

JULY 1, 2023 THROUGH JUNE 30, 2025

**COMPARISON OF MISSISSIPPI
COORDINATED CARE ORGANIZATION
ENCOUNTER DATA TO CASH
DISBURSEMENTS FOR
MAGNOLIA HEALTH**



OCTOBER 15, 2025





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The Mississippi Division of Medicaid (DOM) requires that each of the coordinated care organizations (CCOs) submit encounter data to DOM's fiscal agent contractor (FAC), Gainwell Technologies. To ensure complete encounter data is being received, Myers and Stauffer provides bi-monthly encounter reconciliations. As part of this process, Myers and Stauffer analyzes Medicaid encounter data that has been submitted by the CCOs to the FAC and completes a comparison of the encounters to cash disbursement journals provided by each CCO. For purposes of this analysis, "encounter data" are claims that have been paid by CCOs or delegated vendors (e.g., vision and dental) to health care providers that have rendered health care services to members enrolled with the CCO.

Myers and Stauffer is working closely with DOM and the CCOs to identify deficiencies and propose solutions that will result in high quality and reliable encounter data being submitted and available to the state agency to measure and monitor its Medicaid managed care program. Validated encounter data has many uses such as utilization by actuaries as part of their rate setting analyses as well as fulfilling the federal reporting requirements related to the Medicaid Managed Care Rule, to provide program management and oversight, and for tracking, accounting, and other ad hoc analyses.

Section 11.S.6 of the contract between DOM and the CCO states,

"The Contractor will assist the Division in reconciliation of the Cash Disbursement Journal to Contractor Paid Amount totals for submitted claims. The Contractor shall submit at least ninety-nine percent (99%) of all Member Encounter Data in a valid format, which will be deemed valid by the Division, including those of Subcontractors or delegated vendors as provided for in this section, both for the original and any adjustment or void. The Division or its Agent will validate Member Encounter Data submissions according to the Cash Disbursement Journal of the Contractor and any of its applicable Subcontractors."

The bi-monthly encounter reconciliations also help fulfill part of the work requirements set forth in step number 3 of the Center for Medicare and Medicaid's (CMS) External Quality Review (EQR) Protocol 5, which requires a determination of the completeness, accuracy, and quality of the encounter data being submitted by each CCO. CMS' External Quality Review, Protocol 5, is an excellent way to assess whether the encounter data can be used to determine program effectiveness, accurately evaluate utilization, identify service gaps, and make strong management decisions. In addition, the Protocol evaluates both departmental policies, as well as the policies, procedures, and systems of the health plans to identify strengths and opportunities to enhance oversight. A protocol 5 review was completed by Myers and Stauffer in June 2024.

Our work was performed in accordance with American Institute of Certified Public Accountants (AICPA) professional standards for consulting engagements. We were not engaged to, nor did we perform, an audit, examination, or review services; accordingly, we express no opinion or conclusion related to the procedures performed or the information and documentation we reviewed. In addition, our engagement was not specifically designed for, and should not be relied on, to disclose errors, fraud, or other illegal acts that may exist.

The results of our engagement and this report are intended only for the internal use of the Mississippi Division of Medicaid, and should not be used for any other purpose.



MS Magnolia Health Encounter and CDJ Comparison



SUMMARY

DOM requested that, for this study, we review the CCO's entire plan, each delegated vendor, and fee-for-service (non-vendor) paid encounters to determine if the paid encounters meet the state contract minimum completeness requirement of **99 percent** when compared to the CDJ files. The encounters and CDJ files utilized in this study met the following criteria:

- Encounters were paid within the reporting period of July 1, 2023 through June 30, 2025;
- CDJ transactions had payment dates within the reporting period of July 1, 2023 through June 30, 2025;
- Encounters were received and processed by the FAC for transmission to Myers and Stauffer through August 29, 2025.

Table A — Magnolia Health CAN Cumulative Completion Totals and Percentages

Table A — Magnolia Health CAN Cumulative Completion Totals and Percentages								
Description	Entire Plan	Delegated Vendor						
		Fee-for-Service (Non-Vendor)	Express Scripts (Pharmacy Benefits)	Envolve Pharmacy Solutions (Pharmacy Benefits)	Envolve Dental (Dental Services)	Envolve Vision (Vision Services)	Magnolia Behavioral Health	MTM (NET)
Encounter Total (FAC reported)	\$2,028,673,885	\$1,317,071,747	\$208,085,965	\$68,729,854	\$96,125,626	\$23,478,657	\$300,113,931	\$15,068,105
<i>Total Encounter Adjustments (\$)</i>	<i>(\$455,064,814)</i>	<i>(\$319,335,483)</i>	<i>(\$37,295,911)</i>	<i>(\$14,235,478)</i>	<i>(\$6,321,462)</i>	<i>(\$1,988,135)</i>	<i>(\$74,686,038)</i>	<i>(\$1,202,306)</i>
<i>Total Encounter Adjustments (%)</i>	<i>-22.43%</i>	<i>-24.24%</i>	<i>-17.92%</i>	<i>-20.71%</i>	<i>-6.57%</i>	<i>-8.46%</i>	<i>-24.88%</i>	<i>-7.97%</i>
Net Encounter Total	\$1,573,609,071	\$997,736,264	\$170,790,054	\$54,494,375	\$89,804,164	\$21,490,522	\$225,427,894	\$13,865,798
CDJ Total	\$1,575,211,348	\$994,728,069	\$170,131,660	\$53,615,670	\$89,465,030	\$21,513,854	\$231,907,919	\$13,849,147
<i>Variance</i>	<i>(\$1,602,278)</i>	<i>\$3,008,196</i>	<i>\$658,394</i>	<i>\$878,705</i>	<i>\$339,133</i>	<i>(\$23,332)</i>	<i>(\$6,480,026)</i>	<i>\$16,652</i>
Completion (%)	99.89%	100.30%	100.38%	101.63%	100.37%	99.89%	97.20%	100.12%
100% Limited^ Cumulative Completion (%)	99.58%	100.00%	100.00%	100.00%	100.00%			100.00%
Contract Minimum Completeness Requirement (%)	99.00%							
Non-Compliant (%)							-1.80%	

[^] – To avoid overstating the Entire Plan CAN results in situations where the CCO or an individual vendor's cumulative completion percentage exceeds 100 percent, we have decreased the encounter totals by the reporting period's variance in comparison with the CDJs. Please see data analysis assumption number 10 on page 21 for further explanation.



For this study, Myers and Stauffer analyzes the encounter data that is submitted by the CCOs to the FAC, currently Gainwell Technologies, and loaded into the FAC Medicaid Management Information System (MMIS). Encounters submitted by any CCO that were rejected by the FAC for errors in submission or other reasons are not transmitted to Myers and Stauffer.

Furthermore, Myers and Stauffer analyzes the encounter data from the FAC MMIS and makes the following adjustments. Table B below outlines the impact of applying these encounter analysis adjustments to the encounter paid amounts, when compared to the raw data received.

1. Medical and institutional encounter voids with original encounters already offset by backouts, positive plan paid amounts, or invalid former TCN values are excluded from the encounter totals. Additionally, pharmacy encounters identified as denied by Conduent or with a denied CCO adjudication status from Gainwell are excluded from the encounter totals.
2. Myers and Stauffer identified potential duplicate encounters using our encounter review logic. Based on a comparison to the CDJ files, we noted some are actual duplicate submissions, and some are replacement encounter records without a matching void (i.e. calculated voids). Lists of these potential duplicates, noted in previous reports, were provided to Magnolia for examination. We have reviewed Magnolia Health’s disputed duplicate response files submitted to us prior to August 28, 2025. The accepted responses have been incorporated into the analysis for this report. Responses requiring further explanation have not been added to this report and will be resubmitted to the CCO.
3. Our potential duplicate and calculated void processes attempt to identify and remove encounters that appear to be duplicated for some reason. Encounters paid by the CCO but denied by the FAC were included in both our potential duplicate and calculated void processes. It should be noted that the inclusion of denied encounters by either the FAC or the CCO can artificially inflate the percentages of encounter counts and paid amounts being removed. In the case of encounters denied by the FAC, some of these encounters may have already been identified and flagged by the FAC as being duplicates.

