#### AMENDMENT TO

#### AGREEMENT BETWEEN STATE OF LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS



CFMS #: 708106

DOA #	305-200571

DOA #: 305-2005/1

DHH #: 057751

(Regional/ Program/ Facility

This Amendment Becomes Effective:

Medical Vendor Administration Bureau of Health Services Financing AND

Original Contract Amt 925,792,432

Amerigroup Louisiana, Inc

Original Contract Begin Date 02-01-2012

Original Contract End Date 01-31-2015

Contractor Name

AMEND	MENT	PROV	JISIONS

AMEN	NDMENT PROVISIONS
Change Contract From:	Maximum Amount: 838,259,212
See attachment A-5.	
Change To:	Maximum Amount: 1,172,664,817
See attachment A-5.	
Justification:	
See attachment A-5.	. **
	APPROVED
	APPROVED Office of the Governor Office of Contractual Review
	DEG 24 2012 114

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.

11-01-2012

	CONTRACTOR	DEPART	STATE OF LOUISIANA MENT OF HEALTH AND HOS	SPITALS
A	merigroup Louisiana, Inc	Secretary, Depa	artment of Health and Hospital or	r Designee
CONTRACTOR SIGN	ATURE DATE	SIGNATURE	long Bhillyn	DATE 11/7/12
PRINT NAME	George Bucher	NAME	Jerry Phillips	
CONTRACTOR TITLE	Chief Executive Officer	TITLE	Undersecretary, DHH	-
		OFFICE	Office of Management and Finar	nce

PROGRAM SIGNATURE

NAME

Madeline McAndrew

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 5.0 CCN Reimbursement)  5.13 Coordination of Benefits  5.13.1 Other Coverage Information The Health Plan shall maintain other coverage information for each member. The Health Plan shall verify the other coverage information provided by DHH pursuant to Section 5.12 and develop a system to include additional other coverage information when it becomes available. The Health Plan shall provide a periodic file of updates to other coverage back to the State.  5.13.2 Cost Avoidance As provided in Section 5.12.2, except in certain cases, the Health Plan shall attempt to avoid payment in all cases where there is other insurance. (Medicaid is payer of last resort)  5.13.3 Post-payment Recoupments As provided in Section 5.12.3, Health Plan shall initiate a post payment recovery process when it is determined after the fact that the member had other coverage at the time of service.  5.13.4 Medicare The Health Plan's system shall provide for coordinating benefits on members who are also covered by Medicare.  5.13.5 Reporting and Tracking	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment Document	Change From	Change To	Justification
		The Health Plan's system shall identify and track potential collections. The system should produce reports indicating open receivables, closed receivables, amounts collected, amounts written off and amounts avoided.	
Exhibit E RFP 305 PUR- DHHRFP- CCN-P- MVA	NA .	(New section in 5.0 CCN Reimbursement)  5.14 Copays/Cost Share  5.14.1 The Health Plan and its subcontractors are not required to impose any copay or cost sharing requirements on their members. The Health Plan and its subcontractors, however, are not permitted to charge their members fees of any kind or any copay or cost-sharing amount above what exists in the Medicaid State Plan.  5.14.2 A Health Plan or its subcontractors may not:  5.14.2.1 Deny services to an individual who is eligible for services because of the individual's inability to pay the cost sharing;  5.14.2.2 Restrict its members' access to needed drugs and related pharmaceutical products by requiring that members use mail-order pharmacy providers; or  5.14.2.3 Impose copayments for the following:  5.14.2.3.1 Family planning services and supplies	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<ul> <li>5.14.2.3.3 Services provided to:</li> <li>5.14.2.3.3.1 Individuals younger than 21 years old;</li> <li>5.14.2.3.3.2 Pregnant women;</li> <li>5.14.2.3.3.3 Individuals who are inpatients in long-term care facilities or other institutions;</li> <li>5.14.2.3.3.4 Native American; and</li> </ul>	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	5.14.2.3.3.5 Alaskan Eskimos.  (New section in 5.0 CCN Reimbursement)  5.15 Financial Disclosures for Pharmacy Services The Health Plan must disclose all financial terms and arrangements for remuneration of any kind that apply between the Health Plan and any prescription drug manufacturer or labeler, including, without limitation,	To effect the carve-in of Pharmacy services to Bayou Health
			formulary management, educational support, claims processing, pharmacy network fees, data sales fees, and any other fees. Section 16 of this contract provides that DHH or state auditors may audit such information at any time. DHH agrees to maintain the confidentiality of information disclosed by the Health Plan pursuant to the contract, to the extent that such information is confidential under Louisiana or federal law.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P-	NA	(New section in 6.0 Core Benefits and Services) 6.40 Pharmacy Services	To effect the carve-in of Pharmacy services to Bayo

Exhibit/ Attachment	Document	Change From	Change To	Justification
	MVA		6.40.1 Covered Services  6.40.1.1 The Health Plan must provide coverage for all classes of drugs covered by the Medicaid FFS pharmacy benefit. The Health Plan may manage coverage and utilization of drugs through the formation of a Formulary or Preferred Drug List. Procedures used to manage utilization may include, but are not limited to, prior authorization, utilization and clinical edits.  6.40.1.2 The Health Plan is not required to enforce the DHH monthly prescription drug quantity limits. However, it may not enact prescription quantity limits	Health
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA NA	more stringent than the Medicaid State Plan.  (New section in 6.40 Pharmacy Services)  6.40.2 Formulary  The Health Plan is required to have a Formulary that follows the minimum requirements below:  6.40.2.1 The Formulary shall be kept up-to-date and available to all providers and members via Health Plan web site and electronic prescribing tools.  6.40.2.2 The Formulary only excludes coverage of drugs or drug categories permitted under Section 1927(d) of the Social Security Act. In addition, the Health Plan shall include in its formulary any FDA-approved drugs that may allow for clinical improvement or are clinically advantageous for the management of a disease or condition for FDA	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			approved indications.	
			<b>6.40.2.3</b> The Formulary shall be reviewed in its entirety and updated at least annually.	
			<b>6.40.2.4</b> The Health Plan shall expand its Formulary, as needed, to include newly FDA approved drugs for FDA approved indications, which are deemed to be appropriate, safe, and efficacious in the medical management of members.	
			6.40.2.5 The Formulary and any revision thereto shall be reviewed and approved by DHH prior to implementation. Any changes to the Formulary shall be submitted to DHH at least 30 days prior to implementation.	
			<b>6.40.2.6</b> The Formulary shall include only FDA-approved drug products. For each AHFS Therapeutic Class, the selection of drugs included for each drug class shall be sufficient to ensure enough provider choice and include FDA approved drugs to best serve the medical needs of members with special needs.	
			6.40.2.7 The Health Plan shall authorize the provision of a drug not on the Formulary requested by a prescriber on behalf of the enrollee, if the approved prescriber provides relevant clinical information to the Health Plan to support the medical necessity of the drug, and an explanation as to why a generic alternative or other preferred drug in the same therapeutic category cannot be used Medically	

Exhibit/ Attachment	Document	Change From	Change To	Justification
		•	accepted indications shall be consistent with Section 1927(k)(6) of the Social Security Act.	
			<b>6.40.2.8</b> The Health Plan shall have in place a DHH-approved prior approval process for authorizing the dispensing of non-Formulary drugs.	4
			<b>6.40.2.9</b> Except for the use of approved generic drug substitution of brand drugs, under no circumstances shall the Health Plan permit the therapeutic substitution of a prescribed drug without a prescriber's authorization.	
			6.40.2.10 The Health Plan shall limit negative changes to the formulary (e.g., remove a drug, impose step	
			therapy, etc.) to four times annually, unless urgent	
			circumstances require more timely action, such as drug	ļ,
		100	manufacturer's removal of a drug from the market due	-
		2	to patient safety concerns. The addition of a newly	
-			approved generic and removal of the brand equivalent	
			does not constitute a negative formulary change.	
Exhibit E	RFP 305	NA	(New section in 6.40 Pharmacy Services)	To effect the
	PUR-			carve-in of
	DHHRFP-		6.40.3 Preferred Drug List	Pharmacy
	CCN-P-		The Health Plan may use a preferred drug list (PDL) as	services to Bayou
	MVA		long as the requirements of 6.40.1 Covered Services	Health
			and the following minimum requirements are met:	
			<b>6.40.3.1</b> The PDL is a subset of preferred drug products	
			available on the Formulary and an up-to-date version	-
			shall be available to all providers and members	
		N. C.	through the Health Plan web site and electronic	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			prescribing tools.  6.40.3.2 The PDL shall be reviewed in its entirety and updated at least annually.  6.40.3.3 The PDL and any revision thereto, shall be reviewed and approved by DHH prior to	
			implementation. Any changes to the PDL shall be submitted to DHH at least 30 days prior to implementation.	
			<b>6.40.3.4</b> The selection of drugs included for each drug class shall be sufficient to ensure enough provider choice and include FDA approved drugs to best serve the medical needs of enrollees with special needs.	
	<b>3</b> )		<b>6.40.3.5</b> The Health Plan shall authorize the provision of a drug not listed on the PDL requested by a prescriber on behalf of the enrollee, if the approved prescriber provides relevant clinical information to the Health Plan to support the medical necessity of the drug. Medically accepted indications shall be consistent with Section 1927(k)(6) of the Social Security Act.	
			<b>6.40.3.6</b> The Health Plan shall have in place a DHH-approved prior approval process for authorizing the dispensing of non-PDL drugs.	
			<b>6.40.3.7</b> Except for the use of approved generic drug substitution of brand drugs, under no circumstances shall the Health Plan permit the therapeutic	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			substitution of a prescribed drug without a prescriber's authorization.  6.40.3.8 The Health Plan shall limit negative changes to the PDL (e.g., remove a drug, impose step therapy, etc.) to four times annually, unless urgent circumstances require more timely action, such as drug manufacturer's removal of a drug from the market due to patient safety concerns	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA NA	(New section in 6.40 Pharmacy Services)  6.40.4 Prior Authorization for Mental Health/Substance Abuse Prescriptions The Health Plan shall only restrict or require a prior authorization for prescriptions or pharmacy services prescribed by Mental Health/Substance Abuse ("MH/SA") providers if one of the following exceptions is demonstrated:  6.40.4.1 The drug prescribed is not related to the treatment of substance abuse/dependency/addiction or mental illness or to any side effects of the psychopharmacological agents. These drugs are to be prescribed by the Health Plan's PCP or specialists in the Health Plan's network.  6.40.4.2 The prescribed drug does not conform to standard rules of the Health Plan's pharmacy plan consistent with 6.40.6 and 6.40.7 below.	services to Bayou

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<ul> <li>6.40.4.3 The Health Plan, at its option, may require a prior authorization (PA) process if the number of prescriptions written by MH/SA providers for MH/SA-related conditions exceeds four (4) per month per enrollee or may be contraindicated based on the enrollee's medical conditions or other drugs already prescribed. For drugs that require weekly prescriptions, these prescriptions shall be counted as one (1) per month and not as four (4) separate prescriptions. The Health Plan's PA process for pharmacy services shall require review and prior approval by DHH.</li> <li>6.40.4.4 If the Health Plan suspects prescription abuse by a MH/SA provider, the Health Plan shall contact DHH for investigation and a decision, which may include excluding the provider from the Louisiana Medicaid program. The Health Plan shall provide DHH with any and all documentation related to the alleged prescription abuse.</li> </ul>	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 6.40 Pharmacy Services)  6.40.5 Submission and Publication of the Formulary and PDL  6.40.5.1 The Health Plan shall publish and make available to members and providers upon request a hard copy of the most current Formulary and PDL. Updates to the Formulary or the PDL shall be made available thirty (30) days before the change. The Health Plan shall prominently post the most current Formulary on its web site.	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<b>6.40.5.2</b> The Health Plan shall submit an electronic version of its formulary and PDL to DHH at least quarterly. The formulary and PDL must be provided in a format and program approved by DHH, which may include formulary management software commonly used by prescribers.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 6.40 Pharmacy Services)  6.40.6 Pharmaceutical and Therapeutics (P&T) Committee  6.40.6.1 The Contractor shall establish a Pharmaceutical and Therapeutics (P&T) Committee, or similar entity, for the development of the Formulary and the PDL. The Committee shall represent the needs of all its members including enrollees with special needs. Louisiana network physicians, pharmacists, dentists and specialists, including but not limited to a behavioral health specialist, shall have the opportunity to participate in the development of the Formulary, PDL and clinical drug policies and, prior to any changes to the Formulary or PDL, to review, consider and comment on proposed changes.  6.40.6.2 The P&T committee shall meet at least quarterly to consider products in categories recommended for consideration for inclusion/exclusion on the Health Plan's Formulary or PDL. In developing its recommendations for a Formulary and PDL, the P&T committee shall consider,	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ attachment	Document	Change From	Change To	Justification
			the clinical efficacy, safety, cost-effectiveness and any program benefit associated with the product.  6.40.6.3 The Health Plan shall develop policies governing the conduct of P&T committee meetings, including procedures by which it makes its Formulary and PDL recommendations. P&T Committee meetings shall be open to the public.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New Section in 6.40 Pharmacy Services)  6.40.7 Prior Authorization Process for Pharmacy Services  6.40.7.1 Prior authorization may be used for drug products under the following conditions:  6.40.7.1.1 When prescribing medically necessary non-Formulary or non-preferred (non PDL) drugs.  6.40.7.1.2 When prescribing drugs inconsistent with FDA approved labeling, including behavioral health drugs.  6.40.7.1.3 When prescribing is inconsistent with nationally accepted guidelines.  6.40.7.1.4 When prescribing brand name medications which have A-rated generic equivalents.	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			drug utilization review standards related to proper maintenance drug therapy.	
			<b>6.40.7.2</b> Any prior approval issued by the Health Plan shall take into consideration prescription refills related to the original pharmacy service.	
			<b>6.40.7.3</b> The Health Plan must notify the requesting practitioner of the approval or disapproval of the request within 24 hours once relevant medically necessary information is obtained from the prescriber.	
			<b>6.40.7.4</b> The Health Plan must provide access to a toll-free call center for prescribers to call to request prior authorization for non-preferred drugs or drugs that are subject to clinical edits. The Health Plan must allow	
			prescribers and pharmacies to submit prior authorization requests by phone, fax or automated process. If the Health Plan or its PBM operates a separate call center for prior authorization requests, it will be subject to the provider call center standards set	
		τ,	forth in Section 10 of this contract and monetary penalties set forth in Section 20 of this contract.	
		NO.	<b>6.40.7.5</b> The Health Plan shall not penalize the prescriber or enrollee, financially or otherwise, for such requests and approvals.	
			<b>6.40.7.6</b> Denials of prior authorization requests or offering of an alternative medication shall be provided to the prescriber and/or enrollee in writing.	

