\$35.74
Grand Total	\$1,002.77	\$3,346.67	\$411.74	\$41.90	\$414.69	\$588.47	\$7,516.31	\$1,799.45	\$233.94	\$585.24	\$3,632.09	\$181.76	\$183.14	\$396.16

Exhibit 11G Mississippi Division of Medicaid Summary of CY 2019 MississippiCAN Encounter Claims Summary of Total Costs by Rate Cell														
Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
% of Total Allowed Cost														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	6.4%	2.4%	2.8%	0.0%	0.5%	0.0%	2.9%	1.8%	6.9%	0.8%	0.2%	1.6%	1.1%	3.5%
Surgical	9.1%	3.4%	5.2%	0.0%	0.7%	0.0%	14.7%	4.6%	8.5%	1.3%	2.0%	2.6%	2.0%	5.6%
Maternity / Deliveries	0.3%	0.0%	0.9%	78.0%	7.0%	77.9%	47.3%	70.3%	0.9%	0.2%	0.1%	0.7%	0.6%	10.1%
Psychiatric / Substance Abuse	3.4%	0.0%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	48.6%	11.6%	5.4%	5.2%	4.3%
Skilled Nursing Facility	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Missing Data	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
Inpatient Behavioral Health Total	0.9%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	46.0%	8.3%	4.5%	4.3%	2.8%
Inpatient Facility Total	19.2%	5.7%	10.4%	78.1%	8.5%	78.0%	65.0%	76.9%	16.3%	51.0%	14.0%	10.2%	8.8%	23.6%
Outpatient Facility Services														
Emergency Room	3.7%	0.9%	8.6%	0.1%	9.0%	0.0%	0.7%	1.4%	12.3%	1.6%	0.7%	6.7%	4.6%	4.9%
Urgent Care	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Radiology / Pathology	3.2%	10.0%	5.3%	0.0%	6.6%	0.0%	0.4%	0.5%	4.0%	0.9%	0.3%	2.7%	2.6%	2.9%
Psychiatric / Alcohol & Drug Abuse	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.1%	0.0%	2.7%	1.5%	1.1%
Pharmacy	4.8%	28.0%	2.9%	0.0%	2.9%	0.0%	0.1%	0.1%	0.6%	0.1%	0.0%	0.9%	1.0%	2.5%
Other	8.1%	7.7%	10.4%	0.2%	9.4%	0.1%	1.8%	1.0%	8.0%	2.7%	0.4%	6.7%	5.2%	6.7%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Outpatient Behavioral Health Total	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.1%	0.0%	2.7%	1.5%	1.1%
Outpatient Facility Total	20.6%	46.6%	27.2%	0.3%	28.0%	0.2%	3.0%	3.0%	24.9%	7.4%	1.5%	19.7%	14.9%	18.1%
Physician Services														
IP Visits	1.7%	0.3%	0.8%	0.2%	0.6%	0.2%	15.5%	8.7%	3.2%	0.8%	0.6%	0.5%	0.3%	1.9%
IP Surgery	0.6%	0.7%	0.6%	0.2%	0.2%	0.1%	0.9%	0.4%	0.6%	0.1%	0.1%	0.2%	0.2%	0.4%
Office / Home Visits	4.6%	3.1%	8.9%	0.0%	2.5%	0.0%	0.9%	2.2%	16.0%	4.7%	0.9%	12.2%	11.2%	7.0%
Preventive Exams & Immunizations	0.6%	0.3%	3.5%	0.8%	24.8%	0.6%	0.5%	6.2%	15.6%	1.6%	0.3%	3.9%	2.6%	3.3%
Urgent Care Visits	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.2%	0.0%	0.4%	0.4%	0.2%
ER Visits and Observation Care	1.2%	0.3%	2.6%	0.1%	3.0%	0.1%	0.2%	0.4%	3.7%	0.5%	0.2%	2.1%	1.4%	1.5%
OP Surgery	1.5%	2.3%	3.0%	0.0%	0.8%	0.0%	0.3%	0.2%	1.7%	1.0%	0.1%	2.2%	2.0%	1.6%
Physical Therapy	0.9%	0.1%	0.5%	0.0%	0.0%	0.0%	0.4%	0.0%	0.5%	1.2%	0.2%	1.2%	0.9%	0.8%
Psychiatric / Substance Abuse	4.1%	0.1%	1.5%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	8.3%	75.5%	5.6%	5.0%	4.6%
Radiology / Pathology	1.8%	3.5%	4.5%	0.7%	12.4%	0.7%	0.4%	0.4%	2.8%	0.8%	0.2%	2.4%	2.4%	2.3%
Vision, Hearing, and Speech Exams	0.5%	0.2%	1.0%	0.0%	0.8%	0.0%	0.1%	0.0%	0.2%	0.9%	0.2%	1.9%	2.4%	0.9%
Other	4.6%	19.5%	2.7%	18.7%	2.2%	19.4%	1.5%	0.4%	1.4%	2.2%	0.3%	1.4%	2.8%	3.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Physician Behavioral Health Total	4.7%	0.1%	1.9%	0.0%	0.3%	0.0%	0.0%	0.0%	0.1%	9.2%	75.6%	6.2%	5.5%	5.0%
Physician Total	22.2%	30.4%	29.9%	20.8%	47.7%	21.2%	20.7%	18.8%	45.8%	22.2%	78.6%	34.1%	31.7%	28.3%
Pharmacy Services														
Pharmacy	30.8%	15.8%	27.8%	0.4%	12.4%	0.4%	7.8%	0.5%	10.2%	12.6%	4.5%	19.1%	23.7%	21.3%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Pharmacy Total	30.8%	15.8%	27.8%	0.4%	12.4%	0.4%	7.8%	0.5%	10.2%	12.6%	4.5%	19.1%	23.7%	21.3%
Dental Services														
Dental	0.9%	0.2%	1.7%	0.0%	1.2%	0.0%	0.0%	0.0%	0.4%	4.6%	0.9%	14.2%	17.8%	5.0%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Dental Total	0.9%	0.2%	1.7%	0.0%	1.2%	0.0%	0.0%	0.0%	0.4%	4.6%	0.9%	14.2%	17.8%	5.0%
Other Services														
Ambulance	1.0%	0.1%	0.9%	0.4%	0.9%	0.2%	0.5%	0.6%	1.0%	0.3%	0.3%	0.6%	0.4%	0.8%
Non-Emergency Transportation	1.4%	0.6%	0.7%	0.0%	0.6%	0.0%	0.4%	0.1%	0.3%	0.1%	0.1%	0.3%	0.1%	0.7%
DME	2.4%	0.4%	1.0%	0.0%	0.4%	0.0%	1.3%	0.1%	1.0%	0.9%	0.1%	0.9%	1.4%	1.4%
Glasses / Contacts	0.2%	0.0%	0.4%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.3%	0.1%	0.7%	1.0%	0.3%
Other	1.3%	0.0%	0.1%	0.0%	0.0%	0.0%	1.3%	0.0%	0.0%	0.5%	0.0%	0.2%	0.1%	0.6%
Missing Data	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Other Behavioral Health Total	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.1%	0.1%
Other Total	6.2%	1.2%	3.0%	0.4%	2.2%	0.3%	3.5%	0.8%	2.3%	2.1%	0.5%	2.7%	3.0%	3.8%
Total Behavioral Health	6.5%	0.1%	2.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.1%	57.4%	83.9%	13.5%	11.4%	9.0%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

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

Member Months	765,558	1,187	493,779	493,779	137,224	137,224	6,340	75,312	252,667	78,904	7,776	3,071,992	332,512	5,223,251
Utilization/1000														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	102.7	131.4	24.7	0.0	4.9	0.0	314.2	66.1	44.2	8.7	15.4	7.2	4.3	25.7
Surgical	56.6	121.3	19.4	0.0	3.1	0.1	215.8	42.2	9.8	4.7	1.5	2.9	2.8	13.6
Maternity / Deliveries	5.8	0.0	8.5	74.2	77.4	1,128.5	353.9	3,508.1	0.6	1.8	6.2	3.2	3.0	93.5
Psychiatric / Substance Abuse	62.3	0.0	16.5	0.0	2.7	0.0	1.9	0.0	0.0	140.7	564.8	13.1	11.1	22.1
Skilled Nursing Facility	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Inpatient Behavioral Health Total	13.1	0.0	0.9	0.0	0.3	0.0	0.0	0.0	0.0	113.8	392.0	9.7	8.2	10.5
Inpatient Facility Total	227.4	252.7	69.1	74.2	88.1	1,128.6	885.8	3,616.5	54.7	155.9	588.0	26.4	21.2	154.9
Pharmacy Services														
Pharmacy	27,488.8	38,527.4	17,401.4	108.5	9,423.1	1,582.7	13,487.7	3,428.6	7,366.1	11,538.7	26,095.7	6,779.4	6,712.0	11,032.0
Pharmacy Total	27,488.8	38,527.4	17,401.4	108.5	9,423.1	1,582.7	13,487.7	3,428.6	7,366.1	11,538.7	26,095.7	6,779.4	6,712.0	11,032.0
Average Charge														
Service Category	Non-Newborn SSI / Disabled	Breast and Cervical Cancer	MA Adult - Non-Deliveries	Deliveries - MA Adult	Pregnant Women - Non-Deliveries	Deliveries - Pregnant Women	SSI / Disabled Newborn	Non-SSI Newborns 0 to 2 Months	Non-SSI Newborns 3 to 12 Months	Foster Care	MYPAC	MA Children	Quasi-CHIP	All MSCAN Rate Cells
Inpatient Facility Services														
Medical	\$7,484.96	\$7,200.57	\$5,606.40	\$4,774.06	\$5,189.68	\$0.00	\$8,338.68	\$5,881.49	\$4,390.27	\$6,765.99	\$6,924.79	\$4,759.01	\$5,440.14	\$6,522.48
Surgical	\$19,373.01	\$11,195.33	\$13,240.43	\$0.00	\$12,103.07	\$11,995.12	\$61,546.35	\$23,772.17	\$24,270.33	\$19,522.92	\$564,472.15	\$18,994.41	\$15,508.70	\$19,659.27
Maternity / Deliveries	\$6,111.28	\$0.00	\$4,977.49	\$5,287.03	\$4,489.55	\$4,876.14	\$120,544.15	\$4,327.40	\$40,190.67	\$6,541.16	\$8,401.31	\$4,729.65	\$4,626.99	\$5,153.99
Psychiatric / Substance Abuse	\$6,603.37	\$0.00	\$4,551.99	\$0.00	\$4,700.91	\$0.00	\$11,488.65	\$0.00	\$16,550.98	\$24,267.17	\$8,989.85	\$9,058.28	\$10,185.36	\$9,208.85
Skilled Nursing Facility	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Inpatient Behavioral Health Total	\$8,698.84	\$0.00	\$5,228.91	\$0.00	\$6,356.05	\$0.00	\$0.00	\$0.00	\$0.00	\$28,418.75	\$9,178.52	\$10,027.86	\$11,549.46	\$12,775.59
Inpatient Facility Total	\$10,165.68	\$9,118.05	\$7,437.01	\$5,293.21	\$4,800.86	\$4,877.97	\$66,140.49	\$4,590.29	\$8,377.02	\$22,968.34	\$10,387.43	\$8,470.98	\$9,128.07	\$7,234.78
Pharmacy Services														
Pharmacy	\$134.95	\$164.73	\$79.00	\$17.88	\$65.67	\$17.56	\$521.74	\$31.12	\$38.79	\$76.93	\$75.50	\$61.58	\$77.69	\$91.67
Pharmacy Total	\$135.00	\$164.74	\$79.02	\$17.88	\$65.69	\$17.56	\$521.76	\$31.15	\$38.84	\$76.93	\$75.53	\$61.60	\$77.74	\$91.70

Exhibit 12 Mississippi Division of Medicaid Encounter Data - 5% Assessment Categories						
COS	COS Description	Rendering Provider Code	Rendering Provider Type Description	Mapped Broad Category of Service	Percent of Total 2018 Allowed in COS and Rendering Provider	Percent of Total 2019 Allowed in COS and Rendering Provider
03	LABORATORY AND RADIOLOGY	B00	INDEPENDENT LAB	Physician	0.41%	0.22%
05	PHYSICIAN	A08	CHIROPRACTOR	Physician	0.03%	0.01%
05	PHYSICIAN	A09	PODIATRIST	Physician, Other	0.07%	0.03%
06	HOME & COMM BASED SERVICES	L00	HHA UNCLASSIFIED	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	L02	HHA HOSPITAL BASED PROGRAM	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W01	PERSONAL CARE SERVICES	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W03	RESPIRE CARE, IN HOME	Other	0.00%	0.00%
06	HOME & COMM BASED SERVICES	W04	ADULT DAY CARE	N/A - No Claims	0.00%	0.00%
06	HOME & COMM BASED SERVICES	WC0	ASSISTED LIVING SERVICES PROV	N/A - No Claims	0.00%	0.00%
07	HOME HEALTH SERVICES	L00	HHA UNCLASSIFIED	Outpatient	0.00%	0.02%
07	HOME HEALTH SERVICES	L02	HHA HOSPITAL BASED PROGRAM	Outpatient	0.01%	0.01%
09	MENTAL HEALTH CLINIC SERVICES	X00	COMMUNITY MENTAL HEALTH	Physician, Outpatient	3.76%	1.27%
09	MENTAL HEALTH CLINIC SERVICES	X01	PRIVATE MENTAL HEALTH	Physician	0.45%	0.25%
10	EPSDT SCREENING	E00	NURSE SCREENING	Physician	0.22%	0.09%
10	EPSDT SCREENING	E01	NURSE SCREENING WITH CASE MGMT	Physician, Dental	0.00%	0.00%
10	EPSDT SCREENING	E04	PHYSICIANS SCREENER	Physician	0.50%	0.17%
10	EPSDT SCREENING	E06	FEDERAL CLINIC, SCREEN ONLY	Physician	0.00%	0.00%
10	EPSDT SCREENING	ED0	SCHOOL BASED SCREEN & CS MGT	Physician	0.00%	0.00%
10	EPSDT SCREENING	EV0	VACCINE FOR CHILDREN PROVIDER	Physician	0.20%	0.07%
11	EMERG/NON-EMERG TRANS	J00	AMBULANCE	Other	0.38%	0.18%
12	DENTAL SERVICES	K00	DENTIST, UNCLASSIFIED	Dental	0.28%	0.07%
13	EYEGLOSS SERVICES	N00	OPTOMETRIST	Physician, Other	0.30%	0.23%
13	EYEGLOSS SERVICES	N01	OPTICAL DISPENSARY	Other	0.02%	0.01%
16	DENTAL SCREENING	K00	DENTIST, UNCLASSIFIED	Dental	3.88%	1.30%
17	EYEGLOSS SCREENING	N00	OPTOMETRIST	Physician, Other	0.77%	0.50%
17	EYEGLOSS SCREENING	N01	OPTICAL DISPENSARY	Other	0.05%	0.02%
18	HEARING SCREENING	M00	AUDIOLOGIST	Other, Physician	0.01%	0.00%
24	MEDICAL SUPPLY (DME)	I00	DME, MEDICAL EQUIP SUPPLIES	Other	0.57%	0.38%
24	MEDICAL SUPPLY (DME)	I01	DME, HOME HEALTH	Other	0.01%	0.01%
24	MEDICAL SUPPLY (DME)	I03	DME, PHARMACY BASED, COMMUNITY	Other, Physician	0.06%	0.03%
24	MEDICAL SUPPLY (DME)	S02	NURSE PRACTITIONER	Physician, Other	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	Y03	NF, COUNTY OWNED	N/A - No Claims	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	ZA0	GROUP, PHYSICIANS	N/A - No Claims	0.00%	0.00%
24	MEDICAL SUPPLY (DME)	ZZ0	GROUP, OTHERS	N/A - No Claims	0.00%	0.00%
25	THERAPY SERVICES (OUTSIDE HH)	T00	OCCUPATIONAL THERAPISTS	Physician	0.09%	0.05%
25	THERAPY SERVICES (OUTSIDE HH)	T01	PHYSICAL THERAPISTS	Physician	0.22%	0.10%
25	THERAPY SERVICES (OUTSIDE HH)	T02	SPEECH/LANGUAGE THERAPISTS	Physician	0.24%	0.12%
28	NURSE SERVICES	S00	NURSE ANESTHETIST	Physician	0.26%	0.07%
28	NURSE SERVICES	S01	NURSE MIDWIVES	Physician	0.03%	0.01%
28	NURSE SERVICES	S02	NURSE PRACTITIONER	Physician	1.71%	0.75%
28	NURSE SERVICES	S05	PRIVATE DUTY NURSING	Other	0.24%	0.08%
28	NURSE SERVICES	S06	PHYSICIAN ASSISTANT	Physician	0.09%	0.04%
29	AMBULATORY SURGICAL CENTER	V00	AMBULATORY SURGICAL CENTERS	Physician, Outpatient	0.24%	0.13%
30	PERSONAL CARE SERVICES	W06	PERSONAL CARE ATTENDANT	N/A - No Claims	0.00%	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X02	SOCIAL WORKER	Physician	0.11%	0.05%
33	MENTAL HEALTH PRIVATE SERVICES	X03	PSYCHOLOGIST	Physician	0.05%	0.02%
33	MENTAL HEALTH PRIVATE SERVICES	X05	IDD COMMUNITY SUPPORT PROGRAM	Physician	0.00%	0.00%
33	MENTAL HEALTH PRIVATE SERVICES	X07	LICENSED PROFESSIONAL COUNSELOR	Physician	0.10%	0.05%
33	MENTAL HEALTH PRIVATE SERVICES	X08	BOARD CERTIFD BEHAVIOR ANALYST	Physician	0.01%	0.01%
35	FREE STANDING DIALYSIS	Q01	KIDNEY DIALYSIS FREESTANDING	Outpatient	0.54%	0.16%
35	FREE STANDING DIALYSIS	Q02	KIDNEY DIALYSIS HOSPITAL BASED	Outpatient	0.00%	0.00%
61	PRESCRIBED PED EXT CARE CENTER	S07	PRESCRIBED PED EXT CARE CENTER	Physician	0.29%	0.18%
57	MYPAC SERVICES	X04	N/A	Physician	0.00%	0.26%
Percent of Allowed Eligible for 5% Assessment (A)					16.21%	6.94%
5% Assessment Adjustment (B) = 1 - (A) * 0.05					0.9919	0.9965

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

Change	Change Type	Effective Date	Impacted Rate Cells	Where Reflected in Rate Development
ASD Services	Program	July 1, 2019	SSI, Foster Care, MA Children, and Quasi-CHIP	Exhibit 2A
PDL Adjustment	Program	January 1, 2019, January 1, 2020, May 1, 2020, and January 1, 2021	All	Exhibits 1B, 1C, and 2A
Non-Facility 5% Assessment Application	Reimbursement	July 1, 2018	All	Exhibits 1A and 1B
OPPS Reimbursement	Reimbursement	July 1, 2018	All	Exhibits 1A, 1B, 1C, and 2A
Physician Administered Drug Reimbursement	Reimbursement	July 1, 2018	SSI and MA Adult (non-delivery)	Exhibit 2A
PRTF Services	Program	October 1, 2018	SSI, Foster Care, MA Children, Quasi-CHIP, and MYPAC	Exhibits 1B, 1C, 1D, and 2A
DRG Overpayments	Reimbursement	October 1, 2018	All	N/A
Usual and Customary Pharmacy Overpayments	Reimbursement	November 1, 2018	All	N/A
340B Pharmacy Overpayments	Reimbursement	January 1, 2019	All	Exhibit 1A
Physician Limit Expansion	Program	January 1, 2019	Excludes Children	Exhibit 2A
Dental and Orthodontic Reimbursement	Reimbursement	March 1, 2019	All	N/A
Zolgensma Carveout to FFS	Reimbursement	May 24, 2019	All	Exhibit 1A
ER Leveling Policy Adjustment	Reimbursement	July 1, 2019	All	Exhibit 1A
OP Dental Billing	Reimbursement	July 1, 2019	All	Exhibit 2A
Rx Limit Expansion	Program	July 1, 2019	Excludes Children	Exhibit 2A
Home Health Limit Expansion	Program	July 1, 2019	Excludes Children	Exhibit 2A
Quality Withhold	Program	July 1, 2019	All	Exhibit 4
IMD Services	Program	July 1, 2019	All	N/A
Rural Hospital Policy Adjuster	Program	July 1, 2019	All	N/A
Non-Emergency Transportation Contracting Change	Reimbursement	August 1, 2019 and September 1, 2020	All	Exhibit 2A
Transition GME Payments to FFS	Reimbursement	October 1, 2019	All	Exhibit 2A
Increase Reimbursement for Emergency Transportation	Reimbursement	July 1, 2020	All	Exhibit 2A
COVID-19 Vaccine Administration Expense	Program	March 15, 2021	All	Exhibit 2A
SSI Children - COE Change	Program	July 1, 2021	SSI	Exhibit 1A
Removal of 5% Assessment	Reimbursement	July 1, 2021	All	Exhibit 2A
Preventative and Diagnostic Dental Reimbursement Change	Reimbursement	July 1, 2021 and July 1, 2022	All	Exhibit 2A
Restorative Dental Reimbursement Change	Reimbursement	July 1, 2022	All	Exhibit 2A
Non-APC Outpatient Hospital Adjustment	Reimbursement	July 1, 2022	All	Exhibit 2A
Prescribed Pediatric Extended Care (PPEC) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Private Duty Nursing Services (PDN) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Ambulatory Surgical Center (ASC) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Home Health Agency (HHA) Fee Schedule Update	Reimbursement	October 1, 2022	All	Exhibit 2A
Autism Spectrum Disorder (ASD) Fee Schedule Update	Reimbursement	January 1, 2023	All	Exhibit 2A
Non-APC Outpatient Hospital Adjustment	Reimbursement	July 1, 2023	All	Exhibit 2A

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

Cap Cell	SFY 2022 Exposures	SFY 2023 Exposures
Non-Newborn SSI / Disabled	759,634	719,345
Breast and Cervical Cancer	1,762	992
MA Adult	616,693	469,546
Pregnant Women	126,929	91,902
SSI / Disabled Newborn	4,920	4,066
Non-SSI Newborns 0 to 2 Months	75,599	74,603
Non-SSI Newborns 3 to 12 Months	243,840	215,942
Foster Care	81,472	86,381
MYPAC	9,765	5,177
MA Children	3,658,185	2,631,991
Quasi-CHIP	385,859	287,026
Total - All Cap Cells	5,964,659	4,586,971

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

Cap Cell	Medical Costs PMPM	Non-Service Expenses PMPM¹	Quality Withhold	Total Capitation Rate Prior to Withhold	Total Capitation Rate after Withhold
Non-Newborn SSI / Disabled	\$1,068.13	\$132.57	(\$12.01)	\$1,200.70	\$1,188.69
Breast and Cervical Cancer	\$3,424.36	\$399.83	(\$38.24)	\$3,824.19	\$3,785.95
MA Adult	\$437.09	\$60.99	(\$4.98)	\$498.08	\$493.10
Pregnant Women	\$1,059.37	\$131.58	(\$11.91)	\$1,190.95	\$1,179.04
SSI / Disabled Newborn	\$7,861.86	\$903.16	(\$87.65)	\$8,765.03	\$8,677.38
Non-SSI Newborns 0 to 2 Months	\$1,875.04	\$224.10	(\$20.99)	\$2,099.14	\$2,078.15
Non-SSI Newborns 3 to 12 Months	\$248.70	\$39.62	(\$2.88)	\$288.32	\$285.44
Foster Care	\$609.85	\$80.59	(\$6.90)	\$690.44	\$683.53
MYPAC	\$3,805.00	\$443.00	(\$42.48)	\$4,248.00	\$4,205.52
MA Children	\$189.73	\$32.93	(\$2.23)	\$222.66	\$220.43
Quasi-CHIP	\$191.61	\$33.15	(\$2.25)	\$224.76	\$222.51
Total - All Cap Cells¹					
Using SFY 2022 Exposures	\$388.51	\$55.48	(\$4.44)	\$443.99	\$439.55
Using SFY 2023 Exposures	\$420.02	\$59.06	(\$4.79)	\$479.08	\$474.29
Total Expenditures					
Using SFY 2022 Exposures	\$2,317,339,863	\$330,928,546	(\$26,482,684)	\$2,648,268,409	\$2,621,785,725
Using SFY 2023 Exposures	\$1,926,626,884	\$270,886,490	(\$21,975,134)	\$2,197,513,374	\$2,175,538,240

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

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

Cap Cell	Medical Costs PMPM	Non-Service Expenses PMPM¹	Quality Withhold	Total Capitation Rate Prior to Withhold	Total Capitation Rate after Withhold
Non-Newborn SSI / Disabled	\$1,079.30	\$129.04	(\$12.08)	\$1,208.34	\$1,196.25
Breast and Cervical Cancer	\$3,488.34	\$390.92	(\$38.79)	\$3,879.26	\$3,840.47
MA Adult	\$490.24	\$65.00	(\$5.55)	\$555.24	\$549.69
Pregnant Women	\$1,031.58	\$123.85	(\$11.55)	\$1,155.43	\$1,143.87
SSI / Disabled Newborn	\$8,000.01	\$881.38	(\$88.81)	\$8,881.39	\$8,792.57
Non-SSI Newborns 0 to 2 Months	\$1,834.16	\$211.10	(\$20.45)	\$2,045.26	\$2,024.81
Non-SSI Newborns 3 to 12 Months	\$248.67	\$38.74	(\$2.87)	\$287.41	\$284.54
Foster Care	\$639.31	\$81.20	(\$7.21)	\$720.51	\$713.31
MYPAC	\$3,735.60	\$417.80	(\$41.53)	\$4,153.40	\$4,111.86
MA Children	\$200.39	\$33.49	(\$2.34)	\$233.88	\$231.54
Quasi-CHIP	\$202.70	\$33.74	(\$2.36)	\$236.44	\$234.08
Total - All Cap Cells¹					
Using SFY 2022 Exposures	\$402.00	\$55.41	(\$4.57)	\$457.41	\$452.83
Using SFY 2023 Exposures	\$433.42	\$58.82	(\$4.92)	\$492.24	\$487.32
Total Expenditures					
Using SFY 2022 Exposures	\$2,397,793,873	\$330,484,461	(\$27,282,783)	\$2,728,278,334	\$2,700,995,551
Using SFY 2023 Exposures	\$1,988,078,377	\$269,817,313	(\$22,578,957)	\$2,257,895,690	\$2,235,316,733

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

Exhibit 15 Mississippi Division of Medicaid SFY 2023 Capitation Rate Development CY 2019 to SFY 2023 Unit Cost Trends by Category of Service																
Rate Cell	Category of Service	Percentage of CY 2019 Paid						CY 2019 to SFY 2023 Unit Cost Trend (Annualized)								
		PPEC	PDN	ASC	ASD	HH	PRTF	All Other	PPEC	PDN	ASC	ASD	HH	PRTF	All Other	Composite
Non-Newborn SSI / Disabled	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	1.0%	99.0%	0.00%	0.00%	0.00%	0.00%	0.00%	5.77%	-0.14%	-0.08%
Non-Newborn SSI / Disabled	Outpatient Hospital Services	0.0%	0.0%	0.5%	0.0%	1.0%	0.0%	98.5%	0.00%	0.00%	1.95%	0.00%	7.10%	0.00%	-0.18%	-0.08%
Non-Newborn SSI / Disabled	Physician Services	4.2%	0.0%	1.0%	0.3%	0.0%	0.0%	94.5%	2.89%	0.00%	1.95%	5.64%	0.00%	0.00%	1.18%	1.27%
Non-Newborn SSI / Disabled	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	2.50%	2.50%
Non-Newborn SSI / Disabled	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Non-Newborn SSI / Disabled	Other Services	0.0%	7.4%	0.0%	0.0%	0.0%	0.0%	92.6%	0.00%	3.16%	0.00%	0.00%	6.47%	0.00%	0.57%	0.77%
Breast and Cervical Cancer	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Breast and Cervical Cancer	Outpatient Hospital Services	0.0%	0.0%	0.4%	0.0%	0.3%	0.0%	99.3%	0.00%	0.00%	1.95%	0.00%	3.88%	0.00%	-0.18%	-0.15%
Breast and Cervical Cancer	Physician Services	0.0%	0.0%	1.4%	0.0%	0.0%	0.0%	98.6%	0.00%	0.00%	1.95%	0.00%	0.00%	0.00%	1.18%	1.19%
Breast and Cervical Cancer	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	2.50%	2.50%
Breast and Cervical Cancer	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Breast and Cervical Cancer	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
MA Adult	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
MA Adult	Outpatient Hospital Services	0.0%	0.0%	0.8%	0.0%	0.2%	0.0%	99.0%	0.00%	0.00%	1.95%	0.00%	7.36%	0.00%	-0.18%	-0.14%
MA Adult	Physician Services	0.0%	0.0%	1.8%	0.0%	0.0%	0.0%	98.2%	0.00%	0.00%	1.95%	0.00%	0.00%	0.00%	2.01%	2.01%
MA Adult	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	3.00%	3.00%
MA Adult	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
MA Adult	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
Deliveries - MA Adult	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Deliveries - MA Adult	Outpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.18%	-0.14%
Deliveries - MA Adult	Physician Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	2.01%	2.01%
Deliveries - MA Adult	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	3.00%	3.00%
Deliveries - MA Adult	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Deliveries - MA Adult	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
Pregnant Women	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Pregnant Women	Outpatient Hospital Services	0.0%	0.0%	0.1%	0.0%	0.2%	0.0%	99.7%	0.00%	0.00%	1.95%	0.00%	8.13%	0.00%	-0.18%	-0.16%
Pregnant Women	Physician Services	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	99.6%	0.00%	0.00%	1.95%	0.00%	0.00%	0.00%	2.01%	2.01%
Pregnant Women	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	3.00%	3.00%
Pregnant Women	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Pregnant Women	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
Deliveries - Pregnant Women	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Deliveries - Pregnant Women	Outpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.18%	-0.16%
Deliveries - Pregnant Women	Physician Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	2.01%	2.01%
Deliveries - Pregnant Women	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	3.00%	3.00%
Deliveries - Pregnant Women	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Deliveries - Pregnant Women	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
SSI / Disabled Newborn	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
SSI / Disabled Newborn	Outpatient Hospital Services	0.0%	0.0%	0.1%	0.0%	1.4%	0.0%	98.5%	0.00%	0.00%	1.95%	0.00%	9.82%	0.00%	-0.18%	-0.01%
SSI / Disabled Newborn	Physician Services	5.4%	0.0%	0.0%	0.0%	0.0%	0.0%	94.6%	2.89%	0.00%	1.95%	0.00%	0.00%	0.00%	1.69%	1.75%
SSI / Disabled Newborn	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
SSI / Disabled Newborn	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
SSI / Disabled Newborn	Other Services	0.0%	18.4%	0.0%	0.0%	0.0%	0.0%	81.6%	0.00%	3.16%	0.00%	0.00%	0.00%	0.00%	0.57%	1.06%
Non-SSI Newborns 0 to 2 Months	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Non-SSI Newborns 0 to 2 Months	Outpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%	99.7%	0.00%	0.00%	0.00%	0.00%	9.26%	0.00%	-0.18%	-0.14%
Non-SSI Newborns 0 to 2 Months	Physician Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	2.89%	0.00%	0.00%	0.00%	0.00%	0.00%	1.69%	1.69%
Non-SSI Newborns 0 to 2 Months	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
Non-SSI Newborns 0 to 2 Months	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Non-SSI Newborns 0 to 2 Months	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	3.16%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
Non-SSI Newborns 3 to 12 Months	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-0.14%	-0.14%
Non-SSI Newborns 3 to 12 Months	Outpatient Hospital Services	0.0%	0.0%	0.4%	0.0%	0.1%	0.0%	99.5%	0.00%	0.00%	1.95%	0.00%	10.43%	0.00%	-0.18%	-0.15%
Non-SSI Newborns 3 to 12 Months	Physician Services	1.1%	0.0%	1.0%	0.0%	0.0%	0.0%	98.0%	2.89%	0.00%	1.95%	0.00%	0.00%	0.00%	1.69%	1.70%
Non-SSI Newborns 3 to 12 Months	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
Non-SSI Newborns 3 to 12 Months	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Non-SSI Newborns 3 to 12 Months	Other Services	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	99.9%	0.00%	3.16%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
Foster Care	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	73.7%	26.3%	0.00%	0.00%	0.00%	0.00%	0.00%	5.65%	-0.14%	4.20%
Foster Care	Outpatient Hospital Services	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%	99.7%	0.00%	0.00%	1.95%	0.00%	-2.89%	0.00%	-0.18%	-0.17%
Foster Care	Physician Services	3.6%	0.0%	1.6%	0.3%	0.0%	0.0%	94.5%	2.89%	0.00%	1.95%	5.64%	0.00%	0.00%	1.69%	1.75%
Foster Care	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
Foster Care	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Foster Care	Other Services	0.0%	10.0%	0.0%	0.0%	0.0%	0.0%	90.0%	0.00%	3.16%	0.00%	0.00%	0.00%	0.00%	0.57%	0.84%
MYPAC	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	17.0%	83.0%	0.00%	0.00%	0.00%	0.00%	0.00%	5.99%	-0.14%	0.97%
MYPAC	Outpatient Hospital Services	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	99.9%	0.00%	0.00%	1.95%	0.00%	0.00%	0.00%	-0.18%	-0.17%
MYPAC	Physician Services	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	99.7%	2.89%	0.00%	1.95%	0.00%	0.00%	0.00%	0.06%	0.07%
MYPAC	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
MYPAC	Dental Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
MYPAC	Other Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.57%	0.57%
MA Children	Inpatient Hospital Services	0.0%	0.0%	0.0%	0.0%	0.0%	18.1%	81.9%	0.00%	0.00%	0.00%	0.00%	0.00%	6.07%	-0.14%	1.05%
MA Children	Outpatient Hospital Services	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	99.3%	0.00%	0.00%	1.95%	0.00%	7.85%	0.00%	-0.18%	-0.16%
MA Children	Physician Services	0.2%	0.0%	1.8%	0.0%	0.0%	0.0%	97.9%	2.89%	0.00%	1.95%	5.64%	0.00%	0.00%	1.69%	1.70%
MA Children	Drug Services	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	1.50%	1.50%
MA Children	Dental Services	0.0%</														

Exhibit 16
Mississippi Division of Medicaid
SFY 2023 Capitation Rate Development
Postpartum Extension Adjustment

		Non-Delivery Costs			Delivery Costs		
		CY 2018	CY 2019	Blended	CY 2018	CY 2019	Blended
Prior Eligibility: Prenatal through 60 Days Postpartum							
Member Months	(a)	135,337	137,224	N/A	135,337	137,224	N/A
Total Allowed	(b)	\$57,365,234	\$57,137,775	N/A	\$83,563,032	\$81,213,677	N/A
Allowed PMPM	(c) = (b) / (a)	\$423.87	\$416.38	\$420.10	\$617.44	\$591.83	\$604.55
New Eligibility: 3 through 12 Months Postpartum							
Member Months	(d)	3,598	3,379	N/A	3,598	3,379	N/A
Total Allowed	(e)	\$913,511	\$818,791	N/A	\$0	\$0	N/A
Allowed PMPM	(f) = (e) / (d)	\$253.88	\$242.35	\$248.30	\$0.00	\$0.00	\$0.00
Total Population							
Member Months	(g) = (a) + (d)	138,935	140,603	N/A	138,935	140,603	N/A
Total Allowed	(h) = (b) + (e)	\$58,278,746	\$57,956,566	N/A	\$83,563,032	\$81,213,677	N/A
Allowed PMPM	(i) = (h) + (g)	\$419.47	\$412.20	\$415.81	\$601.45	\$577.61	\$589.46
Postpartum Population Change Factor	(j) = (i) / (c)			0.990			0.975

Exhibit 17
Mississippi Division of Medicaid
SFY 2023 Capitation Rate Development
CY 2019 to SFY 2023 Population Acuity Adjustment

MA Adults

	Risk Adjustment Period Diagnosis Period	Q3 to Q4 2018 CY 2017	Q1 to Q2 2019 SFY 2018	Q3 to Q4 2019 CY 2018
	Prior Enrollment Month New Enrollment Month	October 2017 April 2018	April 2018 October 2018	October 2018 April 2019
<i>a</i>	Enrollment			
<i>b</i>	Prior Enrollment Month	46,782	43,812	40,388
	New Enrollment Month	43,812	40,388	41,410
<i>c = b / a</i>	Membership Change Factor	0.937	0.922	1.025
	Risk Score			
<i>d</i>	Prior Enrollment Month	1.040	1.035	1.087
<i>e</i>	New Enrollment Month	1.053	1.080	1.077
<i>f = e / d</i>	Risk Score Change Factor	1.012	1.043	0.992
	Risk Score Model - Fit Using steps c and f ¹ Risk Score Factor = $g * ((\text{Enrollment Change})^h)$			
<i>g</i>	Model Variable 1	0.989		
<i>h</i>	Model Variable 2	(0.478)		
<i>i</i>	Average Enrollment			
	Base Period - CY 2019	41,126		
<i>j</i>	Rating Period - SFY 2023	39,244		
<i>k = j / i</i>	Enrollment Change - CY 2019 to SFY 2023	0.954		
	Risk Score Factor			
<i>l = g × (1.00 ^ h)</i>	No Enrollment Change	0.989		
<i>m = g × (l ^ h)</i>	CY 2019 to SFY 2023 Enrollment Change	1.012		
<i>q = m / l</i>	Implied Acuity Adjustment - CY 2019 to SFY 2023	1.023		

MA Children and QCHIP

	Risk Adjustment Period Diagnosis Period	Q3 to Q4 2018 CY 2017	Q1 to Q2 2019 SFY 2018	Q3 to Q4 2019 CY 2018
	Prior Enrollment Month New Enrollment Month	October 2017 April 2018	April 2018 October 2018	October 2018 April 2019
<i>a</i>	Enrollment			
<i>b</i>	Prior Enrollment Month	321,471	298,749	278,944
	New Enrollment Month	298,749	278,944	284,453
<i>c = b / a</i>	Membership Change Factor	0.929	0.934	1.020
	Risk Score			
<i>d</i>	Prior Enrollment Month	1.028	1.023	1.046
<i>e</i>	New Enrollment Month	1.035	1.049	1.046
<i>f = e / d</i>	Risk Score Change Factor	1.007	1.026	1.000
	Risk Score Model - Fit Using steps c and f ¹ Risk Score Factor = $g * ((\text{Enrollment Change})^h)$			
<i>g</i>	Model Variable 1	1.001		
<i>h</i>	Model Variable 2	(0.200)		
<i>i</i>	Average Enrollment			
	Base Period - CY 2019	283,630		
<i>j</i>	Rating Period - SFY 2023	243,825		
<i>k = j / i</i>	Enrollment Change - CY 2019 to SFY 2023	0.860		
	Risk Score Factor			
<i>l = g × (1.00 ^ h)</i>	No Enrollment Change	1.001		
<i>m = g × (l ^ h)</i>	CY 2019 to SFY 2023 Enrollment Change	1.032		
<i>q = m / l</i>	Implied Acuity Adjustment - CY 2019 to SFY 2023	1.031		

¹ Risk score change predicted using a power regression model for each population.



Q1 to Q2 2020
SFY 2019

April 2019
October 2019

41,410
40,934
0.989

1.091
1.065
0.976



Q1 to Q2 2020
SFY 2019

April 2019
October 2019

284,453
281,405
0.989

1.058
1.057
0.999

Exhibit 18
Mississippi Division of Medicaid
SFY 2023 MississippiCAN Capitation Rate Development
SFY 2023 MississippiCAN Expenditure Estimate

	a	b	c	d	e	f	g	h	i	j	k = sum of b through j	l = a x k	m	n = l x m
Rate Cell	Projected SFY 2023 Member Months	SFY 2023 Statewide Capitation Rates¹	MHAP-FSA PMPM	Premium Tax on MHAP-FSA PMPM²	MHAP-QIPP PMPM	Premium Tax on MHAP-QIPP PMPM³	TREAT PMPM	Premium Tax on TREAT PMPM⁴	MAPS PMPM	Premium Tax on MAPS PMPM⁵	Total Rate at 1.0 Risk Score after Withhold	MississippiCAN Estimated Cost	FMAP / EFMAP⁶	Federal Estimated Cost
Non-Newborn SSI / Disabled	710,345	\$1,208.34	\$188.96	\$4.92	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$1,448.82	\$1,042,135,468	81.07%	\$844,885,277
North Region	247,720	1,103.21	138.75	4.29	62.81	1.94	3.21	0.10	8.29	0.26	1,322.86	327,697,853	81.07%	265,672,842
Central Region	263,013	1,268.75	170.81	5.28	62.81	1.94	3.21	0.10	8.29	0.26	1,521.46	400,164,214	81.07%	324,423,133
South Region	208,612	1,256.67	168.02	5.20	62.81	1.94	3.21	0.10	8.29	0.26	1,506.50	314,273,401	81.07%	254,789,303
Breast and Cervical Cancer	992	\$3,879.26	\$648.99	\$20.07	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$4,624.93	\$4,657,594	81.07%	\$3,776,028
North Region	195	3,541.76	576.36	17.83	62.81	1.94	3.21	0.10	8.29	0.26	4,212.56	820,282	81.07%	665,023
Central Region	301	4,073.22	364.12	11.26	62.81	1.94	3.21	0.10	8.29	0.26	4,525.21	1,361,452	81.07%	1,103,763
South Region	496	4,034.43	850.12	26.29	62.81	1.94	3.21	0.10	8.29	0.26	4,987.45	2,475,860	81.07%	2,007,242
MA Adult	469,546	\$555.24	\$71.27	\$2.20	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$705.33	\$330,994,660	81.07%	\$268,345,646
North Region	150,542	524.15	66.81	2.07	62.81	1.94	3.21	0.10	8.29	0.26	669.63	100,807,071	81.07%	81,726,812
Central Region	157,913	577.45	75.00	2.32	62.81	1.94	3.21	0.10	8.29	0.26	731.38	115,494,356	81.07%	93,634,162
South Region	161,091	561.35	71.80	2.22	62.81	1.94	3.21	0.10	8.29	0.26	711.98	114,693,233	81.07%	92,984,672
Pregnant Women	91,902	\$1,155.43	\$253.05	\$7.83	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$1,492.92	\$137,309,589	81.07%	\$111,320,316
North Region	28,371	1,090.72	247.82	7.66	62.81	1.94	3.21	0.10	8.29	0.26	1,422.82	40,366,379	81.07%	32,728,033
Central Region	33,901	1,201.64	264.69	8.19	62.81	1.94	3.21	0.10	8.29	0.26	1,551.13	52,584,283	81.07%	42,631,392
South Region	29,631	1,168.14	244.75	7.57	62.81	1.94	3.21	0.10	8.29	0.26	1,497.07	44,358,927	81.07%	35,962,891
SSI / Disabled Newborn	4,066	\$8,881.39	\$2,329.48	\$72.05	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$11,359.52	\$46,247,430	81.07%	\$37,493,947
North Region	1,256	8,721.52	2,126.23	65.76	62.81	1.94	3.21	0.10	8.29	0.26	10,990.12	13,807,496	81.07%	11,194,082
Central Region	1,764	9,050.13	2,629.57	81.33	62.81	1.94	3.21	0.10	8.29	0.26	11,837.64	20,877,373	81.07%	16,925,808
South Region	1,046	8,845.86	2,067.64	63.95	62.81	1.94	3.21	0.10	8.29	0.26	11,054.06	11,562,560	81.07%	9,374,057
Non-SSI Newborns 0 to 2 Months	74,603	\$2,045.26	\$618.17	\$19.12	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$2,759.16	\$205,849,887	81.07%	\$166,887,650
North Region	23,436	2,008.45	645.82	19.97	62.81	1.94	3.21	0.10	8.29	0.26	2,750.85	64,469,614	81.07%	52,267,128
Central Region	27,413	2,084.12	626.55	19.38	62.81	1.94	3.21	0.10	8.29	0.26	2,806.66	76,940,186	81.07%	62,377,332
South Region	23,753	2,037.08	581.23	17.98	62.81	1.94	3.21	0.10	8.29	0.26	2,712.89	64,440,087	81.07%	52,243,190
Non-SSI Newborns 3 to 12 Months	215,942	\$287.41	\$37.27	\$1.15	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$402.44	\$86,913,037	81.07%	\$70,462,572
North Region	67,161	282.24	43.10	1.33	62.81	1.94	3.21	0.10	8.29	0.26	403.28	27,084,543	81.07%	21,958,116
Central Region	79,800	292.87	37.12	1.15	62.81	1.94	3.21	0.10	8.29	0.26	407.75	32,538,778	81.07%	26,380,001
South Region	68,981	286.26	31.76	0.98	62.81	1.94	3.21	0.10	8.29	0.26	395.61	27,289,716	81.07%	22,124,455
Foster Care	86,381	\$720.51	\$161.98	\$5.01	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$964.11	\$83,207,687	81.07%	\$67,458,552
North Region	23,841	707.54	160.16	4.95	62.81	1.94	3.21	0.10	8.29	0.26	949.27	22,631,258	81.07%	18,347,727
Central Region	25,095	734.20	207.52	6.42	62.81	1.94	3.21	0.10	8.29	0.26	1,024.75	25,716,425	81.07%	20,848,948
South Region	37,445	717.63	132.62	4.10	62.81	1.94	3.21	0.10	8.29	0.26	930.96	34,860,005	81.07%	28,261,877
MYPAC	5,177	\$4,153.40	\$208.14	\$6.44	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$4,444.58	\$22,991,152	81.07%	\$18,639,502
North Region	1,619	4,078.64	176.95	5.47	62.81	1.94	3.21	0.10	8.29	0.26	4,337.67	7,022,742	81.07%	5,693,513
Central Region	1,712	4,232.31	267.53	8.27	62.81	1.94	3.21	0.10	8.29	0.26	4,584.72	7,850,020	81.07%	6,364,207
South Region	1,845	4,136.79	180.39	5.58	62.81	1.94	3.21	0.10	8.29	0.26	4,399.36	8,118,390	81.07%	6,581,782
MA Children	2,631,991	\$233.88	\$21.87	\$0.68	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$333.03	\$876,490,732	81.07%	\$710,592,949
North Region	839,490	229.67	20.73	0.64	62.81	1.94	3.21	0.10	8.29	0.26	327.65	275,061,806	81.07%	222,999,482
Central Region	959,763	238.33	23.85	0.74	62.81	1.94	3.21	0.10	8.29	0.26	339.53	325,864,449	81.07%	264,186,456
South Region	832,738	232.95	20.72	0.64	62.81	1.94	3.21	0.10	8.29	0.26	330.91	275,564,478	81.07%	223,407,011
Quasi-CHIP	287,026	\$236.44	\$17.71	\$0.55	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$331.30	\$95,099,940	84.75%	\$80,597,199
North Region	92,667	232.19	16.30	0.50	62.81	1.94	3.21	0.10	8.29	0.26	325.60	30,172,449	84.75%	25,571,150
Central Region	107,652	240.93	19.09	0.59	62.81	1.94	3.21	0.10	8.29	0.26	337.22	36,302,749	84.75%	30,766,580
South Region	86,707	235.50	17.49	0.54	62.81	1.94	3.21	0.10	8.29	0.26	330.13	28,624,743	84.75%	24,259,469
Total - All Rate Cells	4,586,971	\$492.24	\$68.25	\$2.11	\$62.81	\$1.94	\$3.21	\$0.10	\$8.29	\$0.26	\$639.21	\$2,931,897,177	81.19%	\$2,380,459,639
North Region	1,476,297	473.22	64.55	2.00	62.81	1.94	3.21	0.10	8.29	0.26	616.37	909,941,492	81.19%	738,821,908
Central Region	1,658,328	508.74	73.11	2.26	62.81	1.94	3.21	0.10	8.29	0.26	660.72	1,095,694,284	81.19%	889,641,782
South Region	1,452,346	492.65	66.46	2.06	62.81	1.94	3.21	0.10	8.29	0.26	637.77	926,261,400	81.19%	751,995,948

¹ Capitation rates prior to quality withhold, excluding MHAP, MAPS, and TREAT.

² Calculated using a premium tax of 3.00%

³ For SFY 2023, FMAP is calculated as the blend of three months using an FMAP of 84.51%, three months using an FMAP of 84.06%, and six months using an FMAP of 77.86%. For SFY 2023, EFMAP is calculated as the blend of six months using an EFMAP of 85.00% and six months using an EFMAP of 84.50%. Assuming a PHE end as of December 31, 2022, the first six months of both FMAP and EFMAP projections reflect an additional 6.2% FMAP and EFMAP, up to a maximum of 85%.