Table B — Myers and Stauffer LC’s Adjustments to Magnolia Health CAN Encounters			
Description	Encounter Count	Paid Amount	Paid Amount (% of Total*)
Total Encounter Amount (FAC Reported)	16,315,308	\$2,028,673,885	100.00%
<i>Adjustment Type</i>			
<i>Denied</i>	<i>(826,517)</i>	<i>(\$43,109,966)</i>	<i>-2.12%</i>
<i>Calculated Void</i>	<i>(2,539,923)</i>	<i>(\$410,524,950)</i>	<i>-20.23%</i>
<i>Duplicate</i>	<i>(10,457)</i>	<i>(\$1,429,898)</i>	<i>-0.07%</i>
<i>Total Adjustments Made</i>	<i>(3,376,897)</i>	<i>(\$455,064,814)</i>	<i>-22.43%</i>
Net Encounter Amounts	12,938,411	\$1,573,609,071	77.57%

* - Percentage ratios are rounded down for each adjustment type and may not add up to the total percentage of adjustments made for this reporting period. Please see data analysis assumption number 9 on page 21 for further explanation.



During the course of this analysis, Myers and Stauffer identified potential data issues that may impact the completion percentages for specific delegated vendors and/or fee-for-service (non-vendor). **Section A** details payor specific issues related to completion percentages outside the targeted range, while **Section B** notes outstanding payor issues that Magnolia Health may need to continue to work to identify and resolve. **Section C** notes data issues that may impact all payors to some extent (non-vendor and vendor).

Please reference Tables 1 through 8 starting on page 9 for Magnolia Health's CAN plan, delegated vendor, and fee-for-service (non-vendor) reconciliation period tables. These tables contain detailed reconciliation totals, completion percentages, and encounter analysis adjustments made by Myers and Stauffer.

SECTION A – Non-vendor and/or vendor data issues that may cause completion percentages outside the targeted range (below 99 percent or above 100 percent):

1. **Fee-for-Service (non-vendor) and Behavioral Health (Tables 2 and 7):** The Behavioral Health (BHH) cumulative completion percentage is low due to the recent submission of encounter voids. We have noted instances of voided encounter records with corresponding paid CDJ transactions. The potentially missing or failed encounter resubmissions may be causing the low BHH cumulative completion percentage.
 - We also noted instances of multiple payment sequences being submitted in the encounter data records related to each CDJ payment sequence. The final paid amounts for the encounters appear to mostly match the CDJ data totals with the use of potential duplicate identification logic. However, the payment amounts related to a specific sequence may be allocated to one month in the encounters and a different month in the CDJ data. This issue appears to be causing the inflated fee-for-service (FFS) cumulative completion percentage and some FFS and BHH monthly completion percentage to fluctuate from above 100 percent to below 99 percent.
 - Additionally, we noted due to a system limitation, encounter voids are being allocated to their original paid dates, instead of the actual dates the encounter voids occurred. This may be contributing to the monthly completion percentages variances.
 - **We recommend Magnolia Health identify and submit any potentially missing medical and behavioral health encounter records, including adjustments and voids.**
2. **Express Scripts (Table 3):** The Express Scripts Pharmacy CAN cumulative completion percentage and many monthly completion percentages appear to be inflated due to instances of potentially missing or misallocated encounter voids, when compared to the CDJ files. Encounter voids being allocated to the date of their original payment instead of the date the recoupment occurred in the CDJ files, due to a system limitation, may be contributing to lower encounter totals for earlier months (e.g., October 2023) and inflated encounter totals for more recent months (e.g., February 2024).
 - Effective July 1, 2024, the adjudication of pharmacy claims for managed care members was directed to Gainwell Technologies, the FAC. The fluctuating pharmacy completion percentages starting in July 2024 appear to be due to payment differences between the encounter data and CDJ files during the run-out period.
 - **We recommend Magnolia Health continue to work with Gainwell to identify and correct any outstanding pharmacy encounter voids.**



MS Magnolia Health Encounter and CDJ Comparison

3. **Enville Pharmacy Solutions (Table 4):** The Enville Pharmacy CAN cumulative completion percentage appears to be over 100 percent due to potentially missing and/or misallocated encounter voids, when compared to the CDJ files. Pharmacy encounter voids appear in our data extracts with their original, replaced encounter paid date (instead of the actual recoupment or void date found in the CDJ files), contributing to many of the monthly completion percentage fluctuations.
 - In order to limit the impact of potentially missing pharmacy encounter voids on the cumulative completion percentage and the entire plan totals, we have restricted the monthly completion percentages to a maximum of 100 percent for each month and restricted the encounter totals to the CDJ totals at most in cases when the monthly completion percentages were negative for each payor and calculated a separate 100 percent monthly completion percentage for the reporting period.
 - **Enville Pharmacy Solutions was replaced by Express Scripts as Magnolia Health's pharmacy vendor effective October 1, 2023. Pharmacy claims adjudication was subsequently removed from the CCO's contractual scope in July 2024.**
4. **Enville Dental (Table 5):** The Enville Dental CAN cumulative completion percentage is slightly inflated, potentially due to missing and/or misallocated encounter sequences (primarily voids). It appears that voids in the CDJ files that do not have corresponding encounter voids are causing high completion percentages for many months throughout the period.
 - We noted instances of adjustments submitted as original encounters without voiding the replaced records. These encounters are being mostly identified as potential duplicates, and excluded from the reconciliation totals, but may be contributing to the inflated cumulative completion percentage.
 - **Magnolia Health communicated that an issue with their dental encounter adjustments and voids was identified and corrected as of May 30, 2025. We recommend Magnolia Health continue to work with Enville Dental and Gainwell to submit any outstanding encounter voids or adjustments.**
5. **MTM (Table 8):** The MTM CAN cumulative completion percentage and most of the monthly completion percentages appear to be slightly inflated, primarily due to unmatched payment sequences when the encounter data and CDJ files are compared.
 - We also noted instances of trip legs with different paid dates in the CDJ files having corresponding encounter submissions where the total paid amount is allocated to only the last paid date. MTM clarified the trip leg payments are rolled up into a single encounter record for a given member and date of service and assigned the latest paid date. This may be contributing to monthly completion percentage variances when the CDJ paid dates occur in different months.
 - **We recommend Magnolia Health continue to work with MTM to ensure all encounter and CDJ sequences are submitted.**

SECTION B – Additional non-vendor and/or vendor data issues and notes that currently may not impact compliance:

6. **Enville Vision (Table 6):** Many of the Enville Vision CAN monthly completion percentages appear to be above 100 percent due to potentially missing or misallocated encounter voids, when compared to the CDJ files.
 - **We recommend Magnolia Health continue to work with Enville Vision to submit any outstanding encounter records, particularly voids.**

SECTION C – General data issues that may be contributing to non-vendor and/or vendor variances:

7. **CCO Denied Encounters (Tables 1 through 8):** Gainwell has provided supplemental files with the CCO adjudication status for pharmacy encounter records. As part of the reconciliation process, the paid amounts for these denied encounters are being set to zero. The impact of this denied encounter adjustment to the FAC reported encounter data can be found as part of the adjustments column of the Express Scripts and Envolve Pharmacy Solutions monthly tables (Tables 3 and 4) as well as in the “Denied” row of Table B on page 5. Gainwell is still working to identify any remaining duplicate pharmacy encounters and missing or failed pharmacy encounter voids.
 - Please note that Gainwell is still working to identify the CCO adjudication status for non-pharmacy encounter records. We expect to receive a separate supplemental file of the adjudication status for these claims in the future. In the meantime, the non-pharmacy encounter totals may be inflated by any denied encounters with non-zero paid amounts.
8. **Calculated Voids and Potential Duplicates (Tables 1 through 8):** There appear to be an increased number of calculated voids and potential duplicates identified related to the FAC transition from Conduent to Gainwell. As noted in data issue number 7, we have incorporated previously missing encounter backouts and supplemental files identifying denied pharmacy encounters. However, the percentage of calculated void and potential duplicate adjustments for Magnolia Health remain much higher than the other CCOs. It appears we may still be missing encounter backouts for adjustment encounters (frequency code 7) that are replacing MMIS denied original encounters.
9. **Encounter Voids (Tables 1 through 8):** There appear to be instances of Gainwell voids with a frequency code of 8 where the CCO paid amount on the encounter is more than zero dollars. Since encounter voids are not expected to have any associated final CCO paid amounts, these encounter void amounts are being set to zero. Additionally, we noted that our data extracts from Gainwell appear to provide the original, replaced encounter paid date on encounter voids (frequency code 8) instead of the recoupment date. This system limitation may be contributing to some monthly completion percentage fluctuations. However, there is a system change in progress to retrieve the updated CCO paid date from void encounter submissions.
10. **MMIS Response Files (Tables 1 through 8):** Magnolia Health and the other CCOs previously noted some missing response files for their encounter submissions to Gainwell. Since the CCOs use these response files to reconcile their encounter submissions and identify previous transactions for any encounter voids or adjustments, the delay in some response file records may be contributing to the missing encounter sequences noted in this report, particularly the void and adjustment sequences.