MVA fail first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These	Exhibit/ Attachment	Document	Change From	Change To	Justification
when the prescription is presented to the pharmacy due to a prior authorization requirement, the Health Plan must have an automated process that allows the pharmacy to dispense up to a 72-hour supply of a product without having to obtain an override. The pharmacy may fill consecutive 72-hour supplies if the prescriber remains unavailable but the Health Plan is only required to pay one dispensing fee. The Health Plan must reimburse the pharmacy for dispensing the temporary supply of medication.  6.40.7.9 A member, or a provider on Member's behalf, may appeal prior authorization denials in accordance with Section 13 (Grievances and Appeals) of this contract.  Exhibit E  RFP 305  PUR-  DHHRFP- CCN-P- MVA  MA  (New section in 6.40 Pharmacy Services)  To effect the carve-in of Pharmacy Services to Balf il first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These			*	was on the Health Plan's Formulary or PDL and subsequently removed or changed, shall be permitted to continue to receive that prescription drug if determined to be medically necessary. The Health Plan must make that determination in consultation with the	
may appeal prior authorization denials in accordance with Section 13 (Grievances and Appeals) of this contract.  Exhibit E RFP 305 PUR-DHHRFP-CCN-P-MVA  MVA  may appeal prior authorization denials in accordance with Section 13 (Grievances and Appeals) of this contract.  To effect the carve-in of Pharmacy Services Pharmacy Services to Ba fail first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These				when the prescription is presented to the pharmacy due to a prior authorization requirement, the Health Plan must have an automated process that allows the pharmacy to dispense up to a 72-hour supply of a product without having to obtain an override. The pharmacy may fill consecutive 72-hour supplies if the prescriber remains unavailable but the Health Plan is only required to pay one dispensing fee. The Health Plan must reimburse the pharmacy for dispensing the	
PUR- DHHRFP- CCN-P- MVA  BY MVA  Carve-in of CARVE-IN of CARVE-IN OF CARVE-IN OF CARVE-IN OF Pharmacy Services to Ba Health MVA  Fail first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These				may appeal prior authorization denials in accordance with Section 13 (Grievances and Appeals) of this	50
CCN-P- MVA  Health Plans are allowed to implement step therapy or fail first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These	Exhibit E	PUR-	NA		carve-in of
MVA fail first protocols to first drive utilization toward the most cost-effective and safest drug therapy. These		AND LEGISLAND AND THE			1.5
most cost-effective and safest drug therapy. These				- 1000 0 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	services to Bayou
		MVA		,	Health
I protocols may be applied to either individual drugs or I	-				
classes of drugs. However, the Health Plan must				protocols may be applied to either individual drugs or	

Exhibit/ Attachment	Document	Change From	Change To	Justification
	•	•	provide a clear process for a provider to request an override of such restrictions. At a minimum, the Health Plan should grant the override when the prescribing physician provides evidence that the preferred treatment method has been ineffective in the treatment of the patient's medical condition in the past or will cause or will likely cause an adverse reaction or other physical harm to the patient.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 6.40 Pharmacy Services)  6.40.9 Medication Therapy Management  6.40.9.1 Within 90 days of implementation, the Health Plan is required to implement a Medication Therapy Management (MTM) program. The MTM program should include participation from community pharmacists, and include both in-person and telephonic interventions with trained clinical pharmacists.  6.40.9.2 Reimbursement for MTM services with participating pharmacists should be separate and above dispensing and ingredient cost reimbursement.  6.40.9.3 These programs should be developed to identify and target members who would most benefit from these interactions. They should include coordination between the Health Plan, the member, the pharmacist and the prescriber using various means	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E	RFP 305 PUR-	NA	of communication and education.  (New section in 6.40 Pharmacy Services)	To effect the carve-in of

Exhibit/ Attachment	Document	Change From	Change To	Justification
	DHHRFP- CCN-P- MVA		6.40.10 Lock-In (Restriction) Program  6.40.10.1 The Health Plan may implement a restriction program including policies, procedures and criteria for	Pharmacy services to Bayou Health
			establishing the need for the lock-in, which must be prior approved by DHH.  6.40.10.2 Lock-in is a mechanism for restricting Medicaid recipients to a specific physician and/or a specific pharmacy provider. The lock-in mechanism does not prohibit the recipient from receiving services	
			from providers who offer services other than physician and pharmacy benefits.  6.40.10.3 The lock-in mechanism must:  6.40.10.3.1 Ensure appropriate use of Medicaid benefits by recipients and/or providers; and	
			<b>6.40.10.3.2</b> Serve as an educational and monitoring parameter in instructing recipients in the most efficient method of using Medicaid services to ensure maximum health benefits.	
			<b>6.40.10.4</b> A Medicaid recipient who has shown a consistent pattern of misuse or overuse of program benefits may be placed into the lock-in mechanism by the Health plan. Misuse and overuse is a determination made by the Health Plan. The Health Plan shall submit for approval to DHH a list of criteria for which a	
- 18			member may be restricted. Misuse and overuse can occur in a variety of ways.	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<b>6.40.10.4.1</b> Misuse may take the form of obtaining prescriptions under the pharmacy program from various prescribers and/or pharmacies in an uncontrolled and unsound way.	
			<b>6.40.10.4.2</b> Misuse may take the form of obtaining prescriptions or the dispersal of prescriptions by fraudulent actions.	
			<b>6.40.10.5</b> In its Lock-In program, the Health Plan should abide by the following protocols:	
			<b>6.40.10.5.1</b> Enrollees shall be notified prior to the lockin and must be permitted to change providers for good cause. A seventy-two (72)-hour emergency supply of medication at pharmacies other than the designated lock-in pharmacy shall be permitted to ensure the provision of necessary medication required in an interim/urgent basis when the assigned pharmacy does not immediately have the medication.	
			<b>6.40.10.5.2</b> The Health Plan shall initiate contact with the recipient in instances when the recipient fails to contact the Health Plan.	
			6.40.10.5.3 The Health Plan shall notify the recipient and the prescribers regarding the Lock-In Program, the pharmacy they will be restricted to and the recipient's rights and responsibilities including appeal rights.  6.40.10.5.4 The Health Plan shall notify lock-in	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			providers of their selection.  6.40.10.5.5 The continued need for lock-in shall be periodically (at least every two (2) years) evaluated by the Health Plan for each member in the program. Prescriptions from all participating prescribers shall be honored and may not be required to be written by the PCP only unless the member is also locked in to his/her PCP.  6.40.10.5.6 The Health Plan shall submit quarterly reports on the pharmacy lock-in program activities as defined by DHH.  6.40.10.5.7 The Health Plan shall develop criteria and protocols to avoid enrollee injury due to the	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 6.40 Pharmacy Services)  6.40.11 Transition of Care for Pharmacy Services  6.40.11.1 The Health Plan must submit for approval, a transition of care program that ensures members can continue treatment of maintenance medications for at least 60 days after launch of pharmacy services or enrollment into the Health Plan's plan. The Health Plan shall continue any treatment of antidepressants and antipsychotics for at least 90 days after enrollment into the Health Plan's plan. Additionally, an enrollee that is, at the time of enrollment, in the Health Plan receiving a prescription drug that is not on the Health Plan's Formulary or PDL shall be permitted to continue	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			to receive that prescription drug if medically necessary.  6.40.11.2 The Health Plan shall continue the medication prescribed to the enrollee in a state mental health treatment facility for at least ninety (90) days after the facility discharges the enrollee, unless the Health Plan's psychiatrist, in consultation and agreement with the facility's prescribing physician, determines that the medications are:  6.40.11.2.1 Not medically necessary; or	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	6.40.11.2.2 Potentially harmful to the enrollee.  (New section in 7.0 Provider Network Requirements)  7.14 Pharmacy Network, Access Standards and Reimbursement  7.14.1 Pharmacy Network Requirements  7.14.1.1 The Health Plan shall provide a pharmacy network that complies with DHH requirements but at a minimum includes only licensed and registered pharmacies that conform to the Louisiana Board of Pharmacy rules concerning the records to be maintained by a pharmacy.  7.14.1.2 No Health Plan may prohibit any pharmacy or pharmacist participating in the Medicaid program from contracting as a network provider provided the	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			standing with the Louisiana State Board of Pharmacy and accepts the terms and conditions of the contract offered to them by the Health Plan.	
		St.	7.14.1.3 Distance to Pharmacies:	
			7.14.1.3.1 Travel distance time for members living in urban parishes shall not exceed 10 miles; and	
			<b>7.14.1.3.2</b> Travel distance for members living in rural parishes shall not exceed 30 miles.	
			7.14.1.4 The Health Plan must keep an up-to-date pharmacy provider directory on its website for public access. This directory must include, but not be limited to, the following information on all contracted network pharmacies:	
			7.14.1.4.1 Names, locations and telephone numbers.	
			7.14.1.4.2 Any non-English languages spoken.	
			<b>7.14.1.4.3</b> Identification of hours of operation, including identification of providers that are open 24-hours per day.	
			<b>7.14.1.4.4</b> Identification of pharmacies that provide vaccine services.	
			<b>7.14.1.4.5</b> Identification of pharmacies that provide delivery services.	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			7.14.1.5 The Health Plan must make a hard copy of this directory available to its members upon request. The hard copy must be updated at least annually. The online version should be updated in real time, but no less than weekly.	
			<b>7.14.1.6</b> The Health Plan shall ensure PBM/PBA has a network audit program that includes, at a minimum:	
			7.14.1.6.1 Random audits to determine provider compliance with the program policies, procedures and limitations outlined in the provider's contract. The Health Plan shall not utilize contingency-fee based pharmacy audits.	•
			<b>7.14.1.6.2</b> The Health Plan shall submit to DHH the policies of its audit program for approval.	
			<b>7.14.1.7</b> The Health Plan shall ensure that Pharmacies submit the NPI of the prescriber on claims.	
			<b>7.14.1.8</b> The Health Plan must educate network providers about how to access their formulary and PDL on their websites. The Health Plan must also provide provider education on claims processing and payment policies and procedures.	
			<b>7.14.1.9</b> The Health Plan may negotiate the ingredient cost reimbursement in its contracts with providers. However, the Health Plan shall pay a per-prescription dispensing fee, as defined in this contract, at a rate no less than \$2.50.	

Exhibit/ Attachment	Document	Change From	Change To	Justification
THE RESIDENCE OF THE PARTY OF T	Document	Change From	7.14.1.10 The Health Plan and the PBM may not charge pharmacy providers claims processing or provider enrollment fees. This section does not prohibit sanctioning pharmacy providers.  7.14.1.11 Thirty days after enrollment of the pharmacy program into Bayou Health, DHH will require that the Health Plan and PBM receive active agreement from pharmacy providers to participate in Health Plan's pharmacy network, even if the pharmacy provider has an existing relationship with the Health Plan's PBM. This means that if a pharmacy provider is already contracted with a Health Plan's PBM for other coverage products, notification alone will not be sufficient for that pharmacy provider to be considered part of the PBM's Medicaid network. The pharmacy provider must actively agree to the terms of the Medicaid contract addendum. However, to minimize an interruption in care for recipients on November 1, 2012, the Health Plan shall allow a 30-day window after implementation during which the Health Plan and PBM can process and pay claims for pharmacy providers that are contracted with the PBM but have not yet agreed to the Medicaid addendum. Those claims shall be processed and paid according to the terms of the Medicaid addendum that the PBM has offered to the pharmacy provider, as long as those	Justification
			terms meet DHH requirements. After November 30, 2012, pharmacy providers that have not signed a	
			contract agreement or Medicaid addendum with the PBM shall be considered out of network.	

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 7.14 Pharmacy Network, Access Standards and Reimbursement)  7.14.2 Mail order/Mail Service Pharmacy The Health Plan cannot require its members to use a mail service pharmacy. Mail order must not exceed more than one (1) percent of all pharmacy claims. Members cannot be charged anything above applicable copays (e.g. shipping and handling fees).	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E	RFP 305 PUR- DHHRFP-	NA	(New section in 7.14 Pharmacy Network, Access Standards and Reimbursement)	To effect the carve-in of Pharmacy
	CCN-P- MVA		7.14.3.1 DHH recognizes the importance of providing adequate access to specialty drugs to Medicaid members while ensuring proper management of handling and utilization. For the purposes of this contract, "specialty drugs" shall be determined by the definition below. The Health Plan may limit distribution of specialty drugs from a network of specialty pharmacies that meet reasonable requirements to distribute specialty drugs and is willing to accept the terms of the Health Plan's agreement. DHH reserves the right to deny specialty pharmacy contracts that include what it deems to be overly burdensome terms or requirements, including but not limited to requirements for excessive insurance coverage, unreasonable stocking requirements, or restrictive or duplicative accreditation requirements.	services to Bayou Health

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Exhibit/ Attachment	Document	Change From	Change To	Justification
			<ul> <li>7.14.3.2 A specialty drug is defined as one that is</li> <li>7.14.3.2.1 Not typically available at community retail pharmacies or under limited distribution per manufacturer/FDA; or</li> <li>7.14.3.2.2 Includes at least two of the following characteristics:</li> <li>7.14.3.2.2.1 Requires inventory management controls including but not limited to unique storage specifications, short shelf life, and special handling; or</li> <li>7.14.3.2.2.2 Must be administered, infused or injected by a health care professional; or</li> <li>7.14.3.2.2.3 The drug is indicated primarily for the treatment or prevention of:</li> <li>A complex or chronic medical condition, defined as a physical, behavioral or developmental condition that may have no known cure and/or is progressive and/or can be debilitating or fatal if left untreated or under-treated, such as, but not limited to, multiple sclerosis, hepatitis C, cancer and rheumatoid arthritis; or</li> </ul>	
*			A rare medical condition, defined as any disease or condition that typically affects fewer than 200,000 people in the United States; or	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<b>7.14.3.2.2.4</b> The total monthly cost is \$3,000 or more.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 8 Utilization Management)  8.9 Drug Utilization Review (DUR) Program: The Health Plan shall establish and maintain a drug utilization review (DUR) program that satisfies the minimum requirements for prospective and retrospective DUR as described in Section 1927(g) of the Social Security Act.  8.9.1 The Health Plan shall include review of MH/SA drugs in its DUR program.  8.9.2 DUR standards shall encourage proper drug utilization by ensuring maximum compliance, minimizing potential fraud and abuse, and taking into consideration both the quality and cost of the pharmacy benefit.  8.9.3 The Health Plan shall implement an online claims	To effect the carve-in of Pharmacy services to Bayou Health
			adjudication system, which shall include a prospective review of drug utilization, and include age-specific edits where appropriate.  8.9.4 The prospective and retrospective DUR standards established by the Health Plan shall be consistent with those same standards established by FFS Medicaid program.	
		4.	<b>8.9.5</b> The Health Plan's DUR program shall include the standards for each category of DUR, i.e., therapeutic	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			duplication, drug-drug interaction, maximum daily dosage and therapy duration.  8.9.6 The Health Plan's DUR program shall include a procedure/process for utilization review for each category of DUR.  8.9.7 DHH shall review and approve the Health Plan's DUR policy and procedures; DUR utilization review process/procedure and the standards included therein; and any revisions. The DUR program and revisions must be submitted to DHH for prior approval at least forty-five (45) days in advance of the proposed	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	effective date.  (New section in 12.13 Member Identification (ID) Cards)  12.13.8 Pharmacy-Related ID Card Requirements  12.13.8.1 The Health Plan shall provide on the member's Bayou Health Plan identification card, or on a separate prescription benefit card, or through other technology, prescription billing information that:  12.13.8.1.1 Complies with the standards set forth in the National Council for Prescription Drug Programs pharmacy ID card prescription benefit card implementation guide at the time of issuance of the card or other technology; or	To effect the carve-in of Pharmacy services to Bayou Health
			12.13.8.1.2 Includes, at a minimum, the following data elements:	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			12.13.8.1.2.1 The name or identifying trademark of the Health Plan and the prescription benefit manager (see co-branding restrictions in Section 12.22.3);	
			12.13.8.1.2.2 The name and Louisiana Medicaid identification number of the recipient;	
			<b>12.13.8.1.2.3</b> The telephone number that providers may call for:	
			Pharmacy benefit assistance;	
			24-hour member services and filing grievances;	
			Provider services and prior authorization; and	
			Reporting Medicaid Fraud (1-800-488-2917)	
			12.13.8.1.2.4 All electronic transaction routing information and other numbers required by the Health Plan or its benefit administrator to process a prescription claim electronically.	
			12.13.8.2 If the Health Plan chooses to include the prescription benefit information on the Bayou Health	
			Plan card, the Health Plan must ensure all members have a card that includes all necessary prescription benefit information, as outlined above.	
			12.13.8.3 If the Health Plan chooses to provide a separate prescription benefit card, the card mailer that	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			accompanies the card must include language that explains the purpose of the card, how to use the card and how to use it in tandem with the DHH-issued Medicaid Card and the Health Plan-issued card.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 12.0 Marketing and Member Education)  12.22 Pharmacy-Related Marketing and Member Education  12.22.1 The Health Plan and all subcontractors, including PBMs and providers, are subject to the Marketing and Member Education requirements set forth in Section 12.1 – 12.10 of the contract. This includes the review and approval of all marketing and member education materials including, but not limited to, websites and social media, ID cards, call scripts for outbound calls or customer service centers, provider directories, advertisement and direct member mailings.  12.22.2 Members of a Health Plan must have free access to any pharmacy participating in the Health Plan's network (except in cases where the member is participating in the pharmacy lock-in program). Neither the Health Plan nor any subcontractor is allowed to steer members to certain network providers. DHH retains the discretion to deny the use of marketing and member education material that it deems to promote undue patient steering.	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			12.22.3 Health Plans are prohibited from displaying the names and/or logos of co-branded PBMs on the Health Plan's member identification card. Health Plans that choose to co-brand with providers must include on marketing materials (other than ID cards) the following language: "Other Pharmacies are Available in Our Network."	
			<b>12.22.4</b> Co-branded marketing materials must be submitted to DHH by the Health Plan for approval.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 17 Claims Management) 17.6 Pharmacy Claims Processing  17.6.1 System Requirements The Health Plan shall have an automated claims and encounter processing system for pharmacy claims that will support the requirements of this contract and ensure the accurate and timely processing of claims and encounters.  17.6.1.1 Transaction standards: The Health Plan shall support electronic submission of claims using most current HIPAA compliant transaction standard (NCPDP)	To effect the carve-in of Pharmacy services to Bayo Health
		<ul> <li>D.0)</li> <li>17.6.1.2 Pharmacy claim edits shall include eligibility, drug coverage, benefit limitations, prescriber and prospective/concurrent drug utilization review edits.</li> <li>17.6.1.3 The system shall provide for an automated update to the National Drug Code file including all product, packaging, prescription and pricing</li> </ul>		