Exhibit 19 Mississippi Division of Medicaid SFY 2023 MississippiCAN Capitation Rate Development Illustrative MLR Development																			
	a	b	c	d = b × c	e	f = d × (e × 1%) / (1 - 1%)	g	h	i	j	k = d + f + g + h + i + j	l	m = g + h + i + j + l	n	o = g + h + i + j + n	p = m / k	q = o / k		
Rate Cell	Projected SFY 2023 Membership¹	SFY 2023 Regional Capitation Rates net of Withhold²	Illustrative Risk Score³	Risk Adjusted Premium Net of Withhold	% of Withhold Returned¹	Withhold Returned	MHAP-FSA PMPM Gross of Premium Tax¹	MHAP-QIPP Gross of Premium Tax¹	MAPS Gross of Premium Tax¹	TREAT Gross of Premium Tax¹	Total Revenue PMPM	Projected SFY 2023 Medical Costs PMPM¹	Projected Total Service Costs PMPM	Illustrative Actual SFY 2023 Medical Costs PMPM¹	Illustrative Actual Total Service Costs PMPM	Illustrative Target MLR	Illustrative Actual MLR		
Non-Newborn SSI / Disabled	719,345	\$1,196.25	1.000	\$1,196.25	100%	\$12.08	\$163.88	\$64.75	\$8.54	\$3.31	\$1,448.82	\$1,079.30	\$1,319.79	\$1,130.00	\$1,370.49	91.1%	94.6%		
Breast and Cervical Cancer	992	\$3,840.47	1.000	\$3,840.47	100%	\$38.79	\$669.06	\$64.75	\$8.54	\$3.31	\$4,624.93	\$3,488.34	\$4,234.01	\$3,660.00	\$4,405.67	91.5%	95.3%		
MA Adult	469,546	\$549.69	1.000	\$549.69	100%	\$5.55	\$73.48	\$64.75	\$8.54	\$3.31	\$705.33	\$490.24	\$640.33	\$510.00	\$660.09	90.8%	93.6%		
Pregnant Women	91,902	\$1,143.87	1.000	\$1,143.87	100%	\$11.55	\$260.88	\$64.75	\$8.54	\$3.31	\$1,492.92	\$1,031.58	\$1,369.07	\$1,080.00	\$1,417.49	91.7%	94.9%		
SSI / Disabled Newborn	4,066	\$8,792.57	1.000	\$8,792.57	100%	\$88.81	\$2,401.53	\$64.75	\$8.54	\$3.31	\$11,359.52	\$8,000.01	\$10,478.15	\$8,400.00	\$10,878.14	92.2%	95.8%		
Non-SSI Newborns 0 to 2 Months	74,603	\$2,024.81	1.000	\$2,024.81	100%	\$20.45	\$637.29	\$64.75	\$8.54	\$3.31	\$2,759.16	\$1,834.16	\$2,548.07	\$1,930.00	\$2,643.90	92.3%	95.8%		
Non-SSI Newborns 3 to 12 Months	215,942	\$284.54	1.000	\$284.54	100%	\$2.87	\$38.42	\$64.75	\$8.54	\$3.31	\$402.44	\$248.67	\$363.70	\$260.00	\$375.03	90.4%	93.2%		
Foster Care	86,381	\$713.31	1.000	\$713.31	100%	\$7.21	\$166.99	\$64.75	\$8.54	\$3.31	\$964.11	\$639.31	\$882.91	\$670.00	\$913.60	91.6%	94.8%		
MYPAC	5,177	\$4,111.86	1.000	\$4,111.86	100%	\$41.53	\$214.57	\$64.75	\$8.54	\$3.31	\$4,444.58	\$3,735.60	\$4,026.78	\$3,920.00	\$4,211.18	90.6%	94.7%		
MA Children	2,631,991	\$231.54	1.000	\$231.54	100%	\$2.34	\$22.54	\$64.75	\$8.54	\$3.31	\$333.03	\$200.39	\$299.54	\$210.00	\$309.15	89.9%	92.8%		
Quasi-CHIP	287,026	\$234.08	1.000	\$234.08	100%	\$2.36	\$18.25	\$64.75	\$8.54	\$3.31	\$331.30	\$202.70	\$297.56	\$210.00	\$304.86	89.8%	92.0%		
Total	4,586,971	\$487.32	1.000	\$487.32	100%	\$4.92	\$70.36	\$64.75	\$8.54	\$3.31	\$639.21	\$433.42	\$580.39	\$453.60	\$600.57	90.8%	94.0%		
Illustrative Actual MLR																			
Illustrative Target MLR																			
MLR Difference																			
MLR Difference Exceeding Corridor																			
Total Revenue	\$2,932,032,221																		
Risk Corridor Settlement Received (Paid) by DOM	(\$33,938,543)																		

¹ MLR calculation will be populated with actual SFY 2023 CCO-specific values.

² Illustrative values demonstrate projected regional enrollment mix. Actual values will use CCO-specific regional enrollment mix.

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

Exhibit 20A			
Mississippi Division of Medicaid			
Procedure Codes for Non-Psychiatric Physician Visits			
W9009	90066	90544	92004
W9348	90067	90545	92012
W9349	90068	90546	92014
90000	90069	90547	99062
90001	90070	90548	99063
90002	90071	90549	99064
90003	90072	90550	99065
90004	90073	90551	99241
90005	90074	90552	99242
90006	90075	90553	99243
90007	90076	90554	99244
90008	90077	90555	99245
90009	90078	90556	99271
90010	90079	90557	99272
90011	90080	90558	99273
90012	90500	90559	99274
90013	90501	90560	99275
90014	90502	90561	99341
90015	90503	90562	99342
90016	90504	90563	99343
90017	90505	90564	99344
90018	90506	90565	99345
90019	90507	90566	99347
90020	90508	90567	99348
90040	90509	90568	99349
90041	90510	90569	99350
90042	90511	90570	
90043	90512	90571	
90044	90513	90572	
90045	90514	90573	
90046	90515	90574	
90047	90516	90575	
90048	90517	90576	
90049	90518	90577	
90050	90519	90578	
90051	90520	90579	
90052	90530	90580	
90053	90531	90600	
90054	90532	90605	
90055	90533	90610	
90056	90534	90620	
90057	90535	90630	
90058	90536	90640	
90059	90537	90641	
90060	90538	90642	
90061	90539	90643	
90062	90540	90650	
90063	90541	90651	
90064	90542	90652	
90065	90543	92002	

Exhibit 20B
Mississippi Division of Medicaid
Procedure Codes for Psychiatric Physician Visits

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

6/24/2025

Exhibit 20C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

08080717600	08080730790	08080783400	08080941110	08137002281	08137002603	08137004414	08137005390	08137006655	08137102126	08137116894	08137607623	08173909101	08214028739	08214057601	08214114027	08222094193	08225002602	08225005486	08225008702
08080718000	08080731000	08080791100	08080941210	08137002283	08137002604	08137004424	08137005501	08137006660	08137102390	08137117120	08164100125	08179002810	08214028755	08214057716	08214115027	08222094391	08225002603	08225005523	08225008703
08080718100	08080731100	08080800000	08080941310	08137002285	08137002607	08137004430	08137005505	08137006665	08137102394	08137117121	08164100525	08179002827	08214029721	08214057717	08214130001	08222094599	08225002605	08225005525	08225008705
08080718120	08080731300	08080800001	08080941410	08137002287	08137002608	08137004431	08137005518	08137006670	08137102488	08137117128	08164100625	08179002834	08214029724	08214057761	08214131001	08222095121	08225002802	08225005553	08225008706
08080718150	08080731901	08080804200	08080941610	08137002301	08137002613	08137004434	08137005520	08137006675	08137102491	08137117210	08164100725	08179002841	08214029727	08214058539	08214131101	08222095435	08225002803	08225005555	08225009010
08080718170	08080732300	08080804300	08080948000	08137002302	08137002618	08137004436	08137005523	08137006680	08137102561	08137117297	08173000201	08179010204	08214029735	08214058716	08214210001	08222095459	08225002805	08225005582	08225011601
08080718200	08080732501	08080804400	08080949000	08137002303	08137002619	08137004438	08137005532	08137006685	08137102760	08137117299	08179010303	08179010303	08214029737	08214058717	08214215001	08222095534	08225002806	08225005583	08225011602
08080718230	08080733100	08080804500	08080949100	08137002304	08137002623	08137004444	08137005534	08137006690	08137102765	08137117400	08173000525	08179015209	08214029739	08214058733	08214300001	08222095626	08225002902	08225005585	08225011701
08080718250	08080733200	08080804600	08080950000	08137002305	08137002628	08137004446	08137005536	08137006693	08137102799	08137117401	08173001510	08179041208	08214029740	08214059080	08214310001	08222095633	08225002903	08225005593	08225011702
08080718270	08080733900	08080804700	08080958010	08137002321	08137002633	08137004452	08137005540	08137006931	08137102802	08137117419	08173001610	08179041802	08214029748	08214060001	08214352719	08222095657	08225002905	08225005595	08225011801
08080718300	08080733901	08080810055	08080959000	08137002322	08137002638	08137004458	08137005544	08137006937	08137102837	08137117420	08173001720	08179042502	08214029750	08214061001	08214352901	08222095681	08225002906	08225005612	08225011802
08080718350	08080734600	08080812200	08080964000	08137002329	08137002643	08137004488	08137005548	08137006981	08137102902	08137117459	08173003001	08179048009	08214029755	08214065711	08214352933	08222095685	08225003020	08225005613	08225011881
08080718400	08080741805	08080812701	08080964200	08137002331	08137002644	08137004482	08137005549	08137007021	08137102922	08137117460	08173003102	08179050101	08214030001	08214065724	08214353001	08222142387	08225003030	08225005615	08225011882
08080718450	08080741813	08080812801	08080965200	08137002344	08137002648	08137004463	08137005556	08137007202	08137102933	08137117461	08173003201	08179071205	08214030101	08214065726	08214353033	08222142394	08225003040	08225005616	08225011891
08080718500	08080741821	08080818100	08080982010	08137002354	08137002659	08137004464	08137005560	08137007238	08137102943	08137117462	08173003301	08179072509	08214030201	08214065727	08214353719	08222142400	08225003080	08225005623	08225011892
08080719300	08080742000	08080818112	08080988000	08137002355	08137002738	08137004464	08137005561	08137007330	08137102973	08137117468	08173003401	08193007500	08214030721	08214065735	08214354033	08222143896	08225003090	08225005625	08225011901
08080719401	08080748000	08080818113	08080988600	08137002356	08137002770	08137004465	08137005562	08137007610	08137103003	08137117472	08173003501	08193000744	08214030724	08214065739	08214354719	08222172396	08225003302	08225005633	08225011902
08080719810	08080750095	08080819010	08080989000	08137002357	08137002771	08137004465	08137005563	08137007612	08137103004	08137117473	08173003601	08193000812	08214030727	08214065740	08214355719	08222173195	08225003303	08225005635	08225011951
08080720080	08080750300	08080819100	08080989100	08137002358	08137002772	08137004466	08137005566	08137007623	08137103005	08137117474	08173005310	08193100576	08214030735	08214065748	08214359001	08222173393	08225003305	08225005803	08225011952
08080720100	08080751622	08080819112	08080989200	08137002359	08137002774	08137004466	08137005571	08137007902	08137103007	08137117475	08173005410	08193100579	08214030737	08214065750	08214359033	08222173591	08225003382	08225005805	08225011991
08080720120	08080752042	08080819210	08080989300	08137002361	08137002778	08137004470	08137005576	08137007928	08137104653	08137117477	08173005510	08193100583	08214030739	08214065755	08214359719	08222174192	08225003383	08225005813	08225011992
08080720150	08080752505	08080820100	08080989400	08137002362	08137002779	08137004470	08137005583	08137007929	08137105834	08137117478	08173005610	08193102501	08214030740	08214065757	08214380001	08222174390	08225003385	08225005815	08225034402
08080720163	08080752513	08080820112	08080989500	08137002363	08137002780	08137004471	08137005586	08137007962	08137105834	08137117479	08173005710	08193178801	08214030748	08214070001	08214381001	08222174598	08225003386	08225005816	08225034403
08080720170	08080753901	08080821100	08080989600	08137002364	08137002781	08137004473	08137005620	08137008042	08137105833	08137117480	08173005810	08193178801	08214030750	08214070201	08214383034	08222182180	08225003392	08225005823	08225034405
08080720189	08080754000	08080821112	08080989700	08137002365	08137002782	08137004473	08137005621	08137008043	08137105913	08137117483	08173005920	08195020312	08214030755	08214070721	08214384034	08222182586	08225003393	08225005825	08225034406
08080720200	08080754100	08080822100	08080989800	08137002366	08137002783	08137004475	08137005622	08137008045	08137105918	08137117501	08173006020	08195040501	08214030757	08214070726	08214385034	08222192196	08225003395	08225005833	08225044502
08080720205	08080754200	08080822112	08080989900	08137002367	08137002780	08137004475	08137005634	08137008047	08137105922	08137117547	08173006120	08195060601	08214070727	08214070727	08214500712	08222192592	08225003396	08225005835	08225044503
08080720221	08080754400	08080822300	08137002368	08137002781	08137004475	08137005635	08137008056	08137105927	08137117548	08173006220	081950303150	08214035726	08214070729	08214070729	08214501712	08222193155	08225004020	08225006282	08225044504
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NDCs Excluded from Monthly Pharmacy Script Limits

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35664015001	36000001394	36000016178	36000019381	36000021912	36000037420	36000043362	36000051357	36000055033	36652030418	37000026003	37000050585	37000082752	38396000425	38396033070	38396044464	38415030021	38472036905	38472044316	38472058451
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Exhibit 20C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

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Exhibit 20C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

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Exhibit 20C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																			
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Exhibit 20C Mississippi Division of Medicaid NDCs Excluded from Monthly Pharmacy Script Limits																											
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Exhibit 20C
Mississippi Division of Medicaid
NDCs Excluded from Monthly Pharmacy Script Limits

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December 16, 2022

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Re: MississippiCAN Capitation Risk Adjustment – Q1 to Q2 2023 Prospective Payments

Dear Jennifer:

Milliman and the Mississippi Division of Medicaid (DOM) developed regional capitation rates for MississippiCAN-eligible members for state fiscal year (SFY) 2023. A separately provided report¹ documents the development of MississippiCAN capitation rates for SFY 2023. As summarized by Table 1, we risk adjust the MississippiCAN rate cells with credible populations and a significant variance in anticipated acuity within the population. Within these rate cells, we apply risk adjustment to estimate acuity differences between the enrolled populations of each Coordinated Care Organization (CCO) by region.

Table 1 SFY 2023 MississippiCAN Risk Adjustment Application of Risk Adjustment by Rate Cell	
Risk Adjusted	Not Risk Adjusted
Non-Newborn SSI / Disabled	Breast and Cervical Cancer
MA Adult	SSI / Disabled Newborns
MA Children	Non-SSI Newborns Ages 0 to 2 Months
Quasi-CHIP	Non-SSI Newborns Ages 3 to 12 Months
Foster Care	Pregnant Women
	MYPAC

This letter documents the results and methodology used to develop the budget neutral risk scores effective January 1, 2023 through June 30, 2023 (Q1 to Q2 2023) for each CCO for the applicable rate cells shown in Table 1. Additionally, this letter describes how the risk scores should be applied to the capitation rates for SFY 2023. Risk scores for July through December 2022 (Q3 to Q4 2022) were provided in a separate letter in June 2022².

Similar to Q3 to Q4 2022 risk scores we did not make any adjustments to our risk adjustment methodology, despite the decrease in diagnoses recorded due to the COVID-19 pandemic occurring during the diagnosis period. We reviewed the change in plan-level risk scores during the COVID-19 pandemic on a budget neutral basis and observed changes consistent with the magnitude in a typical update. Based on this review we determined that no change in methodology is necessary.

As described in greater detail below, we develop Q1 to Q2 2023 risk scores using the enrollment mix for each CCO as of September 2022. Starting June 2021, DOM began transitioning MississippiCAN members who would have lost Medicaid eligibility prior to the COVID-19 public health emergency (PHE) into FFS. This rapid decrease in MississippiCAN enrollment along with uncertainty surrounding the end date for the PHE may result in the actual enrollment mix in Q1 to Q2 2023 for each CCO being much different than the assumed mix based on September 2022 enrollment. Thus, Milliman will consider an update to Q1 to Q2 2023 risk scores, once that period has concluded using actual enrollment mix in that period. Risk score calculations for each member would not differ from those calculated in this letter, but risk scores for each CCO would be recalculated using the actual mix of enrollees during the Q1 to Q2 2023 period.

¹ "Report13 - SFY 2023 Preliminary MississippiCAN Rate Calculation and Certification.pdf," dated September 14, 2022.

² "Wentworth06 - Q3 to Q4 2022 MississippiCAN Risk Adjustment.pdf," dated June 17, 2022.



Please note, the Foster Care risk scores issued in this report are preliminary estimates and will be trued up to actual enrollment retrospectively. The time periods involved in truing up Foster Care risk adjustment are described in greater detail below.

RESULTS AND COMMENTS

Table 2 shows the regional member months and budget-neutral risk scores for each risk adjusted rate cell. Exhibits 1A through 1E contain additional detail of the membership and risk scores for each rate cell, region, and CCO, separately for scored and unscored members (if applicable). Risk scores for Q1 to Q2 2023 were developed using:

- Diagnosis Period: Medical and drug diagnosis information from encounter and FFS claims incurred during June 2021 to May 2022 with runout through September 5, 2022.
- Enrollment Snapshot: Demographic and enrollment information from September 2022.

Ordinarily, we would select a diagnosis period of SFY 2022 (July 2021 to June 2022) and an enrollment snapshot of October 2022 for Q1 to Q2 2023 risks scores. However, DOM changed MMIS vendor in October 2022 and validated data processed after the MMIS transition is not yet available. Therefore, we elected to shift both our enrollment snapshot and diagnosis period back by one month, to the periods listed above.

Only MississippiCAN-eligible members enrolled in a CCO in September 2022 were considered in this analysis. Risk scores are assigned to individuals using the following data.

- Foster Care: Foster Care individual risk scores are developed using information related to their federal or state cash assistance status, as found in the enrollment snapshot, which is highly correlated to their living arrangement, and therefore, their service costs. No other information, such as age, gender, or diagnostic data, is used to develop their risk scores.
- All other rate cells:
 - Scored Individuals: For individuals with at least six months of eligibility in the diagnosis period, their risk score is developed using both demographic and diagnostic information. In addition, for some populations a variable based upon the length of enrollment during the diagnostic period is included in the risk score calculation.
 - Unscored Individuals: For individuals with less than six months of eligibility in the diagnosis period, their risk score is developed solely from demographic information in the enrollment snapshot.

Table 2
SFY 2023 MississippiCAN Risk Adjustment
Q1 to Q2 2023 Prospective Risk Scores
Based on June 2021 to May 2022 Diagnosis Period

Rate Cell	CCO	North		Central		South	
		Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score	Total Member Months	Budget Neutral Risk Score
Non-Newborn SSI / Disabled	Magnolia	9,880	1.001	10,790	1.025	7,482	1.032
Non-Newborn SSI / Disabled	Molina	2,353	0.980	2,631	0.994	2,327	0.962
Non-Newborn SSI / Disabled	United	8,103	1.004	8,354	0.969	7,680	0.981
MA Adult	Magnolia	3,682	1.017	4,182	1.008	5,110	1.011
MA Adult	Molina	2,291	0.958	2,904	0.954	4,225	0.957
MA Adult	United	3,427	1.010	3,997	1.024	6,212	1.020
MA Children	Magnolia	23,911	1.002	28,807	1.011	29,648	1.004
MA Children	Molina	10,611	0.951	13,762	0.945	17,469	0.938
MA Children	United	22,056	1.022	25,671	1.018	32,221	1.030
Quasi-CHIP	Magnolia	2,881	0.970	3,422	0.982	2,770	0.973
Quasi-CHIP	Molina	1,239	0.996	1,359	0.990	1,458	0.951
Quasi-CHIP	United	3,028	1.030	3,298	1.023	3,499	1.042
Foster Care	Magnolia	1,326	0.917	1,352	0.934	1,918	0.910
Foster Care	Molina	253	1.280	286	1.221	419	1.271
Foster Care	United	471	1.082	402	1.064	641	1.092



A limited number of individuals have the option of opting out of the MississippiCAN program, including disabled children, members of the Mississippi Band of Choctaw Indians, and SSI members age 65 or older. This population is a small portion of the total Medicaid population and has been stable for several years. Capitation rates for SFY 2023 for all rate cells, including those that are risk adjusted, were developed on a 1.00 risk score basis using only MississippiCAN enrolled members, and no adjustment is made in risk scores for the opt-out population.

Risk Score Changes

The prior release of risk scores included prospective budget-neutral risk scores for Q3 to Q4 2022. These risk scores were based on April 2022 enrollment and diagnoses from CY 2021 with runout through April 2022. Changes in budget-neutral plan risk scores between the Q3 to Q4 2022 risk scores and the Q1 to Q2 2023 risk scores presented in this letter are driven by updated diagnosis information and enrollment changes.

Table 3 shows the statewide budget-neutral risk score change for each rate cell relative to the prior release. These statewide values are not adjusted for differences in capitation rates across regions. As a result, actual statewide CCO revenue impacts may vary slightly from the changes listed in the last column.

- For this risk score iteration, we observe larger changes for the Quasi-CHIP population, particularly for Molina, as a result of changes in the diagnosis period.
- The significant changes in the Foster Care rate cell are driven by a change in the enrollment practices for this population over time and is the reason that Foster Care risk scores will be retrospectively adjusted for actual enrollment.

Table 3 SFY 2023 MississippiCAN Risk Adjustment Changes in Statewide Budget Neutral Risk Score Q3 to Q4 2022 vs. Q1 to Q2 2023				
Cohort	Risk Scores: Enrollment: Diagnosis Period:	Q3 to Q4 2022 April 2022 SFY 2021	Q1 to Q2 2023 September 2022 June 2021 to May 2022	% Change
Non-Newborn SSI / Disabled	Magnolia	1.020	1.019	-0.17%
Non-Newborn SSI / Disabled	Molina	0.984	0.979	-0.48%
Non-Newborn SSI / Disabled	United	0.981	0.985	0.39%
MA Adult	Magnolia	1.019	1.012	-0.71%
MA Adult	Molina	0.952	0.956	0.45%
MA Adult	United	1.015	1.019	0.38%
MA Children	Magnolia	1.008	1.006	-0.24%
MA Children	Molina	0.934	0.944	0.99%
MA Children	United	1.025	1.024	-0.13%
Quasi-CHIP	Magnolia	0.987	0.976	-1.12%
Quasi-CHIP	Molina	0.956	0.978	2.27%
Quasi-CHIP	United	1.030	1.032	0.15%
Foster Care	Magnolia	0.933	0.919	-1.49%
Foster Care	Molina	1.268	1.258	-0.79%
Foster Care	United	1.059	1.082	2.11%

Exhibit 2 allocates the change in risk scores between the prior release³ and this letter into various components by population.

- Column A: Shows the risk scores provided in the prior risk score deliverable.
- Column B: Restates the risk scores shown in Column A with additional data runout.

³ "Wentworth06 - Q3 to Q4 2022 MississippiCAN Risk Adjustment.pdf," dated June 17, 2022.



- Column C: Updates the risk scores shown in Column B with an updated diagnosis period.
- Column D: Updates the risk scores shown in Column C with an updated enrollment period. This column contains the final risk scores for this release.

Exhibits 2B, 2D, 2F, and 2H are on a budget-neutral basis, while the other exhibits show the change in unadjusted risk scores. The Foster Care rate cell is not shown in Exhibit 2 since the risk score for the Foster Care rate cell does not use a diagnosis period, and thus, all risk score variations are attributable to enrollment changes.

Table 4 shows the percentage of members who are scored in this release and the prior release. As the risk adjustment methodology for the Foster Care rate cell does not depend on diagnosis data, the scored / unscored classification of members does not apply to Foster Care; every Foster Care member receives a risk score. Thus, we omitted Foster Care from Table 4.

Table 4 SFY 2023 MississippiCAN Risk Adjustment Scored Percentages				
	Magnolia	Molina	United	Total
Non-Newborn SSI / Disabled				
Q3 to Q4 2022	99%	97%	99%	99%
Q1 to Q2 2023	99%	97%	99%	99%
MA Adult				
Q3 to Q4 2022	94%	93%	93%	93%
Q1 to Q2 2023	94%	92%	94%	93%
MA Children				
Q3 to Q4 2022	98%	97%	98%	98%
Q1 to Q2 2023	98%	97%	98%	98%
Quasi-CHIP				
Q3 to Q4 2022	99%	97%	98%	98%
Q1 to Q2 2023	99%	96%	98%	98%

Detailed Prevalence Reports

Exhibit 3 provides detailed prevalence reports supporting each CCO's population and risk score calculation. Detailed exhibits are provided for each rate cell and region. Table 5 lists the exhibit associated with each rate cell and region combination. Note, a single exhibit is provided for the Foster Care rate cell.

Table 5 SFY 2023 MississippiCAN Risk Adjustment Index of Detailed Prevalence Report Exhibits			
Population	Region		
	North	Central	South
Non-Newborn SSI / Disabled	3A	3B	3C
MA Adult	3D	3E	3F
MA Children	3G	3H	3I
Quasi-CHIP	3J	3K	3L
Foster Care	3M	3M	3M

The prevalence reports in Exhibit 3 include the member counts associated with each CCO, the unadjusted plan factor, and the budget-neutral plan factor. Within each prevalence report, the following information can be found for each CCO's population, when applicable:

- Scored Members
 - MississippiCAN-specific CDPS + Rx cost weights
 - Count of members falling into each demographic category



- Count of members falling into each durational category
- Disease category prevalence
- Count of members not assigned to a CDPS + Rx category
- Unscored Members
 - MississippiCAN-specific demographic only cost weights
 - Count of members falling into each demographic category
- Risk Adjustment Results
 - Calculation of budget neutral risk score for scored and unscored members and in total

Additionally, the detailed prevalence reports include the disease impact rank for each rate cell, region, and CCO, if applicable. The disease impact rank is a measure of the significance of specific disease conditions in the risk adjustment process and identifies the diseases with the greatest impact on risk scores for scored individuals. The disease impact for each condition is calculated as the product of the associated cost weight and the prevalence of the condition within each population. Conditions are ordered from highest to lowest disease impact to determine the disease impact rank for each condition.

Table 6 shows the top five conditions by disease impact for each eligibility group using diagnostic information on a statewide basis across all CCOs. The disease impact ranks vary by CCO and region and are included in Exhibits 3A to 3L. There is no disease impact ranking provided for the Foster Care rate cell since risk scores for that population do not utilize diagnostic information.

Table 6
SFY 2023 MississippiCAN Risk Adjustment
Q1 to Q2 2023 Prospective Risk Scores – Conditions with the Top Five Disease Impacts
Statewide Results

Rank	Non-Newborn SSI / Disabled	MA Adult	MA Children	Quasi-CHIP
1	Psychiatric, medium low to medium	Skeletal, very low to low	Psychiatric, medium low	Psychiatric, medium low
2	Cardiovascular, medium	Psychiatric, medium low	Pulmonary, low to medium	Pulmonary, low to medium
3	Psychiatric, high	Pregnancy, incomplete	Cardiovascular, extra low to low	Cardiovascular, extra low to low
4	AIDS, high	Psychiatric, low	Gastro, low	Psychiatric, low
5	CNS, low	Cardiovascular, extra low	Psychiatric, medium	Psychiatric, medium

Member-Level Risk Scores

Text files providing member-level demographic, duration, and diagnosis information have been provided to DOM for distribution with this letter to each CCO.

For each CCO, multiple extracts are provided. For each of the Non-Newborn SSI / Disabled, MA Adult, and children (i.e., MA Children and Quasi-CHIP) populations, there are two extracts:

- The “scored” extract provides detailed demographic, durational, and diagnostic information for each member
- The “unscored” extract provides only demographic information for each member

A separate extract is provided for each CCO for members in Foster Care, listing the enrollment information used for calculating risk scores for that population. A data dictionary is included with the extracts.

METHODOLOGY

Please see the following letters for information on the data, methodology, and prediction metrics associated with the customized risk models used in this analysis:

- **Non-Newborn SSI / Disabled and MA Children / Quasi-CHIP** – “Clark07 - MSCAN Risk Weight Development.pdf,” dated June 25, 2019. This letter includes risk score information for the MA Adult rate cell. However, that information is superseded by the letter listed below.



- **MA Adult** – “Clark14 - MSCAN Risk Weight Development.pdf,” dated June 8, 2020.
- **Foster Care** – “Clark17 - Risk Adjustment Methodology for Foster Care Rate Cell.pdf,” dated June 18, 2020.

Exhibits 4A to 4C display the cost weights used for the Non-Newborn SSI / Disabled, MA Adult, and MA Children / Quasi-CHIP populations, and a mapping from the standard CDPS + Rx diagnostic buckets to those used for the MississippiCAN populations. Cost weights for the Foster Care rate cell are shown on Exhibit 3M.

APPLICATION OF RISK SCORES

When applying the risk scores in this letter, the following formula should be used:

$$CCO \text{ Capitation Rate} = \text{Base Capitation Rate} \times CCO \text{ Budget Neutral Risk Score}$$

The CCO normalized risk factors are shown on Exhibit 1. Risk adjustment will be applied to the capitation rates prior to the following directed payments, all of which are not risk adjusted.

- Mississippi Hospital Access Program (MHAP)
- Mississippi Medicaid Access to Physician Services (MAPS)
- Transforming Reimbursement for Emergency Ambulance Transportation (TREAT)

Exhibits 5A through 5C provide illustrative examples of how the risk scores documented in this letter should be applied to the base capitation rates as summarized in Exhibit 5 of the capitation rate report. This methodology should be applied to the actual capitation amounts for each rate cell, region, and time period.

Next Steps – Foster Care Population

The above tables and attached exhibits contain preliminary risk scores for the Foster Care rate cell. These risk scores have been developed using the same enrollment period as the other rate cells. To calculate final risk scores for the Foster Care rate cell, we require actual enrollment from the risk adjusted period, and thus these risk scores must be calculated after the risk adjusted period has elapsed.

Table 7 summarizes the rating periods for SFY 2023 and when we anticipate providing each risk score update for the Foster Care rate cell. Notably, we plan to provide final Foster Care risk scores for the Q3 to Q4 2022 period in the spring of 2023 and final risk scores for the Q1 to Q2 2023 period in the fall of 2023. The exact timing is to be determined depending on how quickly we are able to validate and use claims and enrollment data after the MMIS transition.

Table 7 SFY 2023 MississippiCAN Risk Adjustment Foster Care Risk Adjustment Periods		
Rating Period	Preliminary Risk Score Release Date	Final Risk Score Release Date
Q3 to Q4 2022	June 2022	Spring 2023
Q1 to Q2 2023	December 2022	Fall 2023

CAVEATS AND LIMITATIONS ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q1 to Q2 2023 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).



Jennifer Wentworth
Mississippi Office of the Governor, Division of Medicaid
December 16, 2022
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The models rely on data and information as input to the models. We used CCO encounters, FFS claims, and eligibility data from January 2021 to September 2022 with runout through September 5, 2022 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q1 to Q2 2023 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

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

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



Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink that reads "Jill Bruckert".

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

JAB/KNL/db

Attachments

A handwritten signature in black ink that reads "Katarina Lorenz".

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary



EXHIBITS

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region						
	Scored Members			Unscored Members		
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score
Magnolia	9,790	0.994	1.001	90	1.017	1.007
Molina	2,287	0.974	0.981	66	0.982	0.973
United	8,003	0.997	1.004	100	1.022	1.012
Total	20,080	0.993	1.000	256	1.010	1.000

Central Region						
	Scored Members			Unscored Members		
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score
Magnolia	10,724	1.088	1.025	66	1.034	1.017
Molina	2,553	1.054	0.994	78	1.009	0.993
United	8,276	1.028	0.969	78	1.009	0.993
Total	21,553	1.061	1.000	222	1.016	1.000

South Region						
	Scored Members			Unscored Members		
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score
Magnolia	7,392	1.151	1.032	90	1.003	0.977
Molina	2,249	1.072	0.961	78	1.022	0.996
United	7,568	1.093	0.980	112	1.048	1.021
Total	17,209	1.115	1.000	280	1.026	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	3,427	1.030	1.018	255	0.994	0.995	1.017
Molina	2,056	0.964	0.954	235	0.994	0.995	0.958
United	3,161	1.021	1.010	266	1.008	1.009	1.010
Total	8,644	1.011	1.000	756	0.999	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	3,914	1.019	1.009	268	0.987	0.996	1.008
Molina	2,644	0.958	0.949	260	0.995	1.003	0.954
United	3,710	1.036	1.026	287	0.992	1.001	1.024
Total	10,268	1.010	1.000	815	0.991	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	4,828	1.054	1.011	282	0.990	1.000	1.011
Molina	3,986	0.994	0.954	239	1.002	1.013	0.957
United	5,894	1.065	1.022	318	0.979	0.990	1.020
Total	14,708	1.042	1.000	839	0.989	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	23,422	1.032	1.002	489	1.004	1.006	1.002
Molina	10,177	0.978	0.949	434	0.990	0.992	0.951
United	21,503	1.054	1.023	553	0.999	1.001	1.022
Total	55,102	1.030	1.000	1,476	0.998	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	28,381	1.036	1.011	426	0.983	0.987	1.011
Molina	13,284	0.966	0.942	478	1.011	1.015	0.945
United	25,184	1.044	1.018	487	0.992	0.997	1.018
Total	66,849	1.025	1.000	1,391	0.995	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score	Budget Neutral Risk Score
CCO							
Magnolia	29,123	1.048	1.004	525	0.991	1.000	1.004
Molina	16,947	0.978	0.937	522	0.991	1.001	0.938
United	31,587	1.076	1.031	634	0.990	0.999	1.030
Total	77,657	1.044	1.000	1,681	0.991	1.000	1.000

Exhibit 1D

Mississippi Division of Medicaid

Quasi-CHIP Risk Score Adjustment Summary - Q1 to Q2 2023 Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,839	1.050	0.970	42	1.025	0.988	0.970
Molina	1,200	1.079	0.997	39	1.015	0.978	0.996
United	2,969	1.116	1.030	59	1.062	1.023	1.030
Total	7,008	1.083	1.000	140	1.038	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,372	1.032	0.982	50	1.037	0.998	0.982
Molina	1,302	1.041	0.990	57	1.047	1.007	0.990
United	3,255	1.076	1.023	43	1.032	0.993	1.023
Total	7,929	1.052	1.000	150	1.039	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,733	1.096	0.973	37	1.045	1.017	0.973
Molina	1,409	1.069	0.949	49	1.053	1.025	0.951
United	3,447	1.175	1.043	52	0.991	0.965	1.042
Total	7,589	1.127	1.000	138	1.027	1.000	1.000

Exhibit 1E
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q1 to Q2 2023 Risk Scores
September 2022 Snapshot Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,326	0.729	0.917
Molina	253	1.017	1.280
United	471	0.860	1.082
Total	2,050	0.795	1.000
Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,352	0.819	0.934
Molina	286	1.070	1.221
United	402	0.932	1.064
Total	2,040	0.876	1.000
South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	1,918	0.733	0.910
Molina	419	1.023	1.271
United	641	0.879	1.092
Total	2,978	0.805	1.000

Exhibit 2A

Mississippi Division of Medicaid

Impact Analysis Non-Newborn SSI / Disabled Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.992	0.991	1.014	0.994	-0.1%	2.3%	-1.9%	0.2%
Molina	0.990	0.990	1.011	0.974	0.0%	2.1%	-3.7%	-1.6%
United	0.993	0.994	1.023	0.997	0.1%	2.9%	-2.6%	0.4%
Unscored Members								
Magnolia	1.046	1.042	1.078	1.017	-0.3%	3.4%	-5.7%	-2.8%
Molina	1.050	1.050	1.033	0.982	0.0%	-1.6%	-4.9%	-6.4%
United	1.013	1.019	1.108	1.022	0.5%	8.8%	-7.8%	0.8%
All Members								
Magnolia	0.993	0.992	1.014	0.994	-0.1%	2.2%	-1.9%	0.2%
Molina	0.991	0.991	1.011	0.974	0.0%	2.0%	-3.7%	-1.7%
United	0.993	0.995	1.023	0.997	0.1%	2.9%	-2.5%	0.4%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.095	1.092	1.110	1.088	-0.3%	1.6%	-2.0%	-0.7%
Molina	1.032	1.047	1.073	1.054	1.4%	2.5%	-1.8%	2.1%
United	1.026	1.030	1.052	1.028	0.5%	2.1%	-2.2%	0.2%
Unscored Members								
Magnolia	1.001	1.010	1.082	1.034	0.9%	7.1%	-4.5%	3.2%
Molina	0.989	0.990	0.814	1.009	0.1%	-17.8%	24.0%	2.0%
United	1.048	1.048	1.244	1.009	0.0%	18.8%	-19.0%	-3.7%
All Members								
Magnolia	1.095	1.092	1.110	1.087	-0.3%	1.7%	-2.0%	-0.7%
Molina	1.032	1.046	1.073	1.054	1.4%	2.5%	-1.8%	2.1%
United	1.026	1.031	1.052	1.028	0.5%	2.1%	-2.3%	0.2%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.141	1.145	1.169	1.151	0.3%	2.2%	-1.6%	0.9%
Molina	1.085	1.088	1.091	1.072	0.3%	0.3%	-1.8%	-1.2%
United	1.078	1.080	1.112	1.093	0.2%	3.0%	-1.8%	1.3%
Unscored Members								
Magnolia	1.020	1.011	0.937	1.003	-0.9%	-7.3%	7.1%	-1.7%
Molina	1.073	1.067	1.084	1.022	-0.5%	1.6%	-5.7%	-4.7%
United	0.991	0.984	1.064	1.048	-0.7%	8.1%	-1.5%	5.7%
All Members								
Magnolia	1.139	1.143	1.169	1.149	0.3%	2.3%	-1.7%	0.8%
Molina	1.086	1.089	1.091	1.072	0.3%	0.2%	-1.8%	-1.3%
United	1.077	1.079	1.112	1.092	0.2%	3.1%	-1.8%	1.4%

Exhibit 2B

Mississippi Division of Medicaid

Impact Analysis Non-Newborn SSI / Disabled Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.000	0.999	0.997	1.001	-0.1%	-0.2%	0.5%	0.1%
Molina	0.998	0.998	0.994	0.981	0.0%	-0.4%	-1.3%	-1.7%
United	1.001	1.002	1.006	1.004	0.1%	0.4%	-0.2%	0.3%
Unscored Members								
Magnolia	1.013	1.008	0.993	1.007	-0.5%	-1.5%	1.4%	-0.6%
Molina	1.017	1.015	0.951	0.973	-0.1%	-6.3%	2.2%	-4.3%
United	0.982	0.985	1.020	1.012	0.4%	3.5%	-0.8%	3.1%
All Members								
Magnolia	1.000	0.999	0.997	1.001	-0.1%	-0.2%	0.5%	0.1%
Molina	0.998	0.998	0.994	0.980	0.0%	-0.5%	-1.3%	-1.8%
United	1.001	1.002	1.006	1.004	0.1%	0.4%	-0.2%	0.4%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.032	1.027	1.025	1.025	-0.5%	-0.3%	0.1%	-0.6%
Molina	0.973	0.985	0.991	0.994	1.3%	0.6%	0.3%	2.2%
United	0.966	0.969	0.971	0.969	0.3%	0.2%	-0.2%	0.3%
Unscored Members								
Magnolia	0.984	0.990	1.034	1.017	0.6%	4.4%	-1.6%	3.4%
Molina	0.972	0.970	0.777	0.993	-0.2%	-19.9%	27.7%	2.2%
United	1.030	1.027	1.189	0.993	-0.3%	15.8%	-16.5%	-3.6%
All Members								
Magnolia	1.032	1.027	1.025	1.025	-0.4%	-0.2%	0.1%	-0.6%
Molina	0.973	0.984	0.990	0.994	1.2%	0.6%	0.3%	2.2%
United	0.967	0.970	0.971	0.969	0.3%	0.1%	-0.2%	0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.031	1.032	1.031	1.032	0.1%	-0.1%	0.1%	0.1%
Molina	0.981	0.981	0.962	0.961	0.0%	-1.9%	-0.1%	-2.0%
United	0.975	0.974	0.981	0.980	-0.1%	0.7%	-0.1%	0.5%
Unscored Members								
Magnolia	0.996	0.994	0.915	0.977	-0.2%	-8.0%	6.8%	-1.9%
Molina	1.047	1.049	1.059	0.996	0.2%	0.9%	-5.9%	-4.9%
United	0.968	0.968	1.039	1.021	0.0%	7.3%	-1.7%	5.5%
All Members								
Magnolia	1.031	1.031	1.031	1.032	0.1%	-0.1%	0.1%	0.1%
Molina	0.983	0.983	0.962	0.962	0.1%	-2.1%	0.0%	-2.1%
United	0.975	0.974	0.981	0.981	-0.1%	0.7%	0.0%	0.6%

Exhibit 2C

Mississippi Division of Medicaid

Impact Analysis MA Adult Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.013	1.007	1.011	1.030	-0.6%	0.5%	1.8%	1.7%
Molina	0.961	0.961	0.963	0.964	-0.1%	0.2%	0.2%	0.3%
United	1.012	1.012	1.028	1.021	0.0%	1.6%	-0.6%	0.9%
Unscored Members								
Magnolia	0.997	0.996	1.011	0.994	-0.1%	1.6%	-1.7%	-0.3%
Molina	1.018	1.018	1.018	0.994	0.0%	0.0%	-2.3%	-2.3%
United	1.001	1.001	0.921	1.008	0.0%	-8.0%	9.4%	0.6%
All Members								
Magnolia	1.012	1.006	1.011	1.027	-0.6%	0.6%	1.5%	1.5%
Molina	0.966	0.966	0.963	0.968	-0.1%	-0.3%	0.5%	0.1%
United	1.012	1.011	1.027	1.020	0.0%	1.6%	-0.7%	0.9%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.035	1.034	1.036	1.019	-0.2%	0.2%	-1.6%	-1.6%
Molina	0.943	0.947	0.944	0.958	0.4%	-0.2%	1.5%	1.6%
United	0.998	0.991	1.023	1.036	-0.7%	3.2%	1.3%	3.8%
Unscored Members								
Magnolia	0.991	0.993	0.958	0.987	0.2%	-3.5%	3.1%	-0.4%
Molina	1.015	1.015	0.934	0.995	0.0%	-7.9%	6.5%	-2.0%
United	1.010	1.011	1.080	0.992	0.0%	6.9%	-8.1%	-1.8%
All Members								
Magnolia	1.032	1.031	1.036	1.017	-0.2%	0.5%	-1.8%	-1.5%
Molina	0.949	0.952	0.944	0.962	0.4%	-0.8%	1.9%	1.4%
United	0.999	0.993	1.023	1.033	-0.6%	3.1%	0.9%	3.4%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.055	1.050	1.055	1.054	-0.5%	0.6%	-0.2%	-0.1%
Molina	0.982	0.986	0.990	0.994	0.5%	0.4%	0.4%	1.2%
United	1.072	1.075	1.079	1.065	0.3%	0.4%	-1.3%	-0.6%
Unscored Members								
Magnolia	0.998	0.997	0.989	0.990	0.0%	-0.8%	0.0%	-0.8%
Molina	0.986	0.987	0.989	1.002	0.1%	0.2%	1.3%	1.6%
United	1.002	1.003	1.064	0.979	0.1%	6.0%	-8.0%	-2.3%
All Members								
Magnolia	1.051	1.047	1.055	1.050	-0.5%	0.8%	-0.5%	-0.1%
Molina	0.982	0.986	0.990	0.994	0.5%	0.3%	0.5%	1.3%
United	1.068	1.070	1.079	1.060	0.3%	0.8%	-1.7%	-0.7%

Exhibit 2D

Mississippi Division of Medicaid

Impact Analysis MA Adult Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.013	1.009	1.006	1.018	-0.3%	-0.3%	1.2%	0.6%
Molina	0.961	0.964	0.958	0.954	0.2%	-0.6%	-0.4%	-0.8%
United	1.012	1.015	1.022	1.010	0.2%	0.8%	-1.2%	-0.2%
Unscored Members								
Magnolia	0.992	0.991	1.041	0.995	-0.1%	5.0%	-4.4%	0.3%
Molina	1.013	1.013	1.048	0.995	0.0%	3.4%	-5.0%	-1.7%
United	0.997	0.997	0.948	1.009	0.0%	-4.9%	6.5%	1.2%
All Members								
Magnolia	1.011	1.008	1.006	1.017	-0.3%	-0.2%	1.0%	0.5%
Molina	0.966	0.968	0.958	0.958	0.2%	-1.0%	0.0%	-0.8%
United	1.011	1.013	1.022	1.010	0.2%	0.9%	-1.2%	-0.1%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.038	1.038	1.028	1.009	0.0%	-1.0%	-1.8%	-2.7%
Molina	0.945	0.951	0.937	0.949	0.6%	-1.4%	1.3%	0.5%
United	1.000	0.995	1.015	1.026	-0.4%	2.0%	1.1%	2.7%
Unscored Members								
Magnolia	0.986	0.988	0.973	0.996	0.1%	-1.5%	2.3%	1.0%
Molina	1.010	1.009	0.949	1.003	-0.1%	-5.9%	5.7%	-0.7%
United	1.006	1.005	1.097	1.001	0.0%	9.2%	-8.8%	-0.5%
All Members								
Magnolia	1.034	1.034	1.028	1.008	0.0%	-0.6%	-1.9%	-2.5%
Molina	0.951	0.956	0.937	0.954	0.6%	-1.9%	1.8%	0.4%
United	1.000	0.996	1.016	1.024	-0.4%	1.9%	0.9%	2.4%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.013	1.007	1.008	1.011	-0.6%	0.1%	0.3%	-0.1%
Molina	0.943	0.946	0.945	0.954	0.4%	-0.1%	0.9%	1.2%
United	1.029	1.031	1.031	1.022	0.2%	0.0%	-0.8%	-0.7%
Unscored Members								
Magnolia	1.001	1.001	0.951	1.000	-0.1%	-5.0%	5.3%	-0.1%
Molina	0.990	0.990	0.951	1.013	0.0%	-4.0%	6.6%	2.4%
United	1.006	1.006	1.022	0.990	0.0%	1.6%	-3.2%	-1.6%
All Members								
Magnolia	1.012	1.007	1.008	1.011	-0.5%	0.1%	0.3%	-0.1%
Molina	0.945	0.949	0.945	0.957	0.4%	-0.4%	1.2%	1.2%
United	1.028	1.029	1.031	1.020	0.2%	0.1%	-1.0%	-0.7%

Exhibit 2E

Mississippi Division of Medicaid

Impact Analysis MA Children Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.016	1.015	1.027	1.032	-0.1%	1.2%	0.5%	1.6%
Molina	0.948	0.949	0.955	0.978	0.1%	0.7%	2.4%	3.2%
United	1.041	1.043	1.052	1.054	0.1%	0.9%	0.1%	1.2%
Unscored Members								
Magnolia	1.014	1.014	0.955	1.004	0.0%	-5.8%	5.1%	-1.0%
Molina	0.997	0.997	0.893	0.990	0.0%	-10.5%	10.9%	-0.7%
United	0.999	0.999	1.043	0.999	0.1%	4.3%	-4.2%	0.1%
All Members								
Magnolia	1.015	1.015	1.027	1.031	-0.1%	1.2%	0.4%	1.6%
Molina	0.950	0.951	0.955	0.979	0.1%	0.4%	2.5%	3.0%
United	1.040	1.042	1.052	1.052	0.1%	1.0%	0.0%	1.1%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.021	1.021	1.035	1.036	0.0%	1.4%	0.2%	1.5%
Molina	0.933	0.931	0.939	0.966	-0.2%	0.9%	2.8%	3.6%
United	1.027	1.025	1.036	1.044	-0.2%	1.1%	0.7%	1.6%
Unscored Members								
Magnolia	0.996	0.996	1.023	0.983	0.1%	2.7%	-3.9%	-1.3%
Molina	1.002	1.003	1.037	1.011	0.0%	3.4%	-2.6%	0.8%
United	0.997	0.996	1.007	0.992	-0.2%	1.2%	-1.5%	-0.5%
All Members								
Magnolia	1.020	1.020	1.035	1.035	0.0%	1.4%	0.1%	1.5%
Molina	0.935	0.934	0.940	0.968	-0.1%	0.6%	3.0%	3.6%
United	1.026	1.024	1.036	1.043	-0.2%	1.2%	0.6%	1.6%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.037	1.035	1.043	1.048	-0.2%	0.8%	0.5%	1.1%
Molina	0.963	0.964	0.964	0.978	0.0%	0.0%	1.5%	1.5%
United	1.059	1.059	1.070	1.076	0.0%	1.0%	0.6%	1.6%
Unscored Members								
Magnolia	0.999	0.998	0.998	0.991	0.0%	-0.1%	-0.7%	-0.8%
Molina	0.983	0.982	0.990	0.991	-0.1%	0.8%	0.1%	0.8%
United	0.997	0.997	0.995	0.990	0.0%	-0.2%	-0.5%	-0.8%
All Members								
Magnolia	1.036	1.034	1.043	1.047	-0.2%	0.8%	0.4%	1.1%
Molina	0.964	0.964	0.964	0.979	0.0%	-0.1%	1.6%	1.6%
United	1.058	1.058	1.070	1.075	0.0%	1.1%	0.4%	1.5%