**MAGNOLIA HEALTH CAN ENTIRE PLAN
MONTHLY TABLE**

MS Magnolia Health Encounter and CDJ Comparison

Table 1 — Magnolia Health CAN (Entire Plan)

Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited[^] Monthly Completion Percentage
July 2023	\$78,543,896	(\$16,009,002)	-20.38%	\$62,534,894	\$63,081,420	(\$546,526)	99.13%	99.11%
August 2023	\$110,038,629	(\$31,901,457)	-28.99%	\$78,137,172	\$75,138,676	\$2,998,496	103.99%	99.99%
September 2023	\$91,677,461	(\$17,540,460)	-19.13%	\$74,137,001	\$74,357,094	(\$220,093)	99.70%	99.14%
October 2023	\$91,791,991	(\$25,295,234)	-27.55%	\$66,496,757	\$66,160,951	\$335,806	100.50%	98.53%
November 2023	\$106,252,479	(\$28,095,473)	-26.44%	\$78,157,006	\$79,085,219	(\$928,212)	98.82%	98.38%
December 2023	\$87,516,215	(\$14,329,903)	-16.37%	\$73,186,312	\$71,193,897	\$1,992,415	102.79%	100.06%
January 2024	\$81,324,497	(\$16,852,608)	-20.72%	\$64,471,889	\$64,464,567	\$7,322	100.01%	99.01%
February 2024	\$126,086,240	(\$47,628,545)	-37.77%	\$78,457,696	\$77,802,926	\$654,770	100.84%	98.91%
March 2024	\$167,569,728	(\$90,021,595)	-53.72%	\$77,548,133	\$74,702,655	\$2,845,477	103.80%	99.98%
April 2024	\$101,051,974	(\$26,345,731)	-26.07%	\$74,706,243	\$74,944,120	(\$237,876)	99.68%	98.89%
May 2024	\$107,679,868	(\$22,976,223)	-21.33%	\$84,703,644	\$83,819,849	\$883,795	101.05%	99.98%
June 2024	\$84,010,332	(\$16,354,689)	-19.46%	\$67,655,643	\$68,976,732	(\$1,321,089)	98.08%	97.78%
July 2024	\$66,462,452	(\$14,819,095)	-22.29%	\$51,643,357	\$53,172,883	(\$1,529,527)	97.12%	96.21%
August 2024	\$87,713,184	(\$19,374,095)	-22.08%	\$68,339,089	\$68,802,456	(\$463,368)	99.32%	99.17%
September 2024	\$67,173,906	(\$10,562,741)	-15.72%	\$56,611,165	\$57,091,661	(\$480,496)	99.15%	99.08%
October 2024	\$77,947,090	(\$12,823,003)	-16.45%	\$65,124,086	\$66,114,637	(\$990,551)	98.50%	98.36%
November 2024	\$63,783,258	(\$9,992,214)	-15.66%	\$53,791,044	\$53,912,223	(\$121,180)	99.77%	99.31%
December 2024	\$65,256,407	(\$9,469,033)	-14.51%	\$55,787,374	\$56,124,738	(\$337,364)	99.39%	99.36%
January 2025	\$54,194,555	(\$4,565,595)	-8.42%	\$49,628,959	\$50,494,254	(\$865,294)	98.28%	98.26%
February 2025	\$62,577,025	(\$6,368,563)	-10.17%	\$56,208,461	\$57,106,206	(\$897,744)	98.42%	98.41%
March 2025	\$57,505,176	(\$4,969,752)	-8.64%	\$52,535,424	\$53,380,513	(\$845,089)	98.41%	98.39%
April 2025	\$64,172,489	(\$4,079,456)	-6.35%	\$60,093,032	\$60,901,358	(\$808,326)	98.67%	98.67%
May 2025	\$72,801,603	(\$2,701,768)	-3.71%	\$70,099,835	\$70,527,128	(\$427,293)	99.39%	99.37%
June 2025	\$55,543,431	(\$1,988,577)	-3.58%	\$53,554,854	\$53,855,183	(\$300,330)	99.44%	99.44%
Cumulative Totals	\$2,028,673,885	(\$455,064,814)	-22.43%	\$1,573,609,071	\$1,575,211,348	(\$1,602,278)	99.89%	
100% Limited[^] Cumulative Totals				\$1,568,707,990	\$1,575,211,348	(\$6,503,358)	99.58%	98.96%
State Contract Minimum Completeness Percentage Requirement							99.00%	

[^] - Since the CAN cumulative completion percentage for the CCO and/or delegated vendor(s) exceed 100 percent, we have decreased the Entire Plan CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and cumulative basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



**MAGNOLIA HEALTH CAN
SUMMARY REPORTING CHARTS**

Chart 1. Monthly CDJ totals and encounter submissions for Magnolia Health CAN’s entire plan

