



Office of State Procurement Contract Certification of Approval

This certificate serves as a confirmation that the Office of State Procurement has reviewed and approved the contract referenced below.

Reference Number: 2000441825

Amendment Number: 12

Vendor: AMERIHEALTH CARITAS LA INC

Description: Managed Care Organizations - Emergency

Approved By: PAMELA RICE

Approval Date: 05/10/2022 11:33:40

AMENDMENT TO
AGREEMENT BETWEEN STATE OF LOUISIANA
LOUISIANA DEPARTMENT OF HEALTH

Amendment #: 12

LAGOV#: 2000441825

LDH #:

(Regional/ Program/ Facility) Medical Vendor Administration
Bureau of Health Services Financing
AND
Amerihealth Caritas Louisiana, Inc.
Contractor Name

Original Contract Amount 1,318,564,254
Original Contract Begin Date 01-01-2020
Original Contract End Date 12-31-2020
RFP Number: N/A

AMENDMENT PROVISIONS

Change Contract From: From Maximum Amount: \$4,645,676,830.13 Current Contract Term: 01/01/20-12/31/22

Attachment D - Rate Certification effective January 1, 2022
Attachment D2 - Rate Certification Addendum effective January 1, 2022

Change Contract To: To Maximum Amount: Changed Contract Term: N/A

Attachment D - Rate Certification effective January 1, 2022
Attachment D2 - Rate Certification Addendum effective January 1, 2022
Attachment D12 - Rate Certification Addendum effective January 1, 2022

Justifications for amendment:

Revisions contained in this amendment are within scope and comply with the terms and conditions as set forth in the RFP.

This amendment incorporates an addendum to the capitation rates for Rate Year (RY) 2022 to include physicians who qualified to participate in the hospital-based physician Full Medicaid Pricing program under the state plan but were not included in RY 2022 rate certification letter dated December 15, 2021. This addendum reflects all qualifying providers participating in the program in RY 2022 and results in a revised range of actuarially sound rates for each rate cell covering the period of January 1, 2022 through December 31, 2022.

This Amendment Becomes Effective: 01-01-2022

This amendment contains or has attached hereto all revised terms and conditions agreed upon by contracting parties.

IN WITNESS THEREOF, this amendment is signed and entered into on the date indicated below.

CONTRACTOR

Amerihealth Caritas Louisiana, Inc.

DocuSigned by: Kyle Viator
62EAAC1C3A04434...
CONTRACTOR SIGNATURE DATE

PRINT NAME Kyle Viator

CONTRACTOR TITLE CEO

STATE OF LOUISIANA
LOUISIANA DEPARTMENT OF HEALTH

Secretary, Louisiana Department of Health or Designee

DocuSigned by: Patrick Gillies
7D2808CB02484F4...
SIGNATURE DATE

NAME Patrick Gillies

TITLE Medicaid Executive Director

OFFICE Louisiana Department of Health

PROGRAM SIGNATURE DATE
NAME



Healthy Louisiana Rate Certification Addendum
**Effective January 1, 2022 through
December 31, 2022**

Louisiana Department of Health
April 1, 2022

Mr. Daniel Cocran
 Chief Financial Officer
 Louisiana Department of Health
 Bureau of Health Services Financing
 628 North 4th Street
 Baton Rouge, LA 70821

Subject: Healthy Louisiana Program — Full Risk-Bearing Managed Care Organization Rate Development and Actuarial Certification Addendum for the Period January 1, 2022 through December 31, 2022

April 1, 2022

Dear Mr. Cocran:

The Louisiana Department of Health (LDH) has contracted with Mercer Government Human Services Consulting (Mercer), as part of Mercer Health & Benefits LLC, to develop actuarially sound¹ capitation rates for the State of Louisiana's (State's) Healthy Louisiana program for the period of January 1, 2022 through December 31, 2022, or rate year 2022 (RY22). This certification addresses the development of the physical health and specialized behavioral health only capitation rates, as well as maternity kick payments.

The previous certification letter presents a detailed overview of the methodology used in Mercer's managed care rate development for the purpose of satisfying the requirements of the Centers for Medicare & Medicaid Services (CMS). This rate certification includes the impact of changes made by LDH to the hospital-based physician Full Medicaid Pricing (FMP) program funding to include new providers. These changes are retroactive back to January 1, 2022 and resulted in the development of a revised range of actuarially sound rates for each rate cell. The final capitation rates are summarized in Appendix A and represent payment in full for the covered services.

¹ Actuarially Sound/Actuarial Soundness — Medicaid capitation rates are "actuarially sound" if, for business for which the certification is being prepared and for the period covered by the certification, projected capitation rates and other revenue sources provide for all reasonable, appropriate, and attainable costs. For purposes of this definition, other revenue sources include, but are not limited to, expected reinsurance and governmental stop-loss cash flows, governmental risk adjustment cash flows, and investment income. For purposes of this definition, costs include, but are not limited to, expected health benefits, health benefit settlement expenses, administrative expenses, the cost of capital, and government-mandated assessments, fees and taxes.