Exhibit 2F

Mississippi Division of Medicaid

Impact Analysis MA Children Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.002	1.001	1.004	1.002	-0.1%	0.2%	-0.2%	-0.1%
Molina	0.936	0.936	0.933	0.949	0.1%	-0.3%	1.7%	1.4%
United	1.028	1.029	1.028	1.023	0.1%	-0.1%	-0.5%	-0.5%
Unscored Members								
Magnolia	1.011	1.011	0.956	1.006	-0.1%	-5.4%	5.2%	-0.6%
Molina	0.994	0.994	0.894	0.992	0.0%	-10.1%	11.0%	-0.2%
United	0.996	0.996	1.044	1.001	0.1%	4.8%	-4.1%	0.6%
All Members								
Magnolia	1.002	1.001	1.004	1.002	-0.1%	0.2%	-0.2%	-0.1%
Molina	0.938	0.939	0.933	0.951	0.1%	-0.5%	1.8%	1.4%
United	1.027	1.028	1.028	1.022	0.1%	0.0%	-0.6%	-0.5%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.014	1.015	1.017	1.011	0.1%	0.2%	-0.6%	-0.3%
Molina	0.927	0.927	0.924	0.942	0.0%	-0.3%	2.0%	1.7%
United	1.021	1.020	1.019	1.018	-0.1%	0.0%	-0.1%	-0.2%
Unscored Members								
Magnolia	0.997	0.998	1.001	0.987	0.1%	0.3%	-1.4%	-1.1%
Molina	1.004	1.005	1.015	1.015	0.1%	1.0%	0.0%	1.1%
United	0.999	0.998	0.986	0.997	-0.1%	-1.2%	1.1%	-0.2%
All Members								
Magnolia	1.014	1.015	1.017	1.011	0.1%	0.2%	-0.7%	-0.4%
Molina	0.929	0.929	0.924	0.945	0.0%	-0.5%	2.3%	1.7%
United	1.020	1.019	1.019	1.018	-0.1%	0.0%	-0.1%	-0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.006	1.005	1.006	1.004	-0.1%	0.1%	-0.2%	-0.3%
Molina	0.935	0.936	0.929	0.937	0.1%	-0.7%	0.8%	0.2%
United	1.028	1.029	1.032	1.031	0.0%	0.3%	-0.1%	0.2%
Unscored Members								
Magnolia	1.005	1.005	1.004	1.000	0.0%	-0.2%	-0.3%	-0.5%
Molina	0.990	0.989	0.996	1.001	-0.1%	0.7%	0.5%	1.1%
United	1.004	1.004	1.001	0.999	0.0%	-0.3%	-0.2%	-0.5%
All Members								
Magnolia	1.006	1.005	1.006	1.004	-0.1%	0.1%	-0.2%	-0.3%
Molina	0.936	0.937	0.929	0.938	0.1%	-0.9%	1.0%	0.2%
United	1.028	1.028	1.032	1.030	0.0%	0.4%	-0.2%	0.2%

Exhibit 2G

Mississippi Division of Medicaid

Impact Analysis Quasi-CHIP Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.049	1.051	1.062	1.050	0.2%	1.1%	-1.1%	0.1%
Molina	1.012	1.015	1.058	1.079	0.3%	4.2%	2.0%	6.6%
United	1.063	1.061	1.077	1.116	-0.1%	1.5%	3.6%	5.0%
Unscored Members								
Magnolia	1.054	1.049	1.046	1.025	-0.5%	-0.3%	-1.9%	-2.7%
Molina	1.086	1.086	1.292	1.015	0.0%	19.0%	-21.4%	-6.5%
United	1.029	1.029	N/A	1.062	0.0%	N/A	N/A	3.3%
All Members								
Magnolia	1.049	1.051	1.062	1.050	0.2%	1.1%	-1.2%	0.0%
Molina	1.015	1.018	1.058	1.078	0.3%	3.9%	1.9%	6.2%
United	1.062	1.060	1.077	1.115	-0.1%	1.6%	3.5%	5.0%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.026	1.025	1.045	1.032	-0.1%	2.0%	-1.2%	0.6%
Molina	1.001	1.002	1.032	1.041	0.1%	2.9%	0.9%	4.0%
United	1.056	1.056	1.070	1.076	0.0%	1.3%	0.6%	1.9%
Unscored Members								
Magnolia	1.076	1.080	N/A	1.037	0.4%	N/A	N/A	-3.6%
Molina	1.050	1.049	1.292	1.047	-0.1%	23.2%	-19.0%	-0.3%
United	1.080	1.080	1.046	1.032	0.0%	-3.2%	-1.3%	-4.4%
All Members								
Magnolia	1.027	1.026	1.045	1.032	-0.1%	1.9%	-1.2%	0.6%
Molina	1.002	1.003	1.032	1.041	0.1%	2.9%	0.9%	3.9%
United	1.056	1.056	1.070	1.075	0.0%	1.3%	0.5%	1.8%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	
Scored Members								
Magnolia	1.077	1.080	1.096	1.096	0.3%	1.5%	0.0%	1.7%
Molina	1.041	1.043	1.055	1.069	0.2%	1.2%	1.3%	2.7%
United	1.178	1.181	1.181	1.175	0.2%	0.0%	-0.5%	-0.3%
Unscored Members								
Magnolia	1.053	1.053	1.169	1.045	0.0%	11.0%	-10.6%	-0.8%
Molina	1.068	1.069	1.070	1.053	0.1%	0.1%	-1.6%	-1.4%
United	1.071	1.071	N/A	0.991	0.0%	N/A	N/A	-7.4%
All Members								
Magnolia	1.077	1.080	1.096	1.095	0.3%	1.5%	-0.1%	1.7%
Molina	1.043	1.045	1.056	1.070	0.2%	1.0%	1.4%	2.7%
United	1.177	1.179	1.181	1.172	0.2%	0.2%	-0.7%	-0.4%

Exhibit 2H

Mississippi Division of Medicaid

Impact Analysis Quasi-CHIP Population

Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.001	1.002	0.995	0.970	0.1%	-0.7%	-2.5%	-3.1%
Molina	0.965	0.968	0.991	0.997	0.2%	2.4%	0.6%	3.2%
United	1.013	1.011	1.009	1.030	-0.2%	-0.3%	2.2%	1.7%
Unscored Members								
Magnolia	1.001	0.997	0.894	0.988	-0.3%	-10.3%	10.4%	-1.3%
Molina	1.031	1.032	1.106	0.978	0.1%	7.1%	-11.5%	-5.1%
United	0.977	0.978	N/A	1.023	0.1%	N/A	N/A	4.7%
All Members								
Magnolia	1.001	1.002	0.995	0.970	0.1%	-0.7%	-2.5%	-3.1%
Molina	0.968	0.970	0.991	0.996	0.2%	2.2%	0.5%	2.9%
United	1.012	1.011	1.009	1.030	-0.2%	-0.2%	2.1%	1.8%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.992	0.991	0.992	0.982	-0.1%	0.1%	-1.1%	-1.0%
Molina	0.968	0.969	0.980	0.990	0.1%	1.1%	1.0%	2.2%
United	1.021	1.021	1.016	1.023	0.0%	-0.5%	0.7%	0.2%
Unscored Members								
Magnolia	1.004	1.007	N/A	0.998	0.3%	N/A	N/A	-0.6%
Molina	0.979	0.977	1.106	1.007	-0.2%	13.1%	-8.9%	2.8%
United	1.007	1.006	0.894	0.993	-0.1%	-11.1%	11.0%	-1.4%
All Members								
Magnolia	0.992	0.992	0.992	0.982	-0.1%	0.1%	-1.0%	-1.0%
Molina	0.968	0.970	0.980	0.990	0.1%	1.1%	1.1%	2.3%
United	1.021	1.021	1.016	1.023	0.0%	-0.5%	0.6%	0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.965	0.966	0.973	0.973	0.0%	0.7%	0.0%	0.7%
Molina	0.932	0.933	0.937	0.949	0.0%	0.5%	1.3%	1.7%
United	1.056	1.055	1.048	1.043	0.0%	-0.7%	-0.5%	-1.2%
Unscored Members								
Magnolia	0.988	0.988	1.060	1.017	0.0%	7.3%	-4.1%	2.9%
Molina	1.002	1.003	0.970	1.025	0.1%	-3.2%	5.6%	2.3%
United	1.005	1.004	N/A	0.965	0.0%	N/A	N/A	-4.0%
All Members								
Magnolia	0.966	0.966	0.973	0.973	0.0%	0.7%	0.0%	0.8%
Molina	0.935	0.935	0.937	0.951	0.0%	0.2%	1.5%	1.8%
United	1.055	1.055	1.048	1.042	0.0%	-0.6%	-0.6%	-1.3%

Exhibit 3A
Mississippi Division of Medicaid
Risk Adjustment Results
Non-Newborn SSI / Disabled - North Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members											
Risk Weight		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.077	N/A	9,790	100.00%	N/A	2,287	100.00%	N/A	8,003	100.00%	N/A	20,080	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	301	3.07%	N/A	166	7.26%	N/A	257	3.21%	N/A	724	3.61%
Age 5 to 14 Female	0.089	N/A	479	4.89%	N/A	112	4.90%	N/A	442	5.52%	N/A	1,033	5.14%
Age 5 to 14 Male	0.067	N/A	1,104	11.28%	N/A	255	11.15%	N/A	882	11.02%	N/A	2,241	11.16%
Age 15 to 24 Female	0.108	N/A	462	4.72%	N/A	135	5.90%	N/A	424	5.30%	N/A	1,021	5.08%
Age 15 to 24 Male	0.000	N/A	852	8.70%	N/A	269	11.76%	N/A	777	9.71%	N/A	1,898	9.45%
Age 25 to 44 Female	0.206	N/A	1,136	11.60%	N/A	211	9.23%	N/A	890	11.12%	N/A	2,237	11.14%
Age 25 to 44 Male	0.053	N/A	1,190	12.16%	N/A	233	10.19%	N/A	987	12.33%	N/A	2,410	12.00%
Age 45 to 64 Female	0.109	N/A	2,484	25.37%	N/A	411	17.97%	N/A	1,864	23.29%	N/A	4,759	23.70%
Age 45 to 64 Male	0.111	N/A	1,759	17.97%	N/A	495	21.64%	N/A	1,464	18.29%	N/A	3,718	18.52%
Age 65 and Older Male and Female	0.006	N/A	23	0.23%	N/A	0	0.00%	N/A	16	0.20%	N/A	39	0.19%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	31	0.32%	N/A	28	1.22%	N/A	45	0.56%	N/A	104	0.52%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	48	0.49%	N/A	38	1.66%	N/A	46	0.57%	N/A	132	0.66%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	9,711	99.19%	N/A	2,221	97.11%	N/A	7,912	98.86%	N/A	19,844	98.82%
Disease Categories													
Cancer, very high	4.640	10	54	0.55%	3	21	0.92%	8	49	0.61%	8	124	0.62%
Cancer, high	1.263	22	114	1.16%	18	32	1.40%	26	87	1.09%	24	233	1.16%
Cancer, medium	0.649	29	179	1.83%	31	34	1.49%	23	188	2.35%	27	401	2.00%
Cancer, low	0.148	46	99	1.01%	46	22	0.96%	46	91	1.14%	46	212	1.06%
Cardiovascular, very high	1.401	35	46	0.47%	33	11	0.48%	35	39	0.49%	34	96	0.48%
Cardiovascular, medium	0.570	2	1,010	10.32%	2	219	9.58%	2	778	9.72%	2	2,007	10.00%
Cardiovascular, medium - child	0.188	49	58	0.59%	45	18	0.79%	48	53	0.66%	49	129	0.64%
Cardiovascular, low	0.192	19	927	9.47%	21	202	8.83%	19	734	9.17%	19	1,863	9.28%
Cardiovascular, extra low	0.106	7	3,027	30.92%	7	601	26.28%	6	2,434	30.41%	6	6,062	30.19%
Cerebrovascular, low	0.153	43	141	1.44%	42	46	2.01%	44	135	1.69%	44	322	1.60%
CNS, medium to high	0.589	17	305	3.12%	20	66	2.89%	22	235	2.94%	20	606	3.02%
CNS, high - child	1.358	41	25	0.26%	43	5	0.22%	43	16	0.20%	41	46	0.23%
CNS, low	0.218	4	1,672	17.08%	6	361	15.78%	5	1,403	17.53%	5	3,436	17.11%
DD, low to medium	0.153	39	354	3.62%	39	72	3.15%	33	374	4.67%	38	800	3.98%
Diabetes, type 1 high	1.267	45	13	0.13%	49	2	0.09%	45	14	0.17%	45	29	0.14%
Diabetes, type 1 medium	0.683	32	131	1.34%	37	17	0.74%	32	96	1.20%	32	244	1.22%
Diabetes, type 2 medium	0.416	9	616	6.29%	19	97	4.24%	14	404	5.05%	12	1,117	5.56%
Diabetes, type 2 low	0.177	15	1,087	11.10%	22	195	8.53%	16	896	11.20%	18	2,178	10.85%
Eye, low	0.142	47	95	0.97%	48	18	0.79%	49	70	0.87%	47	183	0.91%
Eye, very low	0.107	31	909	9.28%	36	113	4.94%	34	516	6.45%	33	1,538	7.66%
Genital, extra low	0.070	42	364	3.72%	44	78	3.41%	42	315	3.94%	43	757	3.77%
Gastro, medium to high	0.523	8	538	5.50%	9	114	4.98%	9	415	5.19%	9	1,067	5.31%
Gastro, high - child	1.264	27	94	0.96%	26	23	1.01%	31	62	0.77%	30	179	0.89%
Gastro, low	0.127	11	1,910	19.51%	17	331	14.47%	12	1,433	17.91%	11	3,674	18.30%
Hematological, very high to extra high	1.633	23	87	0.89%	32	12	0.52%	20	86	1.07%	23	185	0.92%
Hematological, medium	0.705	33	125	1.28%	30	33	1.44%	30	113	1.41%	31	271	1.35%
Hematological, low	0.491	37	122	1.25%	35	28	1.22%	37	100	1.25%	37	250	1.25%
AIDS, high	1.699	5	213	2.18%	4	57	2.49%	4	180	2.25%	4	450	2.24%
HIV, medium	1.210	44	16	0.16%	40	7	0.31%	41	21	0.26%	42	44	0.22%
Infectious, low to medium	0.435	24	321	3.28%	13	108	4.72%	24	276	3.45%	22	705	3.51%
Metabolic, high	1.035	21	157	1.60%	28	26	1.14%	21	135	1.69%	21	318	1.58%
Metabolic, high - child	0.158	51	35	0.36%	50	6	0.26%	51	35	0.44%	51	76	0.38%
Metabolic, medium	0.396	26	338	3.45%	23	87	3.80%	27	277	3.46%	26	702	3.50%
Metabolic, very low	0.138	25	1,012	10.34%	25	233	10.19%	25	820	10.25%	25	2,065	10.28%
Pregnancy, incomplete	0.395	48	29	0.30%	47	8	0.35%	50	25	0.31%	48	62	0.31%
Psychiatric, high	0.677	3	593	6.06%	5	133	5.82%	3	516	6.45%	3	1,242	6.19%
Psychiatric, medium low to medium	0.264	1	2,579	26.34%	1	616	26.93%	1	2,186	27.31%	1	5,381	26.80%
Psychiatric, low	0.167	14	1,202	12.28%	16	253	11.06%	13	1,022	12.77%	15	2,477	12.34%
Pulmonary, very high	1.167	13	187	1.91%	10	48	2.10%	15	137	1.71%	13	372	1.85%
Pulmonary, very high - child	1.465	36	42	0.43%	27	19	0.83%	39	28	0.35%	36	89	0.44%
Pulmonary, high	0.593	50	17	0.17%	51	1	0.04%	47	17	0.21%	50	35	0.17%
Pulmonary, medium	0.475	18	376	3.84%	11	116	5.07%	17	326	4.07%	16	818	4.07%
Pulmonary, low	0.178	6	1,845	18.85%	8	337	14.74%	7	1,301	16.26%	7	3,483	17.35%
Renal, extra high	3.856	20	45	0.46%	14	12	0.52%	10	54	0.67%	14	111	0.55%
Renal, very high	0.489	28	241	2.46%	29	48	2.10%	28	224	2.80%	28	513	2.55%
Renal, low to medium	0.132	38	443	4.53%	38	86	3.76%	38	327	4.09%	39	856	4.26%
Skeletal, medium	0.308	16	623	6.36%	15	142	6.21%	18	494	6.17%	17	1,259	6.27%
Skeletal, very low to low	0.149	12	1,606	16.40%	12	336	14.69%	11	1,251	15.63%	10	3,193	15.90%
Skin, low - high	0.254	40	138	1.41%	41	31	1.36%	40	129	1.61%	40	298	1.48%
Skin, very low	0.090	34	721	7.36%	34	169	7.39%	36	567	7.08%	35	1,457	7.26%
Substance abuse, very low to low	0.153	30	751	7.67%	24	215	9.40%	29	628	7.85%	29	1,594	7.94%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,817	18.56%	N/A	479	20.94%	N/A	1,447	18.08%	N/A	3,743	18.64%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	4	4.44%	N/A	0	0.00%	N/A	8	8.00%	N/A	12	4.69%
Age 5 to 14 Female	0.660	N/A	4	4.44%	N/A	4	6.06%	N/A	4	4.00%	N/A	12	4.69%
Age 5 to 14 Male	0.572	N/A	8	8.89%	N/A	10	15.15%	N/A	13	13.00%	N/A	31	12.11%
Age 15 to 24 Female	0.746	N/A	5	5.56%	N/A	2	3.03%	N/A	0	0.00%	N/A	7	2.73%
Age 15 to 24 Male	0.523	N/A	7	7.78%	N/A	6	9.09%	N/A	6	6.00%	N/A	19	7.42%
Age 25 to 44 Female	1.154	N/A	7	7.78%	N/A	6	9.09%	N/A	10	10.00%	N/A	23	8.98%
Age 25 to 44 Male	0.821	N/A	10	11.11%	N/A	6	9.09%	N/A	11	11.00%	N/A	27	10.55%
Age 45 to 64 Female	1.314	N/A	22	24.44%	N/A	16	24.24%	N/A	20	20.00%	N/A	58	22.66%
Age 45 to 64 Male	1.185	N/A	23	25.56%	N/A	16	24.24%	N/A	28	28.00%	N/A	67	26.17%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	9,790	2,287	8,003	20,080
Unadjusted Plan Factor	0.994	0.974	0.997	0.993
Budget Neutral Plan Factor	1.001	0.981	1.004	1.000
Unscored Members				
Member Months	90	66	100	256
Unadjusted Plan Factor	1.017	0.982	1.022	1.010
Budget Neutral Plan Factor	1.007	0.973	1.012	1.000
Total Members				
Member Months	9,880	2,353	8,103	20,336
Unadjusted Plan Factor	0.994	0.974	0.997	0.993
Budget Neutral Plan Factor	1.001	0.980	1.004	1.000

Exhibit 3B
Mississippi Division of Medicaid
Risk Adjustment Results
Non-Newborn SSI / Disabled - Central Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members											
Risk Weight	Disease Impact Rank	Magnolia			Molina			United			Total		
		Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months		
Regression Intercept	0.077	N/A	10,724	100.00%	N/A	2,553	100.00%	N/A	8,276	100.00%	N/A	21,553	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	358	3.34%	N/A	213	8.34%	N/A	311	3.76%	N/A	882	4.09%
Age 5 to 14 Female	0.089	N/A	559	5.21%	N/A	122	4.78%	N/A	436	5.27%	N/A	1,117	5.18%
Age 5 to 14 Male	0.067	N/A	1,200	11.19%	N/A	292	11.44%	N/A	933	11.27%	N/A	2,425	11.25%
Age 15 to 24 Female	0.108	N/A	545	5.08%	N/A	153	5.99%	N/A	436	5.27%	N/A	1,134	5.26%
Age 15 to 24 Male	0.000	N/A	1,025	9.56%	N/A	280	10.97%	N/A	801	9.68%	N/A	2,106	9.77%
Age 25 to 44 Female	0.206	N/A	1,217	11.35%	N/A	185	7.25%	N/A	866	10.46%	N/A	2,268	10.52%
Age 25 to 44 Male	0.053	N/A	1,256	11.71%	N/A	305	11.95%	N/A	1,044	12.61%	N/A	2,605	12.09%
Age 45 to 64 Female	0.109	N/A	2,546	23.74%	N/A	429	16.80%	N/A	1,801	21.76%	N/A	4,776	22.16%
Age 45 to 64 Male	0.111	N/A	1,952	18.20%	N/A	571	22.37%	N/A	1,610	19.45%	N/A	4,133	19.18%
Age 65 and Older Male and Female	0.006	N/A	66	0.62%	N/A	3	0.12%	N/A	38	0.46%	N/A	107	0.50%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	38	0.35%	N/A	28	1.10%	N/A	49	0.59%	N/A	115	0.53%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	55	0.51%	N/A	52	2.04%	N/A	56	0.68%	N/A	163	0.76%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	10,631	99.13%	N/A	2,473	96.87%	N/A	8,171	98.73%	N/A	21,275	98.71%
Disease Categories													
Cancer, very high	4.640	11	62	0.58%	3	29	1.14%	13	38	0.46%	10	129	0.60%
Cancer, high	1.263	23	126	1.17%	12	42	1.65%	24	97	1.17%	23	265	1.23%
Cancer, medium	0.649	29	210	1.96%	30	46	1.80%	23	196	2.37%	28	452	2.10%
Cancer, low	0.148	46	131	1.22%	48	28	1.10%	47	82	0.99%	46	241	1.12%
Cardiovascular, very high	1.401	30	86	0.80%	35	12	0.47%	34	39	0.47%	32	137	0.64%
Cardiovascular, medium	0.570	3	1,041	9.71%	4	225	8.81%	4	735	8.88%	3	2,001	9.28%
Cardiovascular, medium - child	0.188	50	54	0.50%	50	15	0.59%	50	42	0.51%	50	111	0.52%
Cardiovascular, low	0.192	22	896	8.36%	17	255	9.99%	22	703	8.49%	22	1,854	8.60%
Cardiovascular, extra low	0.106	7	3,442	32.10%	9	683	26.75%	6	2,493	30.12%	6	6,618	30.71%
Cerebrovascular, low	0.153	43	282	2.63%	41	67	2.62%	43	184	2.22%	43	533	2.47%
CNS, medium to high	0.589	16	373	3.48%	13	89	3.49%	17	285	3.44%	17	747	3.47%
CNS, high - child	1.358	40	41	0.38%	46	4	0.16%	42	24	0.29%	42	69	0.32%
CNS, low	0.218	5	1,995	18.60%	6	499	19.55%	5	1,497	18.09%	5	3,991	18.52%
DD, low to medium	0.153	36	485	4.52%	33	137	5.37%	33	371	4.48%	34	993	4.61%
Diabetes, type 1 high	1.267	45	20	0.19%	43	5	0.20%	46	10	0.12%	45	35	0.16%
Diabetes, type 1 medium	0.683	35	116	1.08%	36	22	0.86%	35	79	0.95%	35	217	1.01%
Diabetes, type 2 medium	0.416	10	758	7.07%	18	116	4.54%	11	438	5.29%	11	1,312	6.09%
Diabetes, type 2 low	0.177	21	1,106	10.31%	26	209	8.19%	20	891	10.77%	20	2,206	10.24%
Eye, low	0.142	47	130	1.21%	49	22	0.86%	48	78	0.94%	47	230	1.07%
Eye, very low	0.107	31	1,079	10.06%	38	125	4.90%	32	553	6.68%	33	1,757	8.15%
Genital, extra low	0.070	44	400	3.73%	44	85	3.33%	44	327	3.95%	44	812	3.77%
Gastro, medium to high	0.523	9	669	6.24%	7	185	7.25%	7	469	5.67%	8	1,323	6.14%
Gastro, high - child	1.264	33	82	0.76%	27	28	1.10%	30	70	0.85%	30	180	0.84%
Gastro, low	0.127	13	1,945	18.14%	21	353	13.83%	19	1,254	15.15%	15	3,552	16.48%
Hematological, very high to extra high	1.633	20	120	1.12%	29	19	0.74%	21	91	1.10%	21	230	1.07%
Hematological, medium	0.705	32	155	1.45%	31	38	1.49%	31	124	1.50%	31	317	1.47%
Hematological, low	0.491	38	129	1.20%	32	45	1.76%	39	98	1.18%	38	272	1.26%
AIDS, high	1.699	4	320	2.98%	5	64	2.51%	3	254	3.07%	4	638	2.96%
HIV, medium	1.210	41	39	0.36%	42	8	0.31%	38	40	0.48%	40	87	0.40%
Infectious, low to medium	0.435	26	350	3.26%	22	99	3.88%	27	263	3.18%	25	712	3.30%
Metabolic, high	1.035	19	193	1.80%	23	38	1.49%	18	156	1.88%	19	387	1.80%
Metabolic, high - child	0.158	51	52	0.48%	51	12	0.47%	51	45	0.54%	51	109	0.51%
Metabolic, medium	0.396	27	378	3.52%	25	94	3.68%	26	289	3.49%	27	761	3.53%
Metabolic, very low	0.138	24	1,141	10.64%	24	277	10.85%	28	824	9.96%	26	2,242	10.40%
Pregnancy, incomplete	0.395	48	36	0.34%	45	14	0.55%	49	26	0.31%	49	76	0.35%
Psychiatric, high	0.677	2	1,018	9.49%	2	233	9.13%	2	741	8.95%	2	1,992	9.24%
Psychiatric, medium low to medium	0.264	1	3,121	29.10%	1	687	26.91%	1	2,264	27.36%	1	6,072	28.17%
Psychiatric, low	0.167	18	1,244	11.60%	19	281	11.01%	12	1,081	13.06%	18	2,606	12.09%
Pulmonary, very high	1.167	15	201	1.87%	16	43	1.68%	16	145	1.75%	14	389	1.80%
Pulmonary, very high - child	1.465	39	40	0.37%	34	12	0.47%	40	31	0.37%	39	83	0.39%
Pulmonary, high	0.593	49	22	0.21%	47	7	0.27%	45	24	0.29%	48	53	0.25%
Pulmonary, medium	0.475	17	441	4.11%	11	122	4.78%	14	366	4.42%	16	929	4.31%
Pulmonary, low	0.178	8	1,963	18.30%	10	381	14.92%	8	1,295	15.65%	9	3,639	16.88%
Renal, extra high	3.856	6	103	0.96%	8	22	0.86%	9	55	0.66%	7	180	0.84%
Renal, very high	0.489	28	289	2.69%	28	68	2.66%	29	216	2.61%	29	573	2.66%
Renal, low to medium	0.132	34	609	5.68%	39	99	3.88%	37	389	4.70%	36	1,097	5.09%
Skeletal, medium	0.308	14	794	7.40%	15	165	6.46%	15	559	6.75%	13	1,518	7.04%
Skeletal, very low to low	0.149	12	1,704	15.89%	14	352	13.79%	10	1,248	15.08%	12	3,304	15.33%
Skin, low - high	0.254	42	182	1.70%	40	45	1.76%	41	156	1.88%	41	383	1.78%
Skin, very low	0.090	37	781	7.28%	37	158	6.19%	36	577	6.97%	37	1,516	7.03%
Substance abuse, very low to low	0.153	25	1,019	9.50%	20	295	11.56%	25	787	9.51%	24	2,101	9.75%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,704	15.89%	N/A	475	18.61%	N/A	1,501	18.14%	N/A	3,680	17.07%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	2	3.03%	N/A	2	2.56%	N/A	0	0.00%	N/A	4	1.80%
Age 5 to 14 Female	0.660	N/A	1	1.52%	N/A	1	1.28%	N/A	2	2.56%	N/A	4	1.80%
Age 5 to 14 Male	0.572	N/A	4	6.06%	N/A	5	6.41%	N/A	8	10.26%	N/A	17	7.66%
Age 15 to 24 Female	0.746	N/A	7	10.61%	N/A	5	6.41%	N/A	4	5.13%	N/A	16	7.21%
Age 15 to 24 Male	0.523	N/A	1	1.52%	N/A	7	8.97%	N/A	6	7.69%	N/A	14	6.31%
Age 25 to 44 Female	1.154	N/A	7	10.61%	N/A	12	15.38%	N/A	13	16.67%	N/A	32	14.41%
Age 25 to 44 Male	0.821	N/A	13	19.70%	N/A	13	16.67%	N/A	11	14.10%	N/A	37	16.67%
Age 45 to 64 Female	1.314	N/A	14	21.21%	N/A	15	19.23%	N/A	18	23.08%	N/A	47	21.17%
Age 45 to 64 Male	1.185	N/A	17	25.76%	N/A	18	23.08%	N/A	16	20.51%	N/A	51	22.97%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	10,724	2,553	8,276	21,553
Unadjusted Plan Factor	1.088	1.054	1.028	1.061
Budget Neutral Plan Factor	1.025	0.994	0.969	1.000
Unscored Members				
Member Months	66	78	78	222
Unadjusted Plan Factor	1.034	1.009	1.009	1.016
Budget Neutral Plan Factor	1.017	0.993	0.993	1.000
Total Members				
Member Months	10,790	2,631	8,354	21,775
Unadjusted Plan Factor	1.087	1.054	1.028	1.061
Budget Neutral Plan Factor	1.025	0.994	0.969	1.000

Exhibit 3C

Mississippi Division of Medicaid

Risk Adjustment Results

Non-Newborn SSI / Disabled - South Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members												
	Risk Weight	Magnolia			Molina			United			Total			
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept		0.077	N/A	7,392	100.00%	N/A	2,249	100.00%	N/A	7,568	100.00%	N/A	17,209	100.00%
Demographic Categories														
Age 1 to 4	0.087	N/A	252	3.41%	N/A	150	6.67%	N/A	256	3.38%	N/A	658	3.82%	
Age 5 to 14 Female	0.089	N/A	432	5.84%	N/A	109	4.85%	N/A	402	5.31%	N/A	943	5.48%	
Age 5 to 14 Male	0.067	N/A	941	12.73%	N/A	231	10.27%	N/A	913	12.06%	N/A	2,085	12.12%	
Age 15 to 24 Female	0.108	N/A	354	4.79%	N/A	154	6.85%	N/A	385	5.09%	N/A	893	5.19%	
Age 15 to 24 Male	0.000	N/A	612	8.28%	N/A	261	11.61%	N/A	686	9.06%	N/A	1,559	9.06%	
Age 25 to 44 Female	0.206	N/A	719	9.73%	N/A	192	8.54%	N/A	771	10.19%	N/A	1,682	9.77%	
Age 25 to 44 Male	0.053	N/A	770	10.42%	N/A	208	9.25%	N/A	838	11.07%	N/A	1,816	10.55%	
Age 45 to 64 Female	0.109	N/A	1,924	26.03%	N/A	476	21.16%	N/A	1,846	24.39%	N/A	4,246	24.67%	
Age 45 to 64 Male	0.111	N/A	1,366	18.48%	N/A	465	20.68%	N/A	1,456	19.24%	N/A	3,287	19.10%	
Age 65 and Older Male and Female	0.006	N/A	22	0.30%	N/A	3	0.13%	N/A	15	0.20%	N/A	40	0.23%	
Duration Categories														
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	30	0.41%	N/A	34	1.51%	N/A	51	0.67%	N/A	115	0.67%	
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	47	0.64%	N/A	45	2.00%	N/A	62	0.82%	N/A	154	0.89%	
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	7,315	98.96%	N/A	2,170	96.49%	N/A	7,455	98.51%	N/A	16,940	98.44%	
Disease Categories														
Cancer, very high	4.640	7	57	0.77%	7	17	0.76%	12	43	0.57%	8	117	0.68%	
Cancer, high	1.263	21	110	1.49%	13	42	1.87%	24	97	1.28%	22	249	1.45%	
Cancer, medium	0.649	30	131	1.77%	29	39	1.73%	27	159	2.10%	29	329	1.91%	
Cancer, low	0.148	46	91	1.23%	45	31	1.38%	46	87	1.15%	46	209	1.21%	
Cardiovascular, very high	1.401	33	53	0.72%	41	6	0.27%	34	41	0.54%	33	100	0.58%	
Cardiovascular, medium	0.570	2	776	10.50%	2	256	11.38%	2	730	9.65%	2	1,762	10.24%	
Cardiovascular, medium - child	0.188	51	34	0.46%	47	13	0.58%	51	26	0.34%	51	73	0.42%	
Cardiovascular, low	0.192	19	799	10.81%	20	238	10.58%	19	808	10.68%	19	1,845	10.72%	
Cardiovascular, extra low	0.106	10	2,236	30.25%	11	558	24.81%	7	2,312	30.55%	9	5,106	29.67%	
Cerebrovascular, low	0.153	43	200	2.71%	42	54	2.40%	43	163	2.15%	43	417	2.42%	
CNS, medium to high	0.589	16	322	4.36%	16	85	3.78%	17	294	3.88%	16	701	4.07%	
CNS, high - child	1.358	42	27	0.37%	43	5	0.22%	39	27	0.36%	42	59	0.34%	
CNS, low	0.218	4	1,534	20.75%	6	415	18.45%	4	1,486	19.64%	4	3,435	19.96%	
DD, low to medium	0.153	36	393	5.32%	35	111	4.94%	35	374	4.94%	37	878	5.10%	
Diabetes, type 1 high	1.267	41	29	0.39%	51	0	0.00%	45	16	0.21%	44	45	0.26%	
Diabetes, type 1 medium	0.683	34	96	1.30%	36	24	1.07%	33	86	1.14%	32	206	1.20%	
Diabetes, type 2 medium	0.416	11	514	6.95%	12	136	6.05%	16	419	5.54%	13	1,069	6.21%	
Diabetes, type 2 low	0.177	23	763	10.32%	25	173	7.69%	22	736	9.73%	23	1,672	9.72%	
Eye, low	0.142	47	72	0.97%	50	12	0.53%	48	72	0.95%	48	156	0.91%	
Eye, very low	0.107	32	700	9.47%	40	120	5.34%	38	459	6.07%	35	1,279	7.43%	
Genital, extra low	0.070	45	327	4.42%	44	77	3.42%	44	308	4.07%	45	712	4.14%	
Gastro, medium to high	0.523	6	571	7.72%	5	174	7.74%	6	576	7.61%	6	1,321	7.68%	
Gastro, high - child	1.264	31	65	0.88%	33	15	0.67%	30	67	0.89%	31	147	0.85%	
Gastro, low	0.127	15	1,519	20.55%	18	379	16.85%	15	1,387	18.33%	15	3,285	19.09%	
Hematological, very high to extra high	1.633	26	68	0.92%	31	13	0.58%	28	63	0.83%	28	144	0.84%	
Hematological, medium	0.705	29	124	1.68%	26	43	1.91%	31	113	1.49%	30	280	1.63%	
Hematological, low	0.491	37	122	1.65%	32	41	1.82%	36	114	1.51%	36	277	1.61%	
AIDS, high	1.699	5	181	2.45%	4	59	2.62%	5	189	2.50%	5	429	2.49%	
HIV, medium	1.210	44	21	0.28%	30	18	0.80%	41	28	0.37%	40	67	0.39%	
Infectious, low to medium	0.435	24	298	4.03%	17	112	4.98%	21	353	4.66%	21	763	4.43%	
Metabolic, high	1.035	22	132	1.79%	23	30	1.33%	23	123	1.63%	24	285	1.66%	
Metabolic, high - child	0.158	50	46	0.62%	49	11	0.49%	50	45	0.59%	50	102	0.59%	
Metabolic, medium	0.396	25	310	4.19%	22	81	3.60%	25	277	3.66%	25	668	3.88%	
Metabolic, very low	0.138	27	783	10.59%	24	223	9.92%	29	708	9.36%	27	1,714	9.96%	
Pregnancy, incomplete	0.395	49	21	0.28%	48	5	0.22%	49	24	0.32%	49	50	0.29%	
Psychiatric, high	0.677	3	594	8.04%	3	177	7.87%	3	583	7.70%	3	1,354	7.87%	
Psychiatric, medium low to medium	0.264	1	2,337	31.62%	1	616	27.39%	1	2,284	30.18%	1	5,237	30.43%	
Psychiatric, low	0.167	18	1,047	14.16%	19	282	12.54%	13	1,167	15.42%	14	2,496	14.50%	
Pulmonary, very high	1.167	9	203	2.75%	10	55	2.45%	9	196	2.59%	10	454	2.64%	
Pulmonary, very high - child	1.465	40	26	0.35%	34	12	0.53%	42	17	0.22%	41	55	0.32%	
Pulmonary, high	0.593	48	16	0.22%	46	5	0.22%	47	19	0.25%	47	40	0.23%	
Pulmonary, medium	0.475	17	369	4.99%	9	136	6.05%	18	357	4.72%	17	862	5.01%	
Pulmonary, low	0.178	8	1,398	18.91%	8	370	16.45%	8	1,334	17.63%	7	3,102	18.03%	
Renal, extra high	3.856	14	51	0.69%	28	7	0.31%	14	47	0.62%	18	105	0.61%	
Renal, very high	0.489	28	214	2.90%	27	62	2.76%	26	217	2.87%	26	493	2.86%	
Renal, low to medium	0.132	38	425	5.75%	38	115	5.11%	37	382	5.05%	38	922	5.36%	
Skeletal, medium	0.308	12	659	8.92%	14	165	7.34%	11	660	8.72%	12	1,484	8.62%	
Skeletal, very low to low	0.149	13	1,361	18.41%	15	337	14.98%	10	1,473	19.46%	11	3,171	18.43%	
Skin, low - high	0.254	39	151	2.04%	39	59	2.62%	40	138	1.82%	39	348	2.02%	
Skin, very low	0.090	35	700	9.47%	37	174	7.74%	32	675	8.92%	34	1,549	9.00%	
Substance abuse, very low to low	0.153	20	910	12.31%	21	283	12.58%	20	1,006	13.29%	20	2,199	12.78%	
Population Statistics														
No Classified Disease Categories	N/A	N/A	1,154	15.61%	N/A	448	19.92%	N/A	1,270	16.78%	N/A	2,872	16.69%	

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	3	3.33%	N/A	0	0.00%	N/A	6	5.36%	N/A	9	3.21%
Age 5 to 14 Female	0.660	N/A	5	5.56%	N/A	3	3.85%	N/A	9	8.04%	N/A	17	6.07%
Age 5 to 14 Male	0.572	N/A	8	8.89%	N/A	6	7.69%	N/A	9	8.04%	N/A	23	8.21%
Age 15 to 24 Female	0.746	N/A	4	4.44%	N/A	5	6.41%	N/A	2	1.79%	N/A	11	3.93%
Age 15 to 24 Male	0.523	N/A	9	10.00%	N/A	6	7.69%	N/A	4	3.57%	N/A	19	6.79%
Age 25 to 44 Female	1.154	N/A	12	13.33%	N/A	11	14.10%	N/A	13	11.61%	N/A	36	12.86%
Age 25 to 44 Male	0.821	N/A	9	10.00%	N/A	9	11.54%	N/A	12	10.71%	N/A	30	10.71%
Age 45 to 64 Female	1.314	N/A	21	23.33%	N/A	18	23.08%	N/A	28	25.00%	N/A	67	23.93%
Age 45 to 64 Male	1.185	N/A	19	21.11%	N/A	20	25.64%	N/A	29	25.89%	N/A	68	24.29%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	7,392	2,249	7,568	17,209
Unadjusted Plan Factor	1.151	1.072	1.093	1.115
Budget Neutral Plan Factor	1.032	0.961	0.980	1.000
Unscored Members				
Member Months	90	78	112	280
Unadjusted Plan Factor	1.003	1.022	1.048	1.026
Budget Neutral Plan Factor	0.977	0.996	1.021	1.000
Total Members				
Member Months	7,482	2,327	7,680	17,489
Unadjusted Plan Factor	1.149	1.072	1.092	1.114
Budget Neutral Plan Factor	1.032	0.962	0.981	1.000

Exhibit 3D

Mississippi Division of Medicaid

Risk Adjustment Results

MA Adult - North Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members											
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	3,427	100.00%	N/A	2,056	100.00%	N/A	3,161	100.00%	N/A	8,644	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	255	7.44%	N/A	269	13.08%	N/A	306	9.68%	N/A	830	9.60%
Age 15 to 24 Male	0.000	N/A	10	0.29%	N/A	6	0.29%	N/A	8	0.25%	N/A	24	0.28%
Age 25 to 44 Female	0.236	N/A	2,546	74.29%	N/A	1,489	72.42%	N/A	2,279	72.10%	N/A	6,314	73.04%
Age 25 to 44 Male	0.058	N/A	202	5.89%	N/A	123	5.98%	N/A	197	6.23%	N/A	522	6.04%
Age 45 and Older Female	0.245	N/A	344	10.04%	N/A	135	6.57%	N/A	303	9.59%	N/A	782	9.05%
Age 45 and Older Male	0.365	N/A	70	2.04%	N/A	34	1.65%	N/A	68	2.15%	N/A	172	1.99%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	197	5.75%	N/A	210	10.21%	N/A	200	6.33%	N/A	607	7.02%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	98	2.86%	N/A	72	3.50%	N/A	111	3.51%	N/A	281	3.25%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,132	91.39%	N/A	1,774	86.28%	N/A	2,850	90.16%	N/A	7,756	89.73%
Disease Categories													
Cancer, high to very high	3.752	15	17	0.50%	18	7	0.34%	11	20	0.63%	14	44	0.51%
Cancer, medium	0.997	22	36	1.05%	23	19	0.92%	26	28	0.89%	23	83	0.96%
Cancer, low	0.364	36	15	0.44%	37	7	0.34%	37	12	0.38%	36	34	0.39%
Cardiovascular, very high	1.914	37	2	0.06%	38	1	0.05%	39	1	0.03%	39	4	0.05%
Cardiovascular, medium	0.601	11	145	4.23%	7	83	4.04%	13	121	3.83%	10	349	4.04%
Cardiovascular, low	0.315	16	177	5.16%	15	99	4.82%	17	162	5.12%	17	438	5.07%
Cardiovascular, extra low	0.122	3	1,009	29.44%	5	478	23.25%	4	864	27.33%	4	2,351	27.20%
CNS, medium to high	0.836	27	34	0.99%	36	5	0.24%	25	35	1.11%	28	74	0.86%
CNS, low	0.419	8	219	6.39%	10	116	5.64%	6	228	7.21%	8	563	6.51%
Diabetes, type 1 high	2.432	39	1	0.03%	35	2	0.10%	38	1	0.03%	38	4	0.05%
Diabetes, type 1 medium	1.612	17	34	0.99%	17	18	0.88%	22	20	0.63%	18	72	0.83%
Diabetes, type 2 medium	1.043	14	64	1.87%	14	30	1.46%	15	56	1.77%	15	150	1.74%
Diabetes, type 2 low	0.375	6	287	8.37%	8	133	6.47%	8	222	7.02%	7	642	7.43%
DD, low to medium	0.613	40	2	0.06%	39	2	0.10%	40	2	0.06%	40	6	0.07%
Eye, very low to low	0.324	26	89	2.60%	31	28	1.36%	30	73	2.31%	29	190	2.20%
Genital, extra low	0.118	24	262	7.65%	24	159	7.73%	29	206	6.52%	25	627	7.25%
Gastro, medium to high	0.933	9	98	2.86%	6	54	2.63%	14	76	2.40%	9	228	2.64%
Gastro, low	0.224	4	547	15.96%	9	219	10.65%	5	444	14.05%	5	1,210	14.00%
Hematological, low to extra high	0.318	32	64	1.87%	30	34	1.65%	32	55	1.74%	31	153	1.77%
AIDS, high	1.445	13	48	1.40%	16	21	1.02%	10	55	1.74%	13	124	1.43%
HIV, medium	1.320	38	2	0.06%	40	0	0.00%	36	7	0.22%	37	9	0.10%
Infectious, low to medium	0.578	19	86	2.51%	22	38	1.85%	21	60	1.90%	19	184	2.13%
Metabolic, high	0.857	29	27	0.79%	28	16	0.78%	19	43	1.36%	26	86	0.99%
Metabolic, medium	0.393	34	37	1.08%	32	19	0.92%	34	37	1.17%	34	93	1.08%
Metabolic, very low	0.138	30	158	4.61%	29	82	3.99%	33	112	3.54%	32	352	4.07%
Pregnancy, complete	0.160	18	335	9.78%	13	280	13.62%	16	356	11.26%	16	971	11.23%
Pregnancy, incomplete	0.997	2	147	4.29%	1	100	4.86%	3	107	3.39%	2	354	4.10%
Psychiatric, high	0.972	28	26	0.76%	26	18	0.88%	28	27	0.85%	27	71	0.82%
Psychiatric, medium	0.513	23	64	1.87%	21	43	2.09%	20	70	2.21%	22	177	2.05%
Psychiatric, medium low	0.321	5	367	10.71%	3	216	10.51%	2	385	12.18%	3	968	11.20%
Psychiatric, low	0.212	7	475	13.86%	4	279	13.57%	7	435	13.76%	6	1,189	13.76%
Pulmonart, medium to high	0.600	20	75	2.19%	20	37	1.80%	24	50	1.58%	21	162	1.87%
Pulmonary, low	0.227	10	390	11.38%	11	203	9.87%	12	325	10.28%	11	918	10.62%
Renal, medium to extra high	0.855	33	22	0.64%	27	19	0.92%	27	31	0.98%	30	72	0.83%
Renal, low	0.304	31	69	2.01%	33	24	1.17%	31	60	1.90%	33	153	1.77%
Skeletal, medium	0.586	12	132	3.85%	12	77	3.75%	9	138	4.37%	12	347	4.01%
Skeletal, very low to low	0.362	1	548	15.99%	2	245	11.92%	1	495	15.66%	1	1,288	14.90%
Skin, low to high	0.941	35	11	0.32%	34	7	0.34%	35	13	0.41%	35	31	0.36%
Skin, very low	0.132	25	220	6.42%	25	140	6.81%	23	234	7.40%	24	594	6.87%
Substance abuse, low	0.289	21	130	3.79%	19	80	3.89%	18	136	4.30%	20	346	4.00%
Population Statistics													
No Classified Disease Categories	N/A	N/A	942	27.49%	N/A	642	31.23%	N/A	902	28.54%	N/A	2,486	28.76%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	15	5.88%	N/A	24	10.21%	N/A	21	7.89%	N/A	60	7.94%
Age 15 to 24 Male	0.514	N/A	4	1.57%	N/A	2	0.85%	N/A	4	1.50%	N/A	10	1.32%
Age 25 to 44 Female	0.989	N/A	180	70.59%	N/A	146	62.13%	N/A	161	60.53%	N/A	487	64.42%
Age 25 to 44 Male	0.770	N/A	28	10.98%	N/A	33	14.04%	N/A	36	13.53%	N/A	97	12.83%
Age 45 and Older Female	1.353	N/A	18	7.06%	N/A	20	8.51%	N/A	34	12.78%	N/A	72	9.52%
Age 45 and Older Male	1.362	N/A	10	3.92%	N/A	10	4.26%	N/A	10	3.76%	N/A	30	3.97%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	3,427	2,056	3,161	8,644
Unadjusted Plan Factor	1.030	0.964	1.021	1.011
Budget Neutral Plan Factor	1.018	0.954	1.010	1.000
Unscored Members				
Member Months	255	235	266	756
Unadjusted Plan Factor	0.994	0.994	1.008	0.999
Budget Neutral Plan Factor	0.995	0.995	1.009	1.000
Total Members				
Member Months	3,682	2,291	3,427	9,400
Unadjusted Plan Factor	1.027	0.968	1.020	1.010
Budget Neutral Plan Factor	1.017	0.958	1.010	1.000