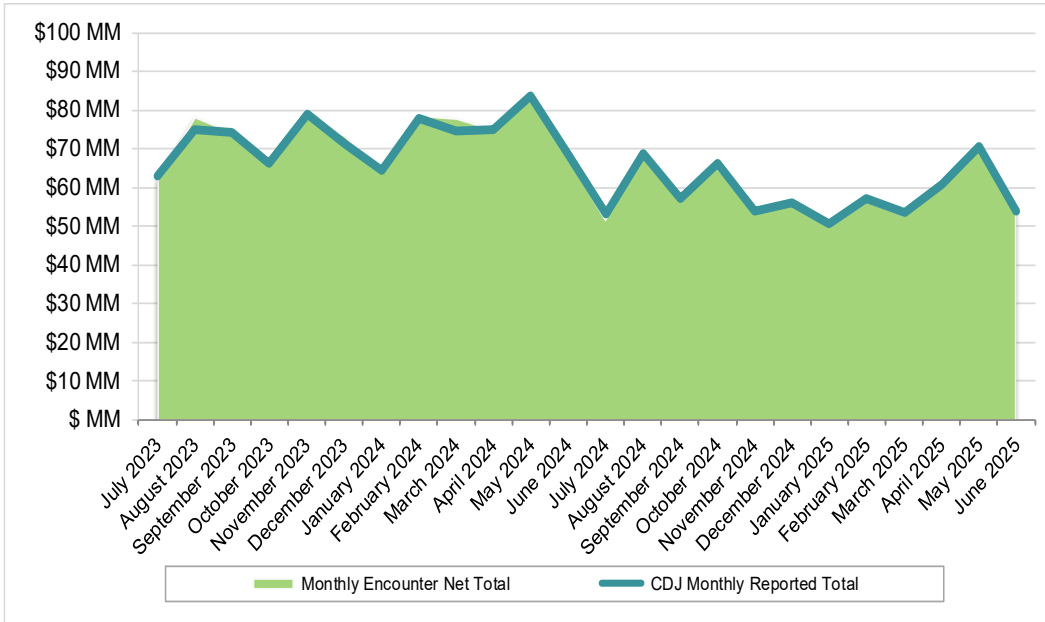
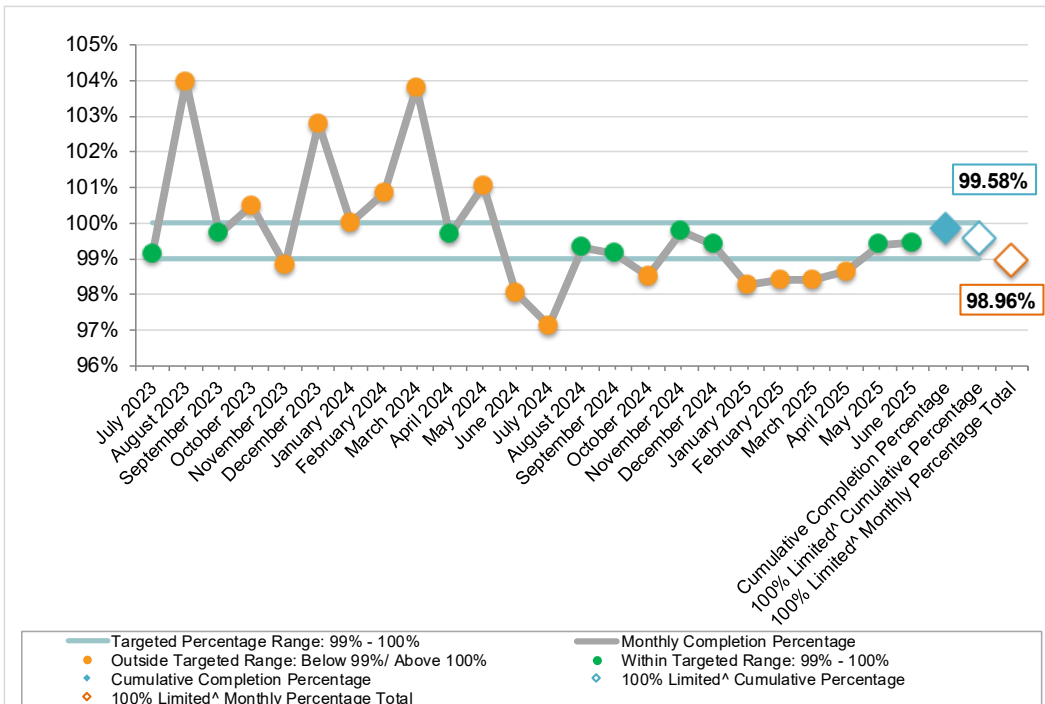


Chart 2. Magnolia Health CAN’s monthly encounter submissions expressed as a percentage of payments submitted to the FAC to reported CCO CDJ payments for the entire plan



^ - To avoid overstating the Entire Plan results in situations where any payor’s cumulative and/or monthly completion percentages exceed 100 percent (or the encounter totals exceed the CDJ totals when the percentage is negative), we have identified 100 percent limited completion percentages on a monthly and cumulative or reporting period basis. Please see data analysis assumption number 10 on page 21 for further explanation.



MAGNOLIA HEALTH CAN FEE-FOR-SERVICE MONTHLY TABLE

MS Magnolia Health Encounter and CDJ Comparison

Table 2 — Magnolia Health CAN Fee-for-Service (Non-Vendor)								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$45,337,888	(\$10,827,810)	-23.88%	\$34,510,078	\$34,864,183	(\$354,105)	98.98%	98.98%
August 2023	\$70,177,852	(\$25,004,078)	-35.62%	\$45,173,774	\$42,869,942	\$2,303,832	105.37%	100.00%
September 2023	\$55,496,760	(\$13,063,020)	-23.53%	\$42,433,740	\$42,037,676	\$396,064	100.94%	100.00%
October 2023	\$49,845,074	(\$13,159,896)	-26.40%	\$36,685,178	\$36,187,986	\$497,192	101.37%	100.00%
November 2023	\$53,127,007	(\$8,512,779)	-16.02%	\$44,614,228	\$44,309,141	\$305,087	100.68%	100.00%
December 2023	\$50,237,176	(\$8,658,691)	-17.23%	\$41,578,485	\$39,705,798	\$1,872,687	104.71%	100.00%
January 2024	\$45,371,640	(\$9,965,596)	-21.96%	\$35,406,044	\$35,002,892	\$403,152	101.15%	100.00%
February 2024	\$79,251,474	(\$33,813,799)	-42.66%	\$45,437,675	\$44,202,738	\$1,234,938	102.79%	100.00%
March 2024	\$112,609,930	(\$70,230,154)	-62.36%	\$42,379,777	\$40,975,408	\$1,404,369	103.42%	100.00%
April 2024	\$61,797,239	(\$21,237,754)	-34.36%	\$40,559,484	\$40,152,483	\$407,001	101.01%	100.00%
May 2024	\$66,727,370	(\$20,046,747)	-30.04%	\$46,680,623	\$46,077,863	\$602,760	101.30%	100.00%
June 2024	\$45,476,783	(\$10,254,035)	-22.54%	\$35,222,748	\$35,443,165	(\$220,417)	99.37%	99.37%
July 2024	\$47,638,625	(\$11,395,184)	-23.92%	\$36,243,440	\$38,074,395	(\$1,830,955)	95.19%	95.19%
August 2024	\$66,942,467	(\$15,718,754)	-23.48%	\$51,223,713	\$51,528,823	(\$305,110)	99.40%	99.40%
September 2024	\$49,215,969	(\$7,988,409)	-16.23%	\$41,227,560	\$41,503,923	(\$276,363)	99.33%	99.33%
October 2024	\$56,987,049	(\$8,707,864)	-15.28%	\$48,279,184	\$48,203,679	\$75,506	100.15%	100.00%
November 2024	\$46,416,442	(\$7,334,122)	-15.80%	\$39,082,320	\$38,850,898	\$231,422	100.59%	100.00%
December 2024	\$46,831,349	(\$6,298,529)	-13.44%	\$40,532,820	\$40,687,068	(\$154,249)	99.62%	99.62%
January 2025	\$39,553,378	(\$3,007,504)	-7.60%	\$36,545,874	\$37,326,536	(\$780,662)	97.90%	97.90%
February 2025	\$47,106,161	(\$4,469,016)	-9.48%	\$42,637,145	\$43,534,775	(\$897,630)	97.93%	97.93%
March 2025	\$41,965,024	(\$3,975,907)	-9.47%	\$37,989,117	\$38,815,232	(\$826,115)	97.87%	97.87%
April 2025	\$46,440,398	(\$2,697,264)	-5.80%	\$43,743,134	\$44,166,095	(\$422,961)	99.04%	99.04%
May 2025	\$53,538,206	(\$2,122,010)	-3.96%	\$51,416,195	\$51,812,137	(\$395,942)	99.23%	99.23%
June 2025	\$38,980,487	(\$846,559)	-2.17%	\$38,133,929	\$38,395,233	(\$261,304)	99.31%	99.31%
Cumulative Totals	\$1,317,071,747	(\$319,335,483)	-24.24%	\$997,736,264	\$994,728,069	\$3,008,196	100.30%	
100% Limited[^] Cumulative Totals				\$994,728,069	\$994,728,069	\$0	100.00%	99.32%
State Contract Minimum Completeness Percentage Requirement							99.00%	

[^] - We have decreased the Magnolia Health CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and reporting period basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