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Prospective Rating Adjustments

Prospective rating adjustments recognize the impact of new benefits or other changes not reflected or not fully reflected in the base period. CMS requires that the rate-setting methodology used to determine actuarially sound rates incorporates the results of any program changes that have taken place, or are anticipated to take place, between the start of the base data period and the conclusion of the contract period.

Hospital-Based Physician Services

Mercer calculated the FMP payments for hospital-based physician services provided at participating facilities by participating physicians according to the State Plan methodology. LDH has made changes to the hospital-based physician FMP program funding to include new providers, effective retroactive to January 1, 2022. This methodology is designed to bring the payments for the physician services up to the community rate level. The community rate is defined as the rate paid by commercial payers for the same service. For state-owned or operated entities and for non-state owned or operated entities, Mercer calculated the FMP payments according to the State Plan using the units of service from the base data, the most currently available Medicare fees, and the Medicare-to-commercial conversion factors provided by LDH. The conversion factors are maintained by LDH and updated annually for state-owned or operated entities and triennially for non-state owned or operated entities.

The table below reflects the revised FMP impact as a result of the change to the participating providers retroactive to January 1, 2022.

Table 14G

Hospital-Based Physician FMP					
Time Period	Historical Cost	Fee Schedule Change Impact	% Impact of Historical Cost	FMP Impact	% Impact of Adjusted Cost
CY 2019	\$260,411,425	\$0	0.00%	\$566,423,288	217.51%

Aggregate Fee Schedule Adjustments

The revised table, Table 14I, includes the revised FMP impact as a result of changes to the hospital-based physician FMP amount.

Table 14I

Aggregate Fee Schedule Changes					
Time Period	Base Expense	Fee Schedule Change Impact	% Impact of Base Expense	FMP Impact	% Impact of Adjusted Base
CY 2019	\$5,590,133,302	\$281,259,330	5.03%	\$1,171,782,193	19.96%

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Certification of Final Rates

This certification assumes items in the Medicaid State Plan or waiver, as well as the Healthy Louisiana managed care organization (MCO) contract, have been approved by CMS.

In preparing the rates shown in Appendix A, Mercer used and relied upon enrollment, fee-for-service claims, encounter data, reimbursement level, benefit design, and other information supplied by LDH and its fiscal agent. LDH, its fiscal agent, and the Healthy Louisiana MCOs are responsible for the validity and completeness of the data supplied. Mercer has reviewed the data and information for internal consistency and reasonableness, but did not audit them. In Mercer's opinion, they are appropriate for the intended purposes.

Because modeling all aspects of a situation or scenario is not possible or practical, Mercer may use summary information, estimates, or simplifications of calculations to facilitate the modeling of future events in an efficient and cost-effective manner. Mercer may also exclude factors or data that are immaterial in our judgment. Use of such simplifying techniques does not, in our judgment, affect the reasonableness, appropriateness, or attainability of the results for the Medicaid program. Actuarial assumptions may also be changed from one certification period to the next because of changes in mandated requirements, program experience, changes in expectations about the future, and other factors. A change in assumptions is not an indication that prior assumptions were unreasonable, inappropriate, or unattainable when they were made.

Mercer certifies the rates in Appendix A, including any risk-sharing mechanisms, were developed in accordance with generally accepted actuarial practices and principles and are appropriate for the Medicaid-covered populations and services under the Healthy Louisiana MCO contract. The undersigned actuaries are members of the American Academy of Actuaries and meet its qualification standards to certify to the actuarial soundness of Medicaid managed care capitation rates.

Rates and ranges developed by Mercer are actuarial projections of future contingent events. All estimates are based upon the information and data available at a point in time, and are subject to unforeseen and random events. Therefore, any projection must be interpreted as having a likely, and potentially wide, range of variability from the estimate. Any estimate or projection may not be used or relied upon by any other party or for any other purpose than for which it was issued by Mercer. Mercer is not responsible for the consequences of any unauthorized use. Actual Healthy Louisiana MCO costs will differ from these projections. Mercer has developed these rates on behalf of LDH to demonstrate compliance with the CMS requirements under 42 CFR §438.4 and in accordance with applicable law and regulations. Use of these rate ranges for any purpose beyond that stated may not be appropriate.

Healthy Louisiana MCOs are advised that the use of these rates may not be appropriate for their particular circumstance, and Mercer disclaims any responsibility for the use of these rates by Healthy Louisiana MCOs for any purpose. Mercer recommends that any MCO considering contracting with

LDH should analyze its own projected medical expense, administrative expense, and any other premium needs for comparison to these rate ranges before deciding whether to contract with LDH.

LDH understands that Mercer is not engaged in the practice of law or in providing advice on taxation matters. This report, which may include commenting on legal or taxation issues or regulations, does not constitute and is not a substitute for legal or taxation advice. Accordingly, Mercer recommends that LDH secure the advice of competent legal and taxation counsel with respect to any legal or taxation matters related to this report or otherwise.

This certification letter assumes the reader is familiar with the Healthy Louisiana Program, Medicaid eligibility rules, and actuarial rate-setting techniques. It has been prepared exclusively for LDH and CMS and should not be relied upon by third parties. Other readers should seek the advice of actuaries or other qualified professionals competent in the area of actuarial rate projections to understand the technical nature of these results. Mercer is not responsible for, and expressly disclaims liability for, any reliance on this report by third parties.