Exhibit 3E
Mississippi Division of Medicaid
Risk Adjustment Results
MA Adult - Central Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members											
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	3,914	100.00%	N/A	2,644	100.00%	N/A	3,710	100.00%	N/A	10,268	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	255	6.52%	N/A	267	10.10%	N/A	306	8.25%	N/A	828	8.06%
Age 15 to 24 Male	0.000	N/A	7	0.18%	N/A	5	0.19%	N/A	16	0.43%	N/A	28	0.27%
Age 25 to 44 Female	0.236	N/A	2,967	75.80%	N/A	2,032	76.85%	N/A	2,704	72.88%	N/A	7,703	75.02%
Age 25 to 44 Male	0.058	N/A	183	4.68%	N/A	138	5.22%	N/A	202	5.44%	N/A	523	5.09%
Age 45 and Older Female	0.245	N/A	413	10.55%	N/A	150	5.67%	N/A	398	10.73%	N/A	961	9.36%
Age 45 and Older Male	0.365	N/A	89	2.27%	N/A	52	1.97%	N/A	84	2.26%	N/A	225	2.19%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	248	6.34%	N/A	218	8.25%	N/A	252	6.79%	N/A	718	6.99%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	127	3.24%	N/A	106	4.01%	N/A	169	4.56%	N/A	402	3.92%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,539	90.42%	N/A	2,320	87.75%	N/A	3,289	88.65%	N/A	9,148	89.09%
Disease Categories													
Cancer, high to very high	3.752	17	16	0.41%	18	9	0.34%	19	14	0.38%	17	39	0.38%
Cancer, medium	0.997	26	37	0.95%	26	21	0.79%	25	34	0.92%	25	92	0.90%
Cancer, low	0.364	37	14	0.36%	39	10	0.38%	39	16	0.43%	38	40	0.39%
Cardiovascular, very high	1.914	39	1	0.03%	38	2	0.08%	37	4	0.11%	39	7	0.07%
Cardiovascular, medium	0.601	12	140	3.58%	12	89	3.37%	12	135	3.64%	12	364	3.54%
Cardiovascular, low	0.315	19	152	3.88%	19	85	3.21%	20	151	4.07%	20	388	3.78%
Cardiovascular, extra low	0.122	3	1,161	29.66%	4	681	25.76%	4	1,069	28.81%	4	2,911	28.35%
CNS, medium to high	0.836	29	35	0.89%	29	19	0.72%	26	40	1.08%	27	94	0.92%
CNS, low	0.419	8	263	6.72%	9	138	5.22%	8	245	6.60%	8	646	6.29%
Diabetes, type 1 high	2.432	38	2	0.05%	37	2	0.08%	38	3	0.08%	37	7	0.07%
Diabetes, type 1 medium	1.612	18	32	0.82%	25	13	0.49%	17	36	0.97%	19	81	0.79%
Diabetes, type 2 medium	1.043	13	80	2.04%	15	40	1.51%	13	76	2.05%	13	196	1.91%
Diabetes, type 2 low	0.375	7	302	7.72%	13	138	5.22%	10	251	6.77%	9	691	6.73%
DD, low to medium	0.613	40	3	0.08%	40	1	0.04%	40	2	0.05%	40	6	0.06%
Eye, very low to low	0.324	24	119	3.04%	32	36	1.36%	27	87	2.35%	28	242	2.36%
Genital, extra low	0.118	27	286	7.31%	24	192	7.26%	29	234	6.31%	26	712	6.93%
Gastro, medium to high	0.933	9	103	2.63%	6	78	2.95%	7	113	3.05%	7	294	2.86%
Gastro, low	0.224	5	573	14.64%	7	305	11.54%	6	540	14.56%	6	1,418	13.81%
Hematological, low to extra high	0.318	30	84	2.15%	30	43	1.63%	31	76	2.05%	32	203	1.98%
AIDS, high	1.445	14	52	1.33%	14	29	1.10%	14	52	1.40%	14	133	1.30%
HIV, medium	1.320	35	13	0.33%	36	4	0.15%	36	10	0.27%	36	27	0.26%
Infectious, low to medium	0.578	22	72	1.84%	21	45	1.70%	22	74	1.99%	23	191	1.86%
Metabolic, high	0.857	31	31	0.79%	28	19	0.72%	32	26	0.70%	30	76	0.74%
Metabolic, medium	0.393	33	52	1.33%	34	27	1.02%	34	44	1.19%	33	123	1.20%
Metabolic, very low	0.138	34	133	3.40%	33	84	3.18%	33	126	3.40%	34	343	3.34%
Pregnancy, complete	0.160	16	392	10.02%	10	359	13.58%	16	409	11.02%	15	1,160	11.30%
Pregnancy, incomplete	0.997	4	138	3.53%	1	140	5.30%	2	158	4.26%	2	436	4.25%
Psychiatric, high	0.972	20	48	1.23%	22	25	0.95%	23	42	1.13%	22	115	1.12%
Psychiatric, medium	0.513	23	81	2.07%	20	52	1.97%	21	87	2.35%	21	220	2.14%
Psychiatric, medium low	0.321	2	471	12.03%	3	282	10.67%	3	416	11.21%	3	1,169	11.38%
Psychiatric, low	0.212	6	561	14.33%	5	365	13.80%	5	591	15.93%	5	1,517	14.77%
Pulmonart, medium to high	0.600	21	73	1.87%	17	59	2.23%	18	88	2.37%	18	220	2.14%
Pulmonary, low	0.227	11	403	10.30%	11	239	9.04%	11	407	10.97%	11	1,049	10.22%
Renal, medium to extra high	0.855	28	36	0.92%	27	24	0.91%	30	31	0.84%	29	91	0.89%
Renal, low	0.304	32	82	2.10%	31	41	1.55%	28	91	2.45%	31	214	2.08%
Skeletal, medium	0.586	10	160	4.09%	8	102	3.86%	9	173	4.66%	10	435	4.24%
Skeletal, very low to low	0.362	1	564	14.41%	2	288	10.89%	1	500	13.48%	1	1,352	13.17%
Skin, low to high	0.941	36	18	0.46%	35	9	0.34%	35	17	0.46%	35	44	0.43%
Skin, very low	0.132	25	287	7.33%	23	176	6.66%	24	277	7.47%	24	740	7.21%
Substance abuse, low	0.289	15	237	6.06%	16	138	5.22%	15	229	6.17%	16	604	5.88%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,134	28.97%	N/A	845	31.96%	N/A	1,055	28.44%	N/A	3,034	29.55%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	14	5.22%	N/A	18	6.92%	N/A	28	9.76%	N/A	60	7.36%
Age 15 to 24 Male	0.514	N/A	2	0.75%	N/A	2	0.77%	N/A	10	3.48%	N/A	14	1.72%
Age 25 to 44 Female	0.989	N/A	178	66.42%	N/A	171	65.77%	N/A	174	60.63%	N/A	523	64.17%
Age 25 to 44 Male	0.770	N/A	44	16.42%	N/A	37	14.23%	N/A	34	11.85%	N/A	115	14.11%
Age 45 and Older Female	1.353	N/A	21	7.84%	N/A	22	8.46%	N/A	32	11.15%	N/A	75	9.20%
Age 45 and Older Male	1.362	N/A	9	3.36%	N/A	10	3.85%	N/A	9	3.14%	N/A	28	3.44%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	3,914	2,644	3,710	10,268
Unadjusted Plan Factor	1.019	0.958	1.036	1.010
Budget Neutral Plan Factor	1.009	0.949	1.026	1.000
Unscored Members				
Member Months	268	260	287	815
Unadjusted Plan Factor	0.987	0.995	0.992	0.991
Budget Neutral Plan Factor	0.996	1.003	1.001	1.000
Total Members				
Member Months	4,182	2,904	3,997	11,083
Unadjusted Plan Factor	1.017	0.962	1.033	1.008
Budget Neutral Plan Factor	1.008	0.954	1.024	1.000

Exhibit 3F

Mississippi Division of Medicaid

Risk Adjustment Results

MA Adult - South Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members											
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	4,828	100.00%	N/A	3,986	100.00%	N/A	5,894	100.00%	N/A	14,708	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	318	6.59%	N/A	401	10.06%	N/A	432	7.33%	N/A	1,151	7.83%
Age 15 to 24 Male	0.000	N/A	14	0.29%	N/A	21	0.53%	N/A	14	0.24%	N/A	49	0.33%
Age 25 to 44 Female	0.236	N/A	3,436	71.17%	N/A	2,817	70.67%	N/A	4,123	69.95%	N/A	10,376	70.55%
Age 25 to 44 Male	0.058	N/A	395	8.18%	N/A	327	8.20%	N/A	500	8.48%	N/A	1,222	8.31%
Age 45 and Older Female	0.245	N/A	530	10.98%	N/A	318	7.98%	N/A	611	10.37%	N/A	1,459	9.92%
Age 45 and Older Male	0.365	N/A	135	2.80%	N/A	102	2.56%	N/A	214	3.63%	N/A	451	3.07%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	229	4.74%	N/A	209	5.24%	N/A	314	5.33%	N/A	752	5.11%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	196	4.06%	N/A	164	4.11%	N/A	209	3.55%	N/A	569	3.87%
Diagnosis Period Duration, 12 Months	0.000	N/A	4,403	91.20%	N/A	3,613	90.64%	N/A	5,371	91.13%	N/A	13,387	91.02%
Disease Categories													
Cancer, high to very high	3.752	24	12	0.25%	21	13	0.33%	21	22	0.37%	22	47	0.32%
Cancer, medium	0.997	32	34	0.70%	25	31	0.78%	24	56	0.95%	24	121	0.82%
Cancer, low	0.364	36	34	0.70%	38	20	0.50%	39	29	0.49%	38	83	0.56%
Cardiovascular, very high	1.914	39	3	0.06%	37	6	0.15%	38	6	0.10%	39	15	0.10%
Cardiovascular, medium	0.601	13	169	3.50%	13	125	3.14%	13	213	3.61%	13	507	3.45%
Cardiovascular, low	0.315	15	249	5.16%	16	200	5.02%	17	300	5.09%	16	749	5.09%
Cardiovascular, extra low	0.122	8	1,212	25.10%	7	879	22.05%	6	1,555	26.38%	8	3,646	24.79%
CNS, medium to high	0.836	27	48	0.99%	32	21	0.53%	25	66	1.12%	28	135	0.92%
CNS, low	0.419	5	412	8.53%	6	302	7.58%	5	508	8.62%	5	1,222	8.31%
Diabetes, type 1 high	2.432	37	5	0.10%	34	7	0.18%	37	7	0.12%	36	19	0.13%
Diabetes, type 1 medium	1.612	20	41	0.85%	20	32	0.80%	19	55	0.93%	20	128	0.87%
Diabetes, type 2 medium	1.043	14	93	1.93%	22	42	1.05%	14	111	1.88%	14	246	1.67%
Diabetes, type 2 low	0.375	10	309	6.40%	14	190	4.77%	12	360	6.11%	12	859	5.84%
DD, low to medium	0.613	40	6	0.12%	40	4	0.10%	40	5	0.08%	40	15	0.10%
Eye, very low to low	0.324	25	135	2.80%	35	49	1.23%	31	125	2.12%	30	309	2.10%
Genital, extra low	0.118	29	322	6.67%	26	255	6.40%	26	426	7.23%	27	1,003	6.82%
Gastro, medium to high	0.933	3	192	3.98%	3	170	4.26%	3	260	4.41%	3	622	4.23%
Gastro, low	0.224	6	760	15.74%	9	429	10.76%	7	809	13.73%	7	1,998	13.58%
Hematological, low to extra high	0.318	28	119	2.46%	27	93	2.33%	32	100	1.70%	31	312	2.12%
AIDS, high	1.445	16	54	1.12%	18	38	0.95%	16	70	1.19%	17	162	1.10%
HIV, medium	1.320	38	9	0.19%	39	4	0.10%	36	13	0.22%	37	26	0.18%
Infectious, low to medium	0.578	17	134	2.78%	17	100	2.51%	18	154	2.61%	19	388	2.64%
Metabolic, high	0.857	30	44	0.91%	33	20	0.50%	30	48	0.81%	32	112	0.76%
Metabolic, medium	0.393	33	71	1.47%	30	48	1.20%	35	57	0.97%	33	176	1.20%
Metabolic, very low	0.138	35	144	2.98%	36	113	2.83%	33	193	3.27%	35	450	3.06%
Pregnancy, complete	0.160	21	409	8.47%	12	487	12.22%	20	539	9.14%	18	1,435	9.76%
Pregnancy, incomplete	0.997	7	167	3.46%	4	152	3.81%	8	163	2.77%	6	482	3.28%
Psychiatric, high	0.972	23	47	0.97%	28	28	0.70%	27	48	0.81%	25	123	0.84%
Psychiatric, medium	0.513	19	137	2.84%	15	123	3.09%	15	201	3.41%	15	461	3.13%
Psychiatric, medium low	0.321	2	672	13.92%	2	520	13.05%	2	853	14.47%	2	2,045	13.90%
Psychiatric, low	0.212	4	843	17.46%	5	664	16.66%	4	1,110	18.83%	4	2,617	17.79%
Pulmonart, medium to high	0.600	18	123	2.55%	19	88	2.21%	22	131	2.22%	21	342	2.33%
Pulmonary, low	0.227	11	504	10.44%	11	398	9.98%	11	629	10.67%	11	1,531	10.41%
Renal, medium to extra high	0.855	26	49	1.01%	24	37	0.93%	28	52	0.88%	26	138	0.94%
Renal, low	0.304	31	122	2.53%	29	88	2.21%	29	143	2.43%	29	353	2.40%
Skeletal, medium	0.586	9	212	4.39%	8	173	4.34%	9	264	4.48%	9	649	4.41%
Skeletal, very low to low	0.362	1	751	15.56%	1	489	12.27%	1	1,003	17.02%	1	2,243	15.25%
Skin, low to high	0.941	34	24	0.50%	31	19	0.48%	34	27	0.46%	34	70	0.48%
Skin, very low	0.132	22	361	7.48%	23	280	7.02%	23	445	7.55%	23	1,086	7.38%
Substance abuse, low	0.289	12	394	8.16%	10	319	8.00%	10	532	9.03%	10	1,245	8.46%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,387	28.73%	N/A	1,262	31.66%	N/A	1,614	27.38%	N/A	4,263	28.98%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	25	8.87%	N/A	17	7.11%	N/A	33	10.38%	N/A	75	8.94%
Age 15 to 24 Male	0.514	N/A	2	0.71%	N/A	3	1.26%	N/A	4	1.26%	N/A	9	1.07%
Age 25 to 44 Female	0.989	N/A	195	69.15%	N/A	151	63.18%	N/A	194	61.01%	N/A	540	64.36%
Age 25 to 44 Male	0.770	N/A	33	11.70%	N/A	33	13.81%	N/A	53	16.67%	N/A	119	14.18%
Age 45 and Older Female	1.353	N/A	12	4.26%	N/A	22	9.21%	N/A	21	6.60%	N/A	55	6.56%
Age 45 and Older Male	1.362	N/A	15	5.32%	N/A	13	5.44%	N/A	13	4.09%	N/A	41	4.89%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	4,828	3,986	5,894	14,708
Unadjusted Plan Factor	1.054	0.994	1.065	1.042
Budget Neutral Plan Factor	1.011	0.954	1.022	1.000
Unscored Members				
Member Months	282	239	318	839
Unadjusted Plan Factor	0.990	1.002	0.979	0.989
Budget Neutral Plan Factor	1.000	1.013	0.990	1.000
Total Members				
Member Months	5,110	4,225	6,212	15,547
Unadjusted Plan Factor	1.050	0.994	1.060	1.039
Budget Neutral Plan Factor	1.011	0.957	1.020	1.000

Exhibit 3G
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - North Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

Scored Members														
	Risk Weight	Magnolia			Molina			United			Total			
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept		0.539	N/A	23,422	100.00%	N/A	10,177	100.00%	N/A	21,503	100.00%	N/A	55,102	100.00%
Demographic Categories														
Age 1 to 5 Male	0.133	N/A	3,268	13.95%	N/A	1,996	19.61%	N/A	3,197	14.87%	N/A	8,461	15.36%	
Age 1 to 5 Female	0.068	N/A	3,364	14.36%	N/A	2,031	19.96%	N/A	3,203	14.90%	N/A	8,598	15.60%	
Age 6 to 12 Male	0.047	N/A	4,239	18.10%	N/A	1,790	17.59%	N/A	3,830	17.81%	N/A	9,859	17.89%	
Age 6 to 12 Female	0.049	N/A	4,460	19.04%	N/A	1,798	17.67%	N/A	3,924	18.25%	N/A	10,182	18.48%	
Age 13 to 18 Male	0.000	N/A	3,969	16.95%	N/A	1,243	12.21%	N/A	3,603	16.76%	N/A	8,815	16.00%	
Age 13 to 18 Female	0.297	N/A	4,122	17.60%	N/A	1,319	12.96%	N/A	3,746	17.42%	N/A	9,187	16.67%	
Disease Categories														
Cancer, very high	27.677	40	0	0.00%	22	1	0.01%	32	1	0.00%	31	2	0.00%	
Cancer, high	4.235	28	9	0.04%	27	4	0.04%	24	14	0.07%	26	27	0.05%	
Cancer, medium	3.414	19	23	0.10%	30	4	0.04%	20	21	0.10%	21	48	0.09%	
Cancer, low	0.629	39	2	0.01%	36	2	0.02%	40	3	0.01%	40	7	0.01%	
Cardiovascular, very high	5.998	33	2	0.01%	39	0	0.00%	35	2	0.01%	35	4	0.01%	
Cardiovascular, medium	0.760	21	90	0.38%	20	42	0.41%	23	78	0.36%	22	210	0.38%	
Cardiovascular, extra low to low	0.593	3	1,169	4.99%	3	379	3.72%	3	1,129	5.25%	3	2,677	4.86%	
Cerebrovascular, low	0.316	38	7	0.03%	38	2	0.02%	38	9	0.04%	39	18	0.03%	
CNS, high	10.392	29	3	0.01%	31	1	0.01%	25	5	0.02%	29	9	0.02%	
CNS, medium	1.647	30	15	0.06%	28	10	0.10%	30	24	0.11%	30	49	0.09%	
CNS, low	0.575	9	356	1.52%	10	161	1.58%	11	341	1.59%	11	858	1.56%	
DD, low to medium	2.162	23	26	0.11%	25	10	0.10%	18	40	0.19%	20	76	0.14%	
Diabetes, type 2 low	2.030	5	172	0.73%	9	49	0.48%	8	140	0.65%	8	361	0.66%	
Eye, very low to low	0.349	25	145	0.62%	29	43	0.42%	26	127	0.59%	28	315	0.57%	
Genital, extra low	0.361	24	151	0.64%	23	66	0.65%	27	121	0.56%	24	338	0.61%	
Gastro, high	5.482	20	14	0.06%	16	9	0.09%	16	20	0.09%	17	43	0.08%	
Gastro, medium	1.521	22	40	0.17%	24	15	0.15%	21	44	0.20%	23	99	0.18%	
Gastro, low	0.386	4	937	4.00%	4	446	4.38%	5	859	3.99%	4	2,242	4.07%	
Hematological, low to extra high	0.598	18	135	0.58%	17	73	0.72%	19	141	0.66%	18	349	0.63%	
AIDS, high	1.527	17	60	0.26%	18	22	0.22%	22	39	0.18%	19	121	0.22%	
HIV, medium	1.204	35	4	0.02%	37	1	0.01%	39	2	0.01%	37	7	0.01%	
Infectious, low to medium	0.197	27	227	0.97%	21	150	1.47%	29	210	0.98%	25	587	1.07%	
Metabolic, medium to high	1.382	15	107	0.46%	12	52	0.51%	12	130	0.60%	12	289	0.52%	
Metabolic, very low	0.506	10	395	1.69%	8	224	2.20%	10	408	1.90%	9	1,027	1.86%	
Pregnancy, incomplete	2.708	16	45	0.19%	19	12	0.12%	17	34	0.16%	16	91	0.17%	
Psychiatric, high	2.650	34	4	0.02%	32	3	0.03%	31	11	0.05%	32	18	0.03%	
Psychiatric, medium	1.509	8	169	0.72%	5	97	0.95%	4	241	1.12%	6	507	0.92%	
Psychiatric, medium low	1.218	1	2,737	11.69%	1	893	8.77%	1	2,505	11.65%	1	6,135	11.13%	
Psychiatric, low	0.619	6	537	2.29%	6	202	1.98%	6	531	2.47%	5	1,270	2.30%	
Pulmonary, high	7.062	13	23	0.10%	11	13	0.13%	9	34	0.16%	10	70	0.13%	
Pulmonary, low to medium	0.502	2	2,716	11.60%	2	1,051	10.33%	2	2,436	11.33%	2	6,203	11.26%	
Renal, extra high	13.306	40	0	0.00%	39	0	0.00%	41	0	0.00%	41	0	0.00%	
Renal, very high	1.565	31	15	0.06%	34	3	0.03%	33	12	0.06%	33	30	0.05%	
Renal, medium	0.837	37	5	0.02%	35	3	0.03%	36	10	0.05%	36	18	0.03%	
Renal, low	0.295	26	167	0.71%	26	63	0.62%	28	144	0.67%	27	374	0.68%	
Skeletal, medium	0.567	11	289	1.23%	13	114	1.12%	15	264	1.23%	14	667	1.21%	
Skeletal, low	0.437	12	374	1.60%	15	135	1.33%	13	363	1.69%	13	872	1.58%	
Skeletal, very low	0.278	7	1,177	5.03%	7	433	4.25%	7	1,141	5.31%	7	2,751	4.99%	
Skin, high	1.516	36	3	0.01%	39	0	0.00%	37	2	0.01%	38	5	0.01%	
Skin, very low to low	0.188	14	847	3.62%	14	338	3.32%	14	817	3.80%	15	2,002	3.63%	
Substance abuse, very low to low	0.381	32	57	0.24%	33	16	0.16%	34	39	0.18%	34	112	0.20%	
Population Statistics														
No Classified Disease Categories	N/A	N/A	14,427	61.60%	N/A	6,605	64.90%	N/A	13,093	60.89%	N/A	34,125	61.93%	

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	102	20.86%	N/A	76	17.51%	N/A	112	20.25%	N/A	290	19.65%
Age 1 to 5 Female	0.833	N/A	73	14.93%	N/A	82	18.89%	N/A	85	15.37%	N/A	240	16.26%
Age 6 to 12 Male	1.046	N/A	85	17.38%	N/A	83	19.12%	N/A	104	18.81%	N/A	272	18.43%
Age 6 to 12 Female	0.896	N/A	91	18.61%	N/A	75	17.28%	N/A	97	17.54%	N/A	263	17.82%
Age 13 to 18 Male	1.007	N/A	56	11.45%	N/A	61	14.06%	N/A	73	13.20%	N/A	190	12.87%
Age 13 to 18 Female	1.292	N/A	82	16.77%	N/A	57	13.13%	N/A	82	14.83%	N/A	221	14.97%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	23,422	10,177	21,503	55,102
Unadjusted Plan Factor	1.032	0.978	1.054	1.030
Budget Neutral Plan Factor	1.002	0.949	1.023	1.000
Unscored Members				
Member Months	489	434	553	1,476
Unadjusted Plan Factor	1.004	0.990	0.999	0.998
Budget Neutral Plan Factor	1.006	0.992	1.001	1.000
Total Members				
Member Months	23,911	10,611	22,056	56,578
Unadjusted Plan Factor	1.031	0.979	1.052	1.030
Budget Neutral Plan Factor	1.002	0.951	1.022	1.000

Exhibit 3H

Mississippi Division of Medicaid

Risk Adjustment Results

MA Children - Central Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

Scored Members														
	Risk Weight	Magnolia			Molina			United			Total			
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept		0.539	N/A	28,381	100.00%	N/A	13,284	100.00%	N/A	25,184	100.00%	N/A	66,849	100.00%
Demographic Categories														
Age 1 to 5 Male	0.133	N/A	4,128	14.54%	N/A	2,731	20.56%	N/A	3,891	15.45%	N/A	10,750	16.08%	
Age 1 to 5 Female	0.068	N/A	3,936	13.87%	N/A	2,676	20.14%	N/A	3,864	15.34%	N/A	10,476	15.67%	
Age 6 to 12 Male	0.047	N/A	5,125	18.06%	N/A	2,298	17.30%	N/A	4,454	17.69%	N/A	11,877	17.77%	
Age 6 to 12 Female	0.049	N/A	5,235	18.45%	N/A	2,295	17.28%	N/A	4,469	17.75%	N/A	11,999	17.95%	
Age 13 to 18 Male	0.000	N/A	4,804	16.93%	N/A	1,653	12.44%	N/A	4,218	16.75%	N/A	10,675	15.97%	
Age 13 to 18 Female	0.297	N/A	5,153	18.16%	N/A	1,631	12.28%	N/A	4,288	17.03%	N/A	11,072	16.56%	
Disease Categories														
Cancer, very high	27.677	41	0	0.00%	25	1	0.01%	32	1	0.00%	33	2	0.00%	
Cancer, high	4.235	29	9	0.03%	30	4	0.03%	28	10	0.04%	29	23	0.03%	
Cancer, medium	3.414	17	39	0.14%	19	12	0.09%	21	26	0.10%	18	77	0.12%	
Cancer, low	0.629	40	3	0.01%	39	1	0.01%	39	4	0.02%	41	8	0.01%	
Cardiovascular, very high	5.998	35	1	0.00%	40	0	0.00%	35	2	0.01%	37	3	0.00%	
Cardiovascular, medium	0.760	26	64	0.23%	24	38	0.29%	26	65	0.26%	27	167	0.25%	
Cardiovascular, extra low to low	0.593	3	1,319	4.65%	3	471	3.55%	3	1,202	4.77%	3	2,992	4.48%	
Cerebrovascular, low	0.316	39	9	0.03%	37	5	0.04%	41	6	0.02%	40	20	0.03%	
CNS, high	10.392	22	7	0.02%	29	2	0.02%	29	4	0.02%	26	13	0.02%	
CNS, medium	1.647	28	29	0.10%	28	13	0.10%	22	41	0.16%	25	83	0.12%	
CNS, low	0.575	9	443	1.56%	9	211	1.59%	8	420	1.67%	9	1,074	1.61%	
DD, low to medium	2.162	19	51	0.18%	23	14	0.11%	18	53	0.21%	19	118	0.18%	
Diabetes, type 2 low	2.030	6	193	0.68%	10	59	0.44%	6	180	0.71%	6	432	0.65%	
Eye, very low to low	0.349	24	169	0.60%	27	62	0.47%	27	128	0.51%	28	359	0.54%	
Genital, extra low	0.361	25	150	0.53%	22	86	0.65%	24	145	0.58%	24	381	0.57%	
Gastro, high	5.482	21	15	0.05%	18	8	0.06%	19	20	0.08%	20	43	0.06%	
Gastro, medium	1.521	20	57	0.20%	21	21	0.16%	20	61	0.24%	21	139	0.21%	
Gastro, low	0.386	4	1,134	4.00%	4	639	4.81%	4	1,109	4.40%	4	2,882	4.31%	
Hematological, low to extra high	0.598	18	206	0.73%	16	98	0.74%	17	195	0.77%	17	499	0.75%	
AIDS, high	1.527	30	24	0.08%	31	11	0.08%	30	24	0.10%	30	59	0.09%	
HIV, medium	1.204	34	11	0.04%	35	6	0.05%	36	9	0.04%	35	26	0.04%	
Infectious, low to medium	0.197	27	244	0.86%	20	207	1.56%	25	265	1.05%	23	716	1.07%	
Metabolic, medium to high	1.382	14	122	0.43%	15	53	0.40%	15	119	0.47%	15	294	0.44%	
Metabolic, very low	0.506	10	496	1.75%	6	312	2.35%	10	411	1.63%	10	1,219	1.82%	
Pregnancy, incomplete	2.708	15	50	0.18%	17	20	0.15%	16	48	0.19%	16	118	0.18%	
Psychiatric, high	2.650	31	12	0.04%	33	3	0.02%	31	13	0.05%	31	28	0.04%	
Psychiatric, medium	1.509	7	233	0.82%	8	85	0.64%	7	218	0.87%	7	536	0.80%	
Psychiatric, medium low	1.218	1	3,447	12.15%	1	1,092	8.22%	1	2,998	11.90%	1	7,537	11.27%	
Psychiatric, low	0.619	5	680	2.40%	7	233	1.75%	5	599	2.38%	5	1,512	2.26%	
Pulmonary, high	7.062	16	19	0.07%	5	25	0.19%	13	25	0.10%	12	69	0.10%	
Pulmonary, low to medium	0.502	2	3,439	12.12%	2	1,440	10.84%	2	3,053	12.12%	2	7,932	11.87%	
Renal, extra high	13.306	33	1	0.00%	40	0	0.00%	33	2	0.01%	34	3	0.00%	
Renal, very high	1.565	36	3	0.01%	34	5	0.04%	37	5	0.02%	36	13	0.02%	
Renal, medium	0.837	38	5	0.02%	36	5	0.04%	40	3	0.01%	39	13	0.02%	
Renal, low	0.295	23	231	0.81%	26	89	0.67%	23	189	0.75%	22	509	0.76%	
Skeletal, medium	0.567	11	423	1.49%	14	140	1.05%	11	351	1.39%	11	914	1.37%	
Skeletal, low	0.437	12	469	1.65%	12	206	1.55%	12	417	1.66%	13	1,092	1.63%	
Skeletal, very low	0.278	8	984	3.47%	11	407	3.06%	9	844	3.35%	8	2,235	3.34%	
Skin, high	1.516	37	3	0.01%	38	1	0.01%	38	5	0.02%	38	9	0.01%	
Skin, very low to low	0.188	13	902	3.18%	13	427	3.21%	14	875	3.47%	14	2,204	3.30%	
Substance abuse, very low to low	0.381	32	63	0.22%	32	28	0.21%	34	67	0.27%	32	158	0.24%	
Population Statistics														
No Classified Disease Categories	N/A	N/A	17,678	62.29%	N/A	8,756	65.91%	N/A	15,653	62.15%	N/A	42,087	62.96%	

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	83	19.48%	N/A	76	15.90%	N/A	95	19.51%	N/A	254	18.26%
Age 1 to 5 Female	0.833	N/A	84	19.72%	N/A	77	16.11%	N/A	92	18.89%	N/A	253	18.19%
Age 6 to 12 Male	1.046	N/A	73	17.14%	N/A	96	20.08%	N/A	78	16.02%	N/A	247	17.76%
Age 6 to 12 Female	0.896	N/A	78	18.31%	N/A	76	15.90%	N/A	82	16.84%	N/A	236	16.97%
Age 13 to 18 Male	1.007	N/A	57	13.38%	N/A	69	14.44%	N/A	70	14.37%	N/A	196	14.09%
Age 13 to 18 Female	1.292	N/A	51	11.97%	N/A	84	17.57%	N/A	70	14.37%	N/A	205	14.74%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	28,381	13,284	25,184	66,849
Unadjusted Plan Factor	1.036	0.966	1.044	1.025
Budget Neutral Plan Factor	1.011	0.942	1.018	1.000
Unscored Members				
Member Months	426	478	487	1,391
Unadjusted Plan Factor	0.983	1.011	0.992	0.995
Budget Neutral Plan Factor	0.987	1.015	0.997	1.000
Total Members				
Member Months	28,807	13,762	25,671	68,240
Unadjusted Plan Factor	1.035	0.968	1.043	1.025
Budget Neutral Plan Factor	1.011	0.945	1.018	1.000

Exhibit 3I
Mississippi Division of Medicaid
Risk Adjustment Results
MA Children - South Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

Scored Members													
	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	29,123	100.00%	N/A	16,947	100.00%	N/A	31,587	100.00%	N/A	77,657	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	4,345	14.92%	N/A	3,549	20.94%	N/A	4,803	15.21%	N/A	12,697	16.35%
Age 1 to 5 Female	0.068	N/A	4,144	14.23%	N/A	3,366	19.86%	N/A	4,571	14.47%	N/A	12,081	15.56%
Age 6 to 12 Male	0.047	N/A	5,414	18.59%	N/A	2,886	17.03%	N/A	5,858	18.55%	N/A	14,158	18.23%
Age 6 to 12 Female	0.049	N/A	5,492	18.86%	N/A	2,928	17.28%	N/A	5,849	18.52%	N/A	14,269	18.37%
Age 13 to 18 Male	0.000	N/A	4,755	16.33%	N/A	2,126	12.54%	N/A	5,207	16.48%	N/A	12,088	15.57%
Age 13 to 18 Female	0.297	N/A	4,973	17.08%	N/A	2,092	12.34%	N/A	5,299	16.78%	N/A	12,364	15.92%
Disease Categories													
Cancer, very high	27.677	40	0	0.00%	38	0	0.00%	32	1	0.00%	34	1	0.00%
Cancer, high	4.235	27	12	0.04%	21	9	0.05%	22	22	0.07%	24	43	0.06%
Cancer, medium	3.414	20	26	0.09%	28	8	0.05%	17	39	0.12%	20	73	0.09%
Cancer, low	0.629	37	10	0.03%	38	0	0.00%	41	4	0.01%	40	14	0.02%
Cardiovascular, very high	5.998	33	4	0.01%	38	0	0.00%	35	2	0.01%	33	6	0.01%
Cardiovascular, medium	0.760	22	100	0.34%	24	47	0.28%	25	103	0.33%	23	250	0.32%
Cardiovascular, extra low to low	0.593	3	1,425	4.89%	3	598	3.53%	3	1,806	5.72%	3	3,829	4.93%
Cerebrovascular, low	0.316	39	6	0.02%	37	5	0.03%	40	11	0.03%	41	22	0.03%
CNS, high	10.392	29	4	0.01%	29	2	0.01%	30	5	0.02%	29	11	0.01%
CNS, medium	1.647	30	20	0.07%	26	21	0.12%	28	37	0.12%	28	78	0.10%
CNS, low	0.575	10	391	1.34%	10	243	1.43%	9	481	1.52%	10	1,115	1.44%
DD, low to medium	2.162	21	40	0.14%	25	16	0.09%	20	45	0.14%	21	101	0.13%
Diabetes, type 2 low	2.030	7	175	0.60%	11	65	0.38%	7	206	0.65%	7	446	0.57%
Eye, very low to low	0.349	24	184	0.63%	27	88	0.52%	27	179	0.57%	27	451	0.58%
Genital, extra low	0.361	26	157	0.54%	20	108	0.64%	24	223	0.71%	26	488	0.63%
Gastro, high	5.482	16	28	0.10%	15	18	0.11%	21	17	0.05%	16	63	0.08%
Gastro, medium	1.521	18	78	0.27%	22	25	0.15%	19	70	0.22%	19	173	0.22%
Gastro, low	0.386	4	1,417	4.87%	4	899	5.30%	5	1,629	5.16%	4	3,945	5.08%
Hematological, low to extra high	0.598	19	198	0.68%	17	125	0.74%	18	204	0.65%	18	527	0.68%
AIDS, high	1.527	28	29	0.10%	30	12	0.07%	31	32	0.10%	30	73	0.09%
HIV, medium	1.204	35	6	0.02%	35	4	0.02%	36	8	0.03%	35	18	0.02%
Infectious, low to medium	0.197	25	302	1.04%	18	265	1.56%	26	351	1.11%	25	918	1.18%
Metabolic, medium to high	1.382	12	157	0.54%	9	114	0.67%	11	188	0.60%	11	459	0.59%
Metabolic, very low	0.506	13	423	1.45%	7	357	2.11%	10	544	1.72%	9	1,324	1.70%
Pregnancy, incomplete	2.708	17	51	0.18%	19	18	0.11%	16	55	0.17%	17	124	0.16%
Psychiatric, high	2.650	32	10	0.03%	32	4	0.02%	29	21	0.07%	31	35	0.05%
Psychiatric, medium	1.509	5	320	1.10%	5	161	0.95%	4	444	1.41%	5	925	1.19%
Psychiatric, medium low	1.218	1	3,795	13.03%	1	1,612	9.51%	1	4,345	13.76%	1	9,752	12.56%
Psychiatric, low	0.619	6	607	2.08%	6	306	1.81%	6	832	2.63%	6	1,745	2.25%
Pulmonary, high	7.062	15	26	0.09%	13	18	0.11%	15	22	0.07%	15	66	0.08%
Pulmonary, low to medium	0.502	2	3,219	11.05%	2	1,621	9.57%	2	3,419	10.82%	2	8,259	10.64%
Renal, extra high	13.306	40	0	0.00%	38	0	0.00%	34	1	0.00%	39	1	0.00%
Renal, very high	1.565	34	5	0.02%	34	4	0.02%	38	3	0.01%	37	12	0.02%
Renal, medium	0.837	36	8	0.03%	36	4	0.02%	37	8	0.03%	38	20	0.03%
Renal, low	0.295	23	241	0.83%	23	127	0.75%	23	287	0.91%	22	655	0.84%
Skeletal, medium	0.567	11	391	1.34%	16	171	1.01%	12	437	1.38%	13	999	1.29%
Skeletal, low	0.437	14	471	1.62%	14	273	1.61%	14	543	1.72%	14	1,287	1.66%
Skeletal, very low	0.278	8	1,110	3.81%	8	585	3.45%	8	1,328	4.20%	8	3,023	3.89%
Skin, high	1.516	38	3	0.01%	31	7	0.04%	39	3	0.01%	36	13	0.02%
Skin, very low to low	0.188	9	1,201	4.12%	12	692	4.08%	13	1,303	4.13%	12	3,196	4.12%
Substance abuse, very low to low	0.381	31	74	0.25%	33	24	0.14%	33	63	0.20%	32	161	0.21%
Population Statistics													
No Classified Disease Categories	N/A	N/A	17,899	61.46%	N/A	11,051	65.21%	N/A	18,926	59.92%	N/A	47,876	61.65%

Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	91	17.33%	N/A	98	18.77%	N/A	123	19.40%	N/A	312	18.56%
Age 1 to 5 Female	0.833	N/A	95	18.10%	N/A	96	18.39%	N/A	114	17.98%	N/A	305	18.14%
Age 6 to 12 Male	1.046	N/A	103	19.62%	N/A	91	17.43%	N/A	103	16.25%	N/A	297	17.67%
Age 6 to 12 Female	0.896	N/A	99	18.86%	N/A	102	19.54%	N/A	122	19.24%	N/A	323	19.21%
Age 13 to 18 Male	1.007	N/A	67	12.76%	N/A	59	11.30%	N/A	84	13.25%	N/A	210	12.49%
Age 13 to 18 Female	1.292	N/A	70	13.33%	N/A	76	14.56%	N/A	88	13.88%	N/A	234	13.92%

Risk Adjustment Results				
	Magnolia	Molina	United	Total
Scored Members				
Member Months	29,123	16,947	31,587	77,657
Unadjusted Plan Factor	1.048	0.978	1.076	1.044
Budget Neutral Plan Factor	1.004	0.937	1.031	1.000
Unscored Members				
Member Months	525	522	634	1,681
Unadjusted Plan Factor	0.991	0.991	0.990	0.991
Budget Neutral Plan Factor	1.000	1.001	0.999	1.000
Total Members				
Member Months	29,648	17,469	32,221	79,338
Unadjusted Plan Factor	1.047	0.979	1.075	1.043
Budget Neutral Plan Factor	1.004	0.938	1.030	1.000

Exhibit 3J

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - North Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.539	N/A	2,839	100.00%	N/A	1,200	100.00%	N/A	2,969	100.00%	N/A	7,008	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	755	26.59%	N/A	328	27.33%	N/A	766	25.80%	N/A	1,849	26.38%
Age 6 to 12 Female	0.049	N/A	722	25.43%	N/A	340	28.33%	N/A	765	25.77%	N/A	1,827	26.07%
Age 13 to 18 Male	0.000	N/A	681	23.99%	N/A	256	21.33%	N/A	747	25.16%	N/A	1,684	24.03%
Age 13 to 18 Female	0.297	N/A	681	23.99%	N/A	276	23.00%	N/A	691	23.27%	N/A	1,648	23.52%
Disease Categories													
Cancer, very high	27.677	38	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Cancer, high	4.235	28	1	0.04%	20	1	0.08%	27	2	0.07%	27	4	0.06%
Cancer, medium	3.414	25	2	0.07%	21	1	0.08%	19	4	0.13%	23	7	0.10%
Cancer, low	0.629	38	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Cardiovascular, very high	5.998	38	0	0.00%	33	0	0.00%	30	1	0.03%	32	1	0.01%
Cardiovascular, medium	0.760	17	17	0.60%	27	3	0.25%	22	17	0.57%	22	37	0.53%
Cardiovascular, extra low to low	0.593	3	141	4.97%	3	65	5.42%	3	166	5.59%	3	372	5.31%
Cerebrovascular, low	0.316	38	0	0.00%	33	0	0.00%	37	1	0.03%	39	1	0.01%
CNS, high	10.392	22	1	0.04%	13	1	0.08%	23	1	0.03%	21	3	0.04%
CNS, medium	1.647	35	1	0.04%	22	2	0.17%	25	6	0.20%	29	9	0.13%
CNS, low	0.575	10	44	1.55%	12	21	1.75%	15	37	1.25%	12	102	1.46%
DD, low to medium	2.162	20	5	0.18%	19	2	0.17%	16	9	0.30%	19	16	0.23%
Diabetes, type 2 low	2.030	4	23	0.81%	4	12	1.00%	6	25	0.84%	5	60	0.86%
Eye, very low to low	0.349	26	19	0.67%	28	5	0.42%	29	20	0.67%	28	44	0.63%
Genital, extra low	0.361	29	10	0.35%	25	7	0.58%	31	16	0.54%	30	33	0.47%
Gastro, high	5.482	19	2	0.07%	8	3	0.25%	14	4	0.13%	14	9	0.13%
Gastro, medium	1.521	14	11	0.39%	23	2	0.17%	17	10	0.34%	18	23	0.33%
Gastro, low	0.386	8	85	2.99%	9	40	3.33%	9	96	3.23%	8	221	3.15%
Hematological, low to extra high	0.598	27	11	0.39%	30	2	0.17%	24	17	0.57%	26	30	0.43%
AIDS, high	1.527	18	8	0.28%	33	0	0.00%	26	6	0.20%	24	14	0.20%
HIV, medium	1.204	37	1	0.04%	33	0	0.00%	38	0	0.00%	38	1	0.01%
Infectious, low to medium	0.197	33	9	0.32%	32	3	0.25%	36	9	0.30%	36	21	0.30%
Metabolic, medium to high	1.382	11	18	0.63%	14	7	0.58%	8	30	1.01%	9	55	0.78%
Metabolic, very low	0.506	21	21	0.74%	17	15	1.25%	20	27	0.91%	20	63	0.90%
Pregnancy, incomplete	2.708	23	3	0.11%	24	1	0.08%	13	9	0.30%	17	13	0.19%
Psychiatric, high	2.650	31	1	0.04%	33	0	0.00%	33	1	0.03%	33	2	0.03%
Psychiatric, medium	1.509	7	24	0.85%	5	14	1.17%	5	36	1.21%	6	74	1.06%
Psychiatric, medium low	1.218	1	363	12.79%	1	166	13.83%	1	438	14.75%	1	967	13.80%
Psychiatric, low	0.619	6	72	2.54%	6	29	2.42%	4	101	3.40%	4	202	2.88%
Pulmonary, high	7.062	15	2	0.07%	10	2	0.17%	18	2	0.07%	15	6	0.09%
Pulmonary, low to medium	0.502	2	303	10.67%	2	105	8.75%	2	320	10.78%	2	728	10.39%
Renal, extra high	13.306	16	1	0.04%	11	1	0.08%	21	1	0.03%	16	3	0.04%
Renal, very high	1.565	36	1	0.04%	29	1	0.08%	32	2	0.07%	31	4	0.06%
Renal, medium	0.837	34	2	0.07%	33	0	0.00%	34	3	0.10%	35	5	0.07%
Renal, low	0.295	24	27	0.95%	26	8	0.67%	28	28	0.94%	25	63	0.90%
Skeletal, medium	0.567	9	46	1.62%	16	16	1.33%	11	54	1.82%	11	116	1.66%
Skeletal, low	0.437	12	54	1.90%	15	22	1.83%	10	75	2.53%	10	151	2.15%
Skeletal, very low	0.278	5	165	5.81%	7	64	5.33%	7	170	5.73%	7	399	5.69%
Skin, high	1.516	30	2	0.07%	33	0	0.00%	38	0	0.00%	37	2	0.03%
Skin, very low to low	0.188	13	112	3.95%	18	38	3.17%	12	136	4.58%	13	286	4.08%
Substance abuse, very low to low	0.381	32	5	0.18%	31	2	0.17%	35	5	0.17%	34	12	0.17%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,751	61.68%	N/A	763	63.58%	N/A	1,719	57.90%	N/A	4,233	60.40%

Exhibit 3K
Mississippi Division of Medicaid
Risk Adjustment Results
Quasi-CHIP - Central Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members												
		Magnolia			Molina			United			Total			
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept		0.539	N/A	3,372	100.00%	N/A	1,302	100.00%	N/A	3,255	100.00%	N/A	7,929	100.00%
Demographic Categories														
Age 1 to 5 Male		0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female		0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male		0.047	N/A	829	24.58%	N/A	334	25.65%	N/A	828	25.44%	N/A	1,991	25.11%
Age 6 to 12 Female		0.049	N/A	818	24.26%	N/A	340	26.11%	N/A	779	23.93%	N/A	1,937	24.43%
Age 13 to 18 Male		0.000	N/A	864	25.62%	N/A	299	22.96%	N/A	825	25.35%	N/A	1,988	25.07%
Age 13 to 18 Female		0.297	N/A	861	25.53%	N/A	329	25.27%	N/A	823	25.28%	N/A	2,013	25.39%
Disease Categories														
Cancer, very high		27.677	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Cancer, high		4.235	27	1	0.03%	19	1	0.08%	22	2	0.06%	23	4	0.05%
Cancer, medium		3.414	23	2	0.06%	9	4	0.31%	14	6	0.18%	16	12	0.15%
Cancer, low		0.629	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Cardiovascular, very high		5.998	33	0	0.00%	31	0	0.00%	28	1	0.03%	33	1	0.01%
Cardiovascular, medium		0.760	26	6	0.18%	21	4	0.31%	25	10	0.31%	26	20	0.25%
Cardiovascular, extra low to low		0.593	3	164	4.86%	3	57	4.38%	3	170	5.22%	3	391	4.93%
Cerebrovascular, low		0.316	33	0	0.00%	30	1	0.08%	38	1	0.03%	38	2	0.03%
CNS, high		10.392	33	0	0.00%	31	0	0.00%	21	1	0.03%	28	1	0.01%
CNS, medium		1.647	18	6	0.18%	31	0	0.00%	23	5	0.15%	22	11	0.14%
CNS, low		0.575	12	35	1.04%	17	12	0.92%	13	46	1.41%	13	93	1.17%
DD, low to medium		2.162	13	9	0.27%	25	1	0.08%	20	5	0.15%	17	15	0.19%
Diabetes, type 2 low		2.030	4	27	0.80%	4	10	0.77%	4	30	0.92%	4	67	0.84%
Eye, very low to low		0.349	22	20	0.59%	26	4	0.31%	26	21	0.65%	25	45	0.57%
Genital, extra low		0.361	25	15	0.44%	28	3	0.23%	33	8	0.25%	30	26	0.33%
Gastro, high		5.482	24	1	0.03%	31	0	0.00%	19	2	0.06%	24	3	0.04%
Gastro, medium		1.521	19	6	0.18%	14	5	0.38%	32	2	0.06%	20	13	0.16%
Gastro, low		0.386	6	95	2.82%	8	46	3.53%	9	81	2.49%	8	222	2.80%
Hematological, low to extra high		0.598	17	17	0.50%	18	11	0.84%	17	24	0.74%	18	52	0.66%
AIDS, high		1.527	28	2	0.06%	31	0	0.00%	27	4	0.12%	31	6	0.08%
HIV, medium		1.204	33	0	0.00%	31	0	0.00%	36	1	0.03%	37	1	0.01%
Infectious, low to medium		0.197	32	5	0.15%	29	3	0.23%	37	6	0.18%	34	14	0.18%
Metabolic, medium to high		1.382	15	12	0.36%	12	8	0.61%	10	22	0.68%	11	42	0.53%
Metabolic, very low		0.506	16	22	0.65%	22	6	0.46%	18	24	0.74%	19	52	0.66%
Pregnancy, incomplete		2.708	14	7	0.21%	7	7	0.54%	15	7	0.22%	12	21	0.26%
Psychiatric, high		2.650	29	1	0.03%	24	1	0.08%	29	2	0.06%	27	4	0.05%
Psychiatric, medium		1.509	8	22	0.65%	10	9	0.69%	5	37	1.14%	6	68	0.86%
Psychiatric, medium low		1.218	1	467	13.85%	1	170	13.06%	1	460	14.13%	1	1,097	13.84%
Psychiatric, low		0.619	5	81	2.40%	5	32	2.46%	6	90	2.76%	5	203	2.56%
Pulmonary, high		7.062	21	1	0.03%	16	1	0.08%	11	4	0.12%	15	6	0.08%
Pulmonary, low to medium		0.502	2	397	11.77%	2	128	9.83%	2	375	11.52%	2	900	11.35%
Renal, extra high		13.306	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Renal, very high		1.565	31	1	0.03%	20	2	0.15%	30	3	0.09%	29	6	0.08%
Renal, medium		0.837	33	0	0.00%	31	0	0.00%	34	2	0.06%	35	2	0.03%
Renal, low		0.295	20	25	0.74%	23	10	0.77%	24	27	0.83%	21	62	0.78%
Skeletal, medium		0.567	9	55	1.63%	11	23	1.77%	7	58	1.78%	9	136	1.72%
Skeletal, low		0.437	10	59	1.75%	13	20	1.54%	12	62	1.90%	10	141	1.78%
Skeletal, very low		0.278	7	124	3.68%	6	69	5.30%	8	117	3.59%	7	310	3.91%
Skin, high		1.516	33	0	0.00%	31	0	0.00%	35	1	0.03%	36	1	0.01%
Skin, very low to low		0.188	11	116	3.44%	15	39	3.00%	16	88	2.70%	14	243	3.06%
Substance abuse, very low to low		0.381	30	6	0.18%	27	3	0.23%	31	12	0.37%	32	21	0.26%
Population Statistics														
No Classified Disease Categories		N/A	N/A	2,092	62.04%	N/A	834	64.06%	N/A	2,033	62.46%	N/A	4,959	62.54%