**MAGNOLIA HEALTH CAN EXPRESS SCRIPTS
(PHARMACY) MONTHLY TABLE**

Table 3 — Magnolia Health CAN Express Scripts (Pharmacy)								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$0	\$0		\$0	\$0	\$0		
August 2023	\$0	\$0		\$0	\$0	\$0		
September 2023	\$0	\$0		\$0	\$0	\$0		
October 2023	\$19,457,856	(\$3,705,876)	-19.04%	\$15,751,980	\$16,142,511	(\$390,531)	97.58%	97.58%
November 2023	\$34,966,459	(\$16,702,785)	-47.76%	\$18,263,674	\$18,900,716	(\$637,042)	96.62%	96.62%
December 2023	\$22,062,380	(\$4,155,179)	-18.83%	\$17,907,201	\$17,912,582	(\$5,382)	99.96%	99.96%
January 2024	\$23,212,946	(\$4,361,907)	-18.79%	\$18,851,038	\$18,625,284	\$225,754	101.21%	100.00%
February 2024	\$22,772,098	(\$4,281,310)	-18.80%	\$18,490,788	\$18,235,439	\$255,349	101.40%	100.00%
March 2024	\$22,326,328	(\$2,759,719)	-12.36%	\$19,566,609	\$19,412,838	\$153,770	100.79%	100.00%
April 2024	\$20,750,078	(\$1,029,497)	-4.96%	\$19,720,582	\$19,539,936	\$180,646	100.92%	100.00%
May 2024	\$20,858,334	(\$155,239)	-0.74%	\$20,703,096	\$20,497,980	\$205,116	101.00%	100.00%
June 2024	\$19,243,091	(\$70,892)	-0.36%	\$19,172,199	\$19,061,309	\$110,890	100.58%	100.00%
July 2024	\$2,334,031	(\$67,976)	-2.91%	\$2,266,056	\$1,808,163	\$457,893	125.32%	100.00%
August 2024	\$47,994	(\$2,804)	-5.84%	\$45,190	\$2,916	\$42,273	1549.51%	100.00%
September 2024	\$25,845	(\$2,728)	-10.55%	\$23,117	(\$3,485)	\$26,601	-663.35%	100.00%
October 2024	\$15,900	\$0	0.00%	\$15,900	\$5,835	\$10,065	272.48%	100.00%
November 2024	\$5,751	\$0	0.00%	\$5,751	\$5,632	\$119	102.10%	100.00%
December 2024	\$1,770	\$0	0.00%	\$1,770	(\$3,096)	\$4,866	-57.16%	100.00%
January 2025	\$3,683	\$0	0.00%	\$3,683	\$3,403	\$281	108.24%	100.00%
February 2025	\$0	\$0		\$0	(\$16,695)	\$16,695	0.00%	0.00%
March 2025	\$0	\$0		\$0	(\$475)	\$475	0.00%	0.00%
April 2025	\$0	\$0		\$0	(\$917)	\$917	0.00%	0.00%
May 2025	\$1,422	\$0	0.00%	\$1,422	\$885	\$537	160.61%	100.00%
June 2025	\$0	\$0		\$0	\$897	(\$897)	0.00%	0.00%
Cumulative Totals	\$208,085,965	(\$37,295,911)	-17.92%	\$170,790,054	\$170,131,660	\$658,394	100.38%	
100% Limited[^] Cumulative Totals				\$170,131,660	\$170,131,660	\$0	100.00%	99.40%
State Contract Minimum Completeness Percentage Requirement							99.00%	

[^] - We have decreased the Express Scripts Pharmacy CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and reporting period basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



MAGNOLIA HEALTH CAN ENOLVE PHARMACY SOLUTIONS MONTHLY TABLE

Table 4 — Magnolia Health CAN Envolve Pharmacy Solutions (Pharmacy)								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$20,427,830	(\$4,262,384)	-20.86%	\$16,165,446	\$16,362,937	(\$197,492)	98.79%	98.79%
August 2023	\$21,110,414	(\$2,588,488)	-12.26%	\$18,521,927	\$18,105,629	\$416,298	102.29%	100.00%
September 2023	\$20,003,881	(\$990,463)	-4.95%	\$19,013,418	\$19,199,483	(\$186,065)	99.03%	99.03%
October 2023	\$7,086,222	(\$6,298,243)	-88.88%	\$787,979	\$22,401	\$765,578	3517.56%	100.00%
November 2023	\$41,448	(\$49,576)	-119.60%	(\$8,127)	\$6,503	(\$14,631)	-124.97%	-124.97%
December 2023	\$26,477	(\$27,515)	-103.91%	(\$1,038)	(\$70,733)	\$69,695	1.46%	1.46%
January 2024	\$312	(\$255)	-81.88%	\$57	(\$8,313)	\$8,369	-0.67%	100.00%
February 2024	\$4,032	(\$5,057)	-125.42%	(\$1,025)	(\$2,239)	\$1,214	45.78%	45.78%
March 2024	\$16	\$0	0.00%	\$16	\$0	\$16		
April 2024	\$0	\$0		\$0	\$0	\$0		
May 2024	\$0	\$0		\$0	\$0	\$0		
June 2024	\$0	\$0		\$0	\$0	\$0		
July 2024	\$0	\$0		\$0	\$0	\$0		
August 2024	\$29,221	(\$13,497)	-46.18%	\$15,724	\$0	\$15,724		
September 2024	\$0	\$0		\$0	\$0	\$0		
October 2024	\$0	\$0		\$0	\$0	\$0		
November 2024	\$0	\$0		\$0	\$0	\$0		
December 2024	\$0	\$0		\$0	\$0	\$0		
January 2025	\$0	\$0		\$0	\$0	\$0		
February 2025	\$0	\$0		\$0	\$0	\$0		
March 2025	\$0	\$0		\$0	\$0	\$0		
April 2025	\$0	\$0		\$0	\$0	\$0		
May 2025	\$0	\$0		\$0	\$0	\$0		
June 2025	\$0	\$0		\$0	\$0	\$0		
Cumulative Totals	\$68,729,854	(\$14,235,478)	-20.71%	\$54,494,375	\$53,615,670	\$878,705	101.63%	
100% Limited[^] Cumulative Totals				\$53,615,670	\$53,615,670	\$0	100.00%	99.38%
							State Contract Minimum Completeness Percentage Requirement	99.00%

[^] - We have decreased the Envolve Pharmacy Solutions CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and reporting period basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



MAGNOLIA HEALTH CAN INVOLVE DENTAL MONTHLY TABLE

MS Magnolia Health Encounter and CDJ Comparison

Table 5 — Magnolia Health CAN Involve Dental (Dental)								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$2,968,175	(\$78,632)	-2.64%	\$2,889,543	\$2,888,386	\$1,157	100.04%	100.00%
August 2023	\$4,640,874	(\$961,503)	-20.71%	\$3,679,371	\$3,674,170	\$5,201	100.14%	100.00%
September 2023	\$3,440,539	(\$210,282)	-6.11%	\$3,230,257	\$3,216,346	\$13,911	100.43%	100.00%
October 2023	\$3,257,689	\$0	0.00%	\$3,257,689	\$3,214,688	\$43,001	101.33%	100.00%
November 2023	\$3,465,508	\$0	0.00%	\$3,465,508	\$3,426,006	\$39,502	101.15%	100.00%
December 2023	\$3,377,353	(\$180,591)	-5.34%	\$3,196,763	\$3,212,712	(\$15,949)	99.50%	99.50%
January 2024	\$2,539,411	(\$70,767)	-2.78%	\$2,468,644	\$2,462,245	\$6,400	100.25%	100.00%
February 2024	\$5,196,206	(\$1,363,583)	-26.24%	\$3,832,623	\$3,824,322	\$8,301	100.21%	100.00%
March 2024	\$4,057,583	(\$80,519)	-1.98%	\$3,977,064	\$3,971,271	\$5,793	100.14%	100.00%
April 2024	\$3,793,523	(\$156,949)	-4.13%	\$3,636,573	\$3,639,170	(\$2,597)	99.92%	99.92%
May 2024	\$4,391,009	(\$227,970)	-5.19%	\$4,163,038	\$4,136,125	\$26,913	100.65%	100.00%
June 2024	\$4,874,184	(\$1,055,491)	-21.65%	\$3,818,693	\$3,721,070	\$97,623	102.62%	100.00%
July 2024	\$3,662,674	(\$163,613)	-4.46%	\$3,499,060	\$3,475,840	\$23,221	100.66%	100.00%
August 2024	\$5,271,862	(\$223,307)	-4.23%	\$5,048,556	\$5,013,144	\$35,412	100.70%	100.00%
September 2024	\$3,821,514	(\$176,219)	-4.61%	\$3,645,295	\$3,632,260	\$13,035	100.35%	100.00%
October 2024	\$4,681,657	(\$210,224)	-4.49%	\$4,471,433	\$4,463,858	\$7,575	100.16%	100.00%
November 2024	\$4,643,017	(\$139,667)	-3.00%	\$4,503,349	\$4,490,373	\$12,976	100.28%	100.00%
December 2024	\$3,442,199	(\$294,195)	-8.54%	\$3,148,004	\$3,138,517	\$9,487	100.30%	100.00%
January 2025	\$3,693,206	(\$58,969)	-1.59%	\$3,634,237	\$3,630,963	\$3,274	100.09%	100.00%
February 2025	\$3,937,850	(\$81,119)	-2.05%	\$3,856,731	\$3,851,732	\$4,998	100.12%	100.00%
March 2025	\$4,064,556	(\$85,882)	-2.11%	\$3,978,675	\$3,974,433	\$4,241	100.10%	100.00%
April 2025	\$3,959,124	(\$30,186)	-0.76%	\$3,928,938	\$3,930,309	(\$1,372)	99.96%	99.96%
May 2025	\$4,473,110	(\$8,645)	-0.19%	\$4,464,465	\$4,457,676	\$6,789	100.15%	100.00%
June 2025	\$4,472,803	(\$463,149)	-10.35%	\$4,009,654	\$4,019,414	(\$9,760)	99.75%	99.75%
Cumulative Totals	\$96,125,626	(\$6,321,462)	-6.57%	\$89,804,164	\$89,465,030	\$339,133	100.37%	
100% Limited[^] Cumulative Totals				\$89,465,030	\$89,465,030	\$0	100.00%	99.96%
State Contract Minimum Completeness Percentage Requirement							99.00%	