LDH agrees to notify Mercer within 30 days of receipt of this report if it disagrees with anything contained in this report or is aware of any information or data that would affect the results of this report that has not been communicated or provided to Mercer or incorporated herein. The report will be deemed final and acceptable to LDH if nothing is received by Mercer within such 30-day period.

If you have any questions on any of the above, please feel free to contact Adam Sery at +1 612 802 0780 or Rogelio Figueroa at +1 470 548 8862 at your convenience.

Sincerely,



Adam Sery FSA, MAAA
Principal



Rogelio Figueroa, ASA, MAAA
Senior Associate

Copy: Patrick Gillies, Medicaid Executive Director – LDH
Bogdan Constantin, Managed Care Finance – LDH
Karen Stubbs, Assistant Secretary – OBH/LDH
Amanda Joyner, Deputy Assistant Secretary – OBH/LDH
F. Ronald Ogborne III, FSA, CERA, MAAA, Partner – Mercer

Appendix A

RY22 Healthy Louisiana Capitation Rates

State of Louisiana

Appendix A: RY22 Healthy Louisiana Capitation Rates

Region Description	Category of Aid Description	Rate Cell Description	Projected Member Months/Deliveries	Certified Rates
Gulf	SSI	0-2 Months	151	\$ 38,082.49
Gulf	SSI	3-11 Months	1,206	\$ 5,219.98
Gulf	SSI	Child 1-20 Years	110,136	\$ 858.50
Gulf	SSI	Adult 21+ Years	293,322	\$ 1,796.31
Gulf	F&C	0-2 Months	29,672	\$ 3,282.79
Gulf	F&C	3-11 Months	112,565	\$ 343.28
Gulf	F&C	Child 1-20 Years	2,107,403	\$ 191.58
Gulf	F&C	Adult 21+ Years	318,236	\$ 461.17
Gulf	FCC	All Ages Male & Female	30,947	\$ 521.86
Gulf	BCC	BCC, All Ages	1,030	\$ 3,188.12
Gulf	LAP	LAP, All Ages	5,949	\$ 246.02
Gulf	HCBS	Child 1-20 Years	2,870	\$ 2,794.76
Gulf	HCBS	Adult 21+ Years	6,656	\$ 1,952.38
Gulf	CCM	CCM, All Ages	14,059	\$ 1,532.32
Gulf	SBH - CCM	SBH - CCM, All Ages	5,980	\$ 179.86
Gulf	SBH - Duals	SBH - Dual Eligible, All Ages	403,835	\$ 37.41
Gulf	SBH - LaHIPP	SBH - LaHIPP, All Ages	191	\$ 37.41
Gulf	SBH - HCBS	Child 1-20 Years	4,948	\$ 148.39
Gulf	SBH - HCBS	Adult 21+ Years	9,101	\$ 83.02
Gulf	SBH - Other	SBH - All Ages	6,039	\$ 186.29
Gulf	Maternity Kick Payment	Maternity Kick Payment	8,008	\$ 12,613.48
Gulf	EED Kick Payment	EED Kick Payment	1	\$ 6,935.38
Gulf	Medicaid Expansion	Age 19-64	2,135,784	\$ 633.57
Gulf	Medicaid Expansion	SBH - Dual Eligible, All Ages	21,224	\$ 37.41
Gulf	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 37.41
Gulf	Medicaid Expansion	SBH - Other	17	\$ 186.29
Gulf	Medicaid Expansion	SBH - CCM, All Ages	222	\$ 179.86
Gulf	Medicaid Expansion	High Needs	707	\$ 1,511.59
Gulf	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	3,682	\$ 16,013.61
Gulf	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 9,984.94
Capital	SSI	0-2 Months	197	\$ 38,658.49
Capital	SSI	3-11 Months	1,361	\$ 5,104.16
Capital	SSI	Child 1-20 Years	86,922	\$ 855.70
Capital	SSI	Adult 21+ Years	211,475	\$ 1,808.10
Capital	F&C	0-2 Months	27,794	\$ 3,766.80
Capital	F&C	3-11 Months	101,626	\$ 335.76
Capital	F&C	Child 1-20 Years	1,915,099	\$ 198.60
Capital	F&C	Adult 21+ Years	279,490	\$ 484.32
Capital	FCC	All Ages Male & Female	50,462	\$ 455.19
Capital	BCC	BCC, All Ages	1,301	\$ 3,160.64
Capital	LAP	LAP, All Ages	7,676	\$ 244.29
Capital	HCBS	Child 1-20 Years	3,352	\$ 2,837.67
Capital	HCBS	Adult 21+ Years	6,425	\$ 1,957.68
Capital	CCM	CCM, All Ages	10,332	\$ 1,562.81
Capital	SBH - CCM	SBH - CCM, All Ages	6,985	\$ 181.86
Capital	SBH - Duals	SBH - Dual Eligible, All Ages	322,020	\$ 31.40
Capital	SBH - LaHIPP	SBH - LaHIPP, All Ages	152	\$ 31.40
Capital	SBH - HCBS	Child 1-20 Years	6,146	\$ 147.10
Capital	SBH - HCBS	Adult 21+ Years	8,680	\$ 84.70
Capital	SBH - Other	SBH - All Ages	8,902	\$ 179.53
Capital	Maternity Kick Payment	Maternity Kick Payment	6,907	\$ 12,148.84
Capital	EED Kick Payment	EED Kick Payment	1	\$ 6,857.20
Capital	Medicaid Expansion	Age 19-64	1,723,325	\$ 668.23
Capital	Medicaid Expansion	SBH - Dual Eligible, All Ages	15,842	\$ 31.40
Capital	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 31.40
Capital	Medicaid Expansion	SBH - Other	72	\$ 179.53
Capital	Medicaid Expansion	SBH - CCM, All Ages	251	\$ 181.86
Capital	Medicaid Expansion	High Needs	745	\$ 2,107.08
Capital	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	3,565	\$ 17,427.39
Capital	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 11,356.05