Exhibit 3L

Mississippi Division of Medicaid

Risk Adjustment Results

Quasi-CHIP - South Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

		Scored Members												
		Magnolia			Molina			United			Total			
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept		0.539	N/A	2,733	100.00%	N/A	1,409	100.00%	N/A	3,447	100.00%	N/A	7,589	100.00%
Demographic Categories														
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	0.00%
Age 6 to 12 Male	0.047	N/A	716	26.20%	N/A	382	27.11%	N/A	817	23.70%	N/A	1,915	25.23%	25.23%
Age 6 to 12 Female	0.049	N/A	613	22.43%	N/A	375	26.61%	N/A	835	24.22%	N/A	1,823	24.02%	24.02%
Age 13 to 18 Male	0.000	N/A	689	25.21%	N/A	314	22.29%	N/A	923	26.78%	N/A	1,926	25.38%	25.38%
Age 13 to 18 Female	0.297	N/A	715	26.16%	N/A	338	23.99%	N/A	872	25.30%	N/A	1,925	25.37%	25.37%
Disease Categories														
Cancer, very high	27.677	34	0	0.00%	30	0	0.00%	13	1	0.03%	18	1	0.01%	0.01%
Cancer, high	4.235	25	1	0.04%	30	0	0.00%	23	2	0.06%	29	3	0.04%	0.04%
Cancer, medium	3.414	27	1	0.04%	30	0	0.00%	18	4	0.12%	24	5	0.07%	0.07%
Cancer, low	0.629	34	0	0.00%	26	1	0.07%	36	1	0.03%	38	2	0.03%	0.03%
Cardiovascular, very high	5.998	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%	0.00%
Cardiovascular, medium	0.760	26	5	0.18%	20	6	0.43%	24	11	0.32%	25	22	0.29%	0.29%
Cardiovascular, extra low to low	0.593	3	157	5.74%	3	70	4.97%	3	257	7.46%	3	484	6.38%	6.38%
Cerebrovascular, low	0.316	33	3	0.11%	29	1	0.07%	37	0	0.00%	37	4	0.05%	0.05%
CNS, high	10.392	34	0	0.00%	11	1	0.07%	37	0	0.00%	30	1	0.01%	0.01%
CNS, medium	1.647	23	3	0.11%	19	3	0.21%	25	5	0.15%	23	11	0.14%	0.14%
CNS, low	0.575	12	34	1.24%	15	12	0.85%	11	54	1.57%	11	100	1.32%	1.32%
DD, low to medium	2.162	17	5	0.18%	13	4	0.28%	17	8	0.23%	14	17	0.22%	0.22%
Diabetes, type 2 low	2.030	5	25	0.91%	7	7	0.50%	6	32	0.93%	6	64	0.84%	0.84%
Eye, very low to low	0.349	20	18	0.66%	25	2	0.14%	28	19	0.55%	27	39	0.51%	0.51%
Genital, extra low	0.361	22	14	0.51%	23	8	0.57%	27	19	0.55%	26	41	0.54%	0.54%
Gastro, high	5.482	21	1	0.04%	30	0	0.00%	14	5	0.15%	16	6	0.08%	0.08%
Gastro, medium	1.521	15	9	0.33%	16	4	0.28%	19	8	0.23%	17	21	0.28%	0.28%
Gastro, low	0.386	7	94	3.44%	6	42	2.98%	7	151	4.38%	7	287	3.78%	3.78%
Hematological, low to extra high	0.598	18	12	0.44%	21	7	0.50%	22	15	0.44%	21	34	0.45%	0.45%
AIDS, high	1.527	30	1	0.04%	24	1	0.07%	34	1	0.03%	33	3	0.04%	0.04%
HIV, medium	1.204	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%	0.00%
Infectious, low to medium	0.197	29	10	0.37%	27	3	0.21%	31	16	0.46%	32	29	0.38%	0.38%
Metabolic, medium to high	1.382	11	15	0.55%	22	3	0.21%	15	19	0.55%	13	37	0.49%	0.49%
Metabolic, very low	0.506	16	22	0.80%	18	10	0.71%	16	35	1.02%	15	67	0.88%	0.88%
Pregnancy, incomplete	2.708	14	6	0.22%	30	0	0.00%	29	2	0.06%	19	8	0.11%	0.11%
Psychiatric, high	2.650	28	1	0.04%	30	0	0.00%	20	4	0.12%	28	5	0.07%	0.07%
Psychiatric, medium	1.509	4	38	1.39%	5	19	1.35%	4	60	1.74%	4	117	1.54%	1.54%
Psychiatric, medium low	1.218	1	481	17.60%	1	250	17.74%	1	670	19.44%	1	1,401	18.46%	18.46%
Psychiatric, low	0.619	6	70	2.56%	4	48	3.41%	5	117	3.39%	5	235	3.10%	3.10%
Pulmonary, high	7.062	19	1	0.04%	14	1	0.07%	26	1	0.03%	20	3	0.04%	0.04%
Pulmonary, low to medium	0.502	2	254	9.29%	2	106	7.52%	2	354	10.27%	2	714	9.41%	9.41%
Renal, extra high	13.306	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%	0.00%
Renal, very high	1.565	34	0	0.00%	30	0	0.00%	33	1	0.03%	36	1	0.01%	0.01%
Renal, medium	0.837	34	0	0.00%	30	0	0.00%	32	3	0.09%	35	3	0.04%	0.04%
Renal, low	0.295	24	16	0.59%	17	19	1.35%	21	34	0.99%	22	69	0.91%	0.91%
Skeletal, medium	0.567	8	50	1.83%	9	23	1.63%	9	68	1.97%	9	141	1.86%	1.86%
Skeletal, low	0.437	10	51	1.87%	10	26	1.85%	10	84	2.44%	10	161	2.12%	2.12%
Skeletal, very low	0.278	9	100	3.66%	8	49	3.48%	8	165	4.79%	8	314	4.14%	4.14%
Skin, high	1.516	31	1	0.04%	30	0	0.00%	35	1	0.03%	34	2	0.03%	0.03%
Skin, very low to low	0.188	13	96	3.51%	12	48	3.41%	12	156	4.53%	12	300	3.95%	3.95%
Substance abuse, very low to low	0.381	32	3	0.11%	28	1	0.07%	30	13	0.38%	31	17	0.22%	0.22%
Population Statistics														
No Classified Disease Categories	N/A	N/A	1,671	61.14%	N/A	870	61.75%	N/A	1,936	56.16%	N/A	4,477	58.99%	58.99%

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
September 2022 Snapshot Period

North Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	225	16.97%	107	42.29%	150	31.85%	482	23.51%
Money Code 3	Receiving IV-E Assistance	0.743	148	11.16%	60	23.72%	63	13.38%	271	13.22%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	889	67.04%	76	30.04%	215	45.65%	1,180	57.56%
Other	All other Money Codes	0.000	64	4.83%	10	3.95%	43	9.13%	117	5.71%
Unadjusted Plan Factor			0.729		1.017		0.860		0.795	
Member Months			1,326		253		471		2,050	
Budget Neutral Plan Factor			0.917		1.280		1.082		1.000	

Central Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	350	25.89%	135	47.20%	150	37.31%	635	31.13%
Money Code 3	Receiving IV-E Assistance	0.743	186	13.76%	73	25.52%	70	17.41%	329	16.13%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	766	56.66%	71	24.83%	151	37.56%	988	48.43%
Other	All other Money Codes	0.000	50	3.70%	7	2.45%	31	7.71%	88	4.31%
Unadjusted Plan Factor			0.819		1.070		0.932		0.876	
Member Months			1,352		286		402		2,040	
Budget Neutral Plan Factor			0.934		1.221		1.064		1.000	

South Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Intercept	Regression Intercept	Risk Weight	0.457	100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	302	15.75%	169	40.33%	201	31.36%	672	22.57%
Money Code 3	Receiving IV-E Assistance	0.743	252	13.14%	112	26.73%	107	16.69%	471	15.82%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	1,266	66.01%	130	31.03%	280	43.68%	1,676	56.28%
Other	All other Money Codes	0.000	98	5.11%	8	1.91%	53	8.27%	159	5.34%
Unadjusted Plan Factor			0.733		1.023		0.879		0.805	
Member Months			1,918		419		641		2,978	
Budget Neutral Plan Factor			0.910		1.271		1.092		1.000	

Exhibit 4A		
Mississippi Division of Medicaid		
Custom Risk Adjustment Weights Effective October 2018		
Non-Newborn SSI / Disabled		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.077	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 4	0.087	1.113
Age 5 to 14 Female	0.089	0.660
Age 5 to 14 Male	0.067	0.572
Age 15 to 24 Female	0.108	0.746
Age 15 to 24 Male	-	0.523
Age 25 to 44 Female	0.206	1.154
Age 25 to 44 Male	0.053	0.821
Age 45 to 64 Female	0.109	1.314
Age 45 to 64 Male	0.111	1.185
Age 65 and Older Male and Female	0.006	1.046
Duration Categories		
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A
Diagnosis Period Duration, 10 to 12 Months	-	N/A
Disease Categories		
Cancer, very high	4.640	N/A
Cancer, high	1.263	N/A
Cancer, medium	0.649	N/A
Cancer, low	0.148	N/A
Cardiovascular, very high	1.401	N/A
Cardiovascular, medium	0.570	N/A
Cardiovascular, medium - child	0.188	N/A
Cardiovascular, low	0.192	N/A
Cardiovascular, extra low	0.106	N/A
Cerebrovascular, low	0.153	N/A
CNS, medium to high	0.589	N/A
CNS, high - child	1.358	N/A
CNS, low	0.218	N/A
DD, low to medium	0.153	N/A
Diabetes, type 1 high	1.267	N/A
Diabetes, type 1 medium	0.683	N/A
Diabetes, type 2 medium	0.416	N/A
Diabetes, type 2 low	0.177	N/A
Eye, low	0.142	N/A
Eye, very low	0.107	N/A
Genital, extra low	0.070	N/A
Gastro, medium to high	0.523	N/A
Gastro, high - child	1.264	N/A
Gastro, low	0.127	N/A
Hematological, very high to extra high	1.633	N/A
Hematological, medium	0.705	N/A
Hematological, low	0.491	N/A
AIDS, high	1.699	N/A
HIV, medium	1.210	N/A
Infectious, low to medium	0.435	N/A
Metabolic, high	1.035	N/A
Metabolic, high - child	0.158	N/A
Metabolic, medium	0.396	N/A
Metabolic, very low	0.138	N/A
Pregnancy, incomplete	0.395	N/A
Psychiatric, high	0.677	N/A
Psychiatric, medium low to medium	0.264	N/A
Psychiatric, low	0.167	N/A
Pulmonary, very high	1.167	N/A
Pulmonary, very high - child	1.465	N/A
Pulmonary, high	0.593	N/A
Pulmonary, medium	0.475	N/A
Pulmonary, low	0.178	N/A
Renal, extra high	3.856	N/A
Renal, very high	0.489	N/A
Renal, low to medium	0.132	N/A
Skeletal, medium	0.308	N/A
Skeletal, very low to low	0.149	N/A
Skin, low - high	0.254	N/A
Skin, very low	0.090	N/A
Substance abuse, very low to low	0.153	N/A

Exhibit 4B

Mississippi Division of Medicaid

CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories

Non-Newborn SSI / Disabled

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, very high	4.640
CANH	Cancer, high	Cancer, high	1.263
CANM	Cancer, medium	Cancer, medium	0.649
CANL	Cancer, low	Cancer, low	0.148
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.401
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.570
CCARM	Cardiovascular, medium - child	Cardiovascular, medium - child	0.188
CARL	Cardiovascular, low	Cardiovascular, low	0.192
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.106
CERL	Cerebrovascular, low	Cerebrovascular, low	0.153
CNSH	CNS, high	CNS, medium to high	0.589
CCNSH	CNS, high - child	CNS, high - child	1.358
CNSM	CNS, medium	CNS, medium to high	0.589
CNSL	CNS, low	CNS, low	0.218
DDM	DD, medium	DD, low to medium	0.153
DDL	DD, low	DD, low to medium	0.153
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	1.267
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	0.683
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	0.416
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.177
EYEL	Eye, low	Eye, low	0.142
EYEVL	Eye, very low	Eye, very low	0.107
GENEL	Genital, extra low	Genital, extra low	0.070
GIH	Gastro, high	Gastro, medium to high	0.523
CGIH	Gastro, high - child	Gastro, high - child	1.264
GIM	Gastro, medium	Gastro, medium to high	0.523
GIL	Gastro, low	Gastro, low	0.127
HEMEH	Hematological, extra high	Hematological, very high to extra high	1.633
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, very high to extra high	1.633
HEMM	Hematological, medium	Hematological, medium	0.705
HEML	Hematological, low	Hematological, low	0.491
AIDSH	AIDS, high	AIDS, high	1.699
INFH	Infectious, high	AIDS, high	1.699
HIVM	HIV, medium	HIV, medium	1.210
INFM	Infectious, medium	Infectious, low to medium	0.435
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.435
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	1.035
CMETH	Metabolic, high - child	Metabolic, high - child	0.158
METM	Metabolic, medium	Metabolic, medium	0.396
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.395
PSYH	Psychiatric, high	Psychiatric, high	0.677
PSYM	Psychiatric, medium	Psychiatric, medium low to medium	0.264
PSYML	Psychiatric, medium low	Psychiatric, medium low to medium	0.264
PSYL	Psychiatric, low	Psychiatric, low	0.167
PULVH	Pulmonary, very high	Pulmonary, very high	1.167
CPULVH	Pulmonary, very high - child	Pulmonary, very high - child	1.465
PULH	Pulmonary, high	Pulmonary, high	0.593
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium	0.475
PULL	Pulmonary, low	Pulmonary, low	0.178
RENEH	Renal, extra high	Renal, extra high	3.856
RENVH	Renal, very high	Renal, very high	0.489
RENM	Renal, medium	Renal, low to medium	0.132
RENL	Renal, low	Renal, low to medium	0.132
SKCM	Skeletal, medium	Skeletal, medium	0.308
SKCL	Skeletal, low	Skeletal, very low to low	0.149
SKCVL	Skeletal, very low	Skeletal, very low to low	0.149
SKNH	Skin, high	Skin, low - high	0.254
SKNL	Skin, low	Skin, low - high	0.254
SKNVL	Skin, very low	Skin, very low	0.090
SUBL	Substance abuse, low	Substance abuse, very low to low	0.153
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.153
MRX1	Anti-coagulants	Cardiovascular, medium	0.570
MRX2	Cardiac	Cardiovascular, extra low	0.106
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.167
MRX4	Diabetes	Diabetes, type 2 low	0.177
MRX5	ESRD / Renal	Renal, very high	0.489
MRX6	Hemophilia / von Willebrands	Hematological, very high to extra high	1.633
MRX7	Hepatitis	HIV, medium	1.210
MRX8	HIV	HIV, medium	1.210
MRX9	Infections, high	AIDS, high	1.699
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.149
MRX11	Malignancies	Cancer, medium	0.649
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.589
MRX13	Parkinsons / Tremor	CNS, low	0.218
MRX14	Seizure disorders	CNS, low	0.218
MRX15	Tuberculosis	Pulmonary, low	0.178

Exhibit 4C		
Mississippi Division of Medicaid		
Custom Risk Adjustment Weights Effective July 2020		
MA Adult		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.142	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 15 to 24 Female	0.330	0.922
Age 15 to 24 Male	-	0.514
Age 25 to 44 Female	0.236	0.989
Age 25 to 44 Male	0.058	0.770
Age 45 and Older Female	0.245	1.353
Age 45 and Older Male	0.365	1.362
Duration Categories		
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A
Diagnosis Period Duration, 12 Months	-	N/A
Disease Categories		
Cancer, high to very high	3.752	N/A
Cancer, medium	0.997	N/A
Cancer, low	0.364	N/A
Cardiovascular, very high	1.914	N/A
Cardiovascular, medium	0.601	N/A
Cardiovascular, low	0.315	N/A
Cardiovascular, extra low	0.122	N/A
CNS, medium to high	0.836	N/A
CNS, low	0.419	N/A
Diabetes, type 1 high	2.432	N/A
Diabetes, type 1 medium	1.612	N/A
Diabetes, type 2 medium	1.043	N/A
Diabetes, type 2 low	0.375	N/A
DD, low to medium	0.613	N/A
Eye, very low to low	0.324	N/A
Genital, extra low	0.118	N/A
Gastro, medium to high	0.933	N/A
Gastro, low	0.224	N/A
Hematological, low to extra high	0.318	N/A
AIDS, high	1.445	N/A
HIV, medium	1.320	N/A
Infectious, low to medium	0.578	N/A
Metabolic, high	0.857	N/A
Metabolic, medium	0.393	N/A
Metabolic, very low	0.138	N/A
Pregnancy, complete	0.160	N/A
Pregnancy, incomplete	0.997	N/A
Psychiatric, high	0.972	N/A
Psychiatric, medium	0.513	N/A
Psychiatric, medium low	0.321	N/A
Psychiatric, low	0.212	N/A
Pulmonary, medium to high	0.600	N/A
Pulmonary, low	0.227	N/A
Renal, medium to extra high	0.855	N/A
Renal, low	0.304	N/A
Skeletal, medium	0.586	N/A
Skeletal, very low to low	0.362	N/A
Skin, low to high	0.941	N/A
Skin, very low	0.132	N/A
Substance abuse, low	0.289	N/A

Exhibit 4D

Mississippi Division of Medicaid

CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories

MA Adult

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, high to very high	3.752
CANH	Cancer, high	Cancer, high to very high	3.752
CANM	Cancer, medium	Cancer, medium	0.997
CANL	Cancer, low	Cancer, low	0.364
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.914
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.601
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, low	0.315
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.122
CERL	Cerebrovascular, low	Not Used	Not Used
CNSH	CNS, high	CNS, medium to high	0.836
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium to high	0.836
CNSL	CNS, low	CNS, low	0.419
DDM	DD, medium	DD, low to medium	0.613
DDL	DD, low	DD, low to medium	0.613
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	2.432
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	1.612
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	1.043
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.375
EYEL	Eye, low	Eye, very low to low	0.324
EYEVL	Eye, very low	Eye, very low to low	0.324
GENEL	Genital, extra low	Genital, extra low	0.118
GIH	Gastro, high	Gastro, medium to high	0.933
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium to high	0.933
GIL	Gastro, low	Gastro, low	0.224
HEMEH	Hematological, extra high	Hematological, low to extra high	0.318
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.318
HEMM	Hematological, medium	Hematological, low to extra high	0.318
HEML	Hematological, low	Hematological, low to extra high	0.318
AIDSH	AIDS, high	AIDS, high	1.445
INFH	Infectious, high	AIDS, high	1.445
HIVM	HIV, medium	HIV, medium	1.320
INFM	Infectious, medium	Infectious, low to medium	0.578
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.578
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.857
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium	0.393
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.160
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.997
PSYH	Psychiatric, high	Psychiatric, high	0.972
PSYM	Psychiatric, medium	Psychiatric, medium	0.513
PSYML	Psychiatric, medium low	Psychiatric, medium low	0.321
PSYL	Psychiatric, low	Psychiatric, low	0.212
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, medium to high	0.600
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium to high	0.600
PULL	Pulmonary, low	Pulmonary, low	0.227
RENEH	Renal, extra high	Renal, medium to extra high	0.855
RENVH	Renal, very high	Renal, medium to extra high	0.855
RENM	Renal, medium	Renal, medium to extra high	0.855
RENL	Renal, low	Renal, low	0.304
SKCM	Skeletal, medium	Skeletal, medium	0.586
SKCL	Skeletal, low	Skeletal, very low to low	0.362
SKCVL	Skeletal, very low	Skeletal, very low to low	0.362
SKNH	Skin, high	Skin, low to high	0.941
SKNL	Skin, low	Skin, low to high	0.941
SKNVL	Skin, very low	Skin, very low	0.132
SUBL	Substance abuse, low	Substance abuse, low	0.289
SUBVL	Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.601
MRX2	Cardiac	Cardiovascular, extra low	0.122
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.212
MRX4	Diabetes	Diabetes, type 2 low	0.375
MRX5	ESRD / Renal	Renal, medium to extra high	0.855
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.318
MRX7	Hepatitis	HIV, medium	1.320
MRX8	HIV	HIV, medium	1.320
MRX9	Infections, high	AIDS, high	1.445
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.362
MRX11	Malignancies	Cancer, medium	0.997
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.836
MRX13	Parkinsons / Tremor	CNS, low	0.419
MRX14	Seizure disorders	CNS, low	0.419
MRX15	Tuberculosis	Pulmonary, low	0.227

Exhibit 4E		
Mississippi Division of Medicaid		
Custom Risk Adjustment Weights Effective October 2018		
MA Children and Quasi-CHIP		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.539	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 5 Male	0.133	0.953
Age 1 to 5 Female	0.068	0.833
Age 6 to 12 Male	0.047	1.046
Age 6 to 12 Female	0.049	0.896
Age 13 to 18 Male	-	1.007
Age 13 to 18 Female	0.297	1.292
Disease Categories		
Cancer, very high	27.677	N/A
Cancer, high	4.235	N/A
Cancer, medium	3.414	N/A
Cancer, low	0.629	N/A
Cardiovascular, very high	5.998	N/A
Cardiovascular, medium	0.760	N/A
Cardiovascular, extra low to low	0.593	N/A
Cerebrovascular, low	0.316	N/A
CNS, high	10.392	N/A
CNS, medium	1.647	N/A
CNS, low	0.575	N/A
DD, low to medium	2.162	N/A
Diabetes, type 2 low	2.030	N/A
Eye, very low to low	0.349	N/A
Genital, extra low	0.361	N/A
Gastro, high	5.482	N/A
Gastro, medium	1.521	N/A
Gastro, low	0.386	N/A
Hematological, low to extra high	0.598	N/A
AIDS, high	1.527	N/A
HIV, medium	1.204	N/A
Infectious, low to medium	0.197	N/A
Metabolic, medium to high	1.382	N/A
Metabolic, very low	0.506	N/A
Pregnancy, incomplete	2.708	N/A
Psychiatric, high	2.650	N/A
Psychiatric, medium	1.509	N/A
Psychiatric, medium low	1.218	N/A
Psychiatric, low	0.619	N/A
Pulmonary, high	7.062	N/A
Pulmonary, low to medium	0.502	N/A
Renal, extra high	13.306	N/A
Renal, very high	1.565	N/A
Renal, medium	0.837	N/A
Renal, low	0.295	N/A
Skeletal, medium	0.567	N/A
Skeletal, low	0.437	N/A
Skeletal, very low	0.278	N/A
Skin, high	1.516	N/A
Skin, very low to low	0.188	N/A
Substance abuse, very low to low	0.381	N/A

Exhibit 4F
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Children and Quasi-CHIP

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, very high	27.677
CANH	Cancer, high	Cancer, high	4.235
CANM	Cancer, medium	Cancer, medium	3.414
CANL	Cancer, low	Cancer, low	0.629
CARVH	Cardiovascular, very high	Cardiovascular, very high	5.998
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.760
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.593
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.593
CERL	Cerebrovascular, low	Cerebrovascular, low	0.316
CNSH	CNS, high	CNS, high	10.392
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium	1.647
CNSL	CNS, low	CNS, low	0.575
DDM	DD, medium	DD, low to medium	2.162
DDL	DD, low	DD, low to medium	2.162
DIA1H	Diabetes, type 1 high	Not Used	Not Used
DIA1M	Diabetes, type 1 medium	Not Used	Not Used
DIA2M	Diabetes, type 2 medium	Not Used	Not Used
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	2.030
EYEL	Eye, low	Eye, very low to low	0.349
EYEVL	Eye, very low	Eye, very low to low	0.349
GENEL	Genital, extra low	Genital, extra low	0.361
GIH	Gastro, high	Gastro, high	5.482
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium	1.521
GIL	Gastro, low	Gastro, low	0.386
HEMEH	Hematological, extra high	Hematological, low to extra high	0.598
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.598
HEMM	Hematological, medium	Hematological, low to extra high	0.598
HEML	Hematological, low	Hematological, low to extra high	0.598
AIDSH	AIDS, high	AIDS, high	1.527
INFH	Infectious, high	AIDS, high	1.527
HIVM	HIV, medium	HIV, medium	1.204
INFM	Infectious, medium	Infectious, low to medium	0.197
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.197
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, medium to high	1.382
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium to high	1.382
METVL	Metabolic, very low	Metabolic, very low	0.506
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	2.708
PSYH	Psychiatric, high	Psychiatric, high	2.650
PSYM	Psychiatric, medium	Psychiatric, medium	1.509
PSYML	Psychiatric, medium low	Psychiatric, medium low	1.218
PSYL	Psychiatric, low	Psychiatric, low	0.619
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, high	7.062
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, low to medium	0.502
PULL	Pulmonary, low	Pulmonary, low to medium	0.502
RENEH	Renal, extra high	Renal, extra high	13.306
RENVH	Renal, very high	Renal, very high	1.565
RENM	Renal, medium	Renal, medium	0.837
RENL	Renal, low	Renal, low	0.295
SKCM	Skeletal, medium	Skeletal, medium	0.567
SKCL	Skeletal, low	Skeletal, low	0.437
SKCVL	Skeletal, very low	Skeletal, very low	0.278
SKNH	Skin, high	Skin, high	1.516
SKNL	Skin, low	Skin, very low to low	0.188
SKNVL	Skin, very low	Skin, very low to low	0.188
SUBL	Substance abuse, low	Substance abuse, very low to low	0.381
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.381
MRX1	Anti-coagulants	Cardiovascular, medium	0.760
MRX2	Cardiac	Cardiovascular, extra low to low	0.593
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.619
MRX4	Diabetes	Diabetes, type 2 low	2.030
MRX5	ESRD / Renal	Renal, very high	1.565
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.598
MRX7	Hepatitis	HIV, medium	1.204
MRX8	HIV	HIV, medium	1.204
MRX9	Infections, high	AIDS, high	1.527
MRX10	Inflammatory / Autoimmune	Skeletal, very low	0.278
MRX11	Malignancies	Cancer, medium	3.414
MRX12	Multiple Sclerosis / Paralysis	CNS, medium	1.647
MRX13	Parkinsons / Tremor	CNS, low	0.575
MRX14	Seizure disorders	CNS, low	0.575
MRX15	Tuberculosis	Pulmonary, low to medium	0.502

Exhibit 5A
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2023

Region:North

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0013	\$1,090.00	\$1,091.37	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,284.37
Molina	0.9804	\$1,090.00	\$1,068.64	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,261.64
United	1.0042	\$1,090.00	\$1,094.53	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,287.53
MA Adult									
Magnolia	1.0168	\$510.00	\$518.59	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$641.59
Molina	0.9579	\$510.00	\$488.52	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$611.52
United	1.0101	\$510.00	\$515.13	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$638.13
MA Children									
Magnolia	1.0016	\$220.00	\$220.36	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$313.36
Molina	0.9506	\$220.00	\$209.14	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$302.14
United	1.0220	\$220.00	\$224.83	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$317.83
Quasi-CHIP									
Magnolia	0.9700	\$220.00	\$213.39	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$296.39
Molina	0.9960	\$220.00	\$219.12	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$302.12
United	1.0302	\$220.00	\$226.64	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$309.64
Foster Care									
Magnolia	0.9174	\$660.00	\$605.46	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$818.46
Molina	1.2798	\$660.00	\$844.68	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,057.68
United	1.0823	\$660.00	\$714.34	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$927.34

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.

Exhibit 5B
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2023

Region:Central

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0253	\$1,250.00	\$1,281.67	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,494.67
Molina	0.9936	\$1,250.00	\$1,242.04	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,455.04
United	0.9693	\$1,250.00	\$1,211.61	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,424.61
MA Adult									
Magnolia	1.0084	\$560.00	\$564.70	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$697.70
Molina	0.9542	\$560.00	\$534.35	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$667.35
United	1.0245	\$560.00	\$573.72	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$706.72
MA Children									
Magnolia	1.0106	\$230.00	\$232.43	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$325.43
Molina	0.9449	\$230.00	\$217.33	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$310.33
United	1.0177	\$230.00	\$234.07	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$327.07
Quasi-CHIP									
Magnolia	0.9821	\$230.00	\$225.88	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$308.88
Molina	0.9904	\$230.00	\$227.80	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$310.80
United	1.0225	\$230.00	\$235.18	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$318.18
Foster Care									
Magnolia	0.9343	\$690.00	\$644.68	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$897.68
Molina	1.2207	\$690.00	\$842.29	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$1,095.29
United	1.0639	\$690.00	\$734.07	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$987.07

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2023

Region:South

	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0317	\$1,240.00	\$1,279.31	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,492.31
Molina	0.9623	\$1,240.00	\$1,193.31	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,406.31
United	0.9805	\$1,240.00	\$1,215.85	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,428.85
MA Adult									
Magnolia	1.0106	\$540.00	\$545.75	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$678.75
Molina	0.9571	\$540.00	\$516.81	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$649.81
United	1.0204	\$540.00	\$551.04	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$684.04
MA Children									
Magnolia	1.0037	\$220.00	\$220.81	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$313.81
Molina	0.9385	\$220.00	\$206.46	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$299.46
United	1.0300	\$220.00	\$226.59	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$319.59
Quasi-CHIP									
Magnolia	0.9731	\$230.00	\$223.81	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$306.81
Molina	0.9514	\$230.00	\$218.81	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$301.81
United	1.0416	\$230.00	\$239.56	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$322.56
Foster Care									
Magnolia	0.9099	\$670.00	\$609.66	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$792.66
Molina	1.2711	\$670.00	\$851.61	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$1,034.61
United	1.0923	\$670.00	\$731.83	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$914.83

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.

Caveats and Limitations
Mississippi Division of Medicaid
Q1 to Q2 2023 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q1 to Q2 2023 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters, FFS claims, and eligibility data from January 2021 to September 2022 with runout through September 2022 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q1 to Q2 2023 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with DOM effective September 1, 2022 apply to these exhibits and their use.

Exhibit 1A
Mississippi Division of Medicaid
Non-Newborn SSI / Disabled Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	9,790	0.994	1.001	90	1.017	1.007	1.001
Molina	2,287	0.974	0.981	66	0.982	0.973	0.980
United	8,003	0.997	1.004	100	1.022	1.012	1.004
Total	20,080	0.993	1.000	256	1.010	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	10,724	1.088	1.025	66	1.034	1.017	1.025
Molina	2,553	1.054	0.994	78	1.009	0.993	0.994
United	8,276	1.028	0.969	78	1.009	0.993	0.969
Total	21,553	1.061	1.000	222	1.016	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	7,392	1.151	1.032	90	1.003	0.977	1.032
Molina	2,249	1.072	0.961	78	1.022	0.996	0.962
United	7,568	1.093	0.980	112	1.048	1.021	0.981
Total	17,209	1.115	1.000	280	1.026	1.000	1.000

Exhibit 1B
Mississippi Division of Medicaid
MA Adult Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,427	1.030	1.018	255	0.994	0.995	1.017
Molina	2,056	0.964	0.954	235	0.994	0.995	0.958
United	3,161	1.021	1.010	266	1.008	1.009	1.010
Total	8,644	1.011	1.000	756	0.999	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,914	1.019	1.009	268	0.987	0.996	1.008
Molina	2,644	0.958	0.949	260	0.995	1.003	0.954
United	3,710	1.036	1.026	287	0.992	1.001	1.024
Total	10,268	1.010	1.000	815	0.991	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	4,828	1.054	1.011	282	0.990	1.000	1.011
Molina	3,986	0.994	0.954	239	1.002	1.013	0.957
United	5,894	1.065	1.022	318	0.979	0.990	1.020
Total	14,708	1.042	1.000	839	0.989	1.000	1.000

Exhibit 1C
Mississippi Division of Medicaid
MA Children Risk Score Adjustment Summary - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	23,422	1.032	1.002	489	1.004	1.006	1.002
Molina	10,177	0.978	0.949	434	0.990	0.992	0.951
United	21,503	1.054	1.023	553	0.999	1.001	1.022
Total	55,102	1.030	1.000	1,476	0.998	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	28,381	1.036	1.011	426	0.983	0.987	1.011
Molina	13,284	0.966	0.942	478	1.011	1.015	0.945
United	25,184	1.044	1.018	487	0.992	0.997	1.018
Total	66,849	1.025	1.000	1,391	0.995	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	29,123	1.048	1.004	525	0.991	1.000	1.004
Molina	16,947	0.978	0.937	522	0.991	1.001	0.938
United	31,587	1.076	1.031	634	0.990	0.999	1.030
Total	77,657	1.044	1.000	1,681	0.991	1.000	1.000

Exhibit 1D
Mississippi Division of Medicaid
Quasi-CHIP Risk Score Adjustment Summary - Q1 to Q2 2023 Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

North Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,839	1.050	0.970	42	1.025	0.988	0.970
Molina	1,200	1.079	0.997	39	1.015	0.978	0.996
United	2,969	1.116	1.030	59	1.062	1.023	1.030
Total	7,008	1.083	1.000	140	1.038	1.000	1.000

Central Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	3,372	1.032	0.982	50	1.037	0.998	0.982
Molina	1,302	1.041	0.990	57	1.047	1.007	0.990
United	3,255	1.076	1.023	43	1.032	0.993	1.023
Total	7,929	1.052	1.000	150	1.039	1.000	1.000

South Region							
	Scored Members			Unscored Members			All Members
		Unadjusted Risk	Budget Neutral		Unadjusted Risk	Budget Neutral	Budget Neutral
CCO	Member Months	Score	Risk Score	Member Months	Score	Risk Score	Risk Score
Magnolia	2,733	1.096	0.973	37	1.045	1.017	0.973
Molina	1,409	1.069	0.949	49	1.053	1.025	0.951
United	3,447	1.175	1.043	52	0.991	0.965	1.042
Total	7,589	1.127	1.000	138	1.027	1.000	1.000

Exhibit 1E
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q1 to Q2 2023 Risk Scores
September 2022 Snapshot Period

North Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	1,326	0.729	0.917
Molina	253	1.017	1.280
United	471	0.860	1.082
Total	2,050	0.795	1.000

Central Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	1,352	0.819	0.934
Molina	286	1.070	1.221
United	402	0.932	1.064
Total	2,040	0.876	1.000

South Region			
	All Members		
		Unadjusted	Budget Neutral
CCO	Member Months	Risk Score	Risk Score
Magnolia	1,918	0.733	0.910
Molina	419	1.023	1.271
United	641	0.879	1.092
Total	2,978	0.805	1.000

Exhibit 2A
Mississippi Division of Medicaid
Impact Analysis Non-Newborn SSI / Disabled Population
Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.992	0.991	1.014	0.994	-0.1%	2.3%	-1.9%	0.2%
Molina	0.990	0.990	1.011	0.974	0.0%	2.1%	-3.7%	-1.6%
United	0.993	0.994	1.023	0.997	0.1%	2.9%	-2.6%	0.4%
Unscored Members								
Magnolia	1.046	1.042	1.078	1.017	-0.3%	3.4%	-5.7%	-2.8%
Molina	1.050	1.050	1.033	0.982	0.0%	-1.6%	-4.9%	-6.4%
United	1.013	1.019	1.108	1.022	0.5%	8.8%	-7.8%	0.8%
All Members								
Magnolia	0.993	0.992	1.014	0.994	-0.1%	2.2%	-1.9%	0.2%
Molina	0.991	0.991	1.011	0.974	0.0%	2.0%	-3.7%	-1.7%
United	0.993	0.995	1.023	0.997	0.1%	2.9%	-2.5%	0.4%

Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.095	1.092	1.110	1.088	-0.3%	1.6%	-2.0%	-0.7%
Molina	1.032	1.047	1.073	1.054	1.4%	2.5%	-1.8%	2.1%
United	1.026	1.030	1.052	1.028	0.5%	2.1%	-2.2%	0.2%
Unscored Members								
Magnolia	1.001	1.010	1.082	1.034	0.9%	7.1%	-4.5%	3.2%
Molina	0.989	0.990	0.814	1.009	0.1%	-17.8%	24.0%	2.0%
United	1.048	1.048	1.244	1.009	0.0%	18.8%	-19.0%	-3.7%
All Members								
Magnolia	1.095	1.092	1.110	1.087	-0.3%	1.7%	-2.0%	-0.7%
Molina	1.032	1.046	1.073	1.054	1.4%	2.5%	-1.8%	2.1%
United	1.026	1.031	1.052	1.028	0.5%	2.1%	-2.3%	0.2%

Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.141	1.145	1.169	1.151	0.3%	2.2%	-1.6%	0.9%
Molina	1.085	1.088	1.091	1.072	0.3%	0.3%	-1.8%	-1.2%
United	1.078	1.080	1.112	1.093	0.2%	3.0%	-1.8%	1.3%
Unscored Members								
Magnolia	1.020	1.011	0.937	1.003	-0.9%	-7.3%	7.1%	-1.7%
Molina	1.073	1.067	1.084	1.022	-0.5%	1.6%	-5.7%	-4.7%
United	0.991	0.984	1.064	1.048	-0.7%	8.1%	-1.5%	5.7%
All Members								
Magnolia	1.139	1.143	1.169	1.149	0.3%	2.3%	-1.7%	0.8%
Molina	1.086	1.089	1.091	1.072	0.3%	0.2%	-1.8%	-1.3%
United	1.077	1.079	1.112	1.092	0.2%	3.1%	-1.8%	1.4%

Exhibit 2B
Mississippi Division of Medicaid
Impact Analysis Non-Newborn SSI / Disabled Population
Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.000	0.999	0.997	1.001	-0.1%	-0.2%	0.5%	0.1%
Molina	0.998	0.998	0.994	0.981	0.0%	-0.4%	-1.3%	-1.7%
United	1.001	1.002	1.006	1.004	0.1%	0.4%	-0.2%	0.3%
Unscored Members								
Magnolia	1.013	1.008	0.993	1.007	-0.5%	-1.5%	1.4%	-0.6%
Molina	1.017	1.015	0.951	0.973	-0.1%	-6.3%	2.2%	-4.3%
United	0.982	0.985	1.020	1.012	0.4%	3.5%	-0.8%	3.1%
All Members								
Magnolia	1.000	0.999	0.997	1.001	-0.1%	-0.2%	0.5%	0.1%
Molina	0.998	0.998	0.994	0.980	0.0%	-0.5%	-1.3%	-1.8%
United	1.001	1.002	1.006	1.004	0.1%	0.4%	-0.2%	0.4%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.032	1.027	1.025	1.025	-0.5%	-0.3%	0.1%	-0.6%
Molina	0.973	0.985	0.991	0.994	1.3%	0.6%	0.3%	2.2%
United	0.966	0.969	0.971	0.969	0.3%	0.2%	-0.2%	0.3%
Unscored Members								
Magnolia	0.984	0.990	1.034	1.017	0.6%	4.4%	-1.6%	3.4%
Molina	0.972	0.970	0.777	0.993	-0.2%	-19.9%	27.7%	2.2%
United	1.030	1.027	1.189	0.993	-0.3%	15.8%	-16.5%	-3.6%
All Members								
Magnolia	1.032	1.027	1.025	1.025	-0.4%	-0.2%	0.1%	-0.6%
Molina	0.973	0.984	0.990	0.994	1.2%	0.6%	0.3%	2.2%
United	0.967	0.970	0.971	0.969	0.3%	0.1%	-0.2%	0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.031	1.032	1.031	1.032	0.1%	-0.1%	0.1%	0.1%
Molina	0.981	0.981	0.962	0.961	0.0%	-1.9%	-0.1%	-2.0%
United	0.975	0.974	0.981	0.980	-0.1%	0.7%	-0.1%	0.5%
Unscored Members								
Magnolia	0.996	0.994	0.915	0.977	-0.2%	-8.0%	6.8%	-1.9%
Molina	1.047	1.049	1.059	0.996	0.2%	0.9%	-5.9%	-4.9%
United	0.968	0.968	1.039	1.021	0.0%	7.3%	-1.7%	5.5%
All Members								
Magnolia	1.031	1.031	1.031	1.032	0.1%	-0.1%	0.1%	0.1%
Molina	0.983	0.983	0.962	0.962	0.1%	-2.1%	0.0%	-2.1%
United	0.975	0.974	0.981	0.981	-0.1%	0.7%	0.0%	0.6%

Exhibit 2C Mississippi Division of Medicaid Impact Analysis MA Adult Population Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.013	1.007	1.011	1.030	-0.6%	0.5%	1.8%	1.7%
Molina	0.961	0.961	0.963	0.964	-0.1%	0.2%	0.2%	0.3%
United	1.012	1.012	1.028	1.021	0.0%	1.6%	-0.6%	0.9%
Unscored Members								
Magnolia	0.997	0.996	1.011	0.994	-0.1%	1.6%	-1.7%	-0.3%
Molina	1.018	1.018	1.018	0.994	0.0%	0.0%	-2.3%	-2.3%
United	1.001	1.001	0.921	1.008	0.0%	-8.0%	9.4%	0.6%
All Members								
Magnolia	1.012	1.006	1.011	1.027	-0.6%	0.6%	1.5%	1.5%
Molina	0.966	0.966	0.963	0.968	-0.1%	-0.3%	0.5%	0.1%
United	1.012	1.011	1.027	1.020	0.0%	1.6%	-0.7%	0.9%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.035	1.034	1.036	1.019	-0.2%	0.2%	-1.6%	-1.6%
Molina	0.943	0.947	0.944	0.958	0.4%	-0.2%	1.5%	1.6%
United	0.998	0.991	1.023	1.036	-0.7%	3.2%	1.3%	3.8%
Unscored Members								
Magnolia	0.991	0.993	0.958	0.987	0.2%	-3.5%	3.1%	-0.4%
Molina	1.015	1.015	0.934	0.995	0.0%	-7.9%	6.5%	-2.0%
United	1.010	1.011	1.080	0.992	0.0%	6.9%	-8.1%	-1.8%
All Members								
Magnolia	1.032	1.031	1.036	1.017	-0.2%	0.5%	-1.8%	-1.5%
Molina	0.949	0.952	0.944	0.962	0.4%	-0.8%	1.9%	1.4%
United	0.999	0.993	1.023	1.033	-0.6%	3.1%	0.9%	3.4%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.055	1.050	1.055	1.054	-0.5%	0.6%	-0.2%	-0.1%
Molina	0.982	0.986	0.990	0.994	0.5%	0.4%	0.4%	1.2%
United	1.072	1.075	1.079	1.065	0.3%	0.4%	-1.3%	-0.6%
Unscored Members								
Magnolia	0.998	0.997	0.989	0.990	0.0%	-0.8%	0.0%	-0.8%
Molina	0.986	0.987	0.989	1.002	0.1%	0.2%	1.3%	1.6%
United	1.002	1.003	1.064	0.979	0.1%	6.0%	-8.0%	-2.3%
All Members								
Magnolia	1.051	1.047	1.055	1.050	-0.5%	0.8%	-0.5%	-0.1%
Molina	0.982	0.986	0.990	0.994	0.5%	0.3%	0.5%	1.3%
United	1.068	1.070	1.079	1.060	0.3%	0.8%	-1.7%	-0.7%

Exhibit 2D
Mississippi Division of Medicaid
Impact Analysis MA Adult Population
Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.013	1.009	1.006	1.018	-0.3%	-0.3%	1.2%	0.6%
Molina	0.961	0.964	0.958	0.954	0.2%	-0.6%	-0.4%	-0.8%
United	1.012	1.015	1.022	1.010	0.2%	0.8%	-1.2%	-0.2%
Unscored Members								
Magnolia	0.992	0.991	1.041	0.995	-0.1%	5.0%	-4.4%	0.3%
Molina	1.013	1.013	1.048	0.995	0.0%	3.4%	-5.0%	-1.7%
United	0.997	0.997	0.948	1.009	0.0%	-4.9%	6.5%	1.2%
All Members								
Magnolia	1.011	1.008	1.006	1.017	-0.3%	-0.2%	1.0%	0.5%
Molina	0.966	0.968	0.958	0.958	0.2%	-1.0%	0.0%	-0.8%
United	1.011	1.013	1.022	1.010	0.2%	0.9%	-1.2%	-0.1%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.038	1.038	1.028	1.009	0.0%	-1.0%	-1.8%	-2.7%
Molina	0.945	0.951	0.937	0.949	0.6%	-1.4%	1.3%	0.5%
United	1.000	0.995	1.015	1.026	-0.4%	2.0%	1.1%	2.7%
Unscored Members								
Magnolia	0.986	0.988	0.973	0.996	0.1%	-1.5%	2.3%	1.0%
Molina	1.010	1.009	0.949	1.003	-0.1%	-5.9%	5.7%	-0.7%
United	1.006	1.005	1.097	1.001	0.0%	9.2%	-8.8%	-0.5%
All Members								
Magnolia	1.034	1.034	1.028	1.008	0.0%	-0.6%	-1.9%	-2.5%
Molina	0.951	0.956	0.937	0.954	0.6%	-1.9%	1.8%	0.4%
United	1.000	0.996	1.016	1.024	-0.4%	1.9%	0.9%	2.4%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.013	1.007	1.008	1.011	-0.6%	0.1%	0.3%	-0.1%
Molina	0.943	0.946	0.945	0.954	0.4%	-0.1%	0.9%	1.2%
United	1.029	1.031	1.031	1.022	0.2%	0.0%	-0.8%	-0.7%
Unscored Members								
Magnolia	1.001	1.001	0.951	1.000	-0.1%	-5.0%	5.3%	-0.1%
Molina	0.990	0.990	0.951	1.013	0.0%	-4.0%	6.6%	2.4%
United	1.006	1.006	1.022	0.990	0.0%	1.6%	-3.2%	-1.6%
All Members								
Magnolia	1.012	1.007	1.008	1.011	-0.5%	0.1%	0.3%	-0.1%
Molina	0.945	0.949	0.945	0.957	0.4%	-0.4%	1.2%	1.2%
United	1.028	1.029	1.031	1.020	0.2%	0.1%	-1.0%	-0.7%

Exhibit 2E Mississippi Division of Medicaid Impact Analysis MA Children Population Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.016	1.015	1.027	1.032	-0.1%	1.2%	0.5%	1.6%
Molina	0.948	0.949	0.955	0.978	0.1%	0.7%	2.4%	3.2%
United	1.041	1.043	1.052	1.054	0.1%	0.9%	0.1%	1.2%
Unscored Members								
Magnolia	1.014	1.014	0.955	1.004	0.0%	-5.8%	5.1%	-1.0%
Molina	0.997	0.997	0.893	0.990	0.0%	-10.5%	10.9%	-0.7%
United	0.999	0.999	1.043	0.999	0.1%	4.3%	-4.2%	0.1%
All Members								
Magnolia	1.015	1.015	1.027	1.031	-0.1%	1.2%	0.4%	1.6%
Molina	0.950	0.951	0.955	0.979	0.1%	0.4%	2.5%	3.0%
United	1.040	1.042	1.052	1.052	0.1%	1.0%	0.0%	1.1%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.021	1.021	1.035	1.036	0.0%	1.4%	0.2%	1.5%
Molina	0.933	0.931	0.939	0.966	-0.2%	0.9%	2.8%	3.6%
United	1.027	1.025	1.036	1.044	-0.2%	1.1%	0.7%	1.6%
Unscored Members								
Magnolia	0.996	0.996	1.023	0.983	0.1%	2.7%	-3.9%	-1.3%
Molina	1.002	1.003	1.037	1.011	0.0%	3.4%	-2.6%	0.8%
United	0.997	0.996	1.007	0.992	-0.2%	1.2%	-1.5%	-0.5%
All Members								
Magnolia	1.020	1.020	1.035	1.035	0.0%	1.4%	0.1%	1.5%
Molina	0.935	0.934	0.940	0.968	-0.1%	0.6%	3.0%	3.6%
United	1.026	1.024	1.036	1.043	-0.2%	1.2%	0.6%	1.6%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.037	1.035	1.043	1.048	-0.2%	0.8%	0.5%	1.1%
Molina	0.963	0.964	0.964	0.978	0.0%	0.0%	1.5%	1.5%
United	1.059	1.059	1.070	1.076	0.0%	1.0%	0.6%	1.6%
Unscored Members								
Magnolia	0.999	0.998	0.998	0.991	0.0%	-0.1%	-0.7%	-0.8%
Molina	0.983	0.982	0.990	0.991	-0.1%	0.8%	0.1%	0.8%
United	0.997	0.997	0.995	0.990	0.0%	-0.2%	-0.5%	-0.8%
All Members								
Magnolia	1.036	1.034	1.043	1.047	-0.2%	0.8%	0.4%	1.1%
Molina	0.964	0.964	0.964	0.979	0.0%	-0.1%	1.6%	1.6%
United	1.058	1.058	1.070	1.075	0.0%	1.1%	0.4%	1.5%

Exhibit 2F
Mississippi Division of Medicaid
Impact Analysis MA Children Population
Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.002	1.001	1.004	1.002	-0.1%	0.2%	-0.2%	-0.1%
Molina	0.936	0.936	0.933	0.949	0.1%	-0.3%	1.7%	1.4%
United	1.028	1.029	1.028	1.023	0.1%	-0.1%	-0.5%	-0.5%
Unscored Members								
Magnolia	1.011	1.011	0.956	1.006	-0.1%	-5.4%	5.2%	-0.6%
Molina	0.994	0.994	0.894	0.992	0.0%	-10.1%	11.0%	-0.2%
United	0.996	0.996	1.044	1.001	0.1%	4.8%	-4.1%	0.6%
All Members								
Magnolia	1.002	1.001	1.004	1.002	-0.1%	0.2%	-0.2%	-0.1%
Molina	0.938	0.939	0.933	0.951	0.1%	-0.5%	1.8%	1.4%
United	1.027	1.028	1.028	1.022	0.1%	0.0%	-0.6%	-0.5%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.014	1.015	1.017	1.011	0.1%	0.2%	-0.6%	-0.3%
Molina	0.927	0.927	0.924	0.942	0.0%	-0.3%	2.0%	1.7%
United	1.021	1.020	1.019	1.018	-0.1%	0.0%	-0.1%	-0.2%
Unscored Members								
Magnolia	0.997	0.998	1.001	0.987	0.1%	0.3%	-1.4%	-1.1%
Molina	1.004	1.005	1.015	1.015	0.1%	1.0%	0.0%	1.1%
United	0.999	0.998	0.986	0.997	-0.1%	-1.2%	1.1%	-0.2%
All Members								
Magnolia	1.014	1.015	1.017	1.011	0.1%	0.2%	-0.7%	-0.4%
Molina	0.929	0.929	0.924	0.945	0.0%	-0.5%	2.3%	1.7%
United	1.020	1.019	1.019	1.018	-0.1%	0.0%	-0.1%	-0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.006	1.005	1.006	1.004	-0.1%	0.1%	-0.2%	-0.3%
Molina	0.935	0.936	0.929	0.937	0.1%	-0.7%	0.8%	0.2%
United	1.028	1.029	1.032	1.031	0.0%	0.3%	-0.1%	0.2%
Unscored Members								
Magnolia	1.005	1.005	1.004	1.000	0.0%	-0.2%	-0.3%	-0.5%
Molina	0.990	0.989	0.996	1.001	-0.1%	0.7%	0.5%	1.1%
United	1.004	1.004	1.001	0.999	0.0%	-0.3%	-0.2%	-0.5%
All Members								
Magnolia	1.006	1.005	1.006	1.004	-0.1%	0.1%	-0.2%	-0.3%
Molina	0.936	0.937	0.929	0.938	0.1%	-0.9%	1.0%	0.2%
United	1.028	1.028	1.032	1.030	0.0%	0.4%	-0.2%	0.2%