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Exhibit/ Attachment	Document	Change From	Change To	Justification
			information. The system shall provide online access to reference file information. The system should maintain a history of the pricing schedules and other significant reference data.	
		*	17.6.1.4 The Health Plan must comply with the claims history requirements in Section 16.12.2 and 16.13.1. The historical encounter data submission shall be retained for a period not less than six (6) years, following generally accepted retention guidelines.	
			17.6.1.4.1 Audit Trails shall be maintained online for no less than six (6) years; additional history shall be retained for no less than ten (10) years and shall be provide forty-eight (48) hour turnaround or better on request for access to information in machine readable form, that is between six (6) to ten (10) years old.	
			17.6.1.4.2 Provisions should be made to maintain permanent history by service date for those services identified as "once-in-a-lifetime" (e.g., smoking cessation).	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 17.6 Pharmacy Claims Processing)  17.6.2 Rebates The Health Plan shall submit all pharmacy encounters, with the exception of inpatient hospital pharmacy encounters, to DHH pursuant to the requirements of Section 17.5.4 of this contract. DHH or its vendor shall submit these pharmacy encounters for rebate from	To effect the carve-in of Pharmacy services to Bayou Health
			manufacturers under the authority of the DHH Secretary pursuant to the Section 2501 of the Patient	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			Protection and Affordable Care Act (PPACA) effective from an October 1, 2012, date of service.	
	-		17.6.2.1 Pharmacy Encounters Claims Submission	
			17.6.2.1.1 The Health Plan shall submit a monthly claim level detail file of pharmacy encounters to DHH which includes individual claim level detail information on each pharmacy claim dispensed to a Medicaid patient, including but not limited to the total number of metric units, dosage form, strength and package size, National Drug Code of each covered outpatient drug dispensed to Medicaid enrollees. This monthly submission must comply with Section 17.5.4 requirements. See the Systems Companion Guide for a complete listing of claim fields required.	
			17.6.2.1.2 The Health Plan must ensure that its pharmacy claims process recognizes claims from 340B pharmacies for products purchased through the 340B discount drug program at the claim level utilizing the NCPDP field designed for this purpose.	
			17.6.2.2 Disputed Encounter Submissions	
			17.6.2.2.1 On a quarterly basis, DHH will review the Health Plan's pharmacy encounter claims and send a file back to the Health Plan of disputed encounters that were identified through the drug rebate invoicing process.	
			17.6.2.2.2 Within 60 calendar days of receipt of the	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			disputed encounter file from DHH, the Health Plan shall, if needed, correct and resubmit any disputed encounters and send a response file that includes 1) corrected and resubmitted encounters as described in the Rebate Section of the Bayou Health Prepaid Systems Companion Guide, and/or 2) a detailed explanation of why the disputed encounters could not be corrected including documentation of all attempts to correct the disputed encounters at an encounter claim level detail, as described in the Rebate Section of the Bayou Health Prepaid Systems Companion Guide.	
			17.6.2.2.3 In addition to the administrative sanctions in Section 20 of this contract, failure of the Health Plan to submit monthly pharmacy encounter claims files and/or a response file to the disputed encounters file within 60 calendar days as detailed above for each disputed encounter will result in a quarterly offset to the capitation payment equal to the value of the rebate assessed on the disputed encounters being deducted from the Health Plan's capitation payment.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 17.6 Pharmacy Claims Processing)  17.6.3 Repackaged Products The Health Plan shall ensure that the manufacturer number, product number, and package number for the drug dispensed shall be listed on all claims. This information shall be taken from the actual package from which the drug is usually purchased by a provider, from a supplier whose products are generally available to all pharmacies and reported in one or	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
		*	supplied through co-ops, franchises, or other sources not readily available to other providers shall not be used. In such instances, the manufacturer number, product number, and package number for the largest package size, as reported in one or more national compendia for the drug shall be listed.	
Exhibit E	RFP 305 PUR-	NA	(New section in 17.6 Pharmacy Claims Processing)	To effect the carve-in of
	DHHRFP- CCN-P-	in E	17.6.4 Use of a Pharmacy Benefits Manager (PBM)	Pharmacy services to Bayo
	MVA		<b>17.6.4.1</b> The Health Plan must use a PBM to process prescription claims. The PBM must pay claims in accordance with Section 17 of this contract.	Health
			17.6.4.2 The Health Plan must identify the proposed PBM and the ownership of the proposed PBM. Before entering into a subcontract with a PBM, the Health Plan shall obtain DHH approval. If the PBM is owned	
			wholly or in part by a retail pharmacy provider, chain drug store or pharmaceutical manufacturer, the Health Plan will submit a written description of the assurances and procedures that must be put in place under the	
			proposed PBM subcontract, such as an independent audit, to prevent patient steering, to ensure no conflicts of interest exist and ensure the confidentiality of proprietary information. The Health Plan must	
			provide a plan documenting how it will monitor such Subcontractors. These assurances and procedures must be transmitted to DHH for review and approval prior to the date pharmacy services begin.	
			17.6.4.3 The Health Plan must submit a plan for	

Exhibit/ Attachment	Document	Change From	Change To	Justification
			oversight of the PBM's performance prior to the implementation of the Health Plan's PBM. The plan must be approved by DHH and comply with this contract and all DHH requirements.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New section in 18.0 Reporting)  18.9 Pharmacy Reporting The Health Plan shall provide additional reporting specific to the pharmacy program, including, but not limited to:  18.9.1 Pharmacy help desk performance  18.9.2 Prior authorization performance  18.9.2.1 Prior Authorization request turnaround time  18.9.2.2 Number of claims submitted as a 72-hour emergency supply  18.9.2.3 Denials (name of drug, number of requests, number of denials)  18.9.3 Pharmacy network access	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	<b>NA</b>	(Add to 20.2.3 Table of Monetary Penalties in blank row at the top of page 254.)  Pharmacy Claims Data At the request of DHH or a sanction of \$10,000 per	To effect the carve-in of Pharmacy services to Bayou Health

Exhibit/ Attachment	Document	Change From	Change To	Justification
			its fiscal intermediary, plans shall submit pharmacy claims information in an electronic format that is suited to allow for integration with the State's pharmacy rebate program. DHH shall establish the frequency of these information requests, and the plans shall comply. The pharmacy rebate process is a quarterly process and claims information is usually required before the end of the month that follows the end of the quarter.	
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA	(New definitions added to Glossary where they alphabetically)  Co-branding - a relationship between two or moseparate legal entities, one of which is a Health Pla The plan displays the name(s) or brand(s) of the cobranding entity or entities on its marketing materia to signify a business arrangement. Co-branding arrangements allow a Health Plan and its co-branding partner(s) to promote enrollment in the plan. Cobranding relationships are entered into independent the contract that the Health Plan has with DHH.	carve-in of Pharmacy services to Bayou Health O- Is Is

Exhibit/ Attachment	Document	Change From	Change To	Justification
			<u>Dispensing Fee</u> - the fee paid by the Health Plan to reimburse the overhead and labor expense incurred by pharmacy providers and the professional services provided by a pharmacist when dispensing a prescription.	
			Formulary – a list maintained by the Health Plan giving details of prescribable medicines	
			Legend Drugs – drugs which bear the federal legend: "Caution: federal law prohibits dispensing without a prescription."	
			Mental Health/Substance Abuse (MH/SA) providers – behavioral health professionals engaged in the treatment of substance abuse, dependency, addiction, or mental illness	
			<u>Pharmacy Benefit Manager (PBM)</u> — a third party administrator of prescription drug programs	
			Preferred Drug List (PDL) — a list maintained by the Health Plan indicating which drugs providers are permitted to prescribe without seeking prior authorization	
Exhibit E	RFP 305 PUR- DHHRFP-	NA	(New entries added to Acronyms where they fit alphabetically)	To effect the carve-in of Pharmacy
	CCN-P- MVA		FDA – Food and Drug Administration  MH/SA – Mental Health/Substance Abuse	services to Bayou Health

#### Bayou Health – AMG Contract Amendment Attachment A-5

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E, Attachment 3	RFP 305 PUR- DHHRFP- CCN-P- MVA	(Table on Page 1)  Contract Anticipated Member Average Maximum Contract Year Months PMPM Amount \$91,886,339  1 Aug-Jan 890,346 \$164.68 \$146,622,179  2 1,807,402 \$164.68 \$297,643,024	P&T – Pharmaceutical and Therapeutics  PBM – Pharmacy Benefit Manager  PDL – Preferred Drug List  (Replace Table on Page 1)  Contract Anticipated Member Average Maximum Contract Year Months PMPM Amount \$91,886,339 1 Aug-Oct 445,173 \$164.68 \$73,311,090 1 Nov-Jan 445,173 \$246.50 \$109,735,145	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E, Appendix G	RFP 305 PUR- DHHRFP- CCN-P- MVA	(Mercer letter dated "September14, 2012" and entitled "REVISED Louisiana BAYOU HEALTH Plans – Prepaid Program Rate Development and Actuarial Certification for the period August 1 through December 31, 2012.")	2 <sup>3</sup> 1,807,402 \$246.50 \$445,524,687 3 <sup>4</sup> 1,834,513 \$246.50 \$452,207,557  Total \$1,172,664,817   (Mercer letter dated "October 15, 2012" and entitled "REVISED Louisiana BAYOU HEALTH Plans — Prepaid Program Rate Development and Actuarial Certification for the period November 1 through December 31, 2012." See attached.)	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	NA NA	(New bullet last bullet for 6.1.5)  • Pharmacy Services (Prescription Medicines Dispensed)	To effect the carve-in of Pharmacy services to Bayou Health
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	<b>6.21.1.7.</b> Pharmacy Services (Prescription Medicines Dispensed)	6.21.1.7. Pharmacy Services (Prescription Medicines Dispensed)	To effect the carve-in of Pharmacy services to Bayou Health

11/1/2012



### Sudha Shenoy, FSA, MAAA, CERA Principal

Government Fluman Services Consulting 3560 Lenox Road, Suite 2400 Atlanta, GA 30326 404 442 3196 Sudha.Shenoy@mercer.com www.mercer-government.mercer.com

> Ms. Madeline McAndrew BAYOU HEALTH Program Director Louisiana Department of Health and Hospitals Bureau of Health Services Financing 628 North 4th Street Baton Rouge, LA 70821

October 15, 2012

Subject: REVISED Louisiana BAYOU HEALTH Plans - Prepaid Program Rate Development and Actuarial Certification for the period November 1 through December 31, 2012

Dear Ms. McAndrew:

prescribed drugs within the Prepaid program, effective November 1, 2012. It follows clarification regarding positioning of rates within the actuarially sound rate range. It is intended to replace all Human Services Consulting (Mercer) to develop actuarially sound capitation rate ranges for the by DHH concerning the extent of possible pharmacy changes that might be implemented in fee The Louisiana Department of Health and Hospitals (DHH) contracted with Mercer Government State of Louisiana's BAYOU HEALTH Program - Prepaid program for the period November 1 plans or impact their ability to generate future savings. It also reflects final decisions by DHH for service Medicaid and the extent to which those changes might apply to Prepaid program earlier dated rate certifications that included prescribed drugs within the Prepaid program. through December 31, 2012. The purpose of this certification is to reflect the inclusion of

sound rates for each region and rate cell combination, which are attached to and certified within service (FFS) medical claims and resulted in development of a range of actuarially sound rates development for the purpose of satisfying the requirements of the Centers for Medicare and Medicaid Services (CMS). This rate development process was based on Medicaid fee-forfor each rate cell. We then worked with DHH to develop a single proposed set of actuarially This letter presents an overview of the methodology used in Mercer's managed care rate





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### Rate Methodology Overview

Capitation rate ranges for the Prepaid program were developed in accordance with rate-setting guidelines established by CMS. One of the key considerations in the rate range development the following year. Restrictions were applied to the enrollment and FFS claims data so that it was the base data. Mercer worked with DHH to obtain Medicaid FFS data from State Fiscal Year (SFY) 2010 and SFY 2011. Louisiana's SFY runs from July 1st through June 30th of matched the populations and benefit package defined in the Contract. To develop capitation rates, adjustments were applied to the base data consistent with the CMS Capitated Rate-Setting Checklist:

- Removal of enrollment and claims during periods of retroactive eligibility (AA.3.4);
- Completion factors to account for unpaid claims at the time of the data submission (AA.3.14);
- Information System (MMIS), including but not limited to inpatient outlier stays, inpatient and Adjustment to reflect amounts paid outside of the Louisiana Medicaid Management outpatient cost reconciliations, and fraud and abuse recoupments (AA.3.0);
- Trend factors to forecast the expenditures and utilization to the appropriate contract period (AA.3.10);
- Prospective and historic program changes not reflected in the base data (AA.3.1);
- Data smoothing (AA.5.0); and
- Administration loading, including projected underwriting gain (AA.3.2).

The resulting rate ranges for each individual rate cell were gross of Graduate Medical Education GME amounts as in the State Plan directly to the teaching hospitals. The resulting net rates are then worked with DHH to develop a single, actuarially sound rate, gross of GME for each rate (GME) payments to teaching hospitals provided in the Louisiana Medicaid State Plan. Mercer gross rates to net rates consistent with DHH's decision to continue paying exactly the same cell. Finally, Mercer developed a GME adjustment for each rate cell designed to reduce the certified as actuarially sound later in this letter.





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## **Base Data Development**

cost settlements. These payments/recoupments outside of the MMIS system (in some instances with runout through August 2011, to develop the capitation rates. Mercer was also provided with system, fraud and abuse recoupments, GME payments, and inpatient and outpatient hospital Mercer was provided with Medicaid FFS enrollment and claims data from SFY10 and SFY11 appropriate, so that the relevant cost for the population eligible for enrollment in the Prepaid supplemental data files containing information on outlier claims paid outside of the MMIS based on estimates) have been added to or subtracted from the base claims data, as program is replicated.

the Prepaid program. Attachment D provides the certification by the State for the data used for determined that the data appears appropriate for the purpose of setting capitation rates for Mercer reviewed the data provided by the State for consistency and reasonableness and setting prepaid capitation rates.

## Enrollment Data

would have included both the SSI enrollment record and the Family and Children record for the was retroactively categorized as SSI from Family and Children. In this case, the enrollment file DHH's proposed policy to recoup the prior capitation payments and re-pay the corrected rates member for each month. Therefore, if a member's eligibility status was retroactively changed, both the old and the new records were present. Most often this occurred because a recipient unique enrollment record to use - typically the SSI record. This treatment is consistent with same month. Mercer worked with DHH to develop a hierarchy to determine the appropriate The enrollment file supplied by DHH's fiscal agent provided all enrollment records for each for up to twelve months when status changes retroactively.

### Claims Data

Mercer used SFY10 and SFY11 FFS data as the data source. The FFS data reflects the actual medical expenses to DHH of providing health care coverage for the Prepaid eligible population. ensure it appeared reasonable and appropriate but did not audit the data. Specifically, Mercer The expenses are net Third Party Liability and subrogation. Mercer reviewed the FFS data to reviewed the following issues:

- Completeness and consistency of incurred claims over time;
- Consistency between FFS claims data and DHH published reports;





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- All payments outside of the MMIS claims system appeared to be properly accounted. for; and
- The data appeared to have been properly restricted to those services and populations to be covered under the Prepaid program.

Adjustments were made to the FFS data to reflect the complete cost of an actuarially equivalent population for the Prepaid contract.

\$10 million, annually, for outlier claims incurred during an inpatient admission for children under 6 years old outside of the MMIS. Adding outlier claims with a cap of \$10 million per year to the base data resulted in an increase to cost of 0.39% in SFY10 and 0.40% in SFY11. Outlier Claims for Children Under 6 Years - DHH makes payments to a maximum of

remaining liability associated with incurred-but-not-reported claims for SFY10 and SFY11. The Incurred-but-not-Reported Claims Adjustments - Mercer estimated and adjusted for the overall adjustments for SFY10 and SFY11, using paid claims data through August 2011 -0.10% and 2.24%, respectively. Fraud-and-Abuse Recoupments – Adjustments were made for recoupments due to fraud-andabuse recoveries. Those adjustments were -0.09% in SFY10 and -0.17% in SFY11.

Graduate Medical Education (GME) (AA.3.8) – DHH will be making payments for GME outside of the capitation rates. Therefore, after developing the gross rates, Mercer made adjustments to remove GME payments from the net rates. Capitation rates are gross of rebates as DHH will file for them outside of capitation. Supplemental rebates expected to be earned by the MCOs are reflected under managed care savings. Pharmacy Rebates -

Medicaid Community Hospitals - LSU state hospitals and other hospitals receive settlements based on cost reports. Certain "High Medicaid Community Hospitals" also receive supplemental payments that are provided for in the State plan. BAYOU HEALTH plans are required to pay at settlements. Mercer applied adjustments of 0.73% in SFY10, and 0.66% in SFY11, to capture Inpatient, Outpatient Hospital Cost Settlements, and Supplemental Payments to High east the FFS Medicaid rate when contracting with the hospitals including the impact of cost the impact of cost settlements made outside of the MMIS.





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health plan. Therefore, enrollment and claims incurred during the retroactive period and those during the first month of Medicaid eligibility have been removed from our calculations. Infants eligible. Even after receiving Medicaid eligibility, it may take 30 days to become enrolled in a Retroactive Eligibility (AA.3.4) - Individuals will not enroll with a health plan until Medicaid are an exception because they are covered under the mother's plan from the date of birth. Non-covered Populations (AA.2.1, AA.2.2) – In general, the Prepaid program includes individuals classified as SSI, Family and Children, Foster Children, Breast and Cervical Cancer, and HCBS Waiver. The following individuals are excluded from participation in the Prepaid

- Medicare Dually Eligible Individuals;
- Chisholm Class Members;
- Individuals Receiving Medicaid Hospice Services;
- Individuals Residing in Long-Term Care Facilities (Nursing Home, ICF/DD);
- ndividuals Receiving Services for Three Months or Less (Medically Needy Spend-down);
- Undocumented Immigrants Eligible for Emergency Services Only;
- Enrollees receiving single service (family planning only); and
- LaCHIP Affordable Plan.