State of Louisiana

Appendix A: RY22 Healthy Louisiana Capitation Rates

Region Description	Category of Aid Description	Rate Cell Description	Projected Member Months/Deliveries	Certified Rates
South Central	SSI	0-2 Months	93	\$ 37,658.71
South Central	SSI	3-11 Months	1,173	\$ 5,096.29
South Central	SSI	Child 1-20 Years	96,851	\$ 776.72
South Central	SSI	Adult 21+ Years	262,880	\$ 1,580.65
South Central	F&C	0-2 Months	29,957	\$ 3,517.20
South Central	F&C	3-11 Months	110,043	\$ 347.85
South Central	F&C	Child 1-20 Years	2,075,697	\$ 195.25
South Central	F&C	Adult 21+ Years	307,604	\$ 434.17
South Central	FCC	All Ages Male & Female	54,998	\$ 402.67
South Central	BCC	BCC, All Ages	787	\$ 3,122.27
South Central	LAP	LAP, All Ages	6,013	\$ 243.22
South Central	HCBS	Child 1-20 Years	3,382	\$ 2,814.63
South Central	HCBS	Adult 21+ Years	7,778	\$ 1,963.51
South Central	CCM	CCM, All Ages	11,637	\$ 1,542.10
South Central	SBH - CCM	SBH - CCM, All Ages	5,964	\$ 186.10
South Central	SBH - Duals	SBH - Dual Eligible, All Ages	390,731	\$ 33.81
South Central	SBH - LaHIPP	SBH - LaHIPP, All Ages	185	\$ 33.81
South Central	SBH - HCBS	Child 1-20 Years	5,195	\$ 144.55
South Central	SBH - HCBS	Adult 21+ Years	9,661	\$ 85.43
South Central	SBH - Other	SBH - All Ages	9,255	\$ 188.66
South Central	Maternity Kick Payment	Maternity Kick Payment	7,440	\$ 10,721.96
South Central	EED Kick Payment	EED Kick Payment	1	\$ 5,445.98
South Central	Medicaid Expansion	Age 19-64	1,827,311	\$ 588.95
South Central	Medicaid Expansion	SBH - Dual Eligible, All Ages	20,109	\$ 33.81
South Central	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 33.81
South Central	Medicaid Expansion	SBH - Other	44	\$ 188.66
South Central	Medicaid Expansion	SBH - CCM, All Ages	159	\$ 186.10
South Central	Medicaid Expansion	High Needs	372	\$ 1,247.37
South Central	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	4,113	\$ 13,984.09
South Central	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 8,157.86
North	SSI	0-2 Months	121	\$ 37,600.39
North	SSI	3-11 Months	1,270	\$ 5,040.36
North	SSI	Child 1-20 Years	103,410	\$ 747.22
North	SSI	Adult 21+ Years	236,382	\$ 1,548.23
North	F&C	0-2 Months	21,532	\$ 3,352.17
North	F&C	3-11 Months	78,753	\$ 341.42
North	F&C	Child 1-20 Years	1,543,541	\$ 202.69
North	F&C	Adult 21+ Years	222,116	\$ 436.26
North	FCC	All Ages Male & Female	38,325	\$ 543.99
North	BCC	BCC, All Ages	830	\$ 3,118.83
North	LAP	LAP, All Ages	3,990	\$ 244.23
North	HCBS	Child 1-20 Years	2,572	\$ 2,810.07
North	HCBS	Adult 21+ Years	5,931	\$ 1,966.22
North	CCM	CCM, All Ages	9,847	\$ 1,542.91
North	SBH - CCM	SBH - CCM, All Ages	5,455	\$ 183.60
North	SBH - Duals	SBH - Dual Eligible, All Ages	321,651	\$ 41.39
North	SBH - LaHIPP	SBH - LaHIPP, All Ages	152	\$ 41.39
North	SBH - HCBS	Child 1-20 Years	3,356	\$ 145.49
North	SBH - HCBS	Adult 21+ Years	6,804	\$ 90.20
North	SBH - Other	SBH - All Ages	7,789	\$ 184.69
North	Maternity Kick Payment	Maternity Kick Payment	5,240	\$ 13,037.30
North	EED Kick Payment	EED Kick Payment	1	\$ 7,067.27
North	Medicaid Expansion	Age 19-64	1,432,102	\$ 588.83
North	Medicaid Expansion	SBH - Dual Eligible, All Ages	14,374	\$ 41.39
North	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 41.39
North	Medicaid Expansion	SBH - Other	19	\$ 184.69
North	Medicaid Expansion	SBH - CCM, All Ages	139	\$ 183.60
North	Medicaid Expansion	High Needs	131	\$ 1,111.49
North	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	3,145	\$ 16,301.62
North	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 9,886.11