[^] - We have decreased the Involve Dental CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and reporting period basis. Please reference data analysis assumption number 10 on page 21 for further explanation.

MS Magnolia Health Encounter and CDJ Comparison



**MAGNOLIA HEALTH CAN INVOLVE VISION
MONTHLY TABLE**

Table 6 — Magnolia Health CAN Involve Vision (Vision)								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$1,425,725	(\$671,832)	-47.12%	\$753,893	\$747,826	\$6,066	100.81%	100.00%
August 2023	\$1,244,220	(\$33,110)	-2.66%	\$1,211,109	\$1,215,152	(\$4,042)	99.66%	99.66%
September 2023	\$894,749	(\$9,453)	-1.05%	\$885,296	\$883,750	\$1,546	100.17%	100.00%
October 2023	\$829,324	(\$7,607)	-0.91%	\$821,718	\$821,452	\$265	100.03%	100.00%
November 2023	\$1,022,112	(\$11,693)	-1.14%	\$1,010,418	\$1,015,248	(\$4,830)	99.52%	99.52%
December 2023	\$645,285	(\$5,023)	-0.77%	\$640,262	\$638,962	\$1,300	100.20%	100.00%
January 2024	\$653,754	(\$6,321)	-0.96%	\$647,433	\$650,568	(\$3,135)	99.51%	99.51%
February 2024	\$819,472	(\$17,270)	-2.10%	\$802,203	\$802,618	(\$415)	99.94%	99.94%
March 2024	\$864,764	(\$22,813)	-2.63%	\$841,951	\$851,139	(\$9,188)	98.92%	98.92%
April 2024	\$901,770	(\$15,724)	-1.74%	\$886,046	\$911,600	(\$25,555)	97.19%	97.19%
May 2024	\$1,047,055	(\$46,084)	-4.40%	\$1,000,971	\$1,011,963	(\$10,992)	98.91%	98.91%
June 2024	\$742,759	(\$22,920)	-3.08%	\$719,838	\$720,066	(\$228)	99.96%	99.96%
July 2024	\$1,001,822	(\$43,919)	-4.38%	\$957,904	\$961,746	(\$3,842)	99.60%	99.60%
August 2024	\$1,534,691	(\$73,478)	-4.78%	\$1,461,212	\$1,451,703	\$9,509	100.65%	100.00%
September 2024	\$1,028,639	(\$38,967)	-3.78%	\$989,672	\$986,076	\$3,595	100.36%	100.00%
October 2024	\$1,208,938	(\$59,751)	-4.94%	\$1,149,187	\$1,151,938	(\$2,751)	99.76%	99.76%
November 2024	\$885,894	(\$37,286)	-4.20%	\$848,608	\$850,116	(\$1,508)	99.82%	99.82%
December 2024	\$870,869	(\$43,732)	-5.02%	\$827,137	\$824,722	\$2,414	100.29%	100.00%
January 2025	\$904,210	(\$149,311)	-16.51%	\$754,899	\$751,338	\$3,562	100.47%	100.00%
February 2025	\$1,023,851	(\$163,783)	-15.99%	\$860,068	\$856,643	\$3,425	100.39%	100.00%
March 2025	\$1,043,720	(\$155,330)	-14.88%	\$888,390	\$883,390	\$5,000	100.56%	100.00%
April 2025	\$1,014,827	(\$146,516)	-14.43%	\$868,311	\$867,429	\$882	100.10%	100.00%
May 2025	\$1,120,710	(\$152,547)	-13.61%	\$968,163	\$962,755	\$5,408	100.56%	100.00%
June 2025	\$749,499	(\$53,666)	-7.16%	\$695,834	\$695,652	\$182	100.02%	100.00%
Cumulative Totals	\$23,478,657	(\$1,988,135)	-8.46%	\$21,490,522	\$21,513,854	(\$23,332)	99.89%	99.69%
							State Contract Minimum Completeness Percentage Requirement	99.00%

[^] - We have decreased the Involve Vision CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



MAGNOLIA HEALTH CAN BEHAVIORAL HEALTH MONTHLY TABLE

Table 7 — Magnolia Health CAN Behavioral Health								
Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$7,863,852	(\$168,344)	-2.14%	\$7,695,509	\$7,700,235	(\$4,726)	99.93%	99.93%
August 2023	\$12,166,523	(\$3,314,137)	-27.23%	\$8,852,386	\$8,574,010	\$278,376	103.24%	100.00%
September 2023	\$11,266,327	(\$3,267,241)	-29.00%	\$7,999,085	\$8,450,061	(\$450,976)	94.66%	94.66%
October 2023	\$10,742,984	(\$2,123,612)	-19.76%	\$8,619,372	\$9,200,338	(\$580,965)	93.68%	93.68%
November 2023	\$12,912,141	(\$2,818,640)	-21.82%	\$10,093,502	\$10,713,310	(\$619,808)	94.21%	94.21%
December 2023	\$10,655,372	(\$1,302,904)	-12.22%	\$9,352,468	\$9,285,112	\$67,356	100.72%	100.00%
January 2024	\$9,105,618	(\$2,447,761)	-26.88%	\$6,657,857	\$7,291,657	(\$633,800)	91.30%	91.30%
February 2024	\$17,445,005	(\$8,147,526)	-46.70%	\$9,297,479	\$10,143,324	(\$845,845)	91.66%	91.66%
March 2024	\$27,192,093	(\$16,928,391)	-62.25%	\$10,263,702	\$8,972,995	\$1,290,708	114.38%	100.00%
April 2024	\$13,244,758	(\$3,905,806)	-29.48%	\$9,338,951	\$10,136,629	(\$797,678)	92.13%	92.13%
May 2024	\$13,971,216	(\$2,500,184)	-17.89%	\$11,471,032	\$11,411,034	\$59,998	100.52%	100.00%
June 2024	\$13,095,069	(\$4,894,383)	-37.37%	\$8,200,686	\$9,509,642	(\$1,308,957)	86.23%	86.23%
July 2024	\$10,868,859	(\$2,702,408)	-24.86%	\$8,166,451	\$8,340,233	(\$173,782)	97.91%	97.91%
August 2024	\$12,456,521	(\$2,645,442)	-21.23%	\$9,811,079	\$10,074,373	(\$263,293)	97.38%	97.38%
September 2024	\$12,528,343	(\$2,355,163)	-18.79%	\$10,173,180	\$10,418,903	(\$245,722)	97.64%	97.64%
October 2024	\$14,333,672	(\$3,844,817)	-26.82%	\$10,488,855	\$11,569,036	(\$1,080,181)	90.66%	90.66%
November 2024	\$11,255,675	(\$2,480,990)	-22.04%	\$8,774,686	\$9,141,856	(\$367,171)	95.98%	95.98%
December 2024	\$13,602,223	(\$2,832,427)	-20.82%	\$10,769,796	\$10,969,015	(\$199,219)	98.18%	98.18%
January 2025	\$9,520,343	(\$1,349,699)	-14.17%	\$8,170,643	\$8,263,805	(\$93,161)	98.87%	98.87%
February 2025	\$9,912,283	(\$1,654,645)	-16.69%	\$8,257,638	\$8,282,951	(\$25,313)	99.69%	99.69%
March 2025	\$9,922,443	(\$752,443)	-7.58%	\$9,170,000	\$9,198,429	(\$28,429)	99.69%	99.69%
April 2025	\$12,233,325	(\$1,205,346)	-9.85%	\$11,027,979	\$11,413,303	(\$385,324)	96.62%	96.62%
May 2025	\$12,988,212	(\$418,524)	-3.22%	\$12,569,687	\$12,612,382	(\$42,695)	99.66%	99.66%
June 2025	\$10,831,074	(\$625,204)	-5.77%	\$10,205,870	\$10,235,288	(\$29,418)	99.71%	99.71%
Cumulative Totals	\$300,113,931	(\$74,686,038)	-24.88%	\$225,427,894	\$231,907,919	(\$6,480,026)	97.20%	
							State Contract Minimum Completeness Percentage Requirement	99.00%
							Non-Compliant	-1.80%
								96.47%