Non-covered Services (AA.2.4) - The Prepaid rates are based on services covered under the provider agreement. The following services have been excluded in the determination of the capitation rates:

- Services provided through DHH's Early-Steps Program;
- Dental Services;
- ICF/DD Services;
- Hospice;
- Personal Care Services (EPSDT and LT-PCS);





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- Nursing Facility Services;
- School-based Individualized Education Plan Services provided by a school district and billed through the intermediate school district, or school-based services funded with certified public expenditures including school nurses;
- Home and Community-Based Waiver Services;
- Specialized Behavioral Health, including hospital services provided to recipients with mental health diagnosis; and

Ø

Targeted Case Management Services.

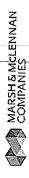
and Client Participation Amounts (AA.2.3, AA.3.13) - Costs associated with "spend-dowh" post-eligibility treatment of income are not included in the base data.

Third-Party Liability (AA.3.6) - Recoveries associated with Third Party Liability and subrogation have been removed from claims. DSH Payments (AA.3.5) - DSH payments are made outside of the MMIS system and have not been included in the capitation rates. Any such payments will be made outside of the capitation rates by DHH after implementation of the Prepaid program.

improved to these facilities. DHH will perform reconciliation quarterly to ensure that the PPS rate has been paid. In the unlikely event of a shortfall, the plans will pay the amount necessary to FQHCs and RHCs at the Prospective Payment System (PPS) rate so that cash flows will be FQHC and RHC Reimbursement (AA.3.9) – DHH requires that all health plans reimburse bring reimbursements to these facilities up to the PPS rate.

Co-payments (AA.3.7) – Co-pays are only applicable to prescription drugs. Since co-pays will remain in place unchanged, no adjustment is necessary.

PCCM fee for members assigned to a primary care provider under the PCCM program. Since Primary Case Care Management (PCCM) Fee (AA.3.0) – Historically, Louisiana has paid a the PCCM fee is not allowed to be included in the capitation rates, Mercer has excluded the PCCM fee by excluding payments associated with procedure code CC001.





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## Rate Category Groupings

reflect differences in risk due to age and gender and during child bearing ages. In addition, due to the high cost associated with pregnancies, DHH will pay a maternity kickpayment to the plans for each delivery that takes place. The following is a list of the different rate cells for each Rates will vary by the major categories of eligibility. Furthermore, where appropriate, the rates within a particular category of eligibility are subdivided into different age and gender bands to eligibility category including the maternity kickpayment.

SSI		
• 0 - 2 Months, Male and Female	14 - 18	14 - 18 Years, Male and Female
• 3 - 11 Months, Male and Female	19 - 44	19 - 44 Years, Male and Female
• 1 - 5 Years, Male and Female	45+ Ye	45+ Years, Male and Female
• 6 - 13 Years, Male and Female		
Family & Children		
• 0 - 2 Months, Male and Female	14 - 18	14 - 18 Years, Male
• 3 - 11 Months, Male and Female	19 - 44	19 - 44 Years, Female
• 1 - 5 Years, Male and Female	• 19 - 44	19 - 44 Years, Male
• 6 - 13 Years, Male and Female	45+ Ye	45+ Years, Female
• 14 - 18 Years, Female	45+ Ye	45+ Years, Male
Foster Care Children, All Ages	sreast and	Breast and Cervical Cancer, All Ages
HCBS Waiver		
• 0 - 18 Years, Male and Female	- 19+ Үе	• <sup>-</sup> 19+ Years, Male and Female
Maternity Kickpayment		

## Trend Development

Trend is an estimate of the change in the overall cost of providing health care benefits over a finite period of time. A trend factor is necessary to estimate the expenses of providing health care services in a future period. Mercer reviewed a variety of sources to develop the trend assumptions. These sources included, but were not limited to:





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- Health care economic indices such as Consumer Price Index for the South-Atlantic région,
- Mercer's regression analysis applied to trends exhibited in the FFS claims data,
- Trends in other state Medicaid programs for similar populations, and
- Judgment regarding economic outlook balancing a variety of sources.

Mercer developed individual trends for each category of eligibility and service category. Mercer's target trend can be found in the following table.

under this certification. The managed care savings adjustments we have used for prescribed drugs reflect our pharmacists' assessment of the achievable savings compared to the fee for Prescribed Drugs are being added to the BAYOU HEALTH – Prepaid Model for the first time service program. In order to avoid potentially duplicating savings, we have not reflected any reductions in drug trend here.

COA Description	COS Description	Utilization	Unit Cost	PMPM Trend
SSI	Inpatient Hospital	1 31%	7000	1 210/
SSI	Outpatient Hospital	5 74%	3 76%	1.31 /0
SSI	Primary Care Physician	3.62%	%000	3 6707
SSI	Specialty Care Physician	3,62%	%00.0	3.0270
SSI	FQHC/RHC	3 62%	2,00%	2.02./0
SSI	EPSDT	3 62%	7.00 /0	0.09%
SSI	Certified Nurse Practitioners/Clinical Nurse	3.62%	0.00.0	3.62%
SSI	Lab/Radiology	3.62%	%00.0	3 62%
SSI	Home Health	3.62%	%00.0	3 82%
SSI	Emergency Transportation	3 74%	0.000	2.02./0
SSI	Non-Emergency Transportation	3 74%	0.00%	0.7470
SSI	Rehabilitation Services (OT. PT. ST)	3 62%	0.00 0	0.7470
SSI	DME	3 62%	0,00.0	3.0270
SSI	Clinic	3 62%	0,00,0	3.02%
SSI	Family Planning	3.62%	0,00.0	3.02.70
SSI	Other	3 62%	0.00%	3.0270
SSI	Prescribed Drugs	1.37%	0,00.0	1 270/
SSI	Emergency Room	5.74%	3.76%	0.71%
SSI	Basic Behavioral Health	3.62%	%00.0	3.62%





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COA Description	COS Description	Utilization	Unit Cost	PMPM Trend
Family and Children	Inpatient Hospital	0.87%	0.00%	0.87%
Family and Children	Outpatient Hospital	4.74%	3.76%	8.68%
Family and Children	Primary Care Physician	2.74%	0.00%	2.74%
Family and Children	Specialty Care Physician	2.74%	0.00%	2.74%
Family and Children	FQHC/RHC	2.74%	2.00%	4.80%
Family and Children	EPSDT	2.74%	0.00%	2.74%
Family and Children	Certified Nurse Practitioners/Clinical Nurse	2.74%	0.00%	2.74%
Family and Children	Lab/Radiology	3.62%	0.00%	3.62%
Family and Children	Home Health	3.62%	0.00%	3.62%
Family and Children	Emergency Transportation	3.74%	0.00%	3.74%
Family and Children	Non-Emergency Transportation	3.74%	0.00%	3.74%
Family and Children	Rehabilitation Services (OT, PT, ST)	3.62%	0.00%	3.62%
Family and Children	DME	3.62%	0.00%	3.62%
Family and Children	Clinic	2.74%	0.00%	2.74%
Family and Children	Family Planning	2.74%	0.00%	2.74%
Family and Children	Other	3.62%	0.00%	3.62%
Family and Children	Prescribed Drugs	1.37%	0.00%	1.37%
Family and Children	Emergency Room	4.74%	3.76%	8.68%
Family and Children	Basic Behavioral Health	2.74%	0.00%	2.74%
Foster Care Children	Inpatient Hospital	1.31%	0.00%	1.31%
Foster Care Children	Outpatient Hospital	5.74%	3.75%	9.71%
Foster Care Children	Primary Care Physician	3.62%	0.00%	3.62%
Foster Care Children	Specialty Care Physician	3.62%	0.00%	3.62%
Foster Care Children	FQHC/RHC	3.62%	2.00%	2.69%
Foster Care Children	EPSDT	3.62%	0.00%	3.62%
Foster Care Children	Certified Nurse Practitioners/Clinical Nurse	3.62%	0.00%	3.62%
Foster Care Children	Lab/Radiology	3.62%	0.00%	3.62%
Foster Care Children	Home Health	3.62%	0.00%	3.62%
Foster Care Children	Emergency Transportation	3.74%	0.00%	3.74%
Foster Care Children	Non-Emergency Transportation	3.74%	0.00%	3.74%
Foster Care Children	Rehabilitation Services (OT, PT, ST)	3.62%	%00.0	3.62%
Foster Care Children		3.62%	%00.0	3.62%
Foster Care Children	Clinic	3.62%	0.00%	3.62%





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COA Description	COS Description	Utilization	Unit Cost	PMPM Trend
Foster Care Children	Family Planning	3.62%	0.00%	3.62%
Foster Care Children	Other	3.62%	0.00%	3.62%
Foster Care Children	Prescribed Drugs	1.37%	0.00%	1.37%
Foster Care Children	Emergency Room	5.74%	3.76%	9.71%
Foster Care Children	Basic Behavioral Health	3.62%	0.00%	3.62%
Breast and Cervical Cancer	Inpatient Hospital	1.31%	%00.0	1.31%
Breast and Cervical Cancer	Outpatient Hospital	5.74%	3.76%	9.72%
Breast and Cervical Cancer	Primary Care Physician	3.62%	0.00%	3.62%
Breast and Cervical Cancer	Specialty Care Physician	3.62%	0.00%	3.62%
Breast and Cervical Cancer	FQHC/RHC	3.62%	2.00%	5.69%
Breast and Cervical Cancer	EPSDT	3.62%	%00.0	3.62%
Breast and Cervical Cancer	Certifled Nurse Practitioners/Clinical Nurse	3.62%	%00.0	3.62%
Breast and Cervical Cancer	Lab/Radiology	3.62%	%00.0	3.62%
Breast and Cervical Cancer	Home Health	3.62%	0.00%	3.62%
Breast and Cervical Cancer	Emergency Transportation	3.74%	0.00%	3.74%
Breast and Cervical Cancer	Non-Emergency Transportation	3.74%	0.00%	3.74%
Breast and Cervical Cancer	Rehabilitation Services (OT, PT, ST)	3.62%	0.00%	3.62%
Breast and Cervical Cancer	DME	3.62%	%00.0	3.62%
Breast and Cervical Cancer	Clinic	3.62%	0.00%	3.62%





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COA Description	COS Description	Utilization	Unit Cost	PMPM Trend
Breast and Cervical	Family Planning	3.62%	%00'0	3.62%
Cancer				
Breast and Cervical	Other	3.62%	%00.0	3.62%
Cancer				
Breast and Cervical	Prescribed Drugs	1.37%	%00'0	1.37%
Cancer				***************************************
Breast and Cervical	Emergency Room	5.74%	3.75%	9.71%
Cancer				***************************************
Breast and Cervical	Basic Behavioral Health	3.62%	%00.0	3.62%
Cancer				
HCBS Waiver	Inpatient Hospital	3.62%	%00'0	3.62%
HCBS Waiver	Outpatient Hospital	7.62%	4.01%	11.94%
HCBS Waiver	Primary Care Physician	5.62%	0.00%	5.62%
HCBS Waiver	Specialty Care Physician	5.62%	%00.0	5.62%
HCBS Waiver	FQHC/RHC	5.62%	2.00%	7.73%
HCBS Waiver	EPSDT	5.62%	%00'0	5.62%
HCBS Waiver	Certified Nurse Practitioners/Clinical Nurse	5.62%	%00'0	5.62%
HCBS Waiver	Lab/Radiology	7.74%	%00'0	7.74%
HCBS Waiver	Home Health	7.74%	0.00%	7.74%
HCBS Waiver	Emergency Transportation	6.74%	0.00%	6.74%
HCBS Waiver	Non-Emergency Transportation	6.74%	%00.0	6.74%
HCBS Waiver	Rehabilitation Services (OT, PT, ST)	7.74%	%00.0	7.74%
HCBS Waiver	DME	7.74%	0.00%	7.74%
HCBS Waiver	Olinic	5.62%	0.00%	5.62%
HCBS Waiver	Family Planning	5.62%	0.00%	5.62%
HCBS Waiver	Other	7.75%	%00:0	7.75%
HCBS Waiver	Prescribed Drugs	6.98%	%00'0	6.98%
HCBS Waiver	Emergency Room	8.04%	3.81%	12.16%
HCBS Waiver	Basic Behavioral Health	5.62%	%00.0	5.62%
Maternity	Maternity Kickpayment	%00.0	%00.0	0.00%
Kickpayment				

The overall annualized per member per month (PMPM) trend assumption for the Prepaid program is 2.87%.





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# Programmatic Changes/Rate Issues

took place during or after the base year. Mercer applied programmatic change adjustments to Programmatic change adjustments recognize the impact of benefit or eligibility changes that incorporate factors not fully reflected in the base data. These adjustments were mutually exclusive and made only once in the rate-setting process.

per diem rates as of January 1, 2011, and applicable cost settlements are reduced by 3.7% for children's and private hospitals and 10% for State hospitals. Rural hospitals continue to be hospital per diem rates. Effective for dates of service on or after August 1, 2012, the inpatient Changes to Inpatient Hospital Reimbursement - Various changes have been made to excluded from the rate reductions.

Changes to the Laboratory/Radiology Fee Schedule - There have been various changes to fee schedules. Most recently, effective for dates of service on or after July 1, 2012, the reimbursement rates for laboratory services was reduced by 3.7% of the fee amounts on file as of January 1, 2011.

# Outpatient Hospital Fee Schedule Changes Children's Specialty Hospitals

Effective for dates of service on or after August 1, 2012, the reimbursement paid to children's hospital facility fees for office/outpatient visits is reduced by 3.7% of the fee schedule on file specialty hospitals for clinical diagnostic laboratory, rehabilitation services, and outpatient as of January 1, 2011.

cost for other outpatient hospital services. From August 4, 2009 through August 31, 2009, these hospitals were cost settled at 78.48% of allowable cost. From September 1, 2009 through Through August 3, 2009, children's specialty hospitals were cost settled at 83.18% of allowable hospitals' cost settlements are to be reduced by 3.7% of allowable cost as calculated through allowable cost. From August 1, 2010 through December 31, 2010, these hospitals were cost hospitals were cost settled at 86.15% of allowable cost. From August 1, 2012 forward, these settled at 87.91% of allowable cost. From January 1, 2011 through July 31, 2012, these February 3, 2010 through July 31, 2010, these hospitals were cost settled at 92.15% of February 2, 2010, these hospitals were cost settled at 97.00% of allowable cost. From the cost report settlement process, making final reimbursement 82.96%.





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## Non-State and Non-Rural Hospitals

service on or after August 1, 2012, the reimbursement paid to non-rural, non-state hospitals for outpatient clinical diagnostic laboratory services, surgeries, rehabilitation services, and hospital Again, there have been various changes to fee schedules. Most recently, effective for dates of facility fees for office/outpatient visits is reduced by 3.7% of the fee schedule on file as of January 1, 2011.

Through August 3, 2009, non-state and non-rural outpatient hospitals were cost settled at 83.18% of cost. From August 4, 2009 through February 2, 2010, these hospitals were cost settled at 78.48% of cost. From February 3, 2010 through July 31, 2010, these hospitals were cost settled at 74.56% of cost. From August 1, 2010 through December 31, 2010, these hospitals were cost settled at 71.13% of cost. From January 1, 2011 through July 31, 2012, these hospitals were cost settled at 69.71% of allowable cost. From August 1, 2012 forward, these hospitals' cost settlements are to be reduced by 3.7% of allowable cost as calculated through the cost report settlement process, making final reimbursement 67.13%.

### State Hospitals

hospitals for outpatient clinical diagnostic laboratory services, surgeries, rehabilitation services, and hospital facility fees for office/outpatient visits is reduced by 10.0% of the fee schedule on Effective for dates of service on or after August 1, 2012, the reimbursement paid to State file as of July 31, 2012.

Through July 31, 2012, State hospitals were cost settled at 100.0% of allowable cost for other outpatient services. From August 1, 2012 forward, these hospitals' cost settlements are to be reduced by 10.0% of allowable cost as calculated through the cost report settlement process, making final reimbursement 90.0%.

## Physician Fee Schedule Changes

cesarean deliveries and consult codes are reimbursed at the vaginal delivery rate or evaluation was reduced by 3,4% of the rates in effect on January 22, 2010. Exceptions to the general rule are primary care codes (99201-99499) and vaccine administration codes (90460-1, 90471-4) Effective July 1, 2012, in general, the reimbursement for non-FQHC/RHC physician services reimbursement at 100% of Medicare in 2013, under the Affordable Care Act. In addition, with specialties of Family Practice, Pediatrics, and Internal Medicine that are subject to and management (E&M) rate, respectively.





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# Clinical Services-End Stage Renal Disease Facilities Non-Medicare Claims Reimbursement Rate Reduction

Various changes, most recently, effective for dates of service on or after July 1, 2012, the reimbursement to ESRD facilities was reduced by 3.7% of the rates in effect on January 1, 2011. **Non-Emergency Medical Transportation** – Most recently, effective for dates of service on or after July 1, 2012, the reimbursement rates for non-emergency, non-ambulance medical transportation services was reduced by 3.7% of the rates in effect on January 1, 2011.