Appendix B

Rate Comparison

Appendix H: Rate Comparison			1/1/24 Rates				1/1/22 Rates			
Region Description	Category of Aid Description	Rate Cell Description	Projected Member Months/Deliveries	Lower Bound PMPM or Cost per Delivery	Upper Bound PMPM or Cost per Delivery		Projected Member Months/Deliveries	Lower Bound PMPM or Cost per Delivery	Upper Bound PMPM or Cost per Delivery	
Gulf	SSI	0-2 Months	248	\$ 28,708.96	\$ 30,036.65		151	\$ 38,082.49	\$ 39,546.30	
Gulf	SSI	3-11 Months	1,770	\$ 6,692.17	\$ 7,068.68		1,206	\$ 5,219.98	\$ 5,524.45	
Gulf	SSI	Child 1-20 Years	146,984	\$ 818.50	\$ 872.10		110,136	\$ 868.50	\$ 918.94	
Gulf	SSI	Adult 21+ Years	325,477	\$ 1,901.96	\$ 2,015.20		293,322	\$ 1,796.31	\$ 1,926.80	
Gulf	F&C	0-2 Months	32,958	\$ 3,133.13	\$ 3,356.88		29,672	\$ 3,262.79	\$ 3,474.09	
Gulf	F&C	3-11 Months	116,389	\$ 366.88	\$ 392.54		112,565	\$ 343.28	\$ 364.54	
Gulf	F&C	Child 1-20 Years	2,160,722	\$ 184.68	\$ 197.78		2,107,403	\$ 191.58	\$ 203.39	
Gulf	F&C	Adult 21+ Years	368,271	\$ 464.01	\$ 491.25		318,236	\$ 461.17	\$ 488.20	
Gulf	FCC	All Ages Male & Female	30,838	\$ 445.26	\$ 484.10		30,947	\$ 521.86	\$ 558.65	
Gulf	BCC	BCC - All Ages	987	\$ 3,061.37	\$ 3,285.43		1,030	\$ 3,188.12	\$ 3,443.54	
Gulf	LAP	LAP - All Ages	5,151	\$ 223.66	\$ 239.70		5,949	\$ 246.02	\$ 261.97	
Gulf	HCBS	Child 1-20 Years	3,063	\$ 2,712.07	\$ 2,916.28		2,870	\$ 2,794.76	\$ 3,003.53	
Gulf	HCBS	Adult 21+ Years	7,198	\$ 1,797.65	\$ 1,916.11		6,656	\$ 1,952.38	\$ 2,097.60	
Gulf	CCM	CCM - All Ages	15,072	\$ 1,393.40	\$ 1,485.15		14,059	\$ 1,532.32	\$ 1,632.36	
Gulf	SBH - CCM	SBH - CCM - All Ages	6,599	\$ 145.27	\$ 154.06		5,980	\$ 179.86	\$ 185.97	
Gulf	SBH - Duals	SBH - Dual Eligible, All Ages	429,125	\$ 29.82	\$ 32.30		403,835	\$ 37.41	\$ 41.08	
Gulf	SBH - LaHIPP	SBH - LaHIPP, All Ages	219	\$ 29.82	\$ 32.30		191	\$ 37.41	\$ 41.08	
Gulf	SBH - HCBS	Child 1-20 Years	5,225	\$ 123.62	\$ 129.64		4,948	\$ 148.39	\$ 152.57	
Gulf	SBH - HCBS	Adult 21+ Years	9,296	\$ 59.11	\$ 64.15		9,101	\$ 83.02	\$ 91.17	
Gulf	SBH - Other	SBH - All Ages	6,816	\$ 155.72	\$ 168.17		6,039	\$ 186.29	\$ 203.56	
Gulf	Maternity Kick Payment	Maternity Kick Payment	7,920	\$ 17,550.98	\$ 17,955.15		8,008	\$ 12,613.48	\$ 12,986.50	
Gulf	EED Kick Payment	EED Kick Payment	1	\$ 9,310.19	\$ 9,427.74		1	\$ 6,935.38	\$ 7,083.71	
Gulf	Medicaid Expansion	Age 19-64	1,973,495	\$ 667.26	\$ 706.14		2,135,784	\$ 633.57	\$ 670.48	
Gulf	Medicaid Expansion	SBH - Dual Eligible, All Ages	19,488	\$ 29.82	\$ 32.30		21,224	\$ 37.41	\$ 41.08	
Gulf	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 29.82	\$ 32.30		1	\$ 37.41	\$ 41.08	
Gulf	Medicaid Expansion	SBH - Other	56	\$ 155.72	\$ 168.17		17	\$ 186.29	\$ 203.56	
Gulf	Medicaid Expansion	SBH - CCM - All Ages	207	\$ 145.27	\$ 154.06		222	\$ 179.86	\$ 185.97	
Gulf	Medicaid Expansion	High Needs	741	\$ 2,010.42	\$ 2,120.09		707	\$ 1,511.59	\$ 1,616.95	
Gulf	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	3,245	\$ 17,136.85	\$ 17,504.11		3,682	\$ 16,013.61	\$ 16,456.20	