Exhibit 2G Mississippi Division of Medicaid Impact Analysis Quasi-CHIP Population Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change								
Unadjusted Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.049	1.051	1.062	1.050	0.2%	1.1%	-1.1%	0.1%
Molina	1.012	1.015	1.058	1.079	0.3%	4.2%	2.0%	6.6%
United	1.063	1.061	1.077	1.116	-0.1%	1.5%	3.6%	5.0%
Unscored Members								
Magnolia	1.054	1.049	1.046	1.025	-0.5%	-0.3%	-1.9%	-2.7%
Molina	1.086	1.086	1.292	1.015	0.0%	19.0%	-21.4%	-6.5%
United	1.029	1.029	N/A	1.062	0.0%	N/A	N/A	3.3%
All Members								
Magnolia	1.049	1.051	1.062	1.050	0.2%	1.1%	-1.2%	0.0%
Molina	1.015	1.018	1.058	1.078	0.3%	3.9%	1.9%	6.2%
United	1.062	1.060	1.077	1.115	-0.1%	1.6%	3.5%	5.0%
Unadjusted Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.026	1.025	1.045	1.032	-0.1%	2.0%	-1.2%	0.6%
Molina	1.001	1.002	1.032	1.041	0.1%	2.9%	0.9%	4.0%
United	1.056	1.056	1.070	1.076	0.0%	1.3%	0.6%	1.9%
Unscored Members								
Magnolia	1.076	1.080	N/A	1.037	0.4%	N/A	N/A	-3.6%
Molina	1.050	1.049	1.292	1.047	-0.1%	23.2%	-19.0%	-0.3%
United	1.080	1.080	1.046	1.032	0.0%	-3.2%	-1.3%	-4.4%
All Members								
Magnolia	1.027	1.026	1.045	1.032	-0.1%	1.9%	-1.2%	0.6%
Molina	1.002	1.003	1.032	1.041	0.1%	2.9%	0.9%	3.9%
United	1.056	1.056	1.070	1.075	0.0%	1.3%	0.5%	1.8%
Unadjusted Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change Due to Risk Score Restatement	% Change Due to New Diagnosis Period	% Change Due to Enrollment Changes	Total % Change
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022				
Scored Members								
Magnolia	1.077	1.080	1.096	1.096	0.3%	1.5%	0.0%	1.7%
Molina	1.041	1.043	1.055	1.069	0.2%	1.2%	1.3%	2.7%
United	1.178	1.181	1.181	1.175	0.2%	0.0%	-0.5%	-0.3%
Unscored Members								
Magnolia	1.053	1.053	1.169	1.045	0.0%	11.0%	-10.6%	-0.8%
Molina	1.068	1.069	1.070	1.053	0.1%	0.1%	-1.6%	-1.4%
United	1.071	1.071	N/A	0.991	0.0%	N/A	N/A	-7.4%
All Members								
Magnolia	1.077	1.080	1.096	1.095	0.3%	1.5%	-0.1%	1.7%
Molina	1.043	1.045	1.056	1.070	0.2%	1.0%	1.4%	2.7%
United	1.177	1.179	1.181	1.172	0.2%	0.2%	-0.7%	-0.4%

Exhibit 2H
Mississippi Division of Medicaid
Impact Analysis Quasi-CHIP Population
Q3 to Q4 2022 to Q1 to Q2 2023 Risk Score Change

Budget Neutral Plan Factors - North Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	1.001	1.002	0.995	0.970	0.1%	-0.7%	-2.5%	-3.1%
Molina	0.965	0.968	0.991	0.997	0.2%	2.4%	0.6%	3.2%
United	1.013	1.011	1.009	1.030	-0.2%	-0.3%	2.2%	1.7%
Unscored Members								
Magnolia	1.001	0.997	0.894	0.988	-0.3%	-10.3%	10.4%	-1.3%
Molina	1.031	1.032	1.106	0.978	0.1%	7.1%	-11.5%	-5.1%
United	0.977	0.978	N/A	1.023	0.1%	N/A	N/A	4.7%
All Members								
Magnolia	1.001	1.002	0.995	0.970	0.1%	-0.7%	-2.5%	-3.1%
Molina	0.968	0.970	0.991	0.996	0.2%	2.2%	0.5%	2.9%
United	1.012	1.011	1.009	1.030	-0.2%	-0.2%	2.1%	1.8%

Budget Neutral Plan Factors - Central Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.992	0.991	0.992	0.982	-0.1%	0.1%	-1.1%	-1.0%
Molina	0.968	0.969	0.980	0.990	0.1%	1.1%	1.0%	2.2%
United	1.021	1.021	1.016	1.023	0.0%	-0.5%	0.7%	0.2%
Unscored Members								
Magnolia	1.004	1.007	N/A	0.998	0.3%	N/A	N/A	-0.6%
Molina	0.979	0.977	1.106	1.007	-0.2%	13.1%	-8.9%	2.8%
United	1.007	1.006	0.894	0.993	-0.1%	-11.1%	11.0%	-1.4%
All Members								
Magnolia	0.992	0.992	0.992	0.982	-0.1%	0.1%	-1.0%	-1.0%
Molina	0.968	0.970	0.980	0.990	0.1%	1.1%	1.1%	2.3%
United	1.021	1.021	1.016	1.023	0.0%	-0.5%	0.6%	0.2%

Budget Neutral Plan Factors - South Region								
	A	B	C	D	E = (B / A) - 1	F = (C / B) - 1	G = (D / C) - 1	H = (D / A) - 1
Enrollment Month	Apr 2022	Apr 2022	Apr 2022	Sep 2022	% Change	% Change	% Change	
Diagnosis Period	CY 2021	CY 2021	June 2021 to May 2022	June 2021 to May 2022	Due to Risk Score Restatement	Due to New Diagnosis Period	Due to Enrollment Changes	Total % Change
Scored Members								
Magnolia	0.965	0.966	0.973	0.973	0.0%	0.7%	0.0%	0.7%
Molina	0.932	0.933	0.937	0.949	0.0%	0.5%	1.3%	1.7%
United	1.056	1.055	1.048	1.043	0.0%	-0.7%	-0.5%	-1.2%
Unscored Members								
Magnolia	0.988	0.988	1.060	1.017	0.0%	7.3%	-4.1%	2.9%
Molina	1.002	1.003	0.970	1.025	0.1%	-3.2%	5.6%	2.3%
United	1.005	1.004	N/A	0.965	0.0%	N/A	N/A	-4.0%
All Members								
Magnolia	0.966	0.966	0.973	0.973	0.0%	0.7%	0.0%	0.8%
Molina	0.935	0.935	0.937	0.951	0.0%	0.2%	1.5%	1.8%
United	1.055	1.055	1.048	1.042	0.0%	-0.6%	-0.6%	-1.3%

Exhibit 3A Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - North Region - Q1 to Q2 2023 Prospective Risk Score June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period														
Scored Members														
Risk Weight	Magnolia			Molina			United			Total				
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months		
Regression Intercept	0.077	N/A	9,790	100.00%	N/A	2,287	100.00%	N/A	8,003	100.00%	N/A	20,080	100.00%	
Demographic Categories														
Age 1 to 4	0.087	N/A	301	3.07%	N/A	166	7.26%	N/A	257	3.21%	N/A	724	3.61%	
Age 5 to 14 Female	0.089	N/A	479	4.89%	N/A	112	4.90%	N/A	442	5.52%	N/A	1,033	5.14%	
Age 5 to 14 Male	0.067	N/A	1,104	11.28%	N/A	255	11.15%	N/A	882	11.02%	N/A	2,241	11.16%	
Age 15 to 24 Female	0.108	N/A	462	4.72%	N/A	135	5.90%	N/A	424	5.30%	N/A	1,021	5.08%	
Age 15 to 24 Male	0.000	N/A	852	8.70%	N/A	289	11.70%	N/A	777	9.71%	N/A	1,868	9.45%	
Age 25 to 44 Female	0.206	N/A	1,136	11.60%	N/A	211	9.23%	N/A	890	11.12%	N/A	2,237	11.14%	
Age 25 to 44 Male	0.053	N/A	1,190	12.16%	N/A	233	10.19%	N/A	987	12.33%	N/A	2,410	12.00%	
Age 45 to 64 Female	0.109	N/A	2,484	25.37%	N/A	411	17.97%	N/A	1,864	23.29%	N/A	4,759	23.70%	
Age 45 to 64 Male	0.111	N/A	1,759	17.97%	N/A	495	21.64%	N/A	1,465	18.29%	N/A	3,718	18.52%	
Age 65 and Older Male and Female	0.006	N/A	23	0.23%	N/A	0	0.00%	N/A	16	0.20%	N/A	39	0.19%	
Duration Categories														
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	31	0.32%	N/A	28	1.22%	N/A	45	0.56%	N/A	104	0.52%	
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	48	0.49%	N/A	38	1.66%	N/A	46	0.57%	N/A	132	0.66%	
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	9,711	99.19%	N/A	2,221	97.11%	N/A	7,912	98.86%	N/A	19,844	98.82%	
Disease Categories														
Cancer, very high	4.640	10	54	0.55%	3	21	0.92%	8	49	0.61%	8	124	0.62%	
Cancer, high	1.263	22	114	1.16%	18	32	1.40%	26	87	1.09%	24	233	1.16%	
Cancer, medium	0.649	29	179	1.83%	31	34	1.49%	23	188	2.35%	27	401	2.00%	
Cancer, low	0.148	46	99	1.01%	46	22	0.96%	46	91	1.14%	46	212	1.06%	
Cardiovascular, very high	1.401	35	46	0.47%	33	11	0.48%	35	39	0.49%	34	96	0.48%	
Cardiovascular, medium	0.570	2	1,010	10.32%	2	219	9.58%	2	778	9.72%	2	2,007	10.00%	
Cardiovascular, medium - child	0.188	49	58	0.59%	45	18	0.79%	48	53	0.66%	49	129	0.64%	
Cardiovascular, low	0.192	19	927	9.47%	21	202	8.83%	19	734	9.17%	19	1,863	9.28%	
Cardiovascular, extra low	0.106	7	3,027	30.92%	7	601	26.28%	6	2,434	30.41%	6	6,062	30.19%	
Cerebrovascular, low	0.153	43	141	1.44%	42	46	2.01%	44	135	1.69%	44	322	1.60%	
CNS, medium to high	0.589	17	305	3.12%	20	66	2.89%	22	235	2.94%	20	606	3.02%	
CNS, high - child	1.358	41	25	0.26%	43	5	0.22%	43	16	0.20%	41	46	0.23%	
CNS, low	0.218	4	1,672	17.08%	6	361	15.78%	5	1,403	17.53%	5	3,436	17.11%	
DD, low to medium	0.153	39	354	3.62%	39	72	3.15%	33	374	4.67%	38	800	3.98%	
Diabetes, type 1 high	1.267	45	13	0.13%	49	2	0.09%	45	14	0.17%	45	29	0.14%	
Diabetes, type 1 medium	0.883	32	131	1.34%	37	17	0.74%	32	86	1.20%	32	244	1.22%	
Diabetes, type 2 medium	0.416	9	616	6.29%	19	97	4.24%	14	404	5.05%	12	1,117	5.56%	
Diabetes, type 2 low	0.177	15	1,087	11.10%	22	195	8.53%	16	896	11.20%	18	2,178	10.85%	
Eye, low	0.142	47	95	0.97%	48	18	0.79%	49	70	0.87%	47	183	0.91%	
Eye, very low	0.107	31	909	9.28%	36	113	4.94%	34	516	6.45%	33	1,538	7.66%	
Genital, extra low	0.070	42	364	3.72%	44	78	3.41%	42	315	3.94%	43	757	3.77%	
Gastro, medium to high	0.523	8	538	5.50%	9	114	4.98%	9	415	5.19%	9	1,067	5.31%	
Gastro, high - child	1.264	27	94	0.96%	26	23	1.01%	31	62	0.77%	30	179	0.89%	
Gastro, low	0.127	11	1,910	19.51%	17	331	14.47%	12	1,433	17.91%	11	3,674	18.30%	
Hematological, very high to extra high	1.633	23	87	0.89%	37	12	0.52%	20	86	1.07%	23	185	0.92%	
Hematological, medium	0.705	33	125	1.28%	30	33	1.44%	30	113	1.41%	31	271	1.35%	
Hematological, low	0.491	37	122	1.25%	35	28	1.22%	37	100	1.25%	37	250	1.25%	
AIDS, high	1.699	5	213	2.18%	4	57	2.49%	4	180	2.25%	4	450	2.24%	
HIV, medium	1.210	44	16	0.16%	40	7	0.31%	41	21	0.26%	42	44	0.22%	
Infectious, low to medium	0.435	24	321	3.28%	13	108	4.72%	24	276	3.45%	22	705	3.51%	
Metabolic, high	1.035	21	157	1.60%	28	26	1.14%	21	135	1.69%	21	318	1.58%	
Metabolic, high - child	0.158	51	35	0.36%	50	6	0.26%	51	35	0.44%	51	76	0.38%	
Metabolic, medium	0.396	26	338	3.45%	23	87	3.80%	27	277	3.46%	26	702	3.50%	
Metabolic, very low	0.138	25	1,012	10.34%	25	233	10.19%	25	820	10.26%	25	2,065	10.28%	
Pregnancy, incomplete	0.395	48	29	0.30%	47	8	0.35%	50	25	0.31%	48	62	0.31%	
Psychiatric, high	0.677	3	593	6.06%	5	133	5.82%	3	516	6.45%	3	1,242	6.19%	
Psychiatric, medium low to medium	0.264	1	2,579	26.34%	1	616	26.93%	1	2,186	27.31%	1	5,381	26.80%	
Psychiatric, low	0.167	14	1,202	12.28%	16	253	11.06%	13	1,022	12.77%	15	2,477	12.34%	
Pulmonary, very high	1.167	13	187	1.91%	10	48	2.10%	15	137	1.71%	13	372	1.85%	
Pulmonary, very high - child	1.465	36	42	0.43%	27	19	0.83%	39	28	0.35%	36	89	0.44%	
Pulmonary, high	0.593	50	17	0.17%	51	1	0.04%	47	17	0.21%	50	35	0.17%	
Pulmonary, medium	0.475	18	376	3.84%	11	116	5.07%	17	326	4.07%	16	818	4.07%	
Pulmonary, low	0.178	6	1,845	18.85%	8	337	14.74%	7	1,301	16.26%	7	3,483	17.35%	
Renal, extra high	3.856	20	45	0.46%	14	12	0.52%	10	54	0.67%	14	111	0.55%	
Renal, very high	0.489	28	241	2.46%	29	48	2.10%	28	224	2.80%	28	513	2.55%	
Renal, low to medium	0.132	38	443	4.53%	38	86	3.76%	38	327	4.09%	39	856	4.26%	
Skeletal, medium	0.308	16	623	6.36%	15	142	6.21%	17	494	6.17%	17	1,259	6.27%	
Skeletal, very low to low	0.149	12	1,606	16.40%	12	336	14.69%	11	1,251	15.63%	10	3,193	15.90%	
Skin, low - high	0.254	40	138	1.41%	41	31	1.36%	40	129	1.61%	40	298	1.48%	
Skin, very low	0.090	34	721	7.36%	34	169	7.39%	36	567	7.08%	35	1,457	7.26%	
Substance abuse, very low to low	0.153	30	751	7.67%	24	215	9.40%	29	628	7.85%	29	1,594	7.94%	
Population Statistics														
No Classified Disease Categories	N/A	N/A	1,817	18.56%	N/A	479	20.94%	N/A	1,447	18.08%	N/A	3,743	18.64%	
Unscored Members														
Risk Weight	Magnolia			Molina			United			Total				
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months		
Demographic Categories														
Age 1 to 4	1.113	N/A	4	4.44%	N/A	0	0.00%	N/A	8	8.00%	N/A	12	4.69%	
Age 5 to 14 Female	0.660	N/A	4	4.44%	N/A	4	6.06%	N/A	4	4.00%	N/A	12	4.69%	
Age 5 to 14 Male	0.572	N/A	8	8.89%	N/A	10	15.15%	N/A	13	13.00%	N/A	31	12.11%	
Age 15 to 24 Female	0.746	N/A	5	5.56%	N/A	2	3.03%	N/A	0	0.00%	N/A	7	2.73%	
Age 15 to 24 Male	0.523	N/A	7	7.78%	N/A	6	9.09%	N/A	6	6.00%	N/A	19	7.42%	
Age 25 to 44 Female	1.154	N/A	7	7.78%	N/A	6	9.09%	N/A	10	10.00%	N/A	23	8.98%	
Age 25 to 44 Male	0.821	N/A	10	11.11%	N/A	6	9.09%	N/A	11	11.00%	N/A	27	10.55%	
Age 45 to 64 Female	1.314	N/A	22	24.44%	N/A	16	24.24%	N/A	20	20.00%	N/A	58	22.66%	
Age 45 to 64 Male	1.185	N/A	23	25.56%	N/A	16	24.24%	N/A	28	28.00%	N/A	67	26.17%	
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	
Risk Adjustment Results														
Scored Members														
Member Months			9,790	Member Months			2,287	Member Months			8,003	Member Months		20,080
Unadjusted Plan Factor			0.994	Unadjusted Plan Factor			0.974	Unadjusted Plan Factor			0.997	Unadjusted Plan Factor		0.993
Budget Neutral Plan Factor			1.001	Budget Neutral Plan Factor			0.981	Budget Neutral Plan Factor			1.004	Budget Neutral Plan Factor		1.000
Unscored Members														
Member Months			90	Member Months			66	Member Months			100	Member Months		256
Unadjusted Plan Factor			1.017	Unadjusted Plan Factor			0.982	Unadjusted Plan Factor			1.022	Unadjusted Plan Factor		1.010
Budget Neutral Plan Factor			1.007	Budget Neutral Plan Factor			0.973	Budget Neutral Plan Factor			1.012	Budget Neutral Plan Factor		1.000
Total Members														
Member Months			9,880	Member Months			2,353	Member Months			8,103	Member Months		20,336
Unadjusted Plan Factor			0.994	Unadjusted Plan Factor			0.974	Unadjusted Plan Factor			0.997	Unadjusted Plan Factor		0.993
Budget Neutral Plan Factor			1.001	Budget Neutral Plan Factor			0.980	Budget Neutral Plan Factor			1.004	Budget Neutral Plan Factor		1.000

Exhibit 3B Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI/ Disabled - Central Region - Q1 to Q2 2023 Prospective Risk Score: June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.077	N/A	10,724	100.00%	N/A	2,553	100.00%	N/A	8,276	100.00%	N/A	21,553	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	358	3.34%	N/A	213	8.34%	N/A	311	3.76%	N/A	882	4.09%
Age 5 to 14 Female	0.089	N/A	559	5.21%	N/A	122	4.78%	N/A	436	5.27%	N/A	1,117	5.18%
Age 5 to 14 Male	0.067	N/A	1,200	11.19%	N/A	292	11.44%	N/A	933	11.27%	N/A	2,425	11.25%
Age 15 to 24 Female	0.108	N/A	545	5.08%	N/A	153	5.99%	N/A	436	5.27%	N/A	1,134	5.28%
Age 15 to 24 Male	0.000	N/A	1,025	9.56%	N/A	280	10.97%	N/A	801	9.68%	N/A	2,106	9.77%
Age 25 to 44 Female	0.206	N/A	1,217	11.35%	N/A	185	7.25%	N/A	866	10.46%	N/A	2,268	10.52%
Age 25 to 44 Male	0.053	N/A	1,256	11.71%	N/A	305	11.95%	N/A	1,044	12.61%	N/A	2,605	12.09%
Age 45 to 64 Female	0.109	N/A	2,546	23.74%	N/A	429	16.80%	N/A	1,801	21.76%	N/A	4,776	22.18%
Age 45 to 64 Male	0.111	N/A	1,952	18.20%	N/A	571	22.37%	N/A	1,610	19.45%	N/A	4,133	19.18%
Age 65 and Older Male and Female	0.006	N/A	66	0.62%	N/A	3	0.12%	N/A	38	0.46%	N/A	107	0.50%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	38	0.35%	N/A	28	1.10%	N/A	49	0.59%	N/A	115	0.53%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	55	0.51%	N/A	52	2.04%	N/A	56	0.68%	N/A	163	0.76%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	10,631	99.13%	N/A	2,473	96.87%	N/A	8,171	98.73%	N/A	21,275	98.71%
Disease Categories													
Cancer, very high	4.640	11	62	0.58%	3	29	1.14%	13	38	0.46%	10	129	0.60%
Cancer, high	1.263	23	126	1.17%	12	42	1.65%	24	97	1.17%	23	265	1.23%
Cancer, medium	0.649	29	210	1.96%	30	46	1.80%	23	196	2.37%	28	452	2.10%
Cancer, low	0.148	46	131	1.22%	48	28	1.10%	47	82	0.99%	46	241	1.12%
Cardiovascular, very high	1.401	30	86	0.80%	35	12	0.47%	34	39	0.47%	32	137	0.64%
Cardiovascular, medium	0.570	3	1,041	9.71%	4	225	8.81%	4	735	8.88%	3	2,001	9.28%
Cardiovascular, medium - child	0.168	50	54	0.50%	50	15	0.59%	50	42	0.51%	50	111	0.52%
Cardiovascular, low	0.192	22	896	8.36%	17	255	9.99%	22	703	8.49%	22	1,854	8.60%
Cardiovascular, extra low	0.106	7	3,442	32.10%	9	683	26.75%	6	2,493	30.12%	6	6,618	30.71%
Cerebrovascular, low	0.153	43	282	2.63%	41	67	2.62%	43	184	2.22%	43	533	2.47%
CNS, medium to high	0.589	16	373	3.48%	13	89	3.49%	17	285	3.44%	17	747	3.47%
CNS, high - child	1.358	40	41	0.38%	46	4	0.16%	42	24	0.29%	42	69	0.32%
CNS, low	0.218	5	1,995	18.60%	6	499	19.55%	5	1,497	18.09%	5	3,991	18.52%
DD, low to medium	0.153	36	485	4.52%	33	137	5.37%	33	371	4.48%	34	993	4.61%
Diabetes, type 1 high	1.267	45	20	0.19%	43	5	0.20%	46	10	0.12%	45	35	0.16%
Diabetes, type 1 medium	0.883	35	116	1.08%	36	22	0.86%	35	79	0.95%	35	217	1.01%
Diabetes, type 2 medium	0.416	10	758	7.07%	18	116	4.54%	11	438	5.29%	11	1,312	6.09%
Diabetes, type 2 low	0.177	21	1,106	10.31%	26	209	8.19%	20	891	10.77%	20	2,206	10.24%
Eye, low	0.142	47	130	1.21%	49	22	0.86%	48	78	0.94%	47	230	1.07%
Eye, very low	0.107	31	1,079	10.06%	38	125	4.90%	32	553	6.68%	33	1,757	8.15%
Genital, extra low	0.070	44	400	3.73%	44	65	3.33%	44	327	3.95%	44	812	3.77%
Gastro, medium to high	0.523	9	669	6.24%	7	185	7.25%	7	469	5.67%	8	1,323	6.14%
Gastro, high - child	1.264	33	82	0.76%	27	28	1.10%	30	70	0.85%	30	180	0.84%
Gastro, low	0.127	13	1,945	18.14%	21	353	13.83%	19	1,254	15.15%	15	3,552	16.48%
Hematological, very high to extra high	1.633	20	120	1.12%	29	19	0.74%	21	91	1.10%	21	230	1.07%
Hematological, medium	0.705	32	155	1.45%	31	38	1.49%	31	124	1.50%	31	317	1.47%
Hematological, low	0.491	38	129	1.20%	32	45	1.76%	39	98	1.18%	38	272	1.26%
AIDS, high	1.699	4	320	2.98%	5	64	2.51%	3	254	3.07%	4	638	2.98%
HIV, medium	1.210	41	39	0.36%	42	8	0.31%	38	40	0.48%	40	87	0.40%
Infectious, low to medium	0.435	26	350	3.26%	22	99	3.88%	27	263	3.18%	25	712	3.30%
Metabolic, high	1.035	19	193	1.80%	23	38	1.49%	18	156	1.88%	19	387	1.80%
Metabolic, high - child	0.158	51	52	0.48%	51	12	0.47%	51	45	0.54%	51	109	0.51%
Metabolic, medium	0.396	27	378	3.52%	25	94	3.68%	26	289	3.49%	27	761	3.53%
Metabolic, very low	0.138	24	1,141	10.64%	24	277	10.85%	28	824	9.96%	26	2,242	10.40%
Pregnancy, incomplete	0.395	48	36	0.34%	45	14	0.55%	49	26	0.31%	49	76	0.35%
Psychiatric, high	0.677	2	1,018	9.49%	2	233	9.13%	2	741	8.95%	2	1,992	9.24%
Psychiatric, medium low to medium	0.264	1	3,121	29.10%	1	687	26.91%	1	2,264	27.36%	1	6,072	28.17%
Psychiatric, low	0.167	18	1,244	11.60%	19	281	11.01%	12	1,081	13.06%	18	2,606	12.09%
Pulmonary, very high	1.167	15	201	1.87%	16	43	1.68%	16	145	1.75%	14	389	1.80%
Pulmonary, very high - child	1.465	39	40	0.37%	34	12	0.47%	40	31	0.37%	39	83	0.39%
Pulmonary, high	0.593	49	22	0.21%	47	7	0.27%	45	24	0.29%	48	53	0.25%
Pulmonary, medium	0.475	17	441	4.11%	11	122	4.78%	14	366	4.42%	16	929	4.31%
Pulmonary, low	0.178	8	1,963	18.30%	10	381	14.92%	8	1,295	15.65%	9	3,639	16.88%
Renal, extra high	3.856	6	103	0.96%	8	22	0.86%	9	55	0.66%	7	180	0.84%
Renal, very high	0.489	28	289	2.69%	28	68	2.66%	29	216	2.61%	29	573	2.66%
Renal, low to medium	0.132	34	609	5.68%	39	99	3.88%	37	389	4.70%	36	1,097	5.08%
Skeletal, medium	0.308	14	794	7.40%	15	165	6.46%	15	559	6.75%	13	1,518	7.01%
Skeletal, very low to low	0.149	12	1,704	15.89%	14	352	13.79%	10	1,248	15.08%	12	3,304	15.33%
Skin, low - high	0.254	42	182	1.70%	40	45	1.76%	41	156	1.88%	41	383	1.78%
Skin, very low	0.090	37	781	7.28%	37	158	6.19%	36	577	6.97%	37	1,516	7.03%
Substance abuse, very low to low	0.153	25	1,019	9.50%	20	295	11.56%	25	787	9.51%	24	2,101	9.75%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,704	15.89%	N/A	475	18.61%	N/A	1,501	18.14%	N/A	3,680	17.07%
Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	2	3.03%	N/A	2	2.56%	N/A	0	0.00%	N/A	4	1.80%
Age 5 to 14 Female	0.660	N/A	1	1.52%	N/A	1	1.28%	N/A	2	2.56%	N/A	4	1.80%
Age 5 to 14 Male	0.572	N/A	4	6.06%	N/A	5	6.41%	N/A	8	10.26%	N/A	17	7.66%
Age 15 to 24 Female	0.746	N/A	7	10.61%	N/A	5	6.41%	N/A	4	5.13%	N/A	16	7.21%
Age 15 to 24 Male	0.523	N/A	1	1.52%	N/A	7	8.97%	N/A	6	7.69%	N/A	14	6.31%
Age 25 to 44 Female	1.154	N/A	7	10.61%	N/A	12	15.38%	N/A	13	16.67%	N/A	32	14.41%
Age 25 to 44 Male	0.821	N/A	13	19.70%	N/A	13	16.67%	N/A	11	14.10%	N/A	37	16.67%
Age 45 to 64 Female	1.314	N/A	14	21.21%	N/A	15	19.23%	N/A	18	23.08%	N/A	47	21.77%
Age 45 to 64 Male	1.185	N/A	17	25.76%	N/A	18	23.08%	N/A	16	20.51%	N/A	51	22.97%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Risk Adjustment Results													
Magnolia			Molina			United			Total				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Unscored Members			Unscored Members			Unscored Members			Unscored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Total Members			Total Members			Total Members			Total Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				

Exhibit 3C Mississippi Division of Medicaid Risk Adjustment Results Non-Newborn SSI / Disabled - South Region - Q1 to Q2 2023 Prospective Risk Score June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.077	N/A	7,392	100.00%	N/A	2,249	100.00%	N/A	7,568	100.00%	N/A	17,209	100.00%
Demographic Categories													
Age 1 to 4	0.087	N/A	262	3.41%	N/A	150	6.67%	N/A	256	3.38%	N/A	658	3.82%
Age 5 to 14 Female	0.089	N/A	432	5.84%	N/A	109	4.85%	N/A	402	5.31%	N/A	943	5.48%
Age 5 to 14 Male	0.067	N/A	941	12.73%	N/A	231	10.27%	N/A	913	12.06%	N/A	2,085	12.12%
Age 15 to 24 Female	0.108	N/A	354	4.79%	N/A	154	6.85%	N/A	385	5.09%	N/A	893	5.19%
Age 15 to 24 Male	0.000	N/A	612	8.28%	N/A	261	11.61%	N/A	688	9.06%	N/A	1,559	9.06%
Age 25 to 44 Female	0.206	N/A	719	9.73%	N/A	192	8.54%	N/A	771	10.19%	N/A	1,682	9.77%
Age 25 to 44 Male	0.053	N/A	770	10.42%	N/A	208	9.25%	N/A	838	11.07%	N/A	1,816	10.55%
Age 45 to 64 Female	0.109	N/A	1,924	26.03%	N/A	476	21.16%	N/A	1,846	24.39%	N/A	4,246	24.67%
Age 45 to 64 Male	0.111	N/A	1,366	18.48%	N/A	465	20.68%	N/A	1,456	19.24%	N/A	3,287	19.10%
Age 65 and Older Male and Female	0.006	N/A	22	0.30%	N/A	3	0.13%	N/A	15	0.20%	N/A	40	0.23%
Duration Categories													
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A	30	0.41%	N/A	34	1.51%	N/A	51	0.67%	N/A	115	0.67%
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A	47	0.64%	N/A	45	2.00%	N/A	62	0.82%	N/A	154	0.89%
Diagnosis Period Duration, 10 to 12 Months	0.000	N/A	7,315	98.96%	N/A	2,170	96.49%	N/A	7,455	98.51%	N/A	16,940	98.44%
Disease Categories													
Cancer, very high	4.640	7	57	0.77%	7	17	0.76%	12	43	0.57%	8	117	0.68%
Cancer, high	1.263	21	110	1.49%	13	42	1.87%	24	97	1.28%	22	249	1.45%
Cancer, medium	0.649	30	131	1.77%	28	39	1.73%	27	159	2.10%	29	329	1.91%
Cancer, low	0.148	46	91	1.23%	45	31	1.38%	46	87	1.15%	46	209	1.21%
Cardiovascular, very high	1.401	33	53	0.72%	41	6	0.27%	34	41	0.54%	33	100	0.58%
Cardiovascular, medium	0.570	2	776	10.50%	2	256	11.38%	2	730	9.65%	2	1,762	10.24%
Cardiovascular, medium - child	0.188	51	34	0.46%	47	13	0.58%	51	26	0.34%	51	473	0.42%
Cardiovascular, low	0.192	19	799	10.81%	20	238	10.58%	19	808	10.68%	19	1,845	10.72%
Cardiovascular, extra low	0.106	10	2,236	30.25%	11	558	24.81%	7	2,312	30.55%	9	5,106	29.67%
Cerebrovascular, low	0.153	43	200	2.71%	42	54	2.40%	43	163	2.15%	43	417	2.42%
CNS, medium to high	0.589	16	322	4.36%	16	85	3.78%	17	294	3.88%	16	701	4.07%
CNS, high - child	1.358	42	27	0.37%	43	5	0.22%	39	27	0.36%	42	59	0.34%
CNS, low	0.218	4	1,534	20.75%	6	415	18.45%	4	1,486	19.64%	4	3,435	19.96%
DD, low to medium	0.153	36	393	5.32%	35	111	4.94%	35	374	4.94%	37	878	5.10%
Diabetes, type 1 high	1.267	41	29	0.39%	51	0	0.00%	45	16	0.21%	44	45	0.26%
Diabetes, type 1 medium	0.883	34	96	1.30%	36	24	1.07%	33	86	1.14%	32	1,206	7.02%
Diabetes, type 2 medium	0.416	11	514	6.95%	12	136	6.05%	16	419	5.54%	13	1,069	6.21%
Diabetes, type 2 low	0.177	23	763	10.32%	25	173	7.69%	22	736	9.73%	23	1,672	9.72%
Eye, low	0.142	47	72	0.97%	50	12	0.53%	48	72	0.95%	48	156	0.91%
Eye, very low	0.107	32	700	9.47%	40	120	5.34%	38	459	6.07%	35	1,279	7.43%
Genital, extra low	0.070	45	327	4.42%	44	77	3.42%	44	308	4.07%	45	712	4.14%
Gastro, medium to high	0.523	6	571	7.72%	5	174	7.74%	6	578	7.61%	6	1,321	7.68%
Gastro, high - child	1.264	31	65	0.88%	33	15	0.67%	30	67	0.89%	31	147	0.85%
Gastro, low	0.127	15	1,519	20.55%	18	379	16.85%	15	1,387	18.33%	15	3,285	19.09%
Hematological, very high to extra high	1.633	26	68	0.92%	31	13	0.58%	28	63	0.83%	28	144	0.84%
Hematological, medium	0.705	29	124	1.68%	26	43	1.91%	31	113	1.49%	30	280	1.63%
Hematological, low	0.491	37	122	1.65%	32	41	1.82%	36	114	1.51%	36	277	1.61%
AIDS, high	1.699	5	181	2.45%	4	59	2.62%	5	189	2.50%	5	429	2.49%
HIV, medium	1.210	44	21	0.28%	30	18	0.80%	41	28	0.37%	37	67	0.39%
Infectious, low to medium	0.435	24	298	4.03%	17	112	4.98%	21	353	4.66%	21	763	4.43%
Metabolic, high	1.035	22	132	1.79%	23	30	1.33%	23	123	1.63%	24	285	1.66%
Metabolic, high - child	0.158	50	46	0.62%	49	11	0.49%	50	45	0.59%	50	102	0.59%
Metabolic, medium	0.396	25	310	4.19%	22	81	3.60%	25	277	3.66%	25	668	3.88%
Metabolic, very low	0.138	27	783	10.59%	24	223	9.92%	29	708	9.36%	27	1,714	9.98%
Pregnancy, incomplete	0.395	49	21	0.28%	48	5	0.22%	49	24	0.32%	49	50	0.29%
Psychiatric, high	0.677	3	594	8.04%	3	177	7.87%	3	583	7.70%	3	1,354	7.87%
Psychiatric, medium low to medium	0.264	1	2,337	31.62%	1	616	27.39%	1	2,284	30.18%	1	5,237	30.43%
Psychiatric, low	0.167	18	1,047	14.16%	19	282	12.54%	13	1,167	15.42%	14	2,498	14.50%
Pulmonary, very high	1.167	9	203	2.75%	10	55	2.45%	9	196	2.59%	10	454	2.64%
Pulmonary, very high - child	1.465	40	26	0.35%	34	12	0.53%	42	17	0.22%	41	55	0.32%
Pulmonary, high	0.593	48	16	0.22%	46	5	0.22%	47	19	0.25%	47	40	0.23%
Pulmonary, medium	0.475	17	369	4.99%	9	136	6.05%	18	357	4.72%	17	862	5.01%
Pulmonary, low	0.178	8	1,398	18.91%	8	370	16.45%	8	1,334	17.63%	7	3,102	18.03%
Renal, extra high	3.856	14	51	0.69%	28	7	0.31%	14	47	0.62%	18	105	0.61%
Renal, very high	0.489	28	214	2.90%	27	62	2.76%	26	217	2.87%	26	493	2.86%
Renal, low to medium	0.132	38	425	5.75%	38	115	5.11%	37	382	5.05%	38	922	5.36%
Skeletal, medium	0.308	12	659	8.92%	14	165	7.34%	11	660	8.72%	12	1,464	8.62%
Skeletal, very low to low	0.149	13	1,361	18.41%	15	337	14.98%	10	1,473	19.46%	11	3,171	18.43%
Skin, low - high	0.254	39	151	2.04%	39	59	2.62%	40	138	1.82%	39	348	2.02%
Skin, very low	0.090	35	700	9.47%	37	174	7.74%	32	675	8.92%	34	1,549	9.00%
Substance abuse, very low to low	0.153	20	910	12.31%	21	283	12.58%	20	1,006	13.29%	20	2,199	12.78%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,154	15.61%	N/A	448	19.92%	N/A	1,270	16.78%	N/A	2,872	16.69%
Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 4	1.113	N/A	3	3.33%	N/A	0	0.00%	N/A	6	5.36%	N/A	9	3.21%
Age 5 to 14 Female	0.660	N/A	5	5.56%	N/A	3	3.85%	N/A	9	8.04%	N/A	17	6.07%
Age 5 to 14 Male	0.572	N/A	8	8.89%	N/A	6	7.69%	N/A	9	8.04%	N/A	23	8.21%
Age 15 to 24 Female	0.746	N/A	4	4.44%	N/A	5	6.41%	N/A	2	1.79%	N/A	11	3.93%
Age 15 to 24 Male	0.523	N/A	9	10.00%	N/A	6	7.69%	N/A	4	3.57%	N/A	19	6.79%
Age 25 to 44 Female	1.154	N/A	12	13.33%	N/A	11	14.10%	N/A	13	11.61%	N/A	36	12.88%
Age 25 to 44 Male	0.821	N/A	9	10.00%	N/A	9	11.54%	N/A	12	10.71%	N/A	30	10.71%
Age 45 to 64 Female	1.314	N/A	21	23.33%	N/A	18	23.08%	N/A	28	25.00%	N/A	67	23.93%
Age 45 to 64 Male	1.185	N/A	19	21.11%	N/A	20	25.64%	N/A	29	25.89%	N/A	68	24.29%
Age 65 and Older Male and Female	1.046	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Risk Adjustment Results													
Scored Members													
Member Months		7,392		2,249			7,568			17,209			
Unadjusted Plan Factor		1.151		1.072			1.093			1.115			
Budget Neutral Plan Factor		1.032		0.961			0.980			1.000			
Unscored Members													
Member Months		90		78			112			280			
Unadjusted Plan Factor		1.003		1.022			1.048			1.026			
Budget Neutral Plan Factor		0.977		0.996			1.021			1.000			
Total Members													
Member Months		7,482		2,327			7,680			17,489			
Unadjusted Plan Factor		1.149		1.072			1.092			1.114			
Budget Neutral Plan Factor		1.032		0.962			0.981			1.000			

Exhibit 3D

Mississippi Division of Medicaid

Risk Adjustment Results

MA Adult - North Region - C1 to C2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	3,427	100.00%	N/A	2,056	100.00%	N/A	3,161	100.00%	N/A	8,644	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	255	7.44%	N/A	269	13.08%	N/A	306	9.68%	N/A	830	9.60%
Age 15 to 24 Male	0.000	N/A	10	0.29%	N/A	6	0.29%	N/A	8	0.25%	N/A	24	0.28%
Age 25 to 44 Female	0.236	N/A	2,546	74.29%	N/A	1,489	72.42%	N/A	2,279	72.10%	N/A	6,314	73.04%
Age 25 to 44 Male	0.058	N/A	202	5.89%	N/A	123	5.98%	N/A	197	6.23%	N/A	522	6.04%
Age 45 and Older Female	0.245	N/A	344	10.04%	N/A	135	6.57%	N/A	303	9.59%	N/A	782	9.05%
Age 45 and Older Male	0.365	N/A	70	2.04%	N/A	34	1.65%	N/A	68	2.15%	N/A	172	1.99%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	197	5.75%	N/A	210	10.21%	N/A	200	6.33%	N/A	607	7.02%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	98	2.86%	N/A	72	3.50%	N/A	111	3.51%	N/A	281	3.25%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,132	91.39%	N/A	1,774	86.28%	N/A	2,850	90.16%	N/A	7,756	89.73%
Disease Categories													
Cancer, high to very high	3.752	15	17	0.50%	18	7	0.34%	11	20	0.63%	14	44	0.51%
Cancer, medium	0.997	22	36	1.05%	23	19	0.92%	26	28	0.89%	23	83	0.96%
Cancer, low	0.364	36	15	0.44%	37	7	0.34%	37	12	0.38%	36	34	0.39%
Cardiovascular, very high	1.914	37	2	0.06%	38	1	0.05%	39	1	0.03%	39	4	0.05%
Cardiovascular, medium	0.601	11	145	4.23%	7	83	4.04%	13	121	3.83%	10	349	4.04%
Cardiovascular, low	0.315	16	177	5.16%	15	99	4.82%	17	162	5.12%	17	438	5.07%
Cardiovascular, extra low	0.122	3	1,009	29.44%	5	478	23.25%	4	864	27.33%	4	2,351	27.20%
CNS, medium to high	0.836	27	34	0.99%	36	5	0.24%	25	35	1.11%	28	74	0.86%
CNS, low	0.419	8	219	6.39%	10	116	5.64%	6	228	7.21%	8	563	6.51%
Diabetes, type 1 high	2.432	39	1	0.03%	35	2	0.10%	38	1	0.03%	38	4	0.05%
Diabetes, type 1 medium	1.612	17	34	0.99%	17	18	0.88%	22	20	0.63%	18	72	0.83%
Diabetes, type 2 medium	1.043	14	64	1.87%	14	30	1.46%	15	56	1.77%	15	150	1.74%
Diabetes, type 2 low	0.375	6	287	8.37%	8	133	6.47%	8	222	7.02%	7	642	7.43%
DD, low to medium	0.613	40	2	0.06%	39	2	0.10%	40	2	0.06%	40	6	0.07%
Eye, very low to low	0.324	26	89	2.60%	31	28	1.36%	30	73	2.31%	29	190	2.20%
Genital, extra low	0.118	24	262	7.65%	24	159	7.73%	29	206	6.52%	25	627	7.25%
Gastro, medium to high	0.933	9	98	2.86%	6	54	2.63%	14	76	2.40%	9	228	2.64%
Gastro, low	0.224	4	547	15.96%	9	219	10.85%	5	444	14.05%	5	1,210	14.00%
Hematological, low to extra high	0.318	32	64	1.87%	30	34	1.65%	32	55	1.74%	31	153	1.77%
AIDS, high	1.445	13	48	1.40%	16	21	1.02%	10	55	1.74%	13	124	1.43%
HIV, medium	1.320	38	2	0.06%	40	0	0.00%	36	7	0.22%	37	9	0.10%
Infectious, low to medium	0.578	19	86	2.51%	22	38	1.85%	21	60	1.90%	19	184	2.13%
Metabolic, high	0.857	29	27	0.79%	28	16	0.78%	19	43	1.36%	26	86	0.99%
Metabolic, medium	0.393	34	37	1.08%	32	19	0.92%	34	37	1.17%	34	93	1.08%
Metabolic, very low	0.138	30	158	4.61%	29	82	3.99%	33	112	3.54%	32	352	4.07%
Pregnancy, complete	0.160	18	335	9.78%	13	280	13.62%	16	356	11.26%	16	971	11.23%
Pregnancy, incomplete	0.997	2	147	4.29%	1	100	4.86%	3	107	3.39%	2	354	4.10%
Psychiatric, high	0.972	28	26	0.76%	26	18	0.88%	28	27	0.85%	27	71	0.82%
Psychiatric, medium	0.513	23	64	1.87%	21	43	2.09%	20	70	2.21%	22	177	2.05%
Psychiatric, medium low	0.321	5	367	10.71%	3	216	10.51%	2	385	12.18%	3	968	11.20%
Psychiatric, low	0.212	7	475	13.86%	4	279	13.57%	7	435	13.75%	6	1,189	13.76%
Pulmonart, medium to high	0.600	20	75	2.19%	20	37	1.80%	24	50	1.58%	21	162	1.87%
Pulmonary, low	0.227	10	390	11.38%	11	203	9.87%	12	325	10.28%	11	918	10.62%
Renal, medium to extra high	0.855	33	22	0.64%	27	19	0.92%	27	31	0.98%	30	72	0.83%
Renal, low	0.304	31	69	2.01%	33	24	1.17%	31	60	1.90%	33	153	1.73%
Skeletal, medium	0.586	12	132	3.85%	12	77	3.75%	9	138	4.37%	12	347	4.01%
Skeletal, very low to low	0.362	1	548	15.99%	2	245	11.92%	1	495	15.66%	1	1,288	14.90%
Skin, low to high	0.941	35	11	0.32%	34	7	0.34%	35	13	0.41%	35	31	0.36%
Skin, very low	0.132	25	220	6.42%	25	140	6.81%	23	234	7.40%	24	594	6.87%
Substance abuse, low	0.289	21	130	3.79%	19	80	3.89%	18	136	4.30%	20	346	4.00%
Population Statistics													
No Classified Disease Categories	N/A	N/A	942	27.49%	N/A	642	31.23%	N/A	902	28.54%	N/A	2,486	28.76%

	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	15	5.88%	N/A	24	10.21%	N/A	21	7.89%	N/A	60	7.94%
Age 15 to 24 Male	0.514	N/A	4	1.57%	N/A	2	0.85%	N/A	4	1.50%	N/A	10	1.32%
Age 25 to 44 Female	0.989	N/A	180	70.59%	N/A	146	62.13%	N/A	161	60.53%	N/A	487	64.42%
Age 25 to 44 Male	0.770	N/A	28	10.98%	N/A	33	14.04%	N/A	36	13.53%	N/A	97	12.83%
Age 45 and Older Female	1.353	N/A	18	7.06%	N/A	20	8.51%	N/A	34	12.78%	N/A	72	9.52%
Age 45 and Older Male	1.362	N/A	10	3.92%	N/A	10	4.26%	N/A	10	3.76%	N/A	30	3.97%

Risk Adjustment Results									
		Magnolia		Molina	United		Total		
Scored Members									
Member Months		3,427		2,056	3,161		8,644		
Unadjusted Plan Factor		1.030		0.964	1.021		1.011		
Budget Neutral Plan Factor		1.018		0.954	1.010		1.000		
Unscored Members									
Member Months		255		235	266		756		
Unadjusted Plan Factor		0.994		0.994	1.008		0.999		
Budget Neutral Plan Factor		0.995		0.995	1.009		1.000		
Total Members									
Member Months		3,682		2,291	3,427		9,400		
Unadjusted Plan Factor		1.027		0.968	1.020		1.010		
Budget Neutral Plan Factor		1.017		0.958	1.010		1.000		