Emergency Medical Transportation - Most recently, effective on or after August 1, 2012, the reimbursement rates for emergency ambulance transportation services is reduced by 5.0% of the rate on file as of July 1, 2012.

service can be found in the table below. Overall, the fee schedule changes since the base data period reduced cost by approximately 6.94% for SFY10 and 2.56% for SFY11. The compounded effect of all of the fee schedule changes by category of aid and category of

compared to the fee for service program. The fee schedule adjustments shown here are limited to the impact of earlier changes to FFS pricing schedules. have used for prescribed drugs reflect our pharmacists' assessment of the achievable savings program for the first time under this certification. The managed care savings adjustments we Prescribed Drugs – Prescribed Drugs are being added to the BAYOU HEALTH – Prepaid

Mercer COA Description	Final Mercer.COS Description	Adjustment for Fee Schedule Changes (SFY10)	Adjustment for Fee Schedule Changes (SFY10) (SFY11)
SSI	Inpatient Hospital	-11.82%	-5.66%
SSI	Outpatient Hospital	-10.29%	-6.78%
SSI	Primary Care Physician	-3.41%	0.54%
SSI	Specialty Care Physician	-5.51%	0.29%
SSI	FQHC/RHC	0.02%	0.03%
SSI	EPSDT	-2.54%	-1.27%
SSI	Certified Nurse Practitioners/Clinical Nurse	-3.74%	-3.68%
SSI	Lab/Radiology	-11.62%	-4.60%





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Merrer (COA Description	Elizabeth Manager Control Mana	Adjustment for Fee Schedule Changes	Adjustment for Fee Schedule Changes
ISS ISS		(SFY10)	(SFY11)
881		-5.63%	-4.66%
SS	Non Emergency Transportation	-14.27%	-10.89%
300	Dobabilitation Scarings Oct BT ST	-12.41%	-5.02%
881	Netiabilitation Services (O1, P1, S1)	-3.70%	-3.70%
SSI	OME	-3.70%	-3.70%
SS		-11.57%	-4.65%
SSI	Other	-8.35%	-7.12%
SSI	Prescribed Drugs	2 400/	-3.00%
SSI	Emergency Room	2, 25.70 %05. 8-	3 38%
SSI	Basic Behavioral Health	-0.65%	0.97%
Family and Children	Inpatient Hospital	-8.66%	-2.93%
Family and Children	Outpatient Hospital	-10.36%	-5.00%
Family and Children	Primary Care Physician	-3.71%	2.57%
Family and Children	Specialty Care Physician	-8.49%	-1.10%
Family and Children	FQHC/RHC	0.02%	0.04%
Family and Children	EPSDT	-3.07%	-1.48%
Family and Children	Certified Nurse Practitioners/Clinical Nurse	-3.70%	-3.70%
Family and Children	Lab/Radiology	-10.32%	-3.74%
Family and Children	Home Health	-5.63%	-4.66%
Family and Children	Emergency Transportation	-14.27%	-10.89%
Family and Children	Non-Emergency Transportation	-12.41%	-5.02%
Family and Children	Rehabilitation Services (OT, PT, ST)	-3.70%	-3.70%
Family and Children	DME	-3.70%	-3.70%
Family and Children	Clinic	-4.56%	-4.02%
Family and Children	Family Planning	-10.43%	-6.97%
	Other	-12.02%	-2.95%
Family and Children	Prescribed Drugs	-2.49%	-0.89%
Family and Children	Emergency Room	-8.80%	-2.63%
Family and Children	Basic Behavioral Health	1.93%	4.17%
Foster Care Children	Inpatient Hospital	-11.62%	-12.48%





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		Adjustment for	Adjustment for
		Fee Schedule Changes	Fee Schedule Changes
Mercer COA Description	Final Mercer COS Description	(SFY10)	(SFY11)
Foster Care Children	Outpatient Hospital	-10.94%	-5.83%
Foster Care Children	Primary Care Physician	-4.78%	3.27%
Foster Care Children	Specialty Care Physician	-9.67%	-1.68%
Foster Care Children	FQHC/RHC	0.02%	0.04%
Foster Care Children	EPSDT	-3.55%	-1.61%
Foster Care Children	Certified Nurse Practitioners/Clinical Nurse	-3.70%	-3.70%
Foster Care Children	Lab/Radiology	-10.63%	-3.92%
Foster Care Children	Home Health	-5.63%	-4.66%
Foster Care Children	Emergency Transportation	-14.27%	-10.89%
Foster Care Children	Non-Emergency Transportation	-12.41%	-5.02%
Foster Care Children	Rehabilitation Services (OT, PT, ST)	-3.70%	-3.70%
Foster Care Children	DME	-3.70%	-3.70%
Foster Care Children	Clinic	-4.83%	-4.96%
Foster Care Children	Family Planning	-5.93%	-5.39%
Foster Care Children	Other	-6.11%	-2.28%
Foster Care Children	Prescribed Drugs	-2.49%	-0.89%
Foster Care Children	Emergency Room	-8.52%	-2.24%
Foster Care Children	Basic Behavioral Health	-1.03%	5.26%
Breast and Cervical Cancer	Inpatient Hospital	-20.71%	-10.26%
Breast and Cervical Cancer	Outpatient Hospital	-10.67%	-8.92%
Breast and Cervical Cancer	Primary Care Physician	-1.81%	1.72%
Breast and Cervical Cancer	Specialty Care Physician	-6.27%	-0.64%
Breast and Cervical Cancer	FQHC/RHC	0.02%	0.02%
Breast and Cervical Cancer	EPSDT	-2.00%	%00.0
Breast and Cervical Cancer	Certified Nurse Practitioners/Clinical Nurse	-3.71%	-3.70%
Breast and Cervical Cancer	Lab/Radiology	-12.59%	-2.87%
Breast and Cervical Cancer	Home Health	-5.63%	-4.66%
Breast and Cervical Cancer	Emergency Transportation	-14.27%	-10.89%
Breast and Cervical Cancer	Non-Emergency Transportation	-12.41%	-5.02%
Breast and Cervical Cancer	Rehabilitation Services (OT, PT, ST)	-3.70%	-3.70%
Breast and Cervical Cancer	DME	-3.70%	-3.70%





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	Final Mercer COS Description		PATRICIA STATE OF THE PROPERTY OF THE PARTY
	是在各种的,我们就是一个,我们就是一个人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人们的人	Changes (SFY10)	Changes (SFY11)
	Clinic	-4.99%	5.96%
	Family Planning	-14.37%	-12.82%
	Other	-10.48%	-3.70%
t	Prescribed Drugs	-2.49%	-0.89%
Breast and Cervical Cancer	Emergency Room	-8.64%	-4.73%
Breast and Cervical Cancer	Basic Behavioral Health	-3.49%	-1.65%
HCBS Waiver	Inpatient Hospital	-14.49%	-8.66%
HCBS Waiver	Outpatient Hospital	-9.10%	-4.73%
HCBS Waiver	Primary Care Physician	-1.07%	0.78%
HCBS Waiver	Specialty Care Physician	-6.20%	-0.37%
HCBS Waiver	FQHC/RHC	0.02%	0.03%
	EPSDT	-2.05%	-1.04%
	Certified Nurse Practitioners/Clinical Nurse	-3.74%	-3.65%
HCBS Waiver	Lab/Radiology	-11.12%	-4.37%
HCBS Waiver	Home Health	-5.63%	-4.66%
HCBS Waiver	Emergency Transportation	-14.27%	-10.89%
HCBS Waiver	Non-Emergency Transportation	-12.41%	-5.02%
HCBS Waiver	Rehabilitation Services (OT, PT, ST)	-3.70%	-3.70%
HCBS Waiver	DME	-3.70%	-3.70%
HCBS Waiver	Olinic	-11.29%	-4.49%
HCBS Waiver	Family Planning	-7.46%	-5.84%
HCBS Waiver	Other	-23.01%	-3.70%
LOBO Waiver	Prescribed Drugs	-2.49%	-0.89%
LOBS Walver	Fmergency Room	-8.09%	-3.04%
LOBS Waiver	Basic Behavioral Health	-0.95%	0.05%
Maternity Kickneyment	Maternity Kickpayment	-12.48%	-4.80%





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## Data Smoothing

As part of the rate development process, Mercer blended data from SFY10 and SFY11 to arrive at the overall data source for rate setting. The goal of the blending process is to obtain a set of base data that has sufficient credibility and reasonableness to develop actuarially-sound capitation rates. Mercer applied weights of 60% and 40% to the SFY11 and SFY10 data, respectively.

rate cells within a region had small enrollment. The cost PMPM for a small rate cell is subject to Beyond blending data from multiple years, Mercer also used state wide figures where particular large fluctuations from one year to the next, thus rendering it less effective at predicting future cost. Using state wide figures results in greater data credibility and reduces the impact of random fluctuations exhibited by the data.

concerns. Therefore, state wide figures are used for these populations and the data has been Some categories of eligibility such as the Foster Children, Breast and Cervical Cancer, and HCBS Waiver populations are too small to have separate rate cells due to data credibility combined across all age and sex cells in determining the capitation rate.

## Managed Care Assumptions

Mercer and DIHH discussed areas for improvements in managed care efficiency. Prior studies of savings achieved in transitioning from FFS to Managed Care showed savings of 2%-19%<sup>1</sup>

Managed Care is able to generate savings by:

- Encouraging the use of preventive services so that acute conditions are not exacerbated to the point that requires a visit to the emergency room (ER) or hospitalization.
  - Louisiana Medicaid recipients make very frequent use of the ER, and ERs are much more expensive than other viable altematives. Those alternatives, such as extended hours for doctor's offices, after-hours urgent care clinics, or even nurse advice lines, may result in Use of alternatives to the ER for conditions that are non-emergent in nature. Some significantly more pleasant experiences than the hospital ER as well.
    - By increasing access and providing member education, BAYOU HEALTH plans can steer some of the members away from the more costly ER setting when the condition is not emergent in nature.

<sup>&</sup>lt;sup>1</sup> The Lewin Group – Medicaid Capitation Expansion's Potential Cost Savings.





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- Minimizing duplication of services. When a recipient doesn't have a "medical home" or care coordinator, they often seek care from different providers, sometimes at different locations, each time they need care. The new provider must get to know them and their history over The provider that knows them may more easily focus in on their needs and provide more again and may order duplicative tests that have already been done by another provider. targeted care.
- Hospital discharge planning to ensure a smooth transition from facility-based care to community resources and minimize readmissions.

method prescribed by the Agency for Healthcare Research and Quality (AHRQ). The study associated with low birth weight babies, congestive heart failure, bacterial pneumonia, and Mercer has performed a study of the potentially preventable hospital admissions using the confirmed that there were significant opportunities for savings due to hospital admissions other conditions which AHRQ has determined to be avoidable. Prescribed Drugs are being added to the BAYOU HEALTH – Prepaid program for the first time used recognize that prescribed drugs will be the financial responsibility of the Prepaid program potentially duplicating savings, we have not reflected any reductions in drug trend. The factors under this certification. The managed care savings adjustments we have used for prescribed drugs reflect our pharmacists' assessment of the achievable savings compared to the fee for consideration informed the decisions about positioning rates relatively high within actuarially service program as in effect in the first half of calendar year (CY) 2012. In order to avoid plans for the first time and that the time period covered by this certification is short. This sound ranges.

The table below illustrates the savings applied by category of aid and categories of service.

COA Description CO	COS Description Inpatient Hospital	Utilization         Unit Cost           -20.63%         4.52%	Unit Cost 4.52%	PMPM -17.04%
-	Outpatient Hospital	-15.63%	2.80%	-13.26%
Ε	Primary Care Physician	9.39%	6.77%	16.79%
၁၉	Specialty Care Physician	-15.61%	1.77%	-14.12%
工	FQHC/RHC	4.39%	1.77%	6.23%
S	EPSDT	9.39%	6.77%	16.79%
洼	Certified Nurse Practitioners/Clinical Nurse	9.39%	6.76%	16.79%





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COA Description	COS Description	Utilization	Unit Cost	PMPM
SSI	Lab/Radiology	-11.22%	1.78%	-9.64%
SSI	Home Health	4.39%	1.77%	6.23%
SSI	Emergency Transportation	-5.62%	1.76%	-3.96%
SSI	Non-Emergency Transportation	4.38%	1.76%	6.21%
SSI	Rehabilitation Services (OT, PT, ST)	-5.61%	1.77%	-3.94%
SSI	DME	-15.61%	1.77%	-14.12%
SSI	Clinic	-15.61%	1.77%	-14.12%
SSI	Family Planning	4.39%	1.77%	6.23%
SSI	Other	4.39%	1.77%	6.24%
SSI	Prescribed Drugs	-2.90%	-9.60%	-12.22%
SSI	Emergency Room	-25.63%	6.81%	-20.56%
SSI	Basic Behavioral Health	4.39%	1.77%	6.23%
Family and Children	Inpatient Hospital	-30.64%	4.52%	-27.50%
Family and Children	Outpatient Hospital	-15.63%	2.80%	-13.26%
Family and Children	Primary Care Physician	9.38%	6.76%	16.77%
Family and Children	Specialty Care Physician	-15.62%	1.76%	-14.14%
Family and Children	FQHC/RHC	4.38%	1.76%	6.21%
Family and Children	EPSDT	9.38%	6.76%	16.77%
Family and Children	Certified Nurse Practitioners/Clinical Nurse	9.38%	6.76%	16.77%
Family and Children	Lab/Radiology	-11.22%	1.78%	-9.64%
Family and Children	Home Health	4.39%	1.77%	6.23%
Family and Children	Emergency Transportation	-5.62%	1.76%	-3.96%
Family and Children	Non-Emergency Transportation	4.38%	1.76%	6.21%
Family and Children	Rehabilitation Services (OT, PT, ST)	-5.61%	1.77%	-3.95%
Family and Children	DME	-15.61%	1.77%	-14.12%
Family and Children	Clinic	-15.62%	1.76%	-14.14%
Family and Children	Family Planning	4.38%	1.76%	6.21%
Family and Children	Other	4.39%	1.77%	6.23%
Family and Children	Prescribed Drugs	-2.80%	-11.00%	-13.49%
Family and Children	Emergency Room	-25.62%	6.81%	-20.56%
Family and Children	Basic Behavioral Health	4.38%	1.76%	6.21%
Foster Care Children	Inpatient Hospital	-20.63%	4.52%	-17.04%
Foster Care Children	Outpatient Hospital	-15.63%	2.80%	-13.26%





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COA Description	GOS Description	Ufilization	linit Cast	Wawa
Foster Care Children	Primary Care Physician	%68.6	6 76%	16 700/
Foster Care Children	Specialty Care Physician	-15.61%	1.77%	-14 12%
Foster Care Children	FQHC/RHC	4.39%	1.77%	6.23%
Foster Care Children	EPSDT	9.39%	6.76%	16.79%
Foster Care Children	Certified Nurse Practitioners/Clinical Nurse	9.39%	6.76%	16.79%
Foster Care Children	Lab/Radiology	-11.22%	1.78%	-9.64%
Foster Care Children	Home Health	4.39%	1.76%	6.23%
Foster Care Children	Emergency Transportation	-5.62%	1.76%	-3.96%
Foster Care Children	Non-Emergency Transportation	4.38%	1.76%	6.22%
roster Care Children	Rehabilitation Services (OT, PT, ST)	-5.61%	1.76%	-3.95%
Foster Care Children	DME	-15.61%	1.76%	-14.12%
Foster Care Children	Clinic	-15.61%	1.77%	-14.12%
Foster Care Children	Family Planning	4.39%	1.77%	6.23%
Foster Care Children	Other	4.39%	1.77%	6.23%
Foster Care Children	Prescribed Drugs	-1.60%	-9.60%	-11.05%
Foster Care Children	Emergency Room	-25.62%	6.81%	-20.56%
Foster Care Children	Basic Behavioral Health	4.39%	1.76%	6.23%
Breast and Cervical	Inpatient Hospital	-20.63%	4.52%	-17.04%
Cancer		•		
Breast and Cervical	Outpatient Hospital	-15.62%	2.80%	-13.26%
Cancer			)	
Breast and Cervical Cancer	Primary Care Physician	9.39%	6.77%	16.79%
Breast and Cervical	Specialty Care Physician	-15.61%	1.77%	-14.12%
Breast and Cervical	FOHC/RHC	1 30%	4 770/	/800 9
Cancer		2	0/ / / 1	0.23.0
Breast and Cervical	EPSDT	9.40%	6.77%	16.80%
Breast and Cervical	Certified Nurse Practitioners/Clinical Nurse	9.39%	6.76%	16.79%
Breast and Cervical	Lab/Radiology	-11.22%	1.78%	-9.65%
Cancer				





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COA Description	COS Description	Utilization	Unit Cost	PMPM
Breast and Cervical	Home Health	4.39%	1.77%	6.23%
Breast and Cervical	Emergency Transportation	-5.62%	1.76%	-3.96%
Breast and Cervical	Non-Emergency Transportation	4.38%	1.76%	6.21%
Breast and Cervical	Rehabilitation Services (OT, PT, ST)	-5.62%	1.76%	-3.95%
Breast and Cervical	DME	-15.62%	1.77%	-14.12%
Breast and Cervical	Olinic	-15.61%	1.77%	-14.12%
Breast and Cervical	Family Planning	4.39%	1.77%	6.23%
Breast and Cervical	Other	4.39%	1.77%	6.23%
Breast and Cervical	Prescribed Drugs	~0.50%	-10.80%	-11.25%
Breast and Cervical	Emergency Room	-25.63%	6.81%	-20.56%
Breast and Cervical	Basic Behavioral Health	4.39%	1.77%	6.23%
HCBS Waiver	Inpatient Hospital	-20.61%	4.54%	-17.01%
HCBS Waiver	Outpatient Hospital	-15.61%	2.80%	-13.25%
HCBS Waiver	Primary Care Physician	9.39%	6.76%	16.79%
HCBS Waiver	Specialty Care Physician	-15.61%	1.77%	-14.12%
HCBS Waiver	FQHC/RHC	4.39%	1.76%	6.23%
HCBS Waiver	EPSDT	9.39%	6.76%	16.79%
HCBS Waiver	Certified Nurse Practitioners/Clinical Nurse	9.39%	6.76%	16.79%
HCBS Waiver	Lab/Radiology	-11.25%	1.77%	-9.68%
HCBS Waiver	Home Health	4.37%	1.76%	6.21%
HCBS Waiver	Emergency Transportation	-5.63%	1.76%	-3.96%
HCBS Waiver	Non-Emergency Transportation	4.37%	1.76%	6.21%
HCBS Waiver	Rehabilitation Services (OT, PT, ST)	-5.63%	1.76%	-3.96%





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COA Description	GOS Description	Utilization	Unit Cost	PMPM
HCBS Waiver	DME	-15.63%	1.76%	-14.14%
HCBS Waiver	Clinic	-15.61%	1.77%	14.12%
HCBS Waiver	Family Planning	4.39%	1.76%	6.23%
HCBS Waiver	Other	4.38%	1.76%	6.22%
HCBS Waiver	Prescribed Drugs	-5.30%	-9.90%	-14.68%
HCBS Waiver	Emergency Room	-25.61%	6.81%	-20.55%
HCBS Waiver	Basic Behavioral Health	4.39%	1.77%	6.23%
Maternity Kickpayment	Maternity Kickpayment   Maternity Kickpayment	0.00%	1.74%	1.74%

The overall impact of managed care assumptions was a reduction of 10.67% to the rates.