Gulf	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 10,705.40	\$ 10,848.99		1	\$ 9,984.94	\$ 10,189.00	
Capital	SSI	0-2 Months	227	\$ 29,528.18	\$ 30,864.27		197	\$ 38,658.49	\$ 40,128.21	
Capital	SSI	3-11 Months	1,733	\$ 6,610.36	\$ 6,986.02		1,361	\$ 5,104.16	\$ 5,407.44	
Capital	SSI	Child 1-20 Years	112,034	\$ 794.34	\$ 849.19		86,922	\$ 855.70	\$ 920.15	
Capital	SSI	Adult 21+ Years	225,528	\$ 1,838.83	\$ 1,963.58		211,475	\$ 1,808.10	\$ 1,948.40	
Capital	F&C	0-2 Months	29,012	\$ 3,803.49	\$ 4,060.61		27,794	\$ 3,766.80	\$ 3,955.09	
Capital	F&C	3-11 Months	103,485	\$ 327.02	\$ 351.21		101,626	\$ 335.76	\$ 356.54	
Capital	F&C	Child 1-20 Years	1,933,466	\$ 193.71	\$ 207.97		1,915,099	\$ 198.60	\$ 211.31	
Capital	F&C	Adult 21+ Years	310,656	\$ 492.09	\$ 523.35		279,490	\$ 484.32	\$ 514.39	
Capital	FCC	All Ages Male & Female	49,580	\$ 444.49	\$ 483.32		50,462	\$ 455.19	\$ 488.77	
Capital	BCC	BCC - All Ages	1,475	\$ 3,024.03	\$ 3,247.71		1,301	\$ 3,160.64	\$ 3,415.78	
Capital	LAP	LAP - All Ages	8,363	\$ 220.96	\$ 236.97		7,676	\$ 244.29	\$ 260.23	
Capital	HCBS	Child 1-20 Years	3,235	\$ 2,740.51	\$ 2,945.00		3,352	\$ 2,837.67	\$ 3,046.88	
Capital	HCBS	Adult 21+ Years	6,429	\$ 1,813.07	\$ 1,931.69		6,425	\$ 1,957.68	\$ 2,102.95	
Capital	CCM	CCM - All Ages	10,761	\$ 1,423.94	\$ 1,516.01		10,332	\$ 1,562.81	\$ 1,663.17	
Capital	SBH - CCM	SBH - CCM - All Ages	7,481	\$ 147.61	\$ 156.42		6,985	\$ 181.86	\$ 187.99	
Capital	SBH - Duals	SBH - Dual Eligible, All Ages	336,657	\$ 26.09	\$ 27.93		322,020	\$ 31.40	\$ 34.14	
Capital	SBH - LaHIPP	SBH - LaHIPP, All Ages	172	\$ 26.09	\$ 27.93		152	\$ 31.40	\$ 34.14	
Capital	SBH - HCBS	Child 1-20 Years	6,092	\$ 129.96	\$ 136.05		6,146	\$ 147.10	\$ 151.27	
Capital	SBH - HCBS	Adult 21+ Years	8,998	\$ 60.52	\$ 65.57		8,680	\$ 84.70	\$ 92.87	
Capital	SBH - Other	SBH - All Ages	10,025	\$ 153.44	\$ 165.86		8,902	\$ 179.53	\$ 196.73	
Capital	Maternity Kick Payment	Maternity Kick Payment	6,902	\$ 12,489.77	\$ 12,794.68		6,907	\$ 12,148.84	\$ 12,496.61	
Capital	EED Kick Payment	EED Kick Payment	1	\$ 6,273.99	\$ 6,362.67		1	\$ 6,857.20	\$ 6,995.49	
Capital	Medicaid Expansion	Age 19-64	1,525,358	\$ 680.89	\$ 724.95		1,723,325	\$ 668.23	\$ 709.80	
Capital	Medicaid Expansion	SBH - Dual Eligible, All Ages	14,386	\$ 26.09	\$ 27.93		15,842	\$ 31.40	\$ 34.14	
Capital	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 26.09	\$ 27.93		1	\$ 31.40	\$ 34.14	
Capital	Medicaid Expansion	SBH - Other	205	\$ 153.44	\$ 165.86		72	\$ 179.53	\$ 196.73	
Capital	Medicaid Expansion	SBH - CCM - All Ages	187	\$ 147.61	\$ 156.42		251	\$ 181.86	\$ 187.99	
Capital	Medicaid Expansion	High Needs	1,040	\$ 1,825.77	\$ 1,941.73		745	\$ 2,107.08	\$ 2,240.92	
Capital	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	2,633	\$ 16,567.16	\$ 16,926.23		3,565	\$ 17,427.39	\$ 17,873.31	
Capital	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 10,281.44	\$ 10,421.84		1	\$ 11,356.05	\$ 11,561.64	