[^] - We have decreased the Magnolia Behavioral Health CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



**MAGNOLIA HEALTH CAN MTM
MONTHLY TABLE**

MS Magnolia Health Encounter and CDJ Comparison

Table 8 — Magnolia Health CAN MTM (NET)

Paid Month	Monthly Encounter Total (FAC Reported)	Monthly Encounter Total (Adjustments)	Percentage of Encounters Adjusted	Monthly Encounter Net Total	CDJ Monthly Reported Total	Monthly Variance	Monthly Completion Percentage	100% Limited [^] Monthly Completion Percentage
July 2023	\$520,427	\$0	0.00%	\$520,427	\$517,853	\$2,574	100.49%	100.00%
August 2023	\$698,746	(\$142)	-0.02%	\$698,605	\$699,774	(\$1,169)	99.83%	99.83%
September 2023	\$575,205	\$0	0.00%	\$575,205	\$569,778	\$5,427	100.95%	100.00%
October 2023	\$572,841	\$0	0.00%	\$572,841	\$571,574	\$1,266	100.22%	100.00%
November 2023	\$717,804	\$0	0.00%	\$717,804	\$714,295	\$3,509	100.49%	100.00%
December 2023	\$512,171	\$0	0.00%	\$512,171	\$509,463	\$2,708	100.53%	100.00%
January 2024	\$440,816	\$0	0.00%	\$440,816	\$440,234	\$582	100.13%	100.00%
February 2024	\$597,953	\$0	0.00%	\$597,953	\$596,724	\$1,229	100.20%	100.00%
March 2024	\$519,014	\$0	0.00%	\$519,014	\$519,005	\$9	100.00%	100.00%
April 2024	\$564,608	\$0	0.00%	\$564,608	\$564,301	\$306	100.05%	100.00%
May 2024	\$684,883	\$0	0.00%	\$684,883	\$684,883	\$0	100.00%	100.00%
June 2024	\$578,447	(\$56,968)	-9.84%	\$521,479	\$521,479	\$0	100.00%	100.00%
July 2024	\$956,440	(\$445,995)	-46.63%	\$510,445	\$512,507	(\$2,062)	99.59%	99.59%
August 2024	\$1,430,427	(\$696,813)	-48.71%	\$733,614	\$731,497	\$2,117	100.28%	100.00%
September 2024	\$553,597	(\$1,255)	-0.22%	\$552,342	\$553,984	(\$1,642)	99.70%	99.70%
October 2024	\$719,874	(\$347)	-0.04%	\$719,527	\$720,291	(\$764)	99.89%	99.89%
November 2024	\$576,479	(\$149)	-0.02%	\$576,330	\$573,347	\$2,983	100.52%	100.00%
December 2024	\$507,998	(\$150)	-0.02%	\$507,848	\$508,512	(\$664)	99.86%	99.86%
January 2025	\$519,735	(\$112)	-0.02%	\$519,623	\$518,210	\$1,413	100.27%	100.00%
February 2025	\$596,880	\$0	0.00%	\$596,880	\$596,800	\$80	100.01%	100.00%
March 2025	\$509,432	(\$191)	-0.03%	\$509,241	\$509,502	(\$261)	99.94%	99.94%
April 2025	\$524,815	(\$143)	-0.02%	\$524,672	\$525,140	(\$469)	99.91%	99.91%
May 2025	\$679,944	(\$41)	0.00%	\$679,903	\$681,293	(\$1,390)	99.79%	99.79%
June 2025	\$509,567	\$0	0.00%	\$509,567	\$508,700	\$867	100.17%	100.00%
Cumulative Totals	\$15,068,105	(\$1,202,306)	-7.97%	\$13,865,798	\$13,849,147	\$16,652	100.12%	
100% Limited[^] Cumulative Totals				\$13,849,147	\$13,849,147	\$0	100.00%	99.93%
State Contract Minimum Completeness Percentage Requirement							99.00%	

[^] - We have decreased the MTM CAN encounter totals by the total variance in comparison to the CDJs to avoid overstating the Entire Plan results on a monthly and reporting period basis. Please reference data analysis assumption number 10 on page 21 for further explanation.



APPENDIX A – DEFINITIONS AND ACRONYMS

The following terms are used throughout this document:

- **Calculated Void Encounter (CV)** – An encounter that Myers and Stauffer LC has identified as being a replacement encounter that does not appear to have a corresponding void of the original encounter in the FAC’s data warehouse.
- **Cash Disbursement Journal (CDJ) Monthly Reported Total** – The sum of all payments from a CCO or delegated vendor to service providers for a given month as reported by the CCO to DOM.
- **Children’s Health Insurance Program (CHIP)** – This program provides insurance coverage for uninsured children up to age 19 whose family does not qualify for Medicaid and whose income does not exceed 200% of the federal poverty level. From November 1, 2019 through June 30, 2025, Molina Healthcare and UnitedHealthcare were responsible for coordinating CHIP services. Beginning on July 1, 2025, Magnolia Health, Molina Healthcare, and TrueCare were contracted for MississippiCAN and CHIP services.
- **Coordinated Care Organization (CCO)** – A private organization that has entered into a risk-based contractual arrangement with the Mississippi Division of Medicaid (DOM) to obtain and finance care for enrolled Medicaid members. CCOs receive a capitation or per member per month (PMPM) payment from DOM for each enrolled member. Between October 1, 2018 and June 30, 2025, Magnolia Health Plan (Magnolia Health), Molina Healthcare (Molina), and UnitedHealthcare Community Plan (UHC) were operating as the CCOs in the state of Mississippi. Effective July 1, 2024, the Mississippi Division of Medicaid decided to remove pharmacy claim adjudication from the contractual scope of the Coordinated Care Organizations and redirected the adjudication of the CCO pharmacy claims to DOM’s fiscal agent, Gainwell Technologies. Effective July 1, 2025, Magnolia Health, Molina Healthcare, and TrueCare were the CCOs contracted for MississippiCAN and CHIP services.
- **Conduent** – Previous state fiscal agent contractor, formerly known as Xerox Health Solutions. Conduent was replaced by Gainwell Technologies as the FAC for Mississippi effective October 3, 2022.
- **Fiscal Agent Contractor (FAC)** – A contractor selected to design, develop, and maintain the claims processing system, Medicaid Management Information System (MMIS); Gainwell Technologies became the FAC effective October 3, 2022.
- **Gainwell Technologies** – State fiscal agent contractor effective October 3, 2022, formerly known as DXC Technology (DXC). Gainwell became DOM’s Pharmacy Benefit Administrator for managed care members effective July 1, 2024.
- **Medicaid Management Information System (MMIS)** – The claims processing system used by the FAC to adjudicate Mississippi Medicaid claims. CCO submitted encounters are loaded into this system and assigned a unique claim identifier.
- **Mississippi Coordinated Access Network (MississippiCAN)** – The state of Mississippi’s Medicaid managed care program. There are three coordinated care organizations responsible for coordinating services for Mississippi Medicaid beneficiaries.
- **Mississippi Division of Medicaid (DOM)** – The division in the Office of the Governor that is responsible for administering Medicaid in Mississippi.