## Commercial Reinsurance

To provide protection against the risk of catastrophic claims, the Prepaid plans are encouraged to purchase reinsurance to insure against large claims incurred by an individual member.

# Administration, Profit, and Tax Load

costly to administer than some of the other services and their addition may have relatively little administrative rates paid to the BAYOU HEALTH plans. The review focused on the reporting and organizational requirements detailed in the BAYOU HEALTH provider agreement. Mercer administration load of 8.9% for the final premium rates. This has been reduced from the prior certification reflecting the addition of prescribed drugs. Prescription drugs are typically less Mercer and DHH reviewed the components of the administrative allowance to evaluate the with other state Medicaid programs' administrative allowances, Mercer assumed an overall necessary for an average plan in this program. Based on the analysis and comparisons modeled the cost structure for these requirements to determine the administrative load marginal impact on some of the existing components of overhead cost. In addition, Mercer included profit and margin considerations in the rate development explicitly through a load of 1.9% of premium. This is an acceptable rate consideration per AA.3.2 of the CMS Rate-Setting Checklist. As instructed by DHH, a load for premium tax of 2.25% was also included in the final premium loaded for administration and profit.





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α approximately 12.8%. We applied this as a load of 7.7% on the Maternity Kickpayment and load of 13.1% on all other rate cells. In total, the overall load applied to the rates for administration and profit/contingencies was

## Risk Adjustment

status of the members served in each plan using the ACG model. The risk adjustment process does not increase or decrease the overall cost of the program but can change the distribution Risk adjustment will be applied to the rates in Attachment A to reflect differences in health

Actuarially sound risk adjustment protocols have been developed so as to be appropriate to the various BAYOU HEALTH plans according to the relative risk of their enrolled members. rates that have been developed by underlying age and gender cells.

### Rate Ranges

amount of efficiency DHH is willing to purchase. The final rates to be paid by DHH are within the assumptions and the financial data adjustments to account for different levels of managed care efficiency and potential risk selection. As a result, the lower bound of the rate range represents Mercer developed actuarially-sound rate ranges for DHH to use in determining the appropriate bound of the rate ranges by varying the assumptions outlined above. Mercer varied the trend a rate for a very efficient BAYOU HEALTH Plan and the upper bound represents the least rates to pay the BAYOU HEALTH Plans. Mercer specifically priced the upper and lower ranges and are included as Attachment A to this letter.

## Rate Development Overview

the adjustments applied to each rate cell in Attachment B. This exhibit presents the breakdown To provide additional detail on the rate development, Mercer has also provided an overview of of the assumptions used to calculate the Target rate within the actuarially sound rate range.

# Family Planning Portion of the Rates

that DHH may claim the enhanced federal match of 90% on these services. CMS issued a guide enhanced federal match rate. Specific details on codes used to identify family planning services Mercer has analyzed the component of the rates associated with Family Planning services so in June 2009, to assist states in determining which services are allowed to be claimed at the can be found in the document accompanying this letter.





Page 25 October 15, 2012 Ms. Madeline McAndrew Louisiana Department of Health and Hospitals Attachment C below contains the PMPMs associated with Family Planning that will be claimed at the enhanced match rate. Please note that these Family Planning PMPMs do not include load for administration and profit.

## Certification of Final Rate Ranges

validity and completeness of this supplied data and information. We have reviewed the data and information for internal consistency and reasonableness but we did not audit it. In our opinion it and relied upon enrollment, FFS claims, reimbursement level, benefit design, and information supplied by the DHH and its fiscal agent. The DHH and its fiscal agent are responsible for the In preparing the rate ranges underlying the rates shown in Attachment A, Mercer has used is appropriate for the intended purposes. If the data and information are incomplete or inaccurate, the values shown in this report may need to be revised accordingly.

populations and services under the managed care contract. Rate estimates provided are based events. Therefore, any projection must be interpreted as having a likely range of variability from the estimate. 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 Mercer certifies that the rates in Attachment A were developed in accordance with generally upon the information available at a point in time and are subject to unforeseen and random accepted actuarial practices and principles and are appropriate for the Medicaid covered care capitation rates.

Rates and ranges developed by Mercer are actuarial projections of future contingent events. Actual BAYOU HEALTH plan costs will differ from these projections. Mercer has developed these rates on behalf of DHH to demonstrate compliance with the CMS requirements under 42 CFR 438.6(c), and in accordance with applicable law and regulations. Use of these rate ranges for any purpose beyond that stated may not be appropriate.

rate ranges by BAYOU HEALTH plans for any purpose. Mercer recommends that any BAYOU HEALTH plan considering contracting with the DHH should analyze its own projected medical expense, administrative expense, and any other premium needs for comparison to these rate BAYOU HEALTH plans are advised that the use of these rate ranges may not be appropriate for their particular circumstance and Mercer disclaims any responsibility for the use of these ranges before deciding whether to contract with the DHH.





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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. Medicaid eligibility rules, and actuarial rating techniques. It is intended for DHH and CMS, and This certification letter assumes the reader is familiar with the BAYOU HEALTH Program,

If you have any questions on any of the information provided, please feel free to call me at 404 442 3249.

Sincerely,

Sudda Shinny

Sudha Shenoy, FSA, MAAA, CERA Principal



					11/1/2012-1	12/31/2012	
<b>О</b> НН			- I material and a second a second and a second a second and a second a second and a second and a second and	Parallel Control of	Prepaid Final Rates w/ Tax (Gross of GME)		Prepaid Final Rates w Tax (Net of GME)
Administrative	Region			FY11 Member			STORESTANDAMENTS SECTION OF
Region	Description	COA Description		Months or			
01	New Orleans	SSI COA Description	RC Description	Deliveries	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
01	New Orleans	SSI	0-2 Months, Male and Female	294	\$ 17,190.64	0.9473	\$ 16,284,43
01	New Orleans	ssi	3-11 Months, Male and Female	1,232	\$ 3,950,27	0.9541	\$ 3,768.77
01	New Orleans	ISSI	1-5 Years, Male and Female	15,362		0.9749	\$ 676.14
01	New Orleans	ISSI	6-13 Years, Male and Female	42,308	\$ 323.69	0.9868	\$ 319,43
01	New Orleans	SSI	14-18 Years, Male and Female	27,513	\$ 313.44	0.9814	\$ 307.62
01	New Orleans	ISSI	19-44 Years, Male and Female	82,727	\$ 622.13	0.9344	\$ 581.29
01	New Orleans		45+ Years, Male and Female	114,401		0.9368	\$ 897.78
01	New Orleans	Family and Children	0-2 Months, Male and Female	32,904	\$ 1,087,38	0.8545	
01	New Orleans	Family and Children	3-11 Months, Male and Female	75,824		0.9586	
01	New Orleans	Family and Children	1-5 Years, Male and Female	476,472	\$ 106.13	0.9751	
01	New Orleans	Family and Children	6-13 Years, Male and Female	555,798	\$ 79.07	0.9843	
01		Family and Children	14-18 Years, Female	159,990		0.9788	
01	New Orleans New Orleans	Family and Children	14-18 Years, Male	145,692	\$ 80.79	0.9629	
01		Family and Children	19-44 Years, Female	242,741		0.9629	
01	New Orleans	Family and Children	19-44 Years, Male	10,938		0.9853	
01	New Orleans	Family and Children	45+ Years, Female	12,952		0.9861	~ 74.100
01	New Orleans	Family and Children	45+ Years, Male	3,291		0.9848	
	New Orleans	Foster Care Children	Foster Care, All Ages Male & Female	12,874		0.9848	
	New Orleans	Breast and Cervical Cancer	BCC, All Ages Female	2,509		0.9817	
	New Orleans	HCBS Waiver	0-18 Years, Male and Female		\$ 1,156.79	0.9938	
01	New Orleans	HCBS Waiver	19+ Years, Male and Female	11,553		0.9866	
09	New Orleans	Maternity Kickpayment	Maternity Kickpayment, All Ages	7,521			
09	Mandeville	SSI	0-2 Months, Male and Female		\$ 17,190,64	0.9488	
	Mandeville	SSI	3-11 Months, Male and Female	596		0.9473	10120 1770
09	Mandeville	SSI	1-5 Years, Male and Female	6,518		0.9541	
09 09	Mandeville	SSI	6-13 Years, Male and Female	16,916		0.9749	
	Mandeville	SSI	14-18 Years, Male and Female	10,695		0.9868	
	Mandeville	SSI	19-44 Years, Male and Female	38,299		0.9814	
	Mandeville	SSI	45+ Years, Male and Female	58.835		0.9955	
	Mandeville	Family and Children	0-2 Months, Male and Female	18,001		0.9977	1,02.0.00
	Mandeville	Family and Children	3-11 Months, Male and Female	41,145		0.9950	
	Mandeville	Family and Children	1-5 Years, Male and Female	266,364		0.9989	
	Mandeville	Family and Children	6-13 Years, Male and Female	355,302		0.9985	100:11
	Mandeville	Family and Children	14-18 Years, Female	97,331	. 10.00	0.9990	
	Mandeville	Family and Children	14-18 Years, Male			0.9991	
	Mandeville	Family and Children	19-44 Years, Female		1.0100	0.9992	
	Mandeville	Family and Children	19-44 Years, Male	8,316	200.02.1	0.9993	
	Mandeville	Family and Children	45+ Years, Female	5,016			\$ 242.56
	Mandeville	Family and Children	45+ Years, Male	2,000			\$ 421.51
	Mandeville	Foster Care Children	Foster Care, All Ages Male & Female				\$ 420.41
	Mandeville	Breast and Cervical Cancer	BCC, All Ages Female			0.9918	2,72,00
	Mandeville		0-18 Years, Male and Female			0.9817	
	Mandeville	HCBS Waiver	19+ Years, Male and Female		11100.101	0.9938	
09	Mandeville	Maternity Kickpayment	Maternity Kickpayment, All Ages		\$ 593.92 \$ 4,929.40		\$ 585.99
			The state of the s	4,100	\$ 4,929.40	0.9965	\$ 4,912.18



					11/1/2012-1	2/31/2012	,
					Prepaid Final Rates w/ Tax (Gross of GME)		Prepaid Final Rates w/ Tax (Net of GME)
DHH Administrative Region	Region Description	COA Description	RC Description	FY11 Member Months or Deliveries	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
	Baton Rouge		0-2 Months, Male and Female	219	\$ 17,190.64	0.9473	
	Baton Rouge		3-11 Months, Male and Female	1.074	\$ 3,950.27	0.9541	\$ 3,768.77
	Baton Rouge	SSI	1-5 Years, Male and Female	13,466	\$ 693.58	0.9749	
	Baton Rouge	ISSI	6-13 Years, Male and Female	29,350	\$ 323.69	0.9868	\$ 319.43
	Baton Rouge	SSI	14-18 Years, Male and Female	17,644	\$ 313.44	0.9814	\$ 307.62
	Baton Rouge	ISSI	19-44 Years, Male and Female	48,997		0.9903	\$ 703.16
	Baton Rouge	ISSI	45+ Years, Male and Female	68,000		0.9911	\$ 978.93
02	Baton Rouge	Family and Children	0-2 Months, Male and Female			0.9874	
02	Baton Rouge	Family and Children	3-11 Months, Male and Female	55,139		0.9938	\$ 239.44
02	Baton Rouge	Family and Children	1-5 Years, Male and Female	346,294		0.9960	\$ 107.38
02	Baton Rouge	Family and Children	6-13 Years, Male and Female	442,619		0.9975	
	Baton Rouge	Family and Children	14-18 Years, Female	122,643		0.9965	\$ 104.25
02	Baton Rouge	Family and Children	14-18 Years, Male	115,101		0.9963	\$ 81.44
	Baton Rouge	Family and Children	19-44 Years, Female	145,570	\$ 216.73	0.9944	\$ 215.51
	Baton Rouge	Family and Children	19-44 Years, Male	5,940		0.9853	\$ 242.56
02	Baton Rouge	Family and Children	45+ Years, Female	7,700		0.9861	\$ 421.51
02	Baton Rouge	Family and Children	45+ Years, Male	1,418	\$ 426.88	0.9848	\$ 420.41
02	Baton Rouge	Foster Care Children	Foster Care, All Ages Male & Female	10,239		0.9918	\$ 212.03
	Baton Rouge	Breast and Cervical Cancer	BCC, All Ages Female	1,712	\$ 1,892.25	0.9817	\$ 1,857.58
02	Baton Rouge	HCBS Waiver	0-18 Years, Male and Female	1,824	\$ 1,156.79	0.9938	\$ 1,149.61
02	Baton Rouge	HCBS Waiver	19+ Years, Male and Female	11,347	\$ 593.92	0.9866	
02	Baton Rouge	Maternity Kickpayment	Maternity Kickpayment, All Ages	5,364	\$ 5,339.99	0.9988	
03	Thibodaux	SSI	0-2 Months, Male and Female	193		0.9473	\$ 16,284.43
03	Thibodaux	SSI	3-11 Months, Male and Female	722	\$ 3,950.27	0.9541	\$ 3,768.77
03	Thibodaux	ISSI	1-5 Years, Male and Female	8,422	\$ 693.58	0.9749	
03	Thibodaux	SSI	6-13 Years, Male and Female	21,828	\$ 323.69	0.9868	\$ 319.43
03	Thibodaux	ISSI	14-18 Years, Male and Female	12,746	\$ 313.44	0.9814	\$ 307.62
03	Thibodaux	SSI	19-44 Years, Male and Female	37,137	\$ 562.39	0.9842	
03	Thibodaux	ISSI	45+ Years, Male and Female	48,395	\$ 950.36		
03	Thibodaux	Family and Children	0-2 Months, Male and Female	15,071	\$ 909.76		
03	Thibodaux	Family and Children	3-11 Months, Male and Female	35,335	\$ 258.04	0.9908	
03	Thibodaux	Family and Children	1-5 Years, Male and Female	221,101	\$ 129.93		
03	Thibodaux	Family and Children	6-13 Years, Male and Female	279,343	\$ 104.27	0.9955	
03	Thibodaux	Family and Children	14-18 Years, Female	82,364	\$ 141.35		
03	Thibodaux	Family and Children	14-18 Years, Male	76,550	\$ 108.24	0.9920	
03	Thibodaux	Family and Children	19-44 Years, Female	102,127			
03	Thibodaux	Family and Children	19-44 Years, Male	6,290		0.9853	
03	Thibodaux	Family and Children	45+ Years, Female	4,273	\$ 427.45		
03	Thibodaux	Family and Children	45+ Years, Male	1,283	\$ 426.88	0.9848	
03	Thibodaux	Foster Care Children	Foster Care, All Ages Male & Female	7,365	\$ 213.78		
03	Thibodaux	Breast and Cervical Cancer	BCC, All Ages Female	1,111			
03	Thibodaux	HCBS Waiver	0-18 Years, Male and Female	1,331		0.9938	\$ 1,149,61
03	Thibodaux	HCBS Waiver	19+ Years, Male and Female	6,555		0.9866	
03	Thibodaux	Maternity Kickpayment	Maternity Kickpayment, All Ages	3,355		0.9856	\$ 5,183.58