Appendix H: Rate Comparison				1/1/24 Rates			1/1/22 Rates		
Region Description	Category of Aid Description	Rate Cell Description	Projected Member Months/Deliveries	Lower Bound PMPM or Cost per Delivery	Upper Bound PMPM or Cost per Delivery	Projected Member Months/Deliveries	Lower Bound PMPM or Cost per Delivery	Upper Bound PMPM or Cost per Delivery	Upper Bound PMPM or Cost per Delivery
South Central	SSI	0-2 Months	189	\$ 28,833.94	\$ 30,162.91	93	\$ 37,658.71	\$ 39,118.18	
South Central	SSI	3-11 Months	2,008	\$ 6,657.84	\$ 7,033.99	1,173	\$ 5,096.29	\$ 5,399.49	
South Central	SSI	Child 1-20 Years	124,598	\$ 741.93	\$ 791.93	96,851	\$ 776.72	\$ 832.49	
South Central	SSI	Adult 21+ Years	286,714	\$ 1,546.22	\$ 1,651.06	262,880	\$ 1,580.65	\$ 1,700.86	
South Central	F&C	0-2 Months	31,521	\$ 3,374.39	\$ 3,648.71	29,957	\$ 3,517.20	\$ 3,714.66	
South Central	F&C	3-11 Months	113,037	\$ 339.31	\$ 366.26	110,043	\$ 347.85	\$ 372.90	
South Central	F&C	Child 1-20 Years	2,102,896	\$ 183.22	\$ 197.17	2,075,697	\$ 195.25	\$ 208.46	
South Central	F&C	Adult 21+ Years	342,061	\$ 420.37	\$ 447.95	307,604	\$ 434.17	\$ 461.26	
South Central	FCC	All Ages Male & Female	55,203	\$ 441.94	\$ 480.75	54,998	\$ 402.67	\$ 432.76	
South Central	BCC	BCC - All Ages	786	\$ 3,013.06	\$ 3,236.63	787	\$ 3,122.27	\$ 3,377.01	
South Central	LAP	LAP - All Ages	7,271	\$ 219.96	\$ 235.96	6,013	\$ 243.22	\$ 259.14	
South Central	HCBS	Child 1-20 Years	3,624	\$ 2,699.15	\$ 2,903.23	3,382	\$ 2,814.63	\$ 3,023.61	
South Central	HCBS	Adult 21+ Years	8,063	\$ 1,807.97	\$ 1,926.54	7,778	\$ 1,963.51	\$ 2,108.84	
South Central	CCM	CCM - All Ages	13,409	\$ 1,391.59	\$ 1,483.33	11,637	\$ 1,542.10	\$ 1,642.25	
South Central	SBH - CCM	SBH - CCM - All Ages	6,979	\$ 148.68	\$ 157.50	5,964	\$ 186.10	\$ 192.26	
South Central	SBH - Duals	SBH - Dual Eligible, All Ages	413,841	\$ 28.60	\$ 30.62	390,731	\$ 33.81	\$ 36.76	
South Central	SBH - LaHIPP	SBH - LaHIPP, All Ages	211	\$ 28.60	\$ 30.62	185	\$ 33.81	\$ 36.76	
South Central	SBH - HCBS	Child 1-20 Years	5,395	\$ 120.26	\$ 126.25	5,195	\$ 144.55	\$ 148.69	
South Central	SBH - HCBS	Adult 21+ Years	10,176	\$ 61.06	\$ 66.13	9,661	\$ 85.43	\$ 93.61	
South Central	SBH - Other	SBH - All Ages	9,902	\$ 160.91	\$ 173.41	9,255	\$ 188.66	\$ 205.95	
South Central	Maternity Kick Payment	Maternity Kick Payment	7,405	\$ 10,409.89	\$ 10,713.37	7,440	\$ 10,721.96	\$ 11,068.54	
South Central	EED Kick Payment	EED Kick Payment	1	\$ 4,218.68	\$ 4,306.94	1	\$ 5,445.98	\$ 5,583.79	
South Central	Medicaid Expansion	Age 19-64	1,671,110	\$ 586.88	\$ 626.67	1,827,311	\$ 588.95	\$ 624.94	
South Central	Medicaid Expansion	SBH - Dual Eligible, All Ages	19,085	\$ 28.60	\$ 30.62	20,109	\$ 33.81	\$ 36.76	
South Central	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 28.60	\$ 30.62	1	\$ 33.81	\$ 36.76	
South Central	Medicaid Expansion	SBH - Other	99	\$ 160.91	\$ 173.41	44	\$ 188.66	\$ 205.95	
South Central	Medicaid Expansion	SBH - CCM - All Ages	182	\$ 148.68	\$ 157.50	159	\$ 186.10	\$ 192.26	
South Central	Medicaid Expansion	High Needs	398	\$ 1,887.23	\$ 2,033.91	372	\$ 1,247.37	\$ 1,338.45	