Exhibit 3E

Mississippi Division of Medicaid

Risk Adjustment Results

MA Adult - Central Region - Q1 to Q2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	3,914	100.00%	N/A	2,644	100.00%	N/A	3,710	100.00%	N/A	10,268	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	255	6.52%	N/A	267	10.10%	N/A	306	8.25%	N/A	828	8.06%
Age 15 to 24 Male	0.000	N/A	7	0.18%	N/A	5	0.19%	N/A	16	0.43%	N/A	28	0.27%
Age 25 to 44 Female	0.236	N/A	2,967	75.80%	N/A	2,032	76.85%	N/A	2,704	72.88%	N/A	7,703	75.02%
Age 25 to 44 Male	0.058	N/A	183	4.68%	N/A	138	5.22%	N/A	202	5.44%	N/A	523	5.09%
Age 45 and Older Female	0.245	N/A	413	10.55%	N/A	150	5.67%	N/A	398	10.73%	N/A	961	9.36%
Age 45 and Older Male	0.365	N/A	89	2.27%	N/A	52	1.97%	N/A	84	2.26%	N/A	225	2.19%
Duration Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	248	6.34%	N/A	218	8.25%	N/A	252	6.79%	N/A	718	6.99%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	127	3.24%	N/A	106	4.01%	N/A	169	4.56%	N/A	402	3.92%
Diagnosis Period Duration, 12 Months	0.000	N/A	3,539	90.42%	N/A	2,320	87.75%	N/A	3,289	88.65%	N/A	9,148	89.09%
Disease Categories													
Cancer, high to very high	3.752	17	16	0.41%	18	9	0.34%	19	14	0.38%	17	39	0.38%
Cancer, medium	0.997	26	37	0.95%	26	21	0.79%	25	34	0.92%	25	92	0.90%
Cancer, low	0.364	37	14	0.36%	39	10	0.38%	39	16	0.43%	38	40	0.39%
Cardiovascular, very high	1.914	39	1	0.03%	38	2	0.08%	37	4	0.11%	39	7	0.07%
Cardiovascular, medium	0.601	12	140	3.58%	12	89	3.37%	12	135	3.64%	12	364	3.54%
Cardiovascular, low	0.315	19	152	3.88%	19	85	3.21%	20	151	4.07%	20	388	3.78%
Cardiovascular, extra low	0.122	3	1,161	29.66%	4	681	25.76%	4	1,069	28.81%	4	2,911	28.35%
CNS, medium to high	0.836	29	35	0.89%	29	19	0.72%	26	40	1.08%	27	94	0.92%
CNS, low	0.419	8	263	6.72%	9	138	5.22%	8	245	6.60%	8	646	6.29%
Diabetes, type 1 high	2.432	38	2	0.05%	37	2	0.08%	38	3	0.08%	37	7	0.07%
Diabetes, type 1 medium	1.612	18	32	0.82%	25	13	0.49%	17	36	0.97%	19	81	0.79%
Diabetes, type 2 medium	1.043	13	80	2.04%	15	40	1.51%	13	76	2.05%	13	196	1.91%
Diabetes, type 2 low	0.375	7	302	7.72%	13	138	5.22%	10	251	6.77%	9	691	6.73%
DD, low to medium	0.613	40	3	0.08%	40	1	0.04%	40	2	0.05%	40	6	0.06%
Eye, very low to low	0.324	24	119	3.04%	32	36	1.36%	27	87	2.35%	28	242	2.36%
Genital, extra low	0.118	27	286	7.31%	24	192	7.26%	29	234	6.31%	26	712	6.93%
Gastro, medium to high	0.933	9	103	2.63%	6	78	2.95%	7	113	3.05%	7	294	2.86%
Gastro, low	0.224	5	573	14.64%	7	305	11.54%	6	540	14.58%	6	1,418	13.81%
Hematological, low to extra high	0.318	30	84	2.15%	30	43	1.63%	31	76	2.05%	32	203	1.98%
AIDS, high	1.445	14	52	1.33%	14	29	1.10%	14	52	1.40%	14	133	1.30%
HIV, medium	1.320	35	13	0.33%	36	4	0.15%	36	10	0.27%	36	27	0.26%
Infectious, low to medium	0.578	22	72	1.84%	21	45	1.70%	22	74	1.99%	23	191	1.86%
Metabolic, high	0.857	31	31	0.79%	28	19	0.72%	32	26	0.70%	30	76	0.74%
Metabolic, medium	0.393	33	52	1.33%	34	27	1.02%	34	44	1.19%	33	123	1.20%
Metabolic, very low	0.138	34	133	3.40%	33	84	3.18%	33	126	3.40%	34	343	3.34%
Pregnancy, complete	0.160	16	392	10.02%	10	359	13.58%	16	409	11.02%	15	1,160	11.30%
Pregnancy, incomplete	0.997	4	138	3.53%	1	140	5.30%	2	158	4.26%	2	436	4.25%
Psychiatric, high	0.972	20	48	1.23%	22	25	0.95%	23	42	1.13%	22	115	1.12%
Psychiatric, medium	0.513	23	81	2.07%	20	52	1.97%	21	87	2.35%	21	220	2.14%
Psychiatric, medium low	0.321	2	471	12.03%	3	262	10.67%	3	416	11.21%	3	1,169	11.38%
Psychiatric, low	0.212	6	561	14.33%	5	365	13.80%	5	591	15.93%	5	1,517	14.77%
Pulmonary, medium to high	0.600	21	73	1.87%	17	59	2.23%	18	88	2.37%	18	220	2.14%
Pulmonary, low	0.227	11	403	10.30%	11	239	9.04%	11	407	10.97%	11	1,049	10.22%
Renal, medium to extra high	0.855	28	36	0.92%	27	24	0.91%	30	31	0.84%	29	91	0.89%
Renal, low	0.304	32	82	2.10%	31	41	1.55%	28	91	2.45%	31	214	2.08%
Skeletal, medium	0.586	10	160	4.09%	8	102	3.86%	9	173	4.68%	10	435	4.24%
Skeletal, very low to low	0.362	1	564	14.41%	2	288	10.89%	1	500	13.48%	1	1,352	13.17%
Skin, low to high	0.941	36	18	0.46%	35	9	0.34%	35	17	0.46%	35	44	0.43%
Skin, very low	0.132	25	287	7.33%	23	176	6.66%	24	277	7.47%	24	740	7.21%
Substance abuse, low	0.289	15	237	6.06%	16	138	5.22%	15	229	6.17%	16	604	5.88%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,134	28.97%	N/A	845	31.96%	N/A	1,055	28.44%	N/A	3,034	29.55%

	Risk Weight	Unscored Members											
		Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.922	N/A	14	5.22%	N/A	18	6.92%	N/A	28	9.76%	N/A	60	7.36%
Age 15 to 24 Male	0.514	N/A	2	0.75%	N/A	2	0.77%	N/A	10	3.48%	N/A	14	1.72%
Age 25 to 44 Female	0.989	N/A	178	66.42%	N/A	171	65.77%	N/A	174	60.63%	N/A	523	64.17%
Age 25 to 44 Male	0.770	N/A	44	16.42%	N/A	37	14.23%	N/A	34	11.85%	N/A	115	14.11%
Age 45 and Older Female	1.353	N/A	21	7.84%	N/A	22	8.46%	N/A	32	11.15%	N/A	75	9.20%
Age 45 and Older Male	1.362	N/A	9	3.36%	N/A	10	3.85%	N/A	9	3.14%	N/A	28	3.44%

		Risk Adjustment Results			
		Magnolia	Molina	United	Total
Scored Members					
Member Months		3,914	2,644	3,710	10,268
Unadjusted Plan Factor		1.019	0.958	1.036	1.010
Budget Neutral Plan Factor		1.009	0.949	1.026	1.000
Unscored Members					
Member Months		268	260	287	815
Unadjusted Plan Factor		0.987	0.995	0.992	0.991
Budget Neutral Plan Factor		0.996	1.003	1.001	1.000
Total Members					
Member Months		4,182	2,904	3,997	11,083
Unadjusted Plan Factor		1.017	0.962	1.033	1.008
Budget Neutral Plan Factor		1.008	0.954	1.024	1.000

Exhibit 3F

Mississippi Division of Medicaid

Risk Adjustment Results

MA Adult - South Region - C1 to C2 2023 Prospective Risk Scores

June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.142	N/A	4,828	100.00%	N/A	3,986	100.00%	N/A	5,894	100.00%	N/A	14,708	100.00%
Demographic Categories													
Age 15 to 24 Female	0.330	N/A	318	6.59%	N/A	401	10.06%	N/A	432	7.33%	N/A	1,151	7.83%
Age 15 to 24 Male	0.000	N/A	14	0.29%	N/A	21	0.53%	N/A	14	0.24%	N/A	49	0.33%
Age 25 to 44 Female	0.236	N/A	3,436	71.17%	N/A	2,817	70.67%	N/A	4,123	69.95%	N/A	10,376	70.55%
Age 25 to 44 Male	0.058	N/A	395	8.18%	N/A	327	8.20%	N/A	500	8.48%	N/A	1,222	8.31%
Age 45 and Older Female	0.245	N/A	530	10.98%	N/A	318	7.98%	N/A	611	10.37%	N/A	1,459	9.92%
Age 45 and Older Male	0.365	N/A	135	2.80%	N/A	102	2.56%	N/A	214	3.63%	N/A	451	3.07%
Duraction Categories													
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A	229	4.74%	N/A	209	5.24%	N/A	314	5.33%	N/A	752	5.11%
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A	196	4.06%	N/A	164	4.11%	N/A	209	3.56%	N/A	569	3.87%
Diagnosis Period Duration, 12 Months	0.000	N/A	4,403	91.20%	N/A	3,613	90.64%	N/A	5,371	91.13%	N/A	13,387	91.02%
Disease Categories													
Cancer, high to very high	3.752	24	12	0.25%	21	13	0.33%	21	22	0.37%	22	47	0.32%
Cancer, medium	0.997	32	34	0.70%	25	31	0.78%	24	56	0.95%	24	121	0.82%
Cancer, low	0.364	36	34	0.70%	38	20	0.50%	39	29	0.49%	38	83	0.56%
Cardiovascular, very high	1.914	39	3	0.06%	37	6	0.15%	38	6	0.10%	39	15	0.10%
Cardiovascular, medium	0.601	13	169	3.50%	13	125	3.14%	13	213	3.61%	13	507	3.45%
Cardiovascular, low	0.315	15	249	5.16%	16	200	5.02%	17	300	5.09%	16	749	5.09%
Cardiovascular, extra low	0.122	8	1,212	25.10%	7	879	22.05%	6	1,555	26.38%	8	3,646	24.79%
CNS, medium to high	0.836	27	48	0.99%	32	21	0.53%	25	66	1.12%	28	135	0.92%
CNS, low	0.419	5	412	8.53%	6	302	7.58%	5	508	8.62%	5	1,222	8.31%
Diabetes, type 1 high	2.432	37	5	0.10%	34	7	0.18%	37	7	0.12%	36	19	0.13%
Diabetes, type 1 medium	1.612	20	41	0.85%	20	32	0.80%	19	55	0.93%	20	128	0.87%
Diabetes, type 2 medium	1.043	14	93	1.93%	22	42	1.05%	14	111	1.88%	14	246	1.67%
Diabetes, type 2 low	0.375	10	309	6.40%	14	190	4.77%	12	360	6.11%	12	859	5.84%
DD, low to medium	0.613	40	6	0.12%	40	4	0.10%	40	5	0.08%	40	15	0.10%
Eye, very low to low	0.324	25	135	2.80%	35	49	1.23%	31	125	2.12%	30	309	2.10%
Genital, extra low	0.118	29	322	6.67%	26	255	6.40%	26	426	7.23%	27	1,003	6.82%
Gastro, medium to high	0.933	3	192	3.98%	3	170	4.26%	3	260	4.41%	3	622	4.23%
Gastro, low	0.224	6	760	15.74%	9	429	10.76%	7	809	13.73%	7	1,998	13.58%
Hematological, low to extra high	0.318	28	119	2.46%	27	93	2.33%	32	100	1.70%	31	312	2.12%
AIDS, high	1.445	16	54	1.12%	18	38	0.95%	16	70	1.19%	17	162	1.10%
HIV, medium	1.320	38	9	0.19%	39	4	0.10%	36	13	0.22%	37	26	0.18%
Infectious, low to medium	0.578	17	134	2.78%	17	100	2.51%	18	154	2.61%	19	388	2.64%
Metabolic, high	0.857	30	44	0.91%	33	20	0.50%	30	48	0.81%	32	112	0.76%
Metabolic, medium	0.393	33	71	1.47%	30	48	1.20%	35	57	0.97%	33	176	1.20%
Metabolic, very low	0.138	35	144	2.98%	36	113	2.83%	33	193	3.27%	35	450	3.06%
Pregnancy, complete	0.160	21	409	8.47%	12	487	12.22%	20	539	9.14%	18	1,435	9.76%
Pregnancy, incomplete	0.997	7	167	3.46%	4	152	3.81%	8	163	2.77%	6	482	3.28%
Psychiatric, high	0.972	23	47	0.97%	28	28	0.70%	27	48	0.81%	25	123	0.84%
Psychiatric, medium	0.513	19	137	2.84%	15	123	3.09%	15	201	3.41%	15	461	3.13%
Psychiatric, medium low	0.321	2	672	13.92%	2	520	13.05%	2	853	14.47%	2	2,045	13.90%
Psychiatric, low	0.212	4	843	17.46%	5	664	16.86%	4	1,110	18.83%	4	2,517	17.79%
Pulmonart, medium to high	0.600	18	123	2.55%	19	88	2.21%	22	131	2.22%	21	342	2.33%
Pulmonary, low	0.227	11	504	10.44%	11	398	9.98%	11	629	10.67%	11	1,531	10.41%
Renal, medium to extra high	0.855	26	49	1.01%	24	37	0.93%	28	52	0.88%	26	138	0.94%
Renal, low	0.304	31	122	2.53%	29	88	2.21%	29	143	2.43%	29	353	2.40%
Skeletal, medium	0.586	9	212	4.39%	8	173	4.34%	9	264	4.48%	9	649	4.41%
Skeletal, very low to low	0.362	1	751	15.56%	1	489	12.27%	1	1,003	17.02%	1	2,243	15.25%
Skin, low to high	0.941	34	24	0.50%	31	19	0.48%	34	27	0.46%	34	70	0.48%
Skin, very low	0.132	22	361	7.48%	23	280	7.02%	23	445	7.55%	23	1,086	7.38%
Substance abuse, low	0.289	12	394	8.16%	10	319	8.00%	10	532	9.03%	10	1,245	8.46%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,387	28.73%	N/A	1,262	31.66%	N/A	1,614	27.38%	N/A	4,263	28.98%

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 15 to 24 Female	0.822	N/A	25	8.87%	N/A	17	7.11%	N/A	33	10.38%	N/A	75	8.94%
Age 15 to 24 Male	0.514	N/A	2	0.71%	N/A	3	1.26%	N/A	4	1.26%	N/A	9	1.07%
Age 25 to 44 Female	0.989	N/A	195	69.15%	N/A	151	63.18%	N/A	194	61.01%	N/A	540	64.36%
Age 25 to 44 Male	0.770	N/A	33	11.70%	N/A	33	13.81%	N/A	53	16.67%	N/A	119	14.18%
Age 45 and Older Female	1.353	N/A	12	4.26%	N/A	22	9.21%	N/A	21	6.60%	N/A	55	6.56%
Age 45 and Older Male	1.362	N/A	15	5.32%	N/A	13	5.44%	N/A	13	4.09%	N/A	41	4.89%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		4,828	3,986	5,894
Unadjusted Plan Factor		1.054	0.994	1.065
Budget Neutral Plan Factor		1.011	0.954	1.022
Unscored Members				
Member Months		282	239	318
Unadjusted Plan Factor		0.990	1.002	0.979
Budget Neutral Plan Factor		1.000	1.013	0.990
Total Members				
Member Months		5,110	4,225	6,212
Unadjusted Plan Factor		1.050	0.994	1.060
Budget Neutral Plan Factor		1.011	0.957	1.020

Exhibit 3G Mississippi Division of Medicaid Risk Adjustment Results MA Children - North Region - Q1 to Q2 2023 Prospective Risk Score June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.539	N/A	23,422	100.00%	N/A	10,177	100.00%	N/A	21,503	100.00%	N/A	55,102	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	3,268	13.95%	N/A	1,996	19.61%	N/A	3,197	14.87%	N/A	8,461	15.36%
Age 1 to 5 Female	0.068	N/A	3,364	14.36%	N/A	2,031	19.96%	N/A	3,203	14.90%	N/A	8,598	15.60%
Age 6 to 12 Male	0.047	N/A	4,239	18.10%	N/A	1,790	17.59%	N/A	3,830	17.81%	N/A	9,859	17.89%
Age 6 to 12 Female	0.049	N/A	4,460	19.04%	N/A	1,798	17.67%	N/A	3,924	18.25%	N/A	10,182	18.48%
Age 13 to 18 Male	0.000	N/A	3,969	16.95%	N/A	1,243	12.21%	N/A	3,603	16.76%	N/A	8,815	16.00%
Age 13 to 18 Female	0.297	N/A	4,122	17.60%	N/A	1,319	12.96%	N/A	3,746	17.42%	N/A	9,187	16.67%
Disease Categories													
Cancer, very high	27.677	40	0	0.00%	22	1	0.01%	32	1	0.00%	31	2	0.00%
Cancer, high	4.235	28	9	0.04%	27	4	0.04%	24	14	0.07%	26	27	0.05%
Cancer, medium	3.414	19	23	0.10%	30	4	0.04%	20	21	0.10%	21	48	0.09%
Cancer, low	0.629	39	2	0.01%	36	2	0.02%	40	3	0.01%	40	7	0.01%
Cardiovascular, very high	5.998	33	2	0.01%	39	0	0.00%	35	2	0.01%	35	4	0.01%
Cardiovascular, medium	0.760	21	90	0.38%	20	42	0.40%	23	78	0.36%	22	210	0.38%
Cardiovascular, extra low to low	0.593	3	1,169	4.99%	3	379	3.72%	3	1,129	5.25%	3	2,677	4.86%
Cerebrovascular, low	0.316	38	7	0.03%	38	2	0.02%	38	9	0.04%	39	18	0.03%
CNS, high	10.392	29	3	0.01%	31	1	0.01%	25	5	0.02%	29	9	0.02%
CNS, medium	1.647	30	15	0.06%	28	10	0.10%	30	24	0.11%	30	49	0.09%
CNS, low	0.575	9	356	1.52%	10	161	1.58%	11	341	1.59%	11	858	1.56%
DD, low to medium	2.162	23	26	0.11%	25	10	0.10%	18	40	0.19%	20	76	0.14%
Diabetes, type 2 low	2.030	5	172	0.73%	9	49	0.48%	8	140	0.65%	8	361	0.66%
Eye, very low to low	0.349	25	145	0.62%	29	43	0.42%	26	127	0.59%	28	315	0.57%
Genital, extra low	0.361	24	151	0.64%	23	66	0.65%	27	121	0.56%	24	338	0.61%
Gastro, high	5.482	20	14	0.06%	16	9	0.09%	16	20	0.09%	17	43	0.08%
Gastro, medium	1.521	22	40	0.17%	24	15	0.15%	21	44	0.20%	23	99	0.18%
Gastro, low	0.386	4	937	4.00%	4	446	4.38%	5	859	3.99%	4	2,242	4.07%
Hematological, low to extra high	0.598	18	135	0.58%	17	73	0.72%	19	141	0.66%	18	349	0.63%
AIDS, high	1.527	17	60	0.26%	18	22	0.22%	22	39	0.18%	19	121	0.22%
HIV, medium	1.204	35	4	0.02%	37	1	0.01%	39	2	0.01%	37	7	0.01%
Infectious, low to medium	0.197	27	227	0.97%	21	150	1.47%	29	210	0.98%	25	587	1.07%
Metabolic, medium to high	1.382	15	107	0.46%	12	52	0.51%	12	130	0.60%	12	289	0.52%
Metabolic, very low	0.506	10	395	1.69%	8	224	2.20%	10	408	1.90%	9	1,027	1.86%
Pregnancy, incomplete	2.708	16	45	0.19%	19	12	0.12%	17	34	0.16%	16	91	0.17%
Psychiatric, high	2.650	34	4	0.02%	32	3	0.03%	31	11	0.05%	32	18	0.03%
Psychiatric, medium	1.509	8	169	0.72%	5	97	0.95%	4	241	1.12%	6	507	0.92%
Psychiatric, medium low	1.218	1	2,737	11.69%	1	893	8.77%	1	2,505	11.65%	1	6,135	11.13%
Psychiatric, low	0.619	6	537	2.29%	6	202	1.98%	6	531	2.47%	5	1,270	2.30%
Pulmonary, high	7.062	13	23	0.10%	11	13	0.13%	9	34	0.16%	10	70	0.13%
Pulmonary, low to medium	0.502	2	2,716	11.60%	2	1,051	10.33%	2	2,436	11.33%	2	6,203	11.26%
Renal, extra high	13.306	40	0	0.00%	39	0	0.00%	41	0	0.00%	41	0	0.00%
Renal, very high	1.565	31	15	0.06%	34	3	0.03%	33	12	0.06%	33	30	0.05%
Renal, medium	0.837	37	5	0.02%	35	3	0.03%	36	10	0.05%	36	18	0.03%
Renal, low	0.295	26	167	0.71%	26	63	0.62%	28	144	0.67%	27	374	0.68%
Skeletal, medium	0.567	11	289	1.23%	13	114	1.12%	15	264	1.23%	14	667	1.21%
Skeletal, low	0.437	12	374	1.60%	15	135	1.33%	13	363	1.69%	13	872	1.58%
Skeletal, very low	0.278	7	1,177	5.03%	7	433	4.25%	7	1,141	5.31%	7	2,751	4.99%
Skin, high	1.516	36	3	0.01%	39	0	0.00%	37	2	0.01%	38	5	0.01%
Skin, very low to low	0.188	14	847	3.62%	14	338	3.32%	14	817	3.80%	15	2,002	3.63%
Substance abuse, very low to low	0.381	32	57	0.24%	33	16	0.16%	34	39	0.18%	34	112	0.20%
Population Statistics													
No Classified Disease Categories	N/A	N/A	14,427	61.60%	N/A	6,605	64.90%	N/A	13,093	60.89%	N/A	34,125	61.93%
Unscored Members													
Risk Weight	Magnolia			Molina			United			Total			
	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	102	20.86%	N/A	76	17.51%	N/A	112	20.25%	N/A	290	19.65%
Age 1 to 5 Female	0.833	N/A	73	14.93%	N/A	82	18.89%	N/A	85	15.37%	N/A	240	16.26%
Age 6 to 12 Male	1.046	N/A	85	17.38%	N/A	83	19.12%	N/A	104	18.81%	N/A	272	18.43%
Age 6 to 12 Female	0.896	N/A	91	18.61%	N/A	75	17.28%	N/A	97	17.54%	N/A	263	17.82%
Age 13 to 18 Male	1.007	N/A	56	11.45%	N/A	61	14.06%	N/A	73	13.20%	N/A	190	12.87%
Age 13 to 18 Female	1.292	N/A	82	16.77%	N/A	57	13.13%	N/A	82	14.83%	N/A	221	14.97%
Risk Adjustment Results													
Magnolia			Molina			United			Total				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Unscored Members			Unscored Members			Unscored Members			Unscored Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				
Total Members			Total Members			Total Members			Total Members				
Member Months			Member Months			Member Months			Member Months				
Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor				
Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor				

Exhibit 3H Mississippi Division of Medicaid Risk Adjustment Results MA Children - Central Region - Q1 to Q2 2023 Prospective Risk Score June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.539	N/A	28,381	100.00%	N/A	13,284	100.00%	N/A	25,184	100.00%	N/A	66,849	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	4,128	14.54%	N/A	2,731	20.56%	N/A	3,891	15.45%	N/A	10,750	16.08%
Age 1 to 5 Female	0.068	N/A	3,936	13.87%	N/A	2,676	20.14%	N/A	3,864	15.34%	N/A	10,476	15.67%
Age 6 to 12 Male	0.047	N/A	5,125	18.06%	N/A	2,298	17.30%	N/A	4,454	17.69%	N/A	11,877	17.77%
Age 6 to 12 Female	0.049	N/A	5,235	18.45%	N/A	2,295	17.28%	N/A	4,469	17.75%	N/A	11,999	17.95%
Age 13 to 18 Male	0.000	N/A	4,804	16.93%	N/A	1,653	12.44%	N/A	4,218	16.75%	N/A	10,675	15.97%
Age 13 to 18 Female	0.297	N/A	5,153	18.16%	N/A	1,631	12.28%	N/A	4,289	17.03%	N/A	11,072	16.56%
Disease Categories													
Cancer, very high	27.677	41	0	0.00%	25	1	0.01%	32	1	0.00%	33	2	0.00%
Cancer, high	4.235	29	9	0.03%	30	4	0.03%	28	10	0.04%	29	23	0.03%
Cancer, medium	3.414	17	39	0.14%	19	12	0.09%	21	18	0.10%	18	77	0.12%
Cancer, low	0.629	40	3	0.01%	39	1	0.01%	39	4	0.02%	41	8	0.01%
Cardiovascular, very high	5.998	35	1	0.00%	40	0	0.00%	35	2	0.01%	37	3	0.00%
Cardiovascular, medium	0.760	26	64	0.23%	24	38	0.29%	26	65	0.26%	27	167	0.25%
Cardiovascular, extra low to low	0.593	3	1,319	4.65%	3	471	3.55%	3	1,202	4.77%	3	2,992	4.48%
Cerebrovascular, low	0.316	39	9	0.03%	37	5	0.04%	41	6	0.02%	40	20	0.03%
CNS, high	10.392	22	7	0.02%	29	2	0.02%	29	4	0.02%	26	13	0.02%
CNS, medium	1.647	28	29	0.10%	28	13	0.10%	22	41	0.16%	25	83	0.12%
CNS, low	0.575	9	443	1.56%	9	211	1.59%	8	420	1.67%	9	1,074	1.61%
DD, low to medium	2.162	19	51	0.18%	23	14	0.11%	18	53	0.21%	19	118	0.18%
Diabetes, type 2 low	2.030	6	193	0.68%	10	59	0.44%	6	180	0.71%	6	432	0.65%
Eye, very low to low	0.349	24	169	0.60%	27	62	0.47%	27	128	0.51%	28	359	0.54%
Genital, extra low	0.361	25	150	0.53%	22	86	0.65%	24	145	0.58%	24	381	0.57%
Gastro, high	5.482	21	15	0.05%	18	8	0.06%	19	20	0.08%	20	43	0.06%
Gastro, medium	1.521	20	57	0.20%	21	21	0.16%	20	61	0.24%	21	139	0.21%
Gastro, low	0.386	4	1,134	4.00%	4	639	4.81%	4	1,109	4.40%	4	2,882	4.31%
Hematological, low to extra high	0.598	18	206	0.73%	16	98	0.74%	17	195	0.77%	17	499	0.75%
AIDS, high	1.527	30	24	0.08%	31	11	0.08%	30	24	0.10%	30	59	0.09%
HIV, medium	1.204	34	11	0.04%	35	6	0.05%	36	9	0.04%	35	26	0.04%
Infectious, low to medium	0.197	27	244	0.86%	20	207	1.56%	25	265	1.05%	23	716	1.07%
Metabolic, medium to high	1.382	14	122	0.43%	15	53	0.40%	15	119	0.47%	15	294	0.44%
Metabolic, very low	0.506	10	496	1.75%	6	312	2.35%	10	411	1.63%	10	1,219	1.82%
Pregnancy, incomplete	2.708	15	50	0.18%	17	20	0.15%	16	48	0.19%	16	118	0.18%
Psychiatric, high	2.650	31	12	0.04%	33	3	0.02%	31	13	0.05%	31	28	0.04%
Psychiatric, medium	1.509	7	233	0.82%	8	85	0.64%	7	218	0.87%	7	536	0.80%
Psychiatric, medium low	1.218	1	3,447	12.15%	1	1,092	8.22%	1	2,998	11.90%	1	7,537	11.27%
Psychiatric, low	0.619	5	680	2.40%	7	233	1.75%	5	599	2.38%	5	1,512	2.26%
Pulmonary, high	7.962	16	19	0.07%	5	25	0.19%	13	25	0.10%	12	69	0.10%
Pulmonary, low to medium	0.502	2	3,439	12.12%	2	1,440	10.84%	2	3,053	12.12%	2	7,932	11.87%
Renal, extra high	13.306	33	1	0.00%	40	0	0.00%	33	2	0.01%	34	3	0.00%
Renal, very high	1.565	36	3	0.01%	34	5	0.04%	37	5	0.02%	36	13	0.02%
Renal, medium	0.837	38	5	0.02%	36	5	0.04%	40	3	0.01%	39	13	0.02%
Renal, low	0.295	23	231	0.81%	26	89	0.67%	23	189	0.75%	22	509	0.75%
Skeletal, medium	0.567	11	423	1.49%	14	140	1.05%	11	351	1.39%	11	914	1.37%
Skeletal, low	0.437	12	469	1.65%	12	206	1.55%	12	417	1.66%	13	1,092	1.63%
Skeletal, very low	0.278	8	994	3.47%	11	407	3.06%	9	844	3.35%	8	2,235	3.34%
Skin, high	1.516	37	3	0.01%	38	1	0.01%	38	5	0.02%	38	9	0.01%
Skin, very low to low	0.188	13	902	3.18%	13	427	3.21%	14	875	3.47%	14	2,204	3.30%
Substance abuse, very low to low	0.381	32	63	0.22%	32	28	0.21%	34	67	0.27%	32	158	0.24%
Population Statistics													
No Classified Disease Categories	N/A	N/A	17,678	62.29%	N/A	8,756	65.91%	N/A	15,653	62.15%	N/A	42,087	62.96%
Unscored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	83	19.48%	N/A	76	15.90%	N/A	95	19.51%	N/A	254	18.26%
Age 1 to 5 Female	0.833	N/A	84	19.72%	N/A	77	16.11%	N/A	92	18.89%	N/A	253	18.19%
Age 6 to 12 Male	1.046	N/A	73	17.14%	N/A	96	20.08%	N/A	78	16.02%	N/A	247	17.76%
Age 6 to 12 Female	0.896	N/A	78	18.31%	N/A	76	15.90%	N/A	82	16.84%	N/A	236	16.97%
Age 13 to 18 Male	1.007	N/A	57	13.38%	N/A	69	14.44%	N/A	70	14.37%	N/A	196	14.09%
Age 13 to 18 Female	1.292	N/A	51	11.97%	N/A	84	17.57%	N/A	70	14.37%	N/A	205	14.74%
Risk Adjustment Results													
	Magnolia			Molina			United			Total			
Scored Members													
Member Months		28,381			13,284			25,184			66,849		
Unadjusted Plan Factor		1.036			0.966			1.044			1.025		
Budget Neutral Plan Factor		1.011			0.942			1.018			1.000		
Unscored Members													
Member Months		426			478			487			1,391		
Unadjusted Plan Factor		0.983			1.011			0.992			0.995		
Budget Neutral Plan Factor		0.987			1.015			0.997			1.000		
Total Members													
Member Months		28,807			13,762			25,671			68,240		
Unadjusted Plan Factor		1.035			0.968			1.043			1.025		
Budget Neutral Plan Factor		1.011			0.945			1.018			1.000		

Exhibit 3I Mississippi Division of Medicaid Risk Adjustment Results MA Children - South Region - Q1 to Q2 2023 Prospective Risk Score June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Regression Intercept	0.539	N/A	29,123	100.00%	N/A	16,947	100.00%	N/A	31,587	100.00%	N/A	77,657	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	4,345	14.92%	N/A	3,549	20.94%	N/A	4,803	15.21%	N/A	12,697	16.35%
Age 1 to 5 Female	0.068	N/A	4,144	14.23%	N/A	3,366	19.86%	N/A	4,571	14.47%	N/A	12,081	15.56%
Age 6 to 12 Male	0.047	N/A	5,414	18.59%	N/A	2,886	17.03%	N/A	5,858	18.55%	N/A	14,158	18.23%
Age 6 to 12 Female	0.049	N/A	5,492	18.86%	N/A	2,928	17.28%	N/A	5,849	18.52%	N/A	14,269	18.37%
Age 13 to 18 Male	0.000	N/A	4,755	16.33%	N/A	2,126	12.54%	N/A	5,207	16.48%	N/A	12,088	15.57%
Age 13 to 18 Female	0.297	N/A	4,973	17.08%	N/A	2,092	12.34%	N/A	5,299	16.78%	N/A	12,364	15.92%
Disease Categories													
Cancer, very high	27.677	40	0	0.00%	38	0	0.00%	32	1	0.00%	34	1	0.00%
Cancer, high	4.235	27	12	0.04%	21	9	0.05%	22	22	0.07%	24	43	0.06%
Cancer, medium	3.414	20	26	0.09%	28	8	0.05%	17	39	0.12%	20	73	0.09%
Cancer, low	0.629	37	10	0.03%	38	0	0.00%	41	4	0.01%	40	14	0.02%
Cardiovascular, very high	5.998	33	4	0.01%	38	0	0.00%	35	2	0.01%	33	6	0.01%
Cardiovascular, medium	0.760	22	100	0.34%	24	47	0.28%	25	103	0.33%	23	250	0.32%
Cardiovascular, extra low to low	0.593	3	1,425	4.89%	3	598	3.53%	3	1,806	5.72%	3	3,829	4.93%
Cerebrovascular, low	0.316	39	6	0.02%	37	5	0.03%	40	11	0.03%	41	22	0.03%
CNS, high	10.392	29	4	0.01%	29	2	0.01%	30	5	0.02%	29	11	0.01%
CNS, medium	1.847	30	20	0.07%	26	21	0.12%	28	37	0.12%	28	78	0.10%
CNS, low	0.575	10	391	1.34%	10	243	1.43%	9	481	1.52%	10	1,115	1.44%
DD, low to medium	2.162	21	40	0.14%	25	16	0.09%	20	45	0.14%	21	101	0.13%
Diabetes, type 2 low	2.030	7	7	0.60%	11	65	0.38%	7	206	0.65%	7	446	0.57%
Eye, very low to low	0.349	24	184	0.63%	27	88	0.52%	27	179	0.57%	27	451	0.58%
Genital, extra low	0.361	26	157	0.54%	20	108	0.64%	24	223	0.71%	26	488	0.63%
Gastro, high	5.482	16	28	0.10%	15	18	0.11%	21	17	0.05%	16	63	0.08%
Gastro, medium	1.521	18	78	0.27%	22	25	0.15%	19	70	0.22%	19	173	0.22%
Gastro, low	0.386	4	1,417	4.87%	4	899	5.30%	5	1,629	5.16%	4	3,945	5.08%
Hematological, low to extra high	0.598	19	198	0.68%	17	125	0.74%	18	204	0.65%	18	527	0.68%
AIDS, high	1.527	28	29	0.10%	30	12	0.07%	31	32	0.10%	30	73	0.09%
HIV, medium	1.204	35	6	0.02%	35	4	0.02%	36	6	0.03%	35	18	0.02%
Infectious, low to medium	0.197	25	302	1.04%	18	265	1.56%	26	351	1.11%	25	918	1.18%
Metabolic, medium to high	1.382	12	157	0.54%	9	114	0.67%	11	188	0.60%	11	459	0.59%
Metabolic, very low	0.506	13	423	1.45%	7	357	2.11%	10	544	1.72%	9	1,324	1.70%
Pregnancy, incomplete	2.708	17	51	0.18%	19	18	0.11%	16	55	0.17%	17	124	0.16%
Psychiatric, high	2.650	32	10	0.03%	32	4	0.02%	29	21	0.07%	31	35	0.05%
Psychiatric, medium	1.509	5	320	1.10%	5	161	0.95%	4	444	1.41%	5	925	1.19%
Psychiatric, medium low	1.218	1	3,795	13.03%	1	1,612	9.51%	1	4,345	13.76%	1	9,752	12.56%
Psychiatric, low	0.619	6	607	2.08%	6	306	1.81%	6	832	2.63%	6	1,745	2.25%
Pulmonary, high	7.062	15	26	0.09%	13	18	0.11%	15	22	0.07%	15	66	0.08%
Pulmonary, low to medium	0.502	2	3,219	11.05%	2	1,621	9.57%	2	3,419	10.82%	2	8,259	10.64%
Renal, extra high	13.306	40	0	0.00%	38	0	0.00%	34	1	0.00%	39	1	0.00%
Renal, very high	1.565	34	5	0.02%	34	4	0.02%	38	3	0.01%	37	12	0.02%
Renal, medium	0.837	36	8	0.03%	36	4	0.02%	37	8	0.03%	38	20	0.03%
Renal, low	0.295	23	241	0.83%	23	127	0.75%	23	287	0.91%	22	655	0.84%
Skeletal, medium	0.567	11	391	1.34%	16	171	1.01%	12	437	1.38%	13	999	1.29%
Skeletal, low	0.437	14	471	1.62%	14	273	1.61%	14	543	1.72%	14	1,287	1.66%
Skeletal, very low	0.278	8	1,110	3.81%	8	585	3.45%	8	1,328	4.20%	8	3,023	3.89%
Skin, high	1.516	38	3	0.01%	31	7	0.04%	39	3	0.01%	36	13	0.02%
Skin, very low to low	0.188	9	1,201	4.12%	12	692	4.08%	13	1,303	4.13%	12	3,196	4.12%
Substance abuse, very low to low	0.381	31	74	0.25%	33	24	0.14%	33	63	0.20%	32	161	0.21%
Population Statistics													
No Classified Disease Categories	N/A	N/A	17,899	61.46%	N/A	11,051	65.21%	N/A	18,926	59.92%	N/A	47,876	61.65%
Unscored Members													
	Magnolia			Molina			United			Total			
Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	91	17.33%	N/A	98	18.77%	N/A	123	19.40%	N/A	312	18.56%
Age 1 to 5 Female	0.833	N/A	95	18.10%	N/A	96	18.39%	N/A	114	17.98%	N/A	305	18.14%
Age 6 to 12 Male	1.046	N/A	103	19.62%	N/A	91	17.43%	N/A	103	16.25%	N/A	297	17.67%
Age 6 to 12 Female	0.896	N/A	99	18.86%	N/A	102	19.54%	N/A	122	19.24%	N/A	323	19.21%
Age 13 to 18 Male	1.007	N/A	67	12.76%	N/A	59	11.30%	N/A	84	13.25%	N/A	210	12.49%
Age 13 to 18 Female	1.292	N/A	70	13.33%	N/A	76	14.56%	N/A	88	13.88%	N/A	234	13.92%
Risk Adjustment Results													
	Magnolia			Molina			United			Total			
Member Months		29,123			16,947			31,587		77,657			
Unadjusted Plan Factor		1.048			0.978			1.076		1.044			
Budget Neutral Plan Factor		1.004			0.937			1.031		1.000			
Unscored Members													
Member Months		525			522			634		1,681			
Unadjusted Plan Factor		0.991			0.991			0.990		0.991			
Budget Neutral Plan Factor		1.000			1.001			0.999		1.000			
Total Members													
Member Months		29,648			17,469			32,221		79,338			
Unadjusted Plan Factor		1.047			0.979			1.075		1.043			
Budget Neutral Plan Factor		1.004			0.938			1.030		1.000			

Exhibit 3J Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - North Region - Q1 to Q2 2023 Prospective Risk Scores June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept													
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	755	26.59%	N/A	328	27.33%	N/A	766	25.80%	N/A	1,849	26.38%
Age 6 to 12 Female	0.049	N/A	722	25.43%	N/A	340	28.33%	N/A	765	25.77%	N/A	1,827	26.07%
Age 13 to 18 Male	0.000	N/A	681	23.99%	N/A	256	21.33%	N/A	747	25.16%	N/A	1,684	24.03%
Age 13 to 18 Female	0.297	N/A	681	23.99%	N/A	276	23.00%	N/A	691	23.27%	N/A	1,648	23.52%
Disease Categories													
Cancer, very high	27.677	38	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Cancer, high	4.235	28	1	0.04%	20	1	0.08%	27	2	0.07%	27	4	0.06%
Cancer, medium	3.414	25	2	0.07%	21	1	0.08%	19	4	0.13%	23	7	0.10%
Cancer, low	0.629	38	0	0.00%	33	0	0.00%	38	0	0.00%	40	0	0.00%
Cardiovascular, very high	5.998	38	0	0.00%	33	0	0.00%	30	1	0.03%	32	1	0.01%
Cardiovascular, medium	0.760	17	17	0.60%	27	3	0.25%	22	17	0.57%	22	37	0.53%
Cardiovascular, extra low to low	0.593	3	141	4.97%	3	65	5.42%	3	166	5.59%	3	372	5.31%
Cerebrovascular, low	0.316	38	0	0.00%	33	0	0.00%	37	1	0.03%	39	1	0.01%
CNS, high	10.392	22	1	0.04%	13	1	0.08%	23	1	0.03%	21	3	0.04%
CNS, medium	1.647	35	1	0.04%	22	2	0.17%	25	6	0.20%	29	9	0.13%
CNS, low	0.575	10	44	1.55%	12	21	1.75%	15	37	1.25%	12	102	1.46%
DD, low to medium	2.162	20	5	0.18%	19	2	0.17%	16	9	0.30%	19	16	0.22%
Diabetes, type 2 low	2.030	4	23	0.81%	4	12	1.00%	6	25	0.84%	5	60	0.86%
Eye, very low to low	0.349	26	19	0.67%	28	5	0.42%	29	20	0.67%	28	44	0.63%
Genital, extra low	0.361	29	10	0.35%	25	7	0.58%	31	16	0.54%	30	33	0.47%
Gastro, high	5.482	19	2	0.07%	8	3	0.25%	14	4	0.13%	14	9	0.13%
Gastro, medium	1.521	14	11	0.39%	23	2	0.17%	17	10	0.34%	18	23	0.33%
Gastro, low	0.386	8	85	2.99%	9	40	3.33%	9	96	3.23%	8	221	3.15%
Hematological, low to extra high	0.598	27	11	0.39%	30	2	0.17%	24	17	0.57%	26	30	0.43%
AIDS, high	1.527	18	8	0.28%	33	0	0.00%	26	6	0.20%	24	14	0.20%
HIV, medium	1.204	37	1	0.04%	33	0	0.00%	38	0	0.00%	38	1	0.01%
Infectious, low to medium	0.197	33	9	0.32%	32	3	0.25%	36	9	0.30%	36	21	0.30%
Metabolic, medium to high	1.382	11	18	0.63%	14	7	0.58%	8	30	1.01%	9	55	0.78%
Metabolic, very low	0.506	21	21	0.74%	17	15	1.25%	20	27	0.91%	20	63	0.90%
Pregnancy, incomplete	2.708	23	3	0.11%	24	1	0.08%	13	9	0.30%	17	13	0.19%
Psychiatric, high	2.650	31	1	0.04%	33	0	0.00%	33	1	0.03%	33	2	0.03%
Psychiatric, medium	1.509	7	24	0.85%	5	14	1.17%	5	36	1.21%	6	74	1.06%
Psychiatric, medium low	1.218	1	363	12.79%	1	166	13.83%	1	438	14.75%	1	967	13.80%
Psychiatric, low	0.619	6	72	2.54%	6	29	2.42%	4	101	3.40%	4	202	2.88%
Pulmonary, high	7.062	15	2	0.07%	10	2	0.17%	18	2	0.07%	15	6	0.09%
Pulmonary, low to medium	0.502	2	303	10.67%	2	105	8.75%	2	320	10.78%	2	728	10.39%
Renal, extra high	13.306	16	1	0.04%	11	1	0.08%	21	1	0.03%	16	3	0.04%
Renal, very high	1.565	36	1	0.04%	29	1	0.08%	32	2	0.07%	31	4	0.06%
Renal, medium	0.837	34	2	0.07%	33	0	0.00%	34	3	0.10%	35	5	0.07%
Renal, low	0.295	24	27	0.95%	26	8	0.67%	28	28	0.94%	25	63	0.90%
Skeletal, medium	0.567	9	46	1.62%	16	16	1.33%	11	54	1.82%	11	116	1.66%
Skeletal, low	0.437	12	54	1.90%	15	22	1.83%	10	75	2.53%	10	151	2.15%
Skeletal, very low	0.278	5	165	5.81%	7	64	5.33%	7	170	5.73%	7	399	5.69%
Skin, high	1.516	30	2	0.07%	33	0	0.00%	38	0	0.00%	37	2	0.03%
Skin, very low to low	0.188	13	112	3.95%	18	38	3.17%	12	136	4.58%	13	286	4.08%
Substance abuse, very low to low	0.381	32	5	0.18%	31	2	0.17%	35	5	0.17%	34	12	0.17%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,751	61.68%	N/A	763	63.58%	N/A	1,719	57.90%	N/A	4,233	60.40%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	13	30.95%	N/A	10	25.64%	N/A	20	33.90%	N/A	43	30.71%
Age 6 to 12 Female	0.896	N/A	13	30.95%	N/A	16	41.03%	N/A	11	18.64%	N/A	40	28.57%
Age 13 to 18 Male	1.007	N/A	10	23.81%	N/A	7	17.95%	N/A	15	25.42%	N/A	32	22.86%
Age 13 to 18 Female	1.292	N/A	6	14.29%	N/A	6	15.38%	N/A	13	22.03%	N/A	25	17.86%
Risk Adjustment Results													
Scored Members				Unscored Members				Total					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					
Unscored Members				Unscored Members				Unscored Members					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					
Total Members				Total Members				Total Members					
Member Months				Member Months				Member Months					
Unadjusted Plan Factor				Unadjusted Plan Factor				Unadjusted Plan Factor					
Budget Neutral Plan Factor				Budget Neutral Plan Factor				Budget Neutral Plan Factor					

Exhibit 3K Mississippi Division of Medicaid Risk Adjustment Results Quasi-CHIP - Central Region - Q1 to Q2 2023 Prospective Risk Scores June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period													
Scored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	3,372	100.00%	N/A	1,302	100.00%	N/A	3,255	100.00%	N/A	7,929	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	829	24.58%	N/A	334	25.65%	N/A	828	25.44%	N/A	1,991	25.11%
Age 6 to 12 Female	0.049	N/A	818	24.26%	N/A	340	26.11%	N/A	779	23.93%	N/A	1,937	24.43%
Age 13 to 18 Male	0.000	N/A	864	25.62%	N/A	299	22.96%	N/A	825	25.35%	N/A	1,988	25.07%
Age 13 to 18 Female	0.297	N/A	861	25.53%	N/A	329	25.27%	N/A	823	25.28%	N/A	2,013	25.39%
Disease Categories													
Cancer, very high	27.677	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Cancer, high	4.235	27	1	0.03%	19	1	0.08%	22	2	0.06%	23	4	0.05%
Cancer, medium	3.414	23	2	0.06%	9	4	0.31%	14	6	0.18%	16	12	0.15%
Cancer, low	0.629	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Cardiovascular, very high	5.998	33	0	0.00%	31	0	0.00%	28	1	0.03%	33	1	0.01%
Cardiovascular, medium	0.760	26	6	0.18%	21	4	0.31%	25	10	0.31%	26	20	0.25%
Cardiovascular, extra low to low	0.593	3	164	4.86%	3	57	4.38%	3	170	5.22%	3	391	4.93%
Cerebrovascular, low	0.316	33	0	0.00%	30	1	0.08%	38	1	0.03%	38	2	0.03%
CNS, high	10.392	33	0	0.00%	31	0	0.00%	21	1	0.03%	28	1	0.01%
CNS, medium	1.647	18	6	0.18%	31	0	0.00%	23	5	0.15%	22	11	0.14%
CNS, low	0.575	12	35	1.04%	17	12	0.92%	13	46	1.41%	13	93	1.17%
DD, low to medium	2.162	13	9	0.27%	25	0.08%	1	5	0.15%	17	15	0.19%	
Diabetes, type 2 low	2.030	4	27	0.80%	4	10	0.77%	4	30	0.92%	4	67	0.84%
Eye, very low to low	0.349	22	20	0.59%	26	4	0.31%	26	21	0.65%	25	45	0.57%
Genital, extra low	0.361	25	15	0.44%	28	3	0.23%	33	8	0.25%	30	26	0.33%
Gastro, high	5.482	24	1	0.03%	31	0	0.00%	19	2	0.06%	24	3	0.04%
Gastro, medium	1.521	19	6	0.18%	14	5	0.38%	32	2	0.06%	20	13	0.16%
Gastro, low	0.386	6	95	2.82%	8	46	3.53%	9	81	2.49%	8	222	2.80%
Hematological, low to extra high	0.598	17	17	0.50%	18	11	0.84%	17	24	0.74%	18	52	0.66%
AIDS, high	1.527	28	2	0.06%	31	0	0.00%	27	4	0.12%	31	6	0.08%
HIV, medium	1.204	33	0	0.00%	31	0	0.00%	36	1	0.03%	37	1	0.01%
Infectious, low to medium	0.197	32	5	0.15%	29	3	0.23%	37	6	0.18%	34	14	0.18%
Metabolic, medium to high	1.382	15	12	0.36%	12	8	0.61%	10	22	0.68%	11	42	0.53%
Metabolic, very low	0.506	16	22	0.65%	22	6	0.46%	18	24	0.74%	19	52	0.66%
Pregnancy, incomplete	2.708	14	7	0.21%	7	7	0.54%	15	7	0.22%	12	21	0.26%
Psychiatric, high	2.650	29	1	0.03%	24	1	0.08%	29	2	0.06%	27	4	0.05%
Psychiatric, medium	1.509	8	22	0.65%	10	9	0.69%	5	37	1.14%	6	68	0.86%
Psychiatric, medium low	1.218	1	467	13.85%	1	170	13.06%	1	460	14.13%	1	1,097	13.84%
Psychiatric, low	0.619	5	81	2.40%	5	32	2.46%	6	90	2.76%	5	203	2.56%
Pulmonary, high	7.062	21	1	0.03%	16	1	0.08%	11	4	0.12%	15	6	0.08%
Pulmonary, low to medium	0.502	2	397	11.77%	2	128	9.83%	2	375	11.52%	2	900	11.35%
Renal, extra high	13.306	33	0	0.00%	31	0	0.00%	39	0	0.00%	39	0	0.00%
Renal, very high	1.565	31	1	0.03%	20	2	0.15%	30	3	0.09%	29	6	0.08%
Renal, medium	0.837	33	0	0.00%	31	0	0.00%	34	2	0.06%	35	2	0.03%
Renal, low	0.295	20	25	0.74%	23	10	0.77%	24	27	0.83%	21	62	0.78%
Skeletal, medium	0.567	9	55	1.63%	11	23	1.77%	7	58	1.78%	9	136	1.72%
Skeletal, low	0.437	10	59	1.75%	13	20	1.54%	12	62	1.90%	10	141	1.78%
Skeletal, very low	0.278	7	124	3.68%	6	69	5.30%	8	117	3.59%	7	310	3.91%
Skin, high	1.516	33	0	0.00%	31	0	0.00%	35	1	0.03%	36	1	0.01%
Skin, very low to low	0.188	11	116	3.44%	15	39	3.00%	16	88	2.70%	14	243	3.06%
Substance abuse, very low to low	0.381	30	6	0.18%	27	3	0.23%	31	12	0.37%	32	21	0.26%
Population Statistics													
No Classified Disease Categories	N/A	N/A	2,092	62.04%	N/A	834	64.06%	N/A	2,033	62.46%	N/A	4,959	62.54%
Unscored Members													
		Magnolia			Molina			United			Total		
	Risk Weight	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	14	28.00%	N/A	11	19.30%	N/A	11	25.58%	N/A	36	24.00%
Age 6 to 12 Female	0.896	N/A	17	34.00%	N/A	22	38.60%	N/A	12	27.91%	N/A	51	34.00%
Age 13 to 18 Male	1.007	N/A	9	18.00%	N/A	9	15.79%	N/A	13	30.23%	N/A	31	20.67%
Age 13 to 18 Female	1.292	N/A	10	20.00%	N/A	15	26.32%	N/A	7	16.28%	N/A	32	21.33%
Risk Adjustment Results													
Magnolia				Molina			United			Total			
Scored Members				Unscored Members			Unscored Members			Unscored Members			
Member Months				Member Months			Member Months			Member Months			
Unadjusted Plan Factor				Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			
Budget Neutral Plan Factor				Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			
Scored Members				Unscored Members			Unscored Members			Unscored Members			
Member Months				Member Months			Member Months			Member Months			
Unadjusted Plan Factor				Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			
Budget Neutral Plan Factor				Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			
Total Members				Total Members			Total Members			Total Members			
Member Months				Member Months			Member Months			Member Months			
Unadjusted Plan Factor				Unadjusted Plan Factor			Unadjusted Plan Factor			Unadjusted Plan Factor			
Budget Neutral Plan Factor				Budget Neutral Plan Factor			Budget Neutral Plan Factor			Budget Neutral Plan Factor			