					11/1/2012-1	12/31/2012	
					Prepaid Final Rates w/ Tax (Gross of GME)		Prepaid Final Rates w/ Tax (Net of GME)
DHH Administrative	Region			FY11 Member Months or			
Region	Description	COA Description	RC Description	Deliveries	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
04	Lafayette	SSI	0-2 Months, Male and Female	204	\$ 17,190.64	0.9473	\$ 16,284.43
04	Lafayette	SSI	3-11 Months, Male and Female		\$ 3,950.27	0.9541	\$ 3,768.77
04	Lafayette	SSI	1-5 Years, Male and Female	10,698		0.9749	\$ 676.14
04	Lafayette	SSI	6-13 Years, Male and Female	22,343	\$ 323.69	0.9868	\$ 319.43
04	Lafayette	SSI	14-18 Years, Male and Female	13,496	\$ 313.44	0.9814	\$ 307.62
04	Lafayette	SSI	19-44 Years, Male and Female	50,952		0.9901	\$ 627.52
04	Lafayette	SSI	45+ Years, Male and Female	77,776		0.9902	\$ 938.18
04	Lafayette	Family and Children	0-2 Months, Male and Female	23,690	\$ 1,058.55	0.9741	\$ 1,031.11
04	Lafayette	Family and Children	3-11 Months, Male and Female	55,876	\$ 262.70	0.9924	\$ 260.70
04	Lafayette	Family and Children	1-5 Years, Male and Female	340,123	\$ 120.80	0.9944	\$ 120.12
04	Lafayette	Family and Children	6-13 Years, Male and Female	442,460	\$ 103.37	0.9970	\$ 103.06
04	Lafayette	Family and Children	14-18 Years, Female	122,849	\$ 126.75	0.9953	\$ 126.15
04	Lafayette	Family and Children	14-18 Years, Male	116,245	\$ 98.04	0.9938	\$ 97.43
04	Lafayette	Family and Children	19-44 Years, Female	140,357	\$ 232.54	0.9940	\$ 231.15
04	Lafayette	Family and Children	19-44 Years, Male	8,731	\$ 246.19	0.9853	\$ 242.56
04	Lafayette	Family and Children	45+ Years, Female	6,135	\$ 427.45	0.9861	\$ 421.51
04	Lafayette	Family and Children	45+ Years, Male	1,726	\$ 426.88	0.9848	\$ 420.41
04	Lafayette	Foster Care Children	Foster Care, All Ages Male & Female	17,319	\$ 213.78	0.9918	\$ 212.03
04	Lafayette	Breast and Cervical Cancer	BCC, All Ages Female	1,412	\$ 1,892.25	0.9817	\$ 1,857.58
04	Lafayette	HCBS Waiver	0-18 Years, Male and Female	1,829	\$ 1,156.79	0.9938	\$ 1,149.61
04	Lafayette	HCBS Waiver	19+ Years, Male and Female	11,413		0.9866	\$ 585.99
04	Lafayette	Maternity Kickpayment	Maternity Kickpayment, All Ages	5,376	\$ 4,668.83	0.9996	\$ 4,666.81



#### Page 30

#### Attachment A BAYOU HEALTH Prepaid Rate Summary

					Prepaid Final Rates w/ Tax (Gross of GME)		Prepaid Final Rates w/ Tax (Net of GME)
DHH Administrative	Region			FY11 Member Months or			The second second
Region	Description	COA Description	RC Description	Deliveries	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
05	Lake Charles	ssi	0-2 Months, Male and Female	73		0.9473	
05	Lake Charles	ISSI	3-11 Months, Male and Female	376		0.9541	4
05	Lake Charles	ISSI	1-5 Years, Male and Female	4,436		0,9749	
05	Lake Charles	SSI	6-13 Years, Male and Female	10,384		0.9868	
05	Lake Charles	ISSI	14-18 Years, Male and Female	5,981		0.9814	
05	Lake Charles	ISSI	19-44 Years, Male and Female	20,788		0.9996	\$ 548.66
05	Lake Charles	SSI	45+ Years, Male and Female	29,943	\$ 905.66	0.9992	\$ 904.97
05	Lake Charles	Family and Children	0-2 Months, Male and Female	11,103	\$ 896.89	0,9974	
05	Lake Charles	Family and Children	3-11 Months, Male and Female	25,854	\$ 282.70	0.9985	\$ 282.28
05	Lake Charles	Family and Children	1-5 Years, Male and Female	161,883	\$ 135.16	0.9995	\$ 135.10
05	Lake Charles	Family and Children	6-13 Years, Male and Female	209,804	\$ 114.94	0.9997	\$ 114.91
05	Lake Charles	Family and Children	14-18 Years, Female	57.089	\$ 146.21	0.9999	\$ 146.19
05	Lake Charles	Family and Children	14-18 Years, Male	55,183	\$ 110.26	0.9998	\$ 110.24
05	Lake Charles	Family and Children	19-44 Years, Female	53,935	\$ 276.40	0.9998	\$ 276.35
05	Lake Charles	Family and Children	19-44 Years, Male	3,044	\$ 246.19	0.9853	\$ 242.56
05	Lake Charles	Family and Children	45+ Years, Female	1,990	\$ 427.45	0.9861	\$ 421.51
05	Lake Charles	Family and Children	45+ Years, Male	538	\$ 426.88	0.9848	\$ 420.41
05	Lake Charles	Foster Care Children	Foster Care, All Ages Male & Female	10,239	\$ 213.78	0.9918	\$ 212.03
05	Lake Charles	Breast and Cervical Cancer	BCC, All Ages Female	754	\$ 1,892.25	0.9817	\$ 1,857.58
05	Lake Charles	HCBS Waiver	0-18 Years, Male and Female	761	\$ 1,156.79	0.9938	\$ 1,149.61
05	Lake Charles	HCBS Waiver	19+ Years, Male and Female	4,341	\$ 593.92	0.9866	\$ 585.99
05	Lake Charles	Maternity Kickpayment	Maternity Kickpayment, All Ages	2,533	\$ 4,768.97	0.9993	\$ 4,765.86
06	Alexandria	SSI	0-2 Months, Male and Female	105	\$ 17,190.64	0.9473	\$ 16,284.43
06	Alexandria	SSI	3-11 Months, Male and Female	549	\$ 3,950.27	0.9541	\$ 3,768.77
06	Alexandria	SSI	1-5 Years, Male and Female	6,142	\$ 693.58	0.9749	\$ 676.14
06	Alexandria	SSI	6-13 Years, Male and Female	16,547	\$ 323.69	0.9868	\$ 319.43
06	Alexandria	SSI	14-18 Years, Male and Female	9,660	\$ 313.44	0.9814	\$ 307.62
06	Alexandria	SSI	19-44 Years, Male and Female	34,347	\$ 513.55	0.9966	\$ 511.80
06	Alexandria	SSI	45+ Years, Male and Female	43,361	\$ 909.45	0.9974	\$ 907.04
	Alexandria	Family and Children	0-2 Months, Male and Female	11,723	\$ 1,344.55	0.9961	\$ 1,339.31
06	Alexandria	Family and Children	3-11 Months, Male and Female	26,763	\$ 278.66	0.9979	\$ 278.08
06	Alexandria	Family and Children	1-5 Years, Male and Female	172,642	\$ 145.35	0.9983	\$ 145.10
06	Alexandria	Family and Children	6-13 Years, Male and Female	234,659	\$ 108.51	0.9989	\$ 108.39
06	Alexandria	Family and Children	14-18 Years, Female	65,936	\$ 136.45	0.9982	\$ 136.20
06	Alexandria	Family and Children	14-18 Years, Male	62,236	\$ 100.07	0.9979	\$ 99.86
06	Alexandria	Family and Children	19-44 Years, Female	63,956	\$ 242.97	0.9977	\$ 242.42
06	Alexandria	Family and Children	19-44 Years, Male	4,161	\$ 246.19	0.9853	\$ 242.56
06	Alexandria	Family and Children	45+ Years, Female	2,466	\$ 427.45	0.9861	\$ 421.51
06	Alexandria	Family and Children	45+ Years, Male	698		0.9848	
06	Alexandria	Foster Care Children	Foster Care, All Ages Male & Female	11,146	\$ 213.78	0.9918	
06	Alexandria	Breast and Cervical Cancer	BCC, All Ages Female	732		0.9817	
06	Alexandria	HCBS Waiver	0-18 Years, Male and Female	495		0.9938	\$ 1,149.61
06	Alexandria	HCBS Waiver	19+ Years, Male and Female	5,472		0.9866	
06	Alexandria	Maternity Kickpayment	Maternity Kickpayment, All Ages	2,643	\$ 4,974.51	0.9970	\$ 4,959.49



11/1/2012-12/31/2012

					11/1/2012-1	12/31/2012	
DHH			- Republic contractor or submitted some or con-		Prepaid Final Rates w/ Tax (Gross of GME)		Prepaid Final Rates w/ Tax (Net of GME)
Administrative Region	Region Description	604.0		FY11 Member Months or			
07	Shreveport	COA Description	RC Description	Deliveries	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
07	Shreveport	SSI	0-2 Months, Male and Female	302	\$ 17,190.64	0.9473	\$ 16,284,43
07	Shreveport	SSI	3-11 Months, Male and Female	1,206	\$ 3,950.27	0.9541	
07	Shreveport	SSI	1-5 Years, Male and Female	13,502		0.9749	
07	Shreveport	SSI	6-13 Years, Male and Female	32,276		0.9868	\$ 319.43
07	Shreveport	SSI	14-18 Years, Male and Female	20,402		0.9814	
07	Shreveport	SSI	19-44 Years, Male and Female	57,262		0.9599	
07	Shreveport	Family and Children	45+ Years, Male and Female	68,689		0.9630	
07	Shreveport		0-2 Months, Male and Female	21,897		0.9185	
07	Shreveport	Family and Children	3-11 Months, Male and Female	48,945	\$ 239.72	0.9720	
07	Shreveport	Family and Children	1-5 Years, Male and Female	299,375		0.9802	
07	Shreveport	Family and Children	6-13 Years, Male and Female	388,940		0.9879	\$ 80.28
	Shreveport	Family and Children	14-18 Years, Female	107,694		0.9835	
07	Shreveport	Family and Children	14-18 Years, Male	98,222			\$ 79.03
07	Shreveport	Family and Children	19-44 Years, Female	118,258		0.9749	
07	Shreveport	Family and Children	19-44 Years, Male	3,975			\$ 242.56
	Shreveport	Family and Children	45+ Years, Female	4,513	\$ 427.45		\$ 421.51
	Shreveport	Family and Children	45+ Years, Male		\$ 426.88		\$ 420.41
	Shreveport	Foster Care Children	Foster Care, All Ages Male & Female		\$ 213.78		\$ 212.03
	Shreveport	Breast and Cervical Cancer	BCC, All Ages Female	1,383	\$ 1,892.25	0.9817	\$ 1.857.58
07	Shreveport	HCBS Waiver	0-18 Years, Male and Female		\$ 1,156.79	0.9938	\$ 1,149.61
	Shreveport	HCBS Waiver	19+ Years, Male and Female		\$ 593.92	0.9866	\$ 585.99
08	Monroe	Maternity Kickpayment	Maternity Kickpayment, All Ages	4,961	\$ 5,357.57	0.9999	\$ 5,356.99
	Monroe	SSI SSI	0-2 Months, Male and Female		\$ 17,190.64	0.9473	\$ 16,284.43
	Monroe		3-11 Months, Male and Female	583	\$ 3,950.27	0.9541	\$ 3,768.77
	Monroe	SSI SSI	1-5 Years, Male and Female	7,354	\$ 693.58		\$ 676.14
	Monroe	SSI	6-13 Years, Male and Female	19,143	\$ 323.69		\$ 319.43
	Monroe		14-18 Years, Male and Female		\$ 313.44		\$ 307.62
08	Monroe	SSI SSI	19-44 Years, Male and Female		\$ 573.94		\$ 570,49
	Monroe	<u> </u>	45+ Years, Male and Female		\$ 899.43		\$ 894.02
	Monroe		0-2 Months, Male and Female	15,642	\$ 1,310.28		\$ 1,296.04
	Monroe		3-11 Months, Male and Female	35,441	\$ 331.23		\$ 330.07
	Monroe	Family and Children	1-5 Years, Male and Female		\$ 156.41		\$ 155.99
	Monroe	Family and Children	6-13 Years, Male and Female		\$ 97.66		\$ 97.46
	Monroe	Family and Children	14-18 Years, Female		\$ 130.71		\$ 130.35
	Monroe	Family and Children	14-18 Years, Male	79,756	\$ 87.64		\$ 87.32
	Monroe	Family and Children	19-44 Years, Female		\$ 224.29		\$ 223.30
	Monroe	Family and Children	19-44 Years, Male	4,958	\$ 246.19		\$ 242.56
	Monroe		45+ Years, Female	3,826	\$ 427.45		\$ 421.51
	Monroe	Family and Children	45+ Years, Male	772	\$ 426.88		\$ 420,41
		Foster Care Children	Foster Care, All Ages Male & Female	9,178			\$ 212.03
	Monroe Monroe	Breast and Cervical Cancer	BCC, All Ages Female	1,231	\$ 1,892.25		\$ 1,857.58
		HCBS Waiver	0-18 Years, Male and Female	680			\$ 1,149,61
		HCBS Waiver	19+ Years, Male and Female	7,723	\$ 593.92		\$ 585.99
<u> </u>	Monroe	Maternity Kickpayment	Maternity Kickpayment, All Ages	3,657	\$ 5,413.95	0.9999	