South Central	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	3,165	\$ 12,895.51	\$ 13,247.59	4,113	\$ 13,984.09	\$ 14,411.82	
South Central	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 6,727.30	\$ 6,864.95	1	\$ 8,157.86	\$ 8,355.06	
North	SSI	0-2 Months	189	\$ 28,388.61	\$ 29,713.01	121	\$ 37,600.39	\$ 39,059.26	
North	SSI	3-11 Months	1,771	\$ 6,521.64	\$ 6,896.40	1,270	\$ 5,040.36	\$ 5,342.98	
North	SSI	Child 1-20 Years	137,851	\$ 704.80	\$ 754.11	103,410	\$ 747.22	\$ 802.15	
North	SSI	Adult 21+ Years	264,269	\$ 1,477.06	\$ 1,578.06	236,382	\$ 1,548.23	\$ 1,663.98	
North	F&C	0-2 Months	22,917	\$ 2,358.91	\$ 2,550.60	21,532	\$ 3,352.17	\$ 3,542.76	
North	F&C	3-11 Months	80,741	\$ 320.79	\$ 345.35	78,753	\$ 341.42	\$ 363.60	
North	F&C	Child 1-20 Years	1,582,681	\$ 189.84	\$ 204.79	1,543,541	\$ 202.69	\$ 215.92	
North	F&C	Adult 21+ Years	246,946	\$ 413.43	\$ 441.47	222,116	\$ 436.26	\$ 463.18	
North	FCC	All Ages Male & Female	36,674	\$ 449.97	\$ 488.85	38,325	\$ 543.99	\$ 586.72	
North	BCC	BCC - All Ages	982	\$ 2,980.75	\$ 3,203.99	830	\$ 3,118.83	\$ 3,373.54	
North	LAP	LAP - All Ages	5,875	\$ 220.83	\$ 236.85	3,990	\$ 244.23	\$ 260.16	
North	HCBS	Child 1-20 Years	2,303	\$ 2,721.12	\$ 2,925.42	2,572	\$ 2,810.07	\$ 3,019.00	
North	HCBS	Adult 21+ Years	6,510	\$ 1,808.53	\$ 1,927.11	5,931	\$ 1,966.22	\$ 2,111.57	
North	CCM	CCM - All Ages	10,164	\$ 1,498.42	\$ 1,542.91	9,847	\$ 1,542.91	\$ 1,643.06	
North	SBH - CCM	SBH - CCM - All Ages	5,927	\$ 150.09	\$ 158.92	5,455	\$ 183.60	\$ 189.74	
North	SBH - Duals	SBH - Dual Eligible, All Ages	338,433	\$ 35.47	\$ 38.19	321,651	\$ 41.39	\$ 45.20	
North	SBH - LaHIPP	SBH - LaHIPP, All Ages	173	\$ 35.47	\$ 38.19	152	\$ 41.39	\$ 45.20	
North	SBH - HCBS	Child 1-20 Years	3,429	\$ 123.56	\$ 129.58	3,356	\$ 145.49	\$ 149.65	
North	SBH - HCBS	Adult 21+ Years	7,176	\$ 63.31	\$ 68.39	6,804	\$ 90.20	\$ 98.42	
North	SBH - Other	SBH - All Ages	8,700	\$ 153.57	\$ 165.99	7,789	\$ 184.69	\$ 201.94	
North	Maternity Kick Payment	Maternity Kick Payment	5,170	\$ 15,933.79	\$ 16,351.79	5,240	\$ 13,037.30	\$ 13,430.31	
North	EED Kick Payment	EED Kick Payment	1	\$ 7,418.05	\$ 7,539.61	1	\$ 7,067.27	\$ 7,223.54	
North	Medicaid Expansion	Age 19-64	1,334,421	\$ 560.63	\$ 598.79	1,432,102	\$ 588.83	\$ 624.39	
North	Medicaid Expansion	SBH - Dual Eligible, All Ages	11,048	\$ 35.47	\$ 38.19	14,374	\$ 41.39	\$ 45.20	
North	Medicaid Expansion	SBH - LaHIPP, All Ages	1	\$ 35.47	\$ 38.19	1	\$ 41.39	\$ 45.20	
North	Medicaid Expansion	SBH - Other	60	\$ 153.57	\$ 165.99	19	\$ 184.69	\$ 201.94	
North	Medicaid Expansion	SBH - CCM - All Ages	140	\$ 150.09	\$ 158.92	139	\$ 183.60	\$ 189.74	
North	Medicaid Expansion	High Needs	325	\$ 968.23	\$ 1,043.79	131	\$ 1,111.49	\$ 1,188.44	
North	Medicaid Expansion - Maternity Kick Payment	Maternity Kick Payment	2,625	\$ 14,709.57	\$ 15,081.18	3,145	\$ 16,301.62	\$ 16,773.48	
North	Medicaid Expansion - EED Kick Payment	EED Kick Payment	1	\$ 8,209.27	\$ 8,354.56	1	\$ 9,886.11	\$ 10,103.66	

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