Exhibit 3L
Mississippi Division of Medicaid
Risk Adjustment Results
Quasi-CHIP - South Region - Q1 to Q2 2023 Prospective Risk Scores
June 2021 to May 2022 Diagnosis Period - September 2022 Snapshot Period

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Regression Intercept	0.539	N/A	2,733	100.00%	N/A	1,409	100.00%	N/A	3,447	100.00%	N/A	7,589	100.00%
Demographic Categories													
Age 1 to 5 Male	0.133	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.068	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	0.047	N/A	716	26.20%	N/A	362	27.11%	N/A	817	23.70%	N/A	1,915	25.23%
Age 6 to 12 Female	0.049	N/A	613	22.43%	N/A	375	26.81%	N/A	835	24.22%	N/A	1,823	24.02%
Age 13 to 18 Male	0.000	N/A	689	25.21%	N/A	314	22.29%	N/A	923	26.78%	N/A	1,926	25.38%
Age 13 to 18 Female	0.297	N/A	715	26.16%	N/A	338	23.99%	N/A	872	25.30%	N/A	1,925	25.37%
Disease Categories													
Cancer, very high	27.677	34	0	0.00%	30	0	0.00%	13	1	0.03%	18	1	0.01%
Cancer, high	4.235	25	1	0.04%	30	0	0.00%	23	2	0.06%	29	3	0.04%
Cancer, medium	3.414	27	1	0.04%	30	0	0.00%	18	4	0.12%	24	5	0.07%
Cancer, low	0.629	34	0	0.00%	26	1	0.07%	36	1	0.03%	38	2	0.03%
Cardiovascular, very high	5.998	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Cardiovascular, medium	0.760	26	5	0.18%	20	6	0.43%	24	11	0.32%	25	22	0.29%
Cardiovascular, extra low to low	0.593	3	157	5.74%	3	70	4.97%	3	257	7.46%	3	484	6.38%
Cerebrovascular, low	0.316	33	3	0.11%	29	1	0.07%	37	0	0.00%	37	4	0.05%
CNS, high	10.392	34	0	0.00%	11	1	0.07%	37	0	0.00%	30	1	0.01%
CNS, medium	1.847	23	3	0.11%	19	3	0.21%	25	5	0.15%	23	11	0.14%
CNS, low	0.575	12	34	1.24%	15	12	0.85%	11	54	1.57%	11	100	1.32%
DD, low to medium	2.162	17	5	0.18%	13	4	0.28%	17	8	0.23%	14	17	0.22%
Diabetes, type 2 low	2.030	5	25	0.91%	7	7	0.50%	6	32	0.93%	6	64	0.84%
Eye, very low to low	0.349	20	18	0.66%	25	2	0.14%	28	19	0.55%	27	39	0.51%
Genital, extra low	0.361	22	14	0.51%	23	8	0.57%	27	19	0.55%	26	41	0.54%
Gastro, high	5.482	21	1	0.04%	30	0	0.00%	14	5	0.15%	16	6	0.08%
Gastro, medium	1.521	15	9	0.33%	16	4	0.28%	19	8	0.23%	17	21	0.28%
Gastro, low	0.386	7	94	3.44%	6	42	2.98%	7	151	4.38%	7	287	3.78%
Hematological, low to extra high	0.598	18	12	0.44%	21	7	0.50%	22	15	0.44%	21	34	0.45%
AIDS, high	1.527	30	1	0.04%	24	1	0.07%	34	1	0.03%	33	3	0.04%
HIV, medium	1.204	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Infectious, low to medium	0.197	29	10	0.37%	27	3	0.21%	31	16	0.46%	32	29	0.38%
Metabolic, medium to high	1.382	11	15	0.55%	22	3	0.21%	15	19	0.55%	13	37	0.49%
Metabolic, very low	0.506	16	22	0.80%	18	10	0.71%	16	35	1.02%	15	67	0.88%
Pregnancy, incomplete	2.708	14	6	0.22%	30	0	0.00%	29	2	0.06%	19	8	0.11%
Psychiatric, high	2.650	28	1	0.04%	30	0	0.00%	20	4	0.12%	28	5	0.07%
Psychiatric, medium	1.509	4	38	1.39%	5	19	1.35%	4	60	1.74%	4	117	1.54%
Psychiatric, medium low	1.218	1	481	17.60%	1	250	17.74%	1	670	19.44%	1	1,401	18.46%
Psychiatric, low	0.619	6	70	2.56%	4	48	3.41%	5	117	3.39%	5	235	3.10%
Pulmonary, high	7.062	19	1	0.04%	14	1	0.07%	26	1	0.03%	20	3	0.04%
Pulmonary, low to medium	0.502	2	254	9.29%	2	106	7.52%	2	354	10.27%	2	714	9.41%
Renal, extra high	13.306	34	0	0.00%	30	0	0.00%	37	0	0.00%	39	0	0.00%
Renal, very high	1.565	34	0	0.00%	30	0	0.00%	33	1	0.03%	36	1	0.01%
Renal, medium	0.837	34	0	0.00%	30	0	0.00%	32	3	0.09%	35	3	0.04%
Renal, low	0.295	24	16	0.59%	17	19	1.35%	21	34	0.99%	22	69	0.91%
Skeletal, medium	0.567	8	50	1.83%	9	23	1.63%	9	68	1.97%	9	141	1.86%
Skeletal, low	0.437	10	51	1.87%	10	26	1.85%	10	84	2.44%	10	161	2.12%
Skeletal, very low	0.278	9	100	3.66%	8	49	3.48%	8	165	4.79%	8	314	4.14%
Skin, high	1.516	31	1	0.04%	30	0	0.00%	35	1	0.03%	34	2	0.03%
Skin, very low to low	0.188	13	96	3.51%	12	48	3.41%	12	156	4.53%	12	300	3.95%
Substance abuse, very low to low	0.381	32	3	0.11%	28	1	0.07%	30	13	0.38%	31	17	0.22%
Population Statistics													
No Classified Disease Categories	N/A	N/A	1,671	61.14%	N/A	870	61.75%	N/A	1,936	56.16%	N/A	4,477	58.99%

	Risk Weight	Magnolia			Molina			United			Total		
		Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months	Disease Impact Rank	Member Months	% of Member Months
Demographic Categories													
Age 1 to 5 Male	0.953	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 1 to 5 Female	0.833	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%	N/A	0	0.00%
Age 6 to 12 Male	1.046	N/A	13	35.14%	N/A	14	28.57%	N/A	15	28.85%	N/A	42	30.43%
Age 6 to 12 Female	0.896	N/A	10	27.03%	N/A	13	26.53%	N/A	23	44.23%	N/A	46	33.33%
Age 13 to 18 Male	1.007	N/A	7	18.92%	N/A	11	22.45%	N/A	10	19.23%	N/A	28	20.29%
Age 13 to 18 Female	1.292	N/A	7	18.92%	N/A	11	22.45%	N/A	4	7.69%	N/A	22	15.94%

Risk Adjustment Results				
		Magnolia	Molina	United
Scored Members				
Member Months		2,733	1,409	3,447
Unadjusted Plan Factor		1.096	1.069	1.175
Budget Neutral Plan Factor		0.973	0.949	1.043
Unscored Members				
Member Months		37	49	52
Unadjusted Plan Factor		1.045	1.053	0.991
Budget Neutral Plan Factor		1.017	1.025	0.965
Total Members				
Member Months		2,770	1,458	3,499
Unadjusted Plan Factor		1.095	1.070	1.172
Budget Neutral Plan Factor		0.973	0.951	1.042

Exhibit 3M
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
September 2022 Snapshot Period

North Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%	
Money Code 2	CWS Foster Care	0.862	225	16.97%	107	42.29%	150	31.85%	482
Money Code 3	Receiving IV-E Assistance	0.743	148	11.16%	60	23.72%	63	13.38%	271
Money Code 4	Receiving IV-E Subadoption Ast	0.064	889	67.04%	76	30.04%	215	45.65%	1,180
Other	All other Money Codes	0.000	64	4.83%	10	3.95%	43	9.13%	117
Unadjusted Plan Factor			0.729		1.017		0.860		0.795
Member Months			1,326		253		471		2,050
Budget Neutral Plan Factor			0.917		1.280		1.082		1.000

Central Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%	
Money Code 2	CWS Foster Care	0.862	350	25.89%	135	47.20%	150	37.31%	635
Money Code 3	Receiving IV-E Assistance	0.743	186	13.76%	73	25.52%	70	17.41%	329
Money Code 4	Receiving IV-E Subadoption Ast	0.064	766	56.66%	71	24.83%	151	37.56%	988
Other	All other Money Codes	0.000	50	3.70%	7	2.45%	31	7.71%	88
Unadjusted Plan Factor			0.819		1.070		0.932		0.876
Member Months			1,352		286		402		2,040
Budget Neutral Plan Factor			0.934		1.221		1.064		1.000

South Region									
Description			Magnolia		Molina		United		Total
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%	
Money Code 2	CWS Foster Care	0.862	302	15.75%	169	40.33%	201	31.36%	672
Money Code 3	Receiving IV-E Assistance	0.743	252	13.14%	112	26.73%	107	16.69%	471
Money Code 4	Receiving IV-E Subadoption Ast	0.064	1,266	66.01%	130	31.03%	280	43.68%	1,676
Other	All other Money Codes	0.000	98	5.11%	8	1.91%	53	8.27%	159
Unadjusted Plan Factor			0.733		1.023		0.879		0.805
Member Months			1,918		419		641		2,978
Budget Neutral Plan Factor			0.910		1.271		1.092		1.000

Exhibit 4A Mississippi Division of Medicaid Custom Risk Adjustment Weights Effective October 2018 Non-Newborn SSI / Disabled		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.077	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 4	0.087	1.113
Age 5 to 14 Female	0.089	0.660
Age 5 to 14 Male	0.067	0.572
Age 15 to 24 Female	0.108	0.746
Age 15 to 24 Male	-	0.523
Age 25 to 44 Female	0.206	1.154
Age 25 to 44 Male	0.053	0.821
Age 45 to 64 Female	0.109	1.314
Age 45 to 64 Male	0.111	1.185
Age 65 and Older Male and Female	0.006	1.046
Duration Categories		
Diagnosis Period Duration, 6 to 7 Months	0.323	N/A
Diagnosis Period Duration, 8 to 9 Months	0.159	N/A
Diagnosis Period Duration, 10 to 12 Months	-	N/A
Disease Categories		
Cancer, very high	4.640	N/A
Cancer, high	1.263	N/A
Cancer, medium	0.649	N/A
Cancer, low	0.148	N/A
Cardiovascular, very high	1.401	N/A
Cardiovascular, medium	0.570	N/A
Cardiovascular, medium - child	0.188	N/A
Cardiovascular, low	0.192	N/A
Cardiovascular, extra low	0.106	N/A
Cerebrovascular, low	0.153	N/A
CNS, medium to high	0.589	N/A
CNS, high - child	1.358	N/A
CNS, low	0.218	N/A
DD, low to medium	0.153	N/A
Diabetes, type 1 high	1.267	N/A
Diabetes, type 1 medium	0.683	N/A
Diabetes, type 2 medium	0.416	N/A
Diabetes, type 2 low	0.177	N/A
Eye, low	0.142	N/A
Eye, very low	0.107	N/A
Genital, extra low	0.070	N/A
Gastro, medium to high	0.523	N/A
Gastro, high - child	1.264	N/A
Gastro, low	0.127	N/A
Hematological, very high to extra high	1.633	N/A
Hematological, medium	0.705	N/A
Hematological, low	0.491	N/A
AIDS, high	1.699	N/A
HIV, medium	1.210	N/A
Infectious, low to medium	0.435	N/A
Metabolic, high	1.035	N/A
Metabolic, high - child	0.158	N/A
Metabolic, medium	0.396	N/A
Metabolic, very low	0.138	N/A
Pregnancy, incomplete	0.395	N/A
Psychiatric, high	0.677	N/A
Psychiatric, medium low to medium	0.264	N/A
Psychiatric, low	0.167	N/A
Pulmonary, very high	1.167	N/A
Pulmonary, very high - child	1.465	N/A
Pulmonary, high	0.593	N/A
Pulmonary, medium	0.475	N/A
Pulmonary, low	0.178	N/A
Renal, extra high	3.856	N/A
Renal, very high	0.489	N/A
Renal, low to medium	0.132	N/A
Skeletal, medium	0.308	N/A
Skeletal, very low to low	0.149	N/A
Skin, low - high	0.254	N/A
Skin, very low	0.090	N/A
Substance abuse, very low to low	0.153	N/A

Exhibit 4B
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
Non-Newborn SSI / Disabled

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, very high	4.640
CANH	Cancer, high	Cancer, high	1.263
CANM	Cancer, medium	Cancer, medium	0.649
CANL	Cancer, low	Cancer, low	0.148
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.401
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.570
CCARM	Cardiovascular, medium - child	Cardiovascular, medium - child	0.188
CARL	Cardiovascular, low	Cardiovascular, low	0.192
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.106
CERL	Cerebrovascular, low	Cerebrovascular, low	0.153
CNSH	CNS, high	CNS, medium to high	0.589
CCNSH	CNS, high - child	CNS, high - child	1.358
CNSM	CNS, medium	CNS, medium to high	0.589
CNSL	CNS, low	CNS, low	0.218
DDM	DD, medium	DD, low to medium	0.153
DDL	DD, low	DD, low to medium	0.153
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	1.267
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	0.683
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	0.416
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.177
EYEL	Eye, low	Eye, low	0.142
EYEVH	Eye, very low	Eye, very low	0.107
GENEL	Genital, extra low	Genital, extra low	0.070
GIH	Gastro, high	Gastro, medium to high	0.523
CGIH	Gastro, high - child	Gastro, high - child	1.264
GIM	Gastro, medium	Gastro, medium to high	0.523
GIL	Gastro, low	Gastro, low	0.127
HEMEH	Hematological, extra high	Hematological, very high to extra high	1.633
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, very high to extra high	1.633
HEMM	Hematological, medium	Hematological, medium	0.705
HEML	Hematological, low	Hematological, low	0.491
AIDSH	AIDS, high	AIDS, high	1.699
INFH	Infectious, high	AIDS, high	1.699
HIVM	HIV, medium	HIV, medium	1.210
INFM	Infectious, medium	Infectious, low to medium	0.435
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.435
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	1.035
CMETH	Metabolic, high - child	Metabolic, high - child	0.158
METM	Metabolic, medium	Metabolic, medium	0.396
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.395
PSYH	Psychiatric, high	Psychiatric, high	0.677
PSYM	Psychiatric, medium	Psychiatric, medium low to medium	0.264
PSYML	Psychiatric, medium low	Psychiatric, medium low to medium	0.264
PSYL	Psychiatric, low	Psychiatric, low	0.167
PULVH	Pulmonary, very high	Pulmonary, very high	1.167
CPULVH	Pulmonary, very high - child	Pulmonary, very high - child	1.465
PULH	Pulmonary, high	Pulmonary, high	0.593
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium	0.475
PULL	Pulmonary, low	Pulmonary, low	0.178
RENEH	Renal, extra high	Renal, extra high	3.856
RENVH	Renal, very high	Renal, very high	0.489
RENM	Renal, medium	Renal, low to medium	0.132
RENH	Renal, low	Renal, low to medium	0.132
SKCM	Skeletal, medium	Skeletal, medium	0.308
SKCL	Skeletal, low	Skeletal, very low to low	0.149
SKCVL	Skeletal, very low	Skeletal, very low to low	0.149
SKNH	Skin, high	Skin, low - high	0.254
SKNL	Skin, low	Skin, low - high	0.254
SKNVL	Skin, very low	Skin, very low	0.090
SUBL	Substance abuse, low	Substance abuse, very low to low	0.153
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.153
MRX1	Anti-coagulants	Cardiovascular, medium	0.570
MRX2	Cardiac	Cardiovascular, extra low	0.106
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.167
MRX4	Diabetes	Diabetes, type 2 low	0.177
MRX5	ESRD / Renal	Renal, very high	0.489
MRX6	Hemophilia / von Willebrands	Hematological, very high to extra high	1.633
MRX7	Hepatitis	HIV, medium	1.210
MRX8	HIV	HIV, medium	1.210
MRX9	Infections, high	AIDS, high	1.699
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.149
MRX11	Malignancies	Cancer, medium	0.649
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.589
MRX13	Parkinsons / Tremor	CNS, low	0.218
MRX14	Seizure disorders	CNS, low	0.218
MRX15	Tuberculosis	Pulmonary, low	0.178

Exhibit 4C Mississippi Division of Medicaid Custom Risk Adjustment Weights Effective July 2020 MA Adult		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.142	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 15 to 24 Female	0.330	0.922
Age 15 to 24 Male	-	0.514
Age 25 to 44 Female	0.236	0.989
Age 25 to 44 Male	0.058	0.770
Age 45 and Older Female	0.245	1.353
Age 45 and Older Male	0.365	1.362
Duration Categories		
Diagnosis Period Duration, 6 to 9 Months	0.126	N/A
Diagnosis Period Duration, 10 to 11 Months	0.059	N/A
Diagnosis Period Duration, 12 Months	-	N/A
Disease Categories		
Cancer, high to very high	3.752	N/A
Cancer, medium	0.997	N/A
Cancer, low	0.364	N/A
Cardiovascular, very high	1.914	N/A
Cardiovascular, medium	0.601	N/A
Cardiovascular, low	0.315	N/A
Cardiovascular, extra low	0.122	N/A
CNS, medium to high	0.836	N/A
CNS, low	0.419	N/A
Diabetes, type 1 high	2.432	N/A
Diabetes, type 1 medium	1.612	N/A
Diabetes, type 2 medium	1.043	N/A
Diabetes, type 2 low	0.375	N/A
DD, low to medium	0.613	N/A
Eye, very low to low	0.324	N/A
Genital, extra low	0.118	N/A
Gastro, medium to high	0.933	N/A
Gastro, low	0.224	N/A
Hematological, low to extra high	0.318	N/A
AIDS, high	1.445	N/A
HIV, medium	1.320	N/A
Infectious, low to medium	0.578	N/A
Metabolic, high	0.857	N/A
Metabolic, medium	0.393	N/A
Metabolic, very low	0.138	N/A
Pregnancy, complete	0.160	N/A
Pregnancy, incomplete	0.997	N/A
Psychiatric, high	0.972	N/A
Psychiatric, medium	0.513	N/A
Psychiatric, medium low	0.321	N/A
Psychiatric, low	0.212	N/A
Pulmonary, medium to high	0.600	N/A
Pulmonary, low	0.227	N/A
Renal, medium to extra high	0.855	N/A
Renal, low	0.304	N/A
Skeletal, medium	0.586	N/A
Skeletal, very low to low	0.362	N/A
Skin, low to high	0.941	N/A
Skin, very low	0.132	N/A
Substance abuse, low	0.289	N/A

Exhibit 4D
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Adult

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, high to very high	3.752
CANH	Cancer, high	Cancer, high to very high	3.752
CANM	Cancer, medium	Cancer, medium	0.997
CANL	Cancer, low	Cancer, low	0.364
CARVH	Cardiovascular, very high	Cardiovascular, very high	1.914
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.601
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, low	0.315
CAREL	Cardiovascular, extra low	Cardiovascular, extra low	0.122
CERL	Cerebrovascular, low	Not Used	Not Used
CNSH	CNS, high	CNS, medium to high	0.836
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium to high	0.836
CNSL	CNS, low	CNS, low	0.419
DDM	DD, medium	DD, low to medium	0.613
DDL	DD, low	DD, low to medium	0.613
DIA1H	Diabetes, type 1 high	Diabetes, type 1 high	2.432
DIA1M	Diabetes, type 1 medium	Diabetes, type 1 medium	1.612
DIA2M	Diabetes, type 2 medium	Diabetes, type 2 medium	1.043
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	0.375
EYEL	Eye, low	Eye, very low to low	0.324
EYEVH	Eye, very low	Eye, very low to low	0.324
GENEL	Genital, extra low	Genital, extra low	0.118
GIH	Gastro, high	Gastro, medium to high	0.933
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium to high	0.933
GIL	Gastro, low	Gastro, low	0.224
HEMEH	Hematological, extra high	Hematological, low to extra high	0.318
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.318
HEMM	Hematological, medium	Hematological, low to extra high	0.318
HEML	Hematological, low	Hematological, low to extra high	0.318
AIDSH	AIDS, high	AIDS, high	1.445
INFH	Infectious, high	AIDS, high	1.445
HIVM	HIV, medium	HIV, medium	1.320
INFM	Infectious, medium	Infectious, low to medium	0.578
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.578
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, high	0.857
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium	0.393
METVL	Metabolic, very low	Metabolic, very low	0.138
PRGCMP	Pregnancy, complete	Pregnancy, complete	0.160
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	0.997
PSYH	Psychiatric, high	Psychiatric, high	0.972
PSYM	Psychiatric, medium	Psychiatric, medium	0.513
PSYML	Psychiatric, medium low	Psychiatric, medium low	0.321
PSYL	Psychiatric, low	Psychiatric, low	0.212
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, medium to high	0.600
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, medium to high	0.600
PULL	Pulmonary, low	Pulmonary, low	0.227
RENEH	Renal, extra high	Renal, medium to extra high	0.855
RENVH	Renal, very high	Renal, medium to extra high	0.855
RENM	Renal, medium	Renal, medium to extra high	0.855
RENH	Renal, low	Renal, low	0.304
SKCM	Skeletal, medium	Skeletal, medium	0.586
SKCL	Skeletal, low	Skeletal, very low to low	0.362
SKCVL	Skeletal, very low	Skeletal, very low to low	0.362
SKNH	Skin, high	Skin, low to high	0.941
SKNL	Skin, low	Skin, low to high	0.941
SKNVH	Skin, very low	Skin, very low	0.132
SUBL	Substance abuse, low	Substance abuse, low	0.289
SUBVL	Substance abuse, very low	Not Used	Not Used
MRX1	Anti-coagulants	Cardiovascular, medium	0.601
MRX2	Cardiac	Cardiovascular, extra low	0.122
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.212
MRX4	Diabetes	Diabetes, type 2 low	0.375
MRX5	ESRD / Renal	Renal, medium to extra high	0.855
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.318
MRX7	Hepatitis	HIV, medium	1.320
MRX8	HIV	HIV, medium	1.320
MRX9	Infections, high	AIDS, high	1.445
MRX10	Inflammatory / Autoimmune	Skeletal, very low to low	0.362
MRX11	Malignancies	Cancer, medium	0.997
MRX12	Multiple Sclerosis / Paralysis	CNS, medium to high	0.836
MRX13	Parkinsons / Tremor	CNS, low	0.419
MRX14	Seizure disorders	CNS, low	0.419
MRX15	Tuberculosis	Pulmonary, low	0.227

Exhibit 4E Mississippi Division of Medicaid Custom Risk Adjustment Weights Effective October 2018 MA Children and Quasi-CHIP		
	Scored Member Cost Weights	Unscored Member Cost Weights
Regression Intercept	0.539	N/A
Demographic Categories		
Under Age 1	N/A	N/A
Age 1 to 5 Male	0.133	0.953
Age 1 to 5 Female	0.068	0.833
Age 6 to 12 Male	0.047	1.046
Age 6 to 12 Female	0.049	0.896
Age 13 to 18 Male	-	1.007
Age 13 to 18 Female	0.297	1.292
Disease Categories		
Cancer, very high	27.677	N/A
Cancer, high	4.235	N/A
Cancer, medium	3.414	N/A
Cancer, low	0.629	N/A
Cardiovascular, very high	5.998	N/A
Cardiovascular, medium	0.760	N/A
Cardiovascular, extra low to low	0.593	N/A
Cerebrovascular, low	0.316	N/A
CNS, high	10.392	N/A
CNS, medium	1.647	N/A
CNS, low	0.575	N/A
DD, low to medium	2.162	N/A
Diabetes, type 2 low	2.030	N/A
Eye, very low to low	0.349	N/A
Genital, extra low	0.361	N/A
Gastro, high	5.482	N/A
Gastro, medium	1.521	N/A
Gastro, low	0.386	N/A
Hematological, low to extra high	0.598	N/A
AIDS, high	1.527	N/A
HIV, medium	1.204	N/A
Infectious, low to medium	0.197	N/A
Metabolic, medium to high	1.382	N/A
Metabolic, very low	0.506	N/A
Pregnancy, incomplete	2.708	N/A
Psychiatric, high	2.650	N/A
Psychiatric, medium	1.509	N/A
Psychiatric, medium low	1.218	N/A
Psychiatric, low	0.619	N/A
Pulmonary, high	7.062	N/A
Pulmonary, low to medium	0.502	N/A
Renal, extra high	13.306	N/A
Renal, very high	1.565	N/A
Renal, medium	0.837	N/A
Renal, low	0.295	N/A
Skeletal, medium	0.567	N/A
Skeletal, low	0.437	N/A
Skeletal, very low	0.278	N/A
Skin, high	1.516	N/A
Skin, very low to low	0.188	N/A
Substance abuse, very low to low	0.381	N/A

Exhibit 4F
Mississippi Division of Medicaid
CDPS + Rx Mapping to Custom Risk Adjustment Weight Categories
MA Children and Quasi-CHIP

CDPS + Rx Abbreviation	CDPS + Rx Description	MississippiCAN Risk Weight Category	MississippiCAN Risk Weight
CANVH	Cancer, very high	Cancer, very high	27.677
CANH	Cancer, high	Cancer, high	4.235
CANM	Cancer, medium	Cancer, medium	3.414
CANL	Cancer, low	Cancer, low	0.629
CARVH	Cardiovascular, very high	Cardiovascular, very high	5.998
CCARVH	Cardiovascular, very high - child	Not Used	Not Used
CARM	Cardiovascular, medium	Cardiovascular, medium	0.760
CCARM	Cardiovascular, medium - child	Not Used	Not Used
CARL	Cardiovascular, low	Cardiovascular, extra low to low	0.593
CAREL	Cardiovascular, extra low	Cardiovascular, extra low to low	0.593
CERL	Cerebrovascular, low	Cerebrovascular, low	0.316
CNSH	CNS, high	CNS, high	10.392
CCNSH	CNS, high - child	Not Used	Not Used
CNSM	CNS, medium	CNS, medium	1.647
CNSL	CNS, low	CNS, low	0.575
DDM	DD, medium	DD, low to medium	2.162
DDL	DD, low	DD, low to medium	2.162
DIA1H	Diabetes, type 1 high	Not Used	Not Used
DIA1M	Diabetes, type 1 medium	Not Used	Not Used
DIA2M	Diabetes, type 2 medium	Not Used	Not Used
DIA2L	Diabetes, type 2 low	Diabetes, type 2 low	2.030
EYEL	Eye, low	Eye, very low to low	0.349
EYEVH	Eye, very low	Eye, very low to low	0.349
GENEL	Genital, extra low	Genital, extra low	0.361
GIH	Gastro, high	Gastro, high	5.482
CGIH	Gastro, high - child	Not Used	Not Used
GIM	Gastro, medium	Gastro, medium	1.521
GIL	Gastro, low	Gastro, low	0.386
HEMEH	Hematological, extra high	Hematological, low to extra high	0.598
CHEMEH	Hematological, extra high - child	Not Used	Not Used
HEMVH	Hematological, very high	Hematological, low to extra high	0.598
HEMM	Hematological, medium	Hematological, low to extra high	0.598
HEML	Hematological, low	Hematological, low to extra high	0.598
AIDSH	AIDS, high	AIDS, high	1.527
INFH	Infectious, high	AIDS, high	1.527
HIVM	HIV, medium	HIV, medium	1.204
INFM	Infectious, medium	Infectious, low to medium	0.197
CINFM	Infectious, medium - child	Not Used	Not Used
INFL	Infectious, low	Infectious, low to medium	0.197
CHIVM	HIV, medium - child	Not Used	Not Used
METH	Metabolic, high	Metabolic, medium to high	1.382
CMETH	Metabolic, high - child	Not Used	Not Used
METM	Metabolic, medium	Metabolic, medium to high	1.382
METVL	Metabolic, very low	Metabolic, very low	0.506
PRGCMP	Pregnancy, complete	Not Used	Not Used
PRGINC	Pregnancy, incomplete	Pregnancy, incomplete	2.708
PSYH	Psychiatric, high	Psychiatric, high	2.650
PSYM	Psychiatric, medium	Psychiatric, medium	1.509
PSYML	Psychiatric, medium low	Psychiatric, medium low	1.218
PSYL	Psychiatric, low	Psychiatric, low	0.619
PULVH	Pulmonary, very high	Not Used	Not Used
CPULVH	Pulmonary, very high - child	Not Used	Not Used
PULH	Pulmonary, high	Pulmonary, high	7.062
CPULH	Pulmonary, high - child	Not Used	Not Used
PULM	Pulmonary, medium	Pulmonary, low to medium	0.502
PULL	Pulmonary, low	Pulmonary, low to medium	0.502
RENEH	Renal, extra high	Renal, extra high	13.306
RENVH	Renal, very high	Renal, very high	1.565
RENM	Renal, medium	Renal, medium	0.837
RENH	Renal, low	Renal, low	0.295
SKCM	Skeletal, medium	Skeletal, medium	0.567
SKCL	Skeletal, low	Skeletal, low	0.437
SKCVL	Skeletal, very low	Skeletal, very low	0.278
SKNH	Skin, high	Skin, high	1.516
SKNL	Skin, low	Skin, very low to low	0.188
SKNVL	Skin, very low	Skin, very low to low	0.188
SUBL	Substance abuse, low	Substance abuse, very low to low	0.381
SUBVL	Substance abuse, very low	Substance abuse, very low to low	0.381
MRX1	Anti-coagulants	Cardiovascular, medium	0.760
MRX2	Cardiac	Cardiovascular, extra low to low	0.593
MRX3	Psychosis / Bipolar / Depression	Psychiatric, low	0.619
MRX4	Diabetes	Diabetes, type 2 low	2.030
MRX5	ESRD / Renal	Renal, very high	1.565
MRX6	Hemophilia / von Willebrands	Hematological, low to extra high	0.598
MRX7	Hepatitis	HIV, medium	1.204
MRX8	HIV	HIV, medium	1.204
MRX9	Infections, high	AIDS, high	1.527
MRX10	Inflammatory / Autoimmune	Skeletal, very low	0.278
MRX11	Malignancies	Cancer, medium	3.414
MRX12	Multiple Sclerosis / Paralysis	CNS, medium	1.647
MRX13	Parkinsons / Tremor	CNS, low	0.575
MRX14	Seizure disorders	CNS, low	0.575
MRX15	Tuberculosis	Pulmonary, low to medium	0.502

Exhibit 5A Mississippi Division of Medicaid Illustrative Risk Adjusted Capitation Rates Q1 to Q2 2023									
Region:	North								
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0013	\$1,090.00	\$1,091.37	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,284.37
Molina	0.9804	\$1,090.00	\$1,068.64	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,261.64
United	1.0042	\$1,090.00	\$1,094.53	\$120.00	\$60.00	\$10.00	\$3.00	\$193.00	\$1,287.53
MA Adult									
Magnolia	1.0168	\$510.00	\$518.59	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$641.59
Molina	0.9579	\$510.00	\$488.52	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$611.52
United	1.0101	\$510.00	\$515.13	\$50.00	\$60.00	\$10.00	\$3.00	\$123.00	\$638.13
MA Children									
Magnolia	1.0016	\$220.00	\$220.36	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$313.36
Molina	0.9506	\$220.00	\$209.14	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$302.14
United	1.0220	\$220.00	\$224.83	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$317.83
Quasi-CHIP									
Magnolia	0.9700	\$220.00	\$213.39	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$296.39
Molina	0.9960	\$220.00	\$218.12	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$302.12
United	1.0302	\$220.00	\$226.64	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$309.64
Foster Care									
Magnolia	0.9174	\$660.00	\$605.46	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$818.46
Molina	1.2798	\$660.00	\$844.68	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,057.68
United	1.0823	\$660.00	\$714.34	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$927.34

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.

Exhibit 5B Mississippi Division of Medicaid Illustrative Risk Adjusted Capitation Rates Q1 to Q2 2023									
Region:	Central								
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0253	\$1,250.00	\$1,281.67	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,494.67
Molina	0.9936	\$1,250.00	\$1,242.04	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,455.04
United	0.9693	\$1,250.00	\$1,211.61	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,424.61
MA Adult									
Magnolia	1.0084	\$560.00	\$564.70	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$697.70
Molina	0.9542	\$560.00	\$534.35	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$667.35
United	1.0245	\$560.00	\$573.72	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$706.72
MA Children									
Magnolia	1.0106	\$230.00	\$232.43	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$325.43
Molina	0.9449	\$230.00	\$217.33	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$310.33
United	1.0177	\$230.00	\$234.07	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$327.07
Quasi-CHIP									
Magnolia	0.9821	\$230.00	\$225.88	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$308.88
Molina	0.9904	\$230.00	\$227.80	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$310.80
United	1.0225	\$230.00	\$235.18	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$318.18
Foster Care									
Magnolia	0.9343	\$690.00	\$644.68	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$897.68
Molina	1.2207	\$690.00	\$842.29	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$1,095.29
United	1.0639	\$690.00	\$734.07	\$180.00	\$60.00	\$10.00	\$3.00	\$253.00	\$987.07

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.

Exhibit 5C
Mississippi Division of Medicaid
Illustrative Risk Adjusted Capitation Rates
Q1 to Q2 2023

Region:	South								
	(a) Budget Neutral Risk Score	(b) Unadjusted Capitation Rate PMPM ¹	(c) = (a) × (b) Risk Adjusted Capitation Payment PMPM	(d) MHAP FSA Payment PMPM ²	(e) MHAP QIPP Payment PMPM ³	(f) MAPS Payment PMPM ³	(g) TREAT Payment PMPM ³	(h) = (d) + (e) + (f) + (g) Total Payments Outside of Rates	(i) = (c) + (h) Total Payments (Capitation Rates + Other Payments)
Non-Newborn SSI / Disabled									
Magnolia	1.0317	\$1,240.00	\$1,279.31	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,492.31
Molina	0.9623	\$1,240.00	\$1,193.31	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,406.31
United	0.9805	\$1,240.00	\$1,215.85	\$140.00	\$60.00	\$10.00	\$3.00	\$213.00	\$1,428.85
MA Adult									
Magnolia	1.0106	\$540.00	\$545.75	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$678.75
Molina	0.9571	\$540.00	\$516.81	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$649.81
United	1.0204	\$540.00	\$551.04	\$60.00	\$60.00	\$10.00	\$3.00	\$133.00	\$684.04
MA Children									
Magnolia	1.0037	\$220.00	\$220.81	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$313.81
Molina	0.9385	\$220.00	\$206.46	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$299.46
United	1.0300	\$220.00	\$226.59	\$20.00	\$60.00	\$10.00	\$3.00	\$93.00	\$319.59
Quasi-CHIP									
Magnolia	0.9731	\$230.00	\$223.81	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$306.81
Molina	0.9514	\$230.00	\$218.81	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$301.81
United	1.0416	\$230.00	\$239.56	\$10.00	\$60.00	\$10.00	\$3.00	\$83.00	\$322.56
Foster Care									
Magnolia	0.9099	\$670.00	\$609.66	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$792.66
Molina	1.2711	\$670.00	\$851.61	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$1,034.61
United	1.0923	\$670.00	\$731.83	\$110.00	\$60.00	\$10.00	\$3.00	\$183.00	\$914.83

¹ Capitation rates reflect the removal of the quality withhold.
² Includes associated premium tax.
³ Includes associated premium tax; MAPS, QIPP, and TREAT are paid quarterly.



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August 9, 2024

Jennifer Wentworth
Deputy Executive Director, Finance
Mississippi Division of Medicaid
550 High Street, Suite 1000
Jackson, MS 39201
Sent via email: jennifer.wentworth@medicaid.ms.gov

Re: Wentworth07 - Final Foster Care Q1 to Q2 2023 Risk Scores

Dear Jennifer:

The Mississippi Division of Medicaid (DOM) retained Milliman to calculate, document, and certify capitation rates for the Mississippi Coordinated Access Network (MississippiCAN), a coordinated care program for targeted Medicaid beneficiaries. Since July 1, 2020, we have risk adjusted the Foster Care rate cell to address consistent differences in acuity between the Foster Care populations enrolling among the Coordinated Care Organizations (CCOs).

This letter updates risk scores provided in a previous letter,¹ which used Foster Care enrollment as of September 2022 to estimate preliminary risk scores for the Q1 to Q2 2023 period. Prior to the spring of 2020, most Foster Care children were enrolled in a single CCO. Since that time, new Foster Care children have been enrolled more evenly across all three CCOs. Due to this change in enrollment practices, we have restated the Q1 to Q2 2023 risk scores from the preliminary estimates using actual enrollment by CCO in the Q1 to Q2 2023 period. This letter documents the methodology and restated risk scores from this update.

RESULTS

The Foster Care rate cell is risk adjusted using each member’s eligibility for either state or federal financial assistance. This status is reported on both the money code field on DOM’s enrollment records and the 834 enrollment reports provided to the CCOs. Table 1 shows the risk weights applicable to each money code field. The methodology to develop these factors is documented in a previous letter.² We plan to review the weights shown in Table 1 as part of the risk weight update planned for fall of 2024.

Table 1 Mississippi Division of Medicaid Risk Weights for the Foster Care Rate Cell		
Money Code	Description	Risk Weight
Money Code 2	CWS Foster Care	0.862
Money Code 3	Receiving IV-E Assistance	0.743
Money Code 4	Receiving IV-E Subadoption Ast	0.064
Other	All other Money Codes	0.000
Additional Risk Weight	Description	Risk Weight
Intercept	Regression Intercept	0.457

¹ "Wentworth11 – Q1 to Q2 2023 MississippiCAN Risk Adjustment.pdf," dated December 16, 2022.
² "Clark17 – Risk Adjustment Methodology for Foster Care Rate Cell.pdf" dated June 18, 2020.



Table 2 summarizes both the preliminary budget neutral risk scores by region and CCO using September 2022 enrollment and the final budget neutral risk scores using actual Q1 to Q2 2023 enrollment. Exhibit 1 shows the application of the risk weights in Table 1 to the CCOs’ Q1 to Q2 2023 enrollment in the Foster Care rate cell to calculate the values in Table 2. The section titled “Risk Score Application” below describes how CCO-specific risk scores are calculated and calibrated to be budget neutral across the program.

Table 2 Mississippi Division of Medicaid Budget Neutral Risk Scores for the Foster Care Rate Cell Q1 to Q2 2023 Enrollment Period		
CCO	Preliminary Risk Scores September 2022 Enrollment	Final Risk Scores Q1 to Q2 2023 Enrollment
Magnolia		
North Region	0.917	0.917
Central Region	0.934	0.915
South Region	0.910	0.906
Molina		
North Region	1.280	1.253
Central Region	1.221	1.240
South Region	1.271	1.246
United		
North Region	1.082	1.074
Central Region	1.064	1.083
South Region	1.092	1.096

We note, the risk scores in Table 2 are further from 1.000 by CCO than we typically see when developing risk scores for other MississippiCAN risk-adjusted populations. These risk scores, however, are commensurate with differences in per-member-per-month (PMPM) costs we have historically seen for the Foster Care rate cell.

Risk Score Application

There are several steps in applying the risk weights in Table 1 to adjust capitation rate payments to each CCO. The following outlines the steps in this calculation.

- Set rating period** – For concurrent risk score development, actual enrollment from the rating period is used to develop final risk scores for that same rating period. Preliminary risk scores are developed using enrollment before the final rating period and are provided at the same time as the risk scores for all other rate cells.
- Calculate member-level risk scores** – The risk score for an individual in Foster Care is calculated as the sum of two components:
 - The risk model's intercept, which is applied to all members
 - An additional factor corresponding to each member’s money code status each month in the rating period. Members without a valid code are given the “other” money code weight shown in Table 1

For traditional risk scores based on CDPS + Rx, a member is only given a risk score if they have at least six months of claims experience. This is to ensure the member has sufficient claims experience to capture diagnostic information about the member. For the Foster Care rate cell, all members are given a risk score, as their risk score depends only on their money code each month.

- Calculate each CCO’s raw risk score** – A CCO’s raw risk score is calculated as the average risk score of its members in a given risk adjustment period. Raw risk scores are calculated at the regional level.

CCOs with low enrollment (using a full credibility threshold of 300 member months over the six-month risk adjustment period) may be credibility adjusted to reduce volatility in their raw risk scores. For plans with



partially credible experience, the plan's risk score would be blended with the region-wide raw risk score to determine the credibility-adjusted raw risk score. Multiple months of data are used to develop risk scores for each CCO under a concurrent risk score methodology, which increases the credibility of each CCO's risk score. Since each CCO has more than 300 member months in each region over the six-month risk adjustment period (as shown in Exhibit 1), we have not applied credibility adjustments to these Foster Care risk scores. We will continue to monitor enrollment by CCO and volatility of claims costs by money code to determine if credibility adjustments are appropriate in the future.

4. **Calculate each CCO's budget neutral risk score** – The average raw risk score is calculated for each region as the average of all members' risk scores across all CCOs within a region. Each CCO's raw risk score is divided by this regional raw risk score to calculate its budget neutral risk score for that region.
5. **Calculate the risk adjusted capitation rate** – A CCO's capitation rate will be determined based upon the following formula:

$$\text{CCO Capitation Rate} = \text{Base Capitation Rate} \times \text{CCO Budget Neutral Risk Adjustment Factor}$$

Risk adjustment will be applied to the capitation rate after the quality withhold application and excluding amounts paid outside the capitation rate (MHAP, MAPS, and TREAT payments along with the associated premium tax).

Exhibit 1 and Table 2 show the final budget neutral risk scores by CCO using a Q1 to Q2 2023 risk adjustment period, to be applied as described in Step 5 above when capitation rates are paid to the CCOs.

CAVEATS AND LIMITATION ON USE

This letter is intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive this letter and related materials. The materials should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in this letter. The intent of the models was to calculate Q1 to Q2 2023 Foster Care risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO eligibility data from January 2023 to June 2023 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in this letter. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

This letter is designed to document the risk scores for Q1 to Q2 2023 for MississippiCAN eligible Foster Care members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

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





Jennifer Wentworth
Mississippi Division of Medicaid
August 9, 2024
Page 4 of 4

Jennifer, please call us at 262 784 2250 if you have questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jill Bruckert'.

Jill A. Bruckert FSA, MAAA
Principal and Consulting Actuary

JAB/KNL/zk

Attachment

A handwritten signature in black ink, appearing to read 'Katarina Lorenz'.

Katarina N. Lorenz, FSA, MAAA
Consulting Actuary



EXHIBITS

Exhibit 1
Mississippi Division of Medicaid
Risk Adjustment Results
Foster Care Concurrent Risk Scores
January 2023 to June 2023 Enrollment Period

North Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Description	Risk	Weight								
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	1,353	16.45%	739	41.12%	856	27.30%	2,948	22.41%
Money Code 3	Receiving IV-E Assistance	0.743	948	11.53%	388	21.59%	544	17.35%	1,880	14.29%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	5,505	66.94%	609	33.89%	1,484	47.34%	7,598	57.75%
Other	All other Money Codes	0.000	418	5.08%	61	3.39%	251	8.01%	730	5.55%
Unadjusted Plan Factor			0.727		0.994		0.852		0.793	
Member Months			8,224		1,797		3,135		13,156	
Budget Neutral Plan Factor			0.917		1.253		1.074		1.000	

Central Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Description	Risk	Weight								
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	1,774	21.79%	925	47.19%	836	31.58%	3,535	27.73%
Money Code 3	Receiving IV-E Assistance	0.743	1,131	13.89%	489	24.95%	629	23.76%	2,249	17.64%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	4,877	59.90%	490	25.00%	1,018	38.46%	6,385	50.08%
Other	All other Money Codes	0.000	360	4.42%	56	2.86%	164	6.20%	580	4.55%
Unadjusted Plan Factor			0.786		1.065		0.930		0.859	
Member Months			8,142		1,960		2,647		12,749	
Budget Neutral Plan Factor			0.915		1.240		1.083		1.000	

South Region										
			Magnolia		Molina		United		Total	
			Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months	Member Months	% of Member Months
Description	Risk	Weight								
Intercept	Regression Intercept	0.457		100.00%		100.00%		100.00%		100.00%
Money Code 2	CWS Foster Care	0.862	1,614	14.24%	933	34.75%	1,151	27.73%	3,698	20.35%
Money Code 3	Receiving IV-E Assistance	0.743	1,469	12.96%	759	28.27%	814	19.61%	3,042	16.74%
Money Code 4	Receiving IV-E Subadoption Ast	0.064	7,645	67.45%	936	34.86%	1,827	44.01%	10,408	57.28%
Other	All other Money Codes	0.000	606	5.35%	57	2.12%	359	8.65%	1,022	5.62%
Unadjusted Plan Factor			0.719		0.989		0.870		0.793	
Member Months			11,334		2,685		4,151		18,170	
Budget Neutral Plan Factor			0.906		1.246		1.096		1.000	

Exhibit 2
Mississippi Division of Medicaid
Foster Care Risk Score Adjustment Summary - Q1 to Q2 2023 Risk Scores
January 2023 to June 2023 Enrollment Period

North Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	8,224	0.727	0.917
Molina	1,797	0.994	1.253
United	3,135	0.852	1.074
Total	13,156	0.793	1.000

Central Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	8,142	0.786	0.915
Molina	1,960	1.065	1.240
United	2,647	0.930	1.083
Total	12,749	0.859	1.000

South Region			
	All Members		
CCO	Member Months	Unadjusted Risk Score	Budget Neutral Risk Score
Magnolia	11,334	0.719	0.906
Molina	2,685	0.989	1.246
United	4,151	0.870	1.096
Total	18,170	0.793	1.000

Caveats and Limitations
Mississippi Division of Medicaid
Q1 to Q2 2023 MississippiCAN Risk Adjustment Exhibits
READ BEFORE PROCEEDING

These exhibits are intended for the internal use of DOM in accordance with its statutory and regulatory requirements. Milliman recognizes the materials may be public records subject to disclosure to third parties; however, Milliman does not intend to benefit, and assumes no duty or liability to, any third parties who receive these exhibits. These exhibits should only be reviewed in their entirety.

Milliman has developed certain models to estimate the values included in these exhibits. The intent of the models was to calculate Q1 to Q2 2023 risk scores for this MississippiCAN program. We reviewed the models, including their inputs, calculations, and outputs for consistency, reasonableness, and appropriateness to the intended purpose and in compliance with generally accepted actuarial practice and relevant actuarial standards of practice (ASOP).

The models rely on data and information as input to the models. We used CCO encounters, FFS claims, and eligibility data from January 2021 to September 2022 with runout through September 2022 and other information from DOM, MississippiCAN CCOs, and CMS to calculate the risk scores shown in these exhibits. If the underlying data used is inadequate or incomplete, the results will be likewise inadequate or incomplete.

These exhibits are designed to document the risk scores for Q1 to Q2 2023 for MississippiCAN eligible members. This information may not be appropriate, and should not be used, for other purposes. This information should be viewed in conjunction with our final SFY 2023 capitation rate report.

Differences between the actual costs incurred by members and the costs predicted using the developed risk weights will differ. 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.

We are Actuaries for Milliman, members of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of our knowledge and belief, these exhibits are complete and accurate and have been prepared in accordance with generally recognized and accepted actuarial principles and practices.