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- **Monthly Completion Percentage** – The percentage of the monthly encounter total in relation to the CDJ monthly reported total.
- **Monthly Encounter Net Total** – The sum of the encounter submissions for a given month incorporating the Myers and Stauffer LC encounter data adjustments made to the encounter submissions stored in the FAC's encounter data warehouse.
- **Monthly Encounter Total (Adjustments)** – The sum of all Myers and Stauffer LC adjustments for a given month that were removed from the encounter submissions stored in the FAC's encounter data warehouse.
- **Monthly Encounter Total (FAC Reported)** – The sum of all encounter submissions for a given month stored in the FAC's encounter data warehouse.
- **Monthly Variance** – The difference between the monthly encounter total and the CDJ monthly reported total.
- **Potential Duplicate Encounter (PDUP)** – An encounter that Myers and Stauffer LC has identified as being a potential duplicate of another encounter in the FAC's data warehouse.
- **Truven Health Analytics (Truven)** – Subcontractor to the state's former fiscal agent contractor, Conduent, previously responsible for the encounter data warehouse.



Encounters from institutional, medical, and pharmacy service types were combined on like data fields. We analyzed the information reported on each encounter to capture the amount paid on the entire claim. Encounter totals were calculated by summarizing the data by the CCO paid date, CCO identification number, and specific delegated vendor criteria. Each cash disbursement submitted by the CCO were summarized by paid date, CCO program identifier, and delegated vendor to create a matching table. These matching tables were combined using common fields between the tables and were used to produce the results.

Based on criteria provided by the CCO and DOM, we identified Magnolia Health encounters as follows:

- ❖ **Magnolia Health CAN Encounters**
 - Truven submitter ID equal to '91473' or Gainwell submitter ID equal to 'TP000169'.
 - Truven MC Prov ID equal to '09253560' or Gainwell Encounter Prov ID equal to '009253560'.
 - Pay to Provider Number equal to '09253560' or first COB Payer ID equal to '09253560' for Truven pharmacy encounters only.
- ❖ **Magnolia Health CHIP Encounters¹**
 - Truven submitter ID equal to '93550' or Gainwell submitter ID equal to 'TP000170'
 - Truven MC Prov ID equal to '01935367' or Gainwell Encounter Prov ID equal to '001935367'.
 - Pay to Provider Number equal to '01935367' or first COB Payer ID equal to '01935367' for Truven pharmacy encounters only.
- ❖ **Involve Dental – Dental Services**
 - Plan TCN or Patient Account Number field contains "DH" in the first and second positions.
- ❖ **Involve Vision – Vision Services**
 - Plan TCN or Patient Account Number field contains 'OC' in the first and second positions.
- ❖ **Magnolia Behavior Health – Behavioral Health Services**
 - Plan TCN or Patient Account Number field contains 'MK'.
- ❖ **MTM – Non-emergency Transportation**
 - Plan TCN or Patient Account Number field contains 'MOM' or 'MIS' in the first through third positions
 - Plan TCN or Patient Account Number field contains 'Q0' in the first and second positions and the third position does not contain a number.
- ❖ **Express Scripts – Pharmacy Benefit^{2,3}**
 - Pharmacy claim type with dates of service beginning on October 1, 2023.
 - Plan TCN starts with 'EX'
- ❖ **Involve Pharmacy Solutions – Pharmacy Benefit**
 - Pharmacy claim type with dates of service through September 30, 2023.
- ❖ **Magnolia Fee-for-Service**
 - All other plan submitted encounters that do not meet the listed criteria.

1 – Magnolia's CHIP contract with the State ended on October 31, 2019, prior to the current reporting period. Any remaining CHIP encounter records have been excluded from this report.

2 – Express Scripts replaced Involve Pharmacy Solutions as the pharmacy vendor effective October 1, 2023.

3 – Effective July 1, 2024, the Mississippi Division of Medicaid decided to remove pharmacy claim adjudication from the contractual scope of the Coordinated Care Organizations and redirect the adjudication of the CCO pharmacy claims to DOM's fiscal agent, Gainwell Technologies.



**APPENDIX C – DATA
ANALYSIS ASSUMPTIONS**

1. We assume that all data provided to Myers and Stauffer is complete and accurate.
2. Voided encounter records contained within the encounter submissions were coded to match the associated adjustment's paid date to allow for the proper matching of cash disbursements that occurred due to this void transaction. However, we were unable to assign a paid date to the void transactions in which there was not an associated adjustment encounter.
3. We instructed the CCOs to exclude referral fees, management fees, and other non-encounter related fees in the CDJ data submitted to Myers and Stauffer.
4. Interest amounts do not appear to be included in the CCO paid amounts. We have therefore excluded the separately itemized interest expense from the CDJ totals.
5. Magnolia Health CHIP contract with DOM ended on October 31, 2019, prior to the start of the current reporting period. Magnolia Health's CHIP completion percentage information will no longer be included in the reconciliation reports.
6. Gainwell has provided supplemental encounter claims extracts intended to update encounter information such as previously missing backout records, corrected transaction types, CCO pharmacy paid amount updates, and other field corrections. We are utilizing the most recently received Gainwell supplemental files for the purposes of this reconciliation.
7. Magnolia Health's Envolve Pharmacy Solutions paid amounts were initially submitted to Gainwell as the ingredient cost instead of in the appropriate paid amount field. Gainwell provided a separate extract of the ingredient cost field for Myers and Stauffer's use and noted that Magnolia Health's current pharmacy vendor, Express Scripts, appears to be submitting their paid amount in the appropriate field. This current report has incorporated the supplemental file of pharmacy paid amounts provided by the FAC.
8. We noted instances of Magnolia Health encounters with missing header paid dates. The claim received dates or the paid dates of subsequent encounter corrections were used to approximate the CCO paid dates when possible. However, these estimated paid dates may contribute to some monthly completion percentage variances.
9. Percentage ratios noted in this report are rounded down. The sum of the percentages may not add up to the percentage sum total (Tables A and B).
10. Monthly and/or cumulative completion percentages exceeding 100 percent were noted for the vendor and non-vendor Magnolia Health totals. In order to limit the impact of these potentially overstated encounter totals on the Entire Plan CAN results, we have restricted the cumulative and monthly completion percentage to a maximum of 100 percent (or the encounter totals to a maximum of the CDJ totals when the completion percentage is negative) and reported these percentages separately. The 100 percent limited cumulative completion percentages only apply to payors where the cumulative encounter totals for the entire report period are greater than the cumulative CDJ totals (Tables A, 1, 2, 3, 4, 5, and 8; Chart 2). For each payor whose cumulative completion percentage exceeds 100 percent, the cumulative encounter totals are decreased by the reporting period's variance in comparison with the CDJs. Additionally, we have provided 100 percent limited monthly completion percentages for informational purposes only. For each payor's monthly completion percentage over 100 percent, we decreased the monthly encounter totals by the variance with the CDJ totals. Then the limited monthly encounter totals and the CDJ totals are summed up for the entire reporting period. The limited encounter and CDJ totals used in these 100 percent limited



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monthly completion percentages by payor are combined to determine the 100 percent limited monthly completion percentages for the entire plan and program.

11. Opportunities for improving the encounter reconciliation process have been identified during the analysis of the encounter data and cash disbursement journals, as well as frequent interactions with the CCOs, their delegated vendors, DOM, and the FAC. While we have attempted to account for these situations, other potential issues within the data may exist that have not yet been identified which may require us to restate prior reports or modify reconciliation processes in the future.