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				FY10 Precaid					PMPM Post		Projected FY11						PMPM Post Adjustments
				Base PMPM	PASSES AND A	Adjus	tments		Adjustments	Section 2	Prepaid PMPM	Base PMPM		Adjus	iments		Adjustine
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			No. 2 April 2 September 1985	######################################		Integrity	IP and OP	Fee					75.50	Recoupment	IP and OP	Fee	
DHH						Recoupment	A CONTRACTOR OF THE SECOND	Schedule	РМРМ ог	Trend to	PMPM or	PMPM or	Completion	s (Fraud &	Hospital Cost	Schedule	PMPM or
Admin.	Region			PMPM or	Completion	s (Fraud &	Hospital Cost Settlements	Changes	Cost/Delivery	FY11	Cost/Delivery	Cost/Delivery	Factor	Abuse)	Settlements	Changes	Cost/Delivery
Region	Description	COA Description	RC Description	Cost/Delivery	Factor	Abuse)		0.8932	S 16.754.38	1.7%	S 17.043.21	\$ 18.309.07	1.0828	0.9952	1.0798	0.9512	
01	New Orleans	SSI	0-2 Months, Male and Female	\$ 17,876.93	1.0019	0.9987	1.0486 1.0336	0.9020	\$ 4.077.32	1.9%		\$ 4,816.39	1,0687	0.9959	1.0613	0.9552	
01	New Orleans	SSI	3-11 Months, Male and Female	\$ 4,369.23	1.0015	0.9994	1,0126	0.9020		2.4%		\$ 631.08	1,0412	0.9973	1.0094	0,9627	
01	New Orleans	SSI	1-5 Years, Male and Female	\$ 830,98	1.0009	0,9994 0,9994	0.9920	0.9446		2.6%			1.0237	0.9982	1.0000	0.9735	
01	New Orleans	1001	6-13 Years, Male and Female	\$ 259.81	0.9997	0.9994	0.9948	0.9334		2.7%			1,0256	0.9982	1.0039	0.9713	
01	New Orleans	17.7	14-18 Years, Male and Female	\$ 267.08	1.0000 1.0003	0.9994	1,0011	0.9238		2.7%		\$ 571.61	1,0322	0.9978	1.0116	0.9674	
01	New Orleans	1XXI	19-44 Years, Male and Female	\$ 638.85 \$ 994.62	1,0003	0.9994	0.9916	0.9237				\$ 885,46		0.9977	1.0035	0.9670	
01	New Orleans		45+ Years, Male and Female	S 1.158.94	1,0002	0.9988	1.0412	0.9200	S 1,109.37	1.5%	\$ 1,125.84				1.0660	0.9760	
01	New Orleans		0-2 Months, Male and Female 3-11 Months, Male and Female	S 202.58	0.9982	0.9988		0.9420		2.7%		\$ 193.89			1.0120	0.9828	
01	New Orleans	TI OTTINI DITO	3-11 Months, Male and Female	S 100.05	0.9977	0.9986		0.9446		3.0%					0.9958	0.9848	
01	New Orleans	Family and Children	6-13 Years, Male and Female	\$ 73.95	0.9976	0.9986	0.9878	0.9499	\$ 69,13	2.8%					0.9911	0.9868	
01	New Orleans	Family and Children	14-18 Years, Female	S 98.44	0.9976	0.9988	0.9829	0.9366	\$ 90.30	3.3%				0.9987	0.9861	0.9801 0.9808	
01	New Orleans	Family and Children	14-18 Years, Male	S 78.70	0.9981	0.9988	0.9890	0.9378	\$ 72.77	3.0%					0.9967	0.9808	
01	New Orleans	Family and Children Family and Children	19-44 Years, Female	S 202.00	0.9979	0.9989	0.9785	0.9304	\$ 183.30	3.4%					0.9920		
01	New Orleans New Orleans	Family and Children	19-44 Years, Male	S 203,44	0.9983	0.9988	0.9947	0.9348		2.9%					0.9828	0.9814	
01	New Orleans	Family and Children	45+ Years, Female	\$ 367.98	0.9983	0.9989	0.9861	0.9380		2.6%					0.9916	0.9833	
01	New Orleans	Family and Children	45+ Years, Male	S 452.16	0.9982	0.9990		0.9384		2.7%						0.9620	
01	New Orleans	Foster Care Children	Foster Care, All Ages Male & Female	\$ 172.54	0.9998	0.9990		0.9364	\$ 160.12						0.8905		
01	New Orleans		BCC, All Ages Female	\$ 2,044.06	0.9993	0,9996		0.9014		6.19					1.0098		
01	New Orleans	HCBS Waiver	0-18 Years, Male and Female	\$ 810.80	1.0003	0.9997		0.9285	\$ 759.44						1.0148		
01	New Orleans	HCBS Waiver	19+ Years, Male and Female	\$ 520.24		0.9996		0.9401	\$ 489.09	0.09							
01	New Orleans	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 7,230.05	1,0000			0.8752	\$ 6,328,07 \$ 15,335,67	1.69							
09	Mandeville	SSI	0-2 Months, Male and Female	\$ 16,947.18	1.0020			0.8911									\$ 2,428.24
09	Mandeville	SSI	3-11 Months, Male and Female	\$ 6,784.31	1,0016			0.8986 0.9327									
09	Mandeville	SSI	1-5 Years, Male and Female	\$ 721.53					- I - I								
09	Mandeville	SSI	6-13 Years, Male and Female	\$ 333.00										0.9987			
09	Mandeville	SSI	14-18 Years, Male and Female	\$ 271.70				0.9332						0.9984	0.9982		
09	Mandeville	SSI	19-44 Years, Male and Female	\$ 662.16				0.9306						0.9980		0.9698	
09	Mandeville	SSI	45+ Years, Male and Female	\$ 1,038.66 \$ 1,024.89				0.9211					4 1.057				
09	Mandeville	Family and Children	0-2 Months, Male and Female	\$ 1,024.85				0.9477				\$ 220.0					
09	Mandeville	Family and Children	3-11 Months, Male and Female	S 126.74							% \$ 122.65						
09	Mandeville	Family and Children	1-5 Years, Male and Female	S 106.88							% \$ 104.12						
09	Mandeville	Family and Children	6-13 Years, Male and Female	\$ 130.70				0.9444			% \$ 126.35	\$ 127.7					
09	Mandeville	Family and Children	14-18 Years, Female	S 106.48													
09	Mandeville	Family and Children	14-18 Years, Male 19-44 Years, Female	\$ 263.70					\$ 243.6								
09	Mandeville	Family and Children Family and Children	19-44 Years, Male	\$ 328.42				0.9373			% \$ 315.08						Z-1-X
09	Mandeville	Family and Children Family and Children	45+ Years, Female	\$ 547.03													
09	Mandeville Mandeville	Family and Children	45+ Years, Male	\$ 517.45			0.9973				% S 498.44						
09	Mandeville	Foster Care Children	Foster Care, All Ages Male & Female			0.998											
09	Mandeville	Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,094.03		0.999	4 0.9622				% \$ 999.2						
09	Mandeville	HCBS Waiver	0-18 Years, Male and Female	\$ 934.1	0.9997												
09	Mandeville	HCBS Waiver	19+ Years, Male and Female	\$ 453.0													
09	Mandeville	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 5,169.4	1,000	1.000	0 1.0000	0.875	2 5 4,524.5	5 0.0	% S 4,524.5	4,001./	<u>v 1.000</u>	1.000	<u> </u>		



				TOUTH A PROPERTY OF THE PARTY OF	the contract manuals.		7	11/1/2012-	-12/31/2012				
	Systematics with participation and participation			Weighted FY10 and FY11 PMPM at FY11		Projected FFS PMPM		PMPM Post MC Savings	PMPM Post Smoothing w/Statewide		Final Prepaid Premium w/Tax (Gross of GME)		Final Prepaid Premium w/ Tax Net of GME)
	Region Description	COA Description	RC Description	PMPM or Cost/Delivery	Trend	PMPM or Cost/Delivery	MC Savings	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Premium w/ Tax Load	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
	New Orleans	SSI	0-2 Months, Male and Female	\$ 18,976.32	1.68%	\$ 19,596.03	-15.47%	\$ 16,564,40	\$ 14,935,87	13.1%	\$ 17,190,64	0.9473	The same of the sa
	New Orleans	SSI	3-11 Months, Male and Female	\$ 4,779.65	1.88%		-14.15%			13.1%	\$ 3,950.27	0.9473	\$ 16,284,43
		SSI	1-5 Years, Male and Female	\$ 697.40	2.76%	\$ 734.89	-10.32%			13.1%		0.9341	
	New Orleans	SSI	6-13 Years, Male and Female	\$ 275.05	2,68%	\$ 289.44	-10.69%			13.1%			
	New Orleans	SSI	14-18 Years, Male and Female	\$ 260.76		\$ 275.01	-11,41%			13.1%		0.9868 0.9814	
	New Orleans	SSI	19-44 Years, Male and Female	\$ 588.24	2.78%		-12.84%	\$ 540.51		13.1%		0.9814	
	New Orleans	SSI	45+ Years, Male and Female	\$ 904.62	2.81%	\$ 954.19	-12.74%	\$ 832.59		13.1%		0.9344	
	New Orleans	Family and Children	0-2 Months, Male and Female	\$ 1,151,06	1.51%	\$ 1,184.72	-20.26%			13.1%			
	New Orleans	Family and Children	3-11 Months, Male and Female	\$ 196.58	2.82%	\$ 207.38	-9.07%			13.1%		0.8545	
	New Orleans	Family and Children	1-5 Years, Male and Female	\$ 95.48	3.12%		-8.98%	\$ 92.20		13.1%		0.9586	
	New Orleans	Family and Children	6-13 Years, Male and Female	\$ 71.87	2.89%		-9.52%			13.1%		0.9751	
	New Orleans	Family and Children	14-18 Years, Female	\$ 93.40	3.45%	\$ 99.69	-10.80%			13.1%	\$ 79.07 \$ 102.36	0.9843	
		Family and Children	14-18 Years, Male	\$ 76.08	3.05%		-12.91%			13.1%	\$ 80.79	0.9788	
	New Orleans	Family and Children	19-44 Years, Female	\$ 193,94	3.45%	\$ 207.03	-13,13%	\$ 179.85		13.1%		0.9629	
	New Orleans	Family and Children	19-44 Years, Male	\$ 193.26	3.04%		-14.73%			13.1%	\$ 246.19	0.9629	
	New Orleans	Family and Children	45+ Years, Female	\$ 322.82	2.91%		-13.57%			13.1%		0.9853	
	New Orleans	Family and Children	45+ Years, Male	\$ 368.25		\$ 387.35	-14.25%			13.1%	\$ 427.45 \$ 426.88	0.9861	
	New Orleans	Foster Care Children	Foster Care, All Ages Male & Female	\$ 178.00	2.90%	\$ 188.08	-8.70%					0.9848	
		Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,440,95		\$ 1,608,97	-12.54%			13.1% 13.1%		0.9918	
	New Orleans	HCBS Waiver	0-18 Years, Male and Female	\$ 707.02	4.76%		-4.74%			13.1%		0.9817	
	New Orleans	HCBS Waiver	19+ Years, Male and Female	\$ 531.12	6.86%	\$ 603.46	-13.05%		\$ 1,005.03 \$ 516.00	13.1%	\$ 1,156.79	0.9938	
	New Orleans	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 6.011.64		\$ 6,011,64	1.74%				\$ 593.92	0.9866	
		SSI	0-2 Months, Male and Female	\$ 13,392,77		\$ 13,839,67	-15.59%		\$ 14.935.87	7.7% 13.1%		0.9488	
		SSI	3-11 Months, Male and Female	\$ 3,971.86	2.08%		-12.89%		\$ 3,432.08	13.1%			\$ 16,284.43
		SSI	1-5 Years, Male and Female	\$ 673.89	3.12%	\$ 714.89	-8.40%	\$ 654.82	\$ 5,432.08 \$ 602.59	13.1%		0.9541	
	Mandeville	SSI	6-13 Years, Male and Female	\$ 335.28	3.19%	\$ 356.18	-8.12%	\$ 327.27				0.9749	
		SSI	14-18 Years, Male and Female	\$ 285,62	3.28%	\$ 303.95	-9.11%	\$ 276.25	\$ 272.32	13.1%		0.9868	
		SSI	19-44 Years, Male and Female	\$ 617.72	3.06%	\$ 654.65	-12.38%	\$ 573.62	\$ 272.32 \$ 573.62	13.1%		0.9814	
		SSI	45+ Years, Male and Female	\$ 956,54	3.04%	\$ 1.013.28	-12.31%		\$ 573.62 \$ 888.53	13.1%			\$ 657.26
	Mandeville	Family and Children	0-2 Months, Male and Female	\$ 1,012.18	1.66%	\$ 1,044,80	-18.87%			13.1%		0.9977	
	Mandeville	Family and Children	3-11 Months, Male and Female	\$ 226.52	2.80%		-7,21%			13.1%		0.9950	
	Mandeville	Family and Children	1-5 Years, Male and Female	\$ 121.74	3.10%		-8.24%	\$ 118.48					\$ 254.87
		Family and Children	6-13 Years, Male and Female	\$ 105.27	2.82%		-8.98%	\$ 101.09		13.1%		0.9985	\$ 136.17
	Mandeville	Family and Children	14-18 Years, Female	\$ 126.30		\$ 134,92	-9.59%	\$ 121,99	\$ 101.09 \$ 121.99	13.1%		0.9990	\$ 116.25
	Mandeville	Family and Children	14-18 Years, Male	\$ 105.39	3.25%	\$ 112.08	-10.40%	\$ 100.42		13.1% 13.1%		0.9991	
	Mandeville	Family and Children	19-44 Years, Female	\$ 246.26	3.70%		-12.56%				\$ 115.59	0.9992	\$ 115.50
	Mandeville	Family and Children	19-44 Years, Male	\$ 292.25	3.17%		-14.66%	\$ 264.86		13.1%	\$ 265.82		\$ 265.63
		Family and Children	45+ Years, Female	\$ 528,69	2.74%		-14.06%	\$ 477.44	2.10.00 [	13.1%		0.9853	\$ 242.56
		Family and Children	45+ Years, Male	\$ 485.95	2.95%		-14.26%	\$ 444.25	0.1.07	13.1%		0.9861	\$ 421.51
09	Mandeville	Foster Care Children	Foster Care, All Ages Male & Female	\$ 191,95	3.05%	\$ 203.40	-7.46%		370.87	13.1%		0.9848	\$ 420.41
09	Mandeville	The state of the s	BCC, All Ages Female	\$ 1,164,71	5.58%		-11.85%		185.73	13.1%			\$ 212.03
09		HCBS Waiver	**************************************	\$ 877.42	5.27%			\$ 1,139.80		13.1%		0.9817	\$ 1,857.58
09			19+ Years, Male and Female	\$ 463.32	6.91%	\$ 526.89	-1.51% -12.95%			13.1%		0.9938	\$ 1,149.61
09		Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 4,472.55	0.00%				516.00	13,1%		0.9866	\$ 585.99
		7		Ψ 4,472.33	0.00%	<u>9 4,47∠.55</u>	1.74%	\$ 4,550.38 5	4,550.38	7.7%	\$ 4,929,40	0.9965	\$ 4,912,18



Page 34	•		[				11/1/2012-12/31/2012 11/1/2012-12/31/2012 State Fiscal Year 2010 Rate Development State Fiscal Year 2011 Rate Development										
						State	Fiscal Year 2010	Rate Develop					State I	Fiscal Year 20	11 Rate Develo	pment	
				FY10 Prepaid Base PMPM		Adius	tments		FY10 Prepaid PMPM Post Adjustments		Projected FY11 Prepaid PMPM	FY11 Prepaid Base PMPM		Adjus	stments		FY11 Prepaid PMPM Post Adjustments
						Program Integrity								Program Integrity			
DHH						Recoupment	IP and OP	Fee				r empire Santinope	100000000000000000000000000000000000000	Recoupment		Fee	
Admin.	Region			PMPM or	Completion	s (Fraud &	Hospital Cost	Schedule	PMPM or	Trend to	PMPM or	PMPM or	Completion	s (Fraud &	Hospital Cost		PMPM or
Region	Description	COA Description	RC Description	Cost/Delivery	Factor	Abuse)	Settlements	Changes	Cost/Delivery	FY11	Cost/Delivery	Cost/Delivery	Factor	Abuse)	Settlements	Changes	Cost/Delivery
	Baton Rouge	SSI	0-2 Months, Male and Female	\$ 15,519.05	1.0019	0.9987	1.0363	0.8937	\$ 14,381.33	1.7%	\$ 14,630.33	\$ 19,897.93	1.0832	0.9952	1.0153	0.9517	\$ 20,725.96
			3-11 Months, Male and Female	\$ 3,822,62	1,0012	0.9992	1.0260	0.9095	\$ 3,568.52	2.0%	\$ 3,639.26	\$ 3,277.45	1.0579	0.9966	1.0094	0.9588	
				\$ 651.89	1.0004	0.9991	1.0115	0.9272	\$ 611.11	2.8%	\$ 627.96	\$ 588.85	1.0263	0.9984	1.0012	0.9724	
	Baton Rouge		6-13 Years, Male and Female	\$ 295.72	0.9999	0.9993	1.0084	0.9414	\$ 280.52	2.4%	\$ 287.37	\$ 274.17	1.0164	0.9988	1.0007	0.9805	\$ 273.11
02	Baton Rouge		14-18 Years, Male and Female	\$ 295.00	0.9999	0.9994	1,0085	0.9386	\$ 279.06	2.6%	\$ 286.34	\$ 252.07	1.0201	0.9986	1.0011	0.9763	
02	Baton Rouge			\$ 715.18	1.0001	0.9995	1.0105	0.9287	\$ 670.95	2.6%	\$ 688.36	S 660.41	1.0260	0.9982	1.0017	0.9703	\$ 657.46
02	Baton Rouge		45+ Years, Male and Female	\$ 954.24	0.9999	0.9993	1.0034	0.9310	\$ 890.72	3.0%		\$ 933.82	1.0255	0.9980		0.9687	
02	Baton Rouge		0-2 Months, Male and Female	\$ 1,129.71	1.0006	0.9987	1.0322	0.9195		1.5%		S 1,109.52			1.0131	0.9760	
02			3-11 Months, Male and Female	S 235.61	0.9985	0.9987	1.0106	0.9416		2.5%		\$ 213.50		0.9978	1.0041	0.9832	
02	Baton Rouge		1-5 Years, Male and Female	\$ 98.02	0.9977	0.9984	1.0014	0.9481	\$ 92.69	3.0%	\$ 95.43	\$ 97.07				0.9859	
02	Baton Rouge		6-13 Years, Male and Female	S 75.27	0.9975	0.9987	1.0002	0.9554	\$ 71.65	2.7%	\$ 73.61	\$ 75.32		0.9992		0.9893	
02	Baton Rouge	Family and Children	14-18 Years, Female	\$ 98.12	0.9974	0.9989	0.9986	0.9426	\$ 92.02	3.5%		\$ 93.54	1.0087	0.9991	0.9983	0.9822	
02	Baton Rouge	Family and Children	14-18 Years, Male	\$ 76.20	0.9976	0.9988	1.0001	0.9459		3.2%		\$ 74.72		0.9989		0.9848	
02	Baton Rouge	Family and Children	19-44 Years, Female	S 209.14	0.9976	0.9992	0.9974	0.9348		3.7%		S 202.81				0.9772	
02	Baton Rouge		19-44 Years, Male	\$ 283.62	0.9982	0.9992	1.0043	0.9395		2.9%	\$ 274.73	\$ 225.72			0.9995	0.9806	
02	Baton Rouge	Family and Children	45+ Years, Female	\$ 411.18	0.9979	0.9990	0.9981	0.9403		3.1%		\$ 410.01	1.0126		0.9985	0.9811	
02	Baton Rouge	Family and Children	45+ Years, Male	\$ 389.56	0.9982	0.9990	1.0055	0.9451		2.4%		\$ 307.94				0.9815	
02	Baton Rouge	Foster Care Children	Foster Care, All Ages Male & Female	\$ 183.84	0.9995	0.9991	1.0024	0.9505		2.8%		S 174.34				0.9773	
02	Baton Rouge	Breast and Cervical Cancer	BCC, All Ages Female	S 1,743.17	0.9994	0.9997	0.9707	0.9014		5.8%		\$ 1,701.11				0.9387	
02	Baton Rouge	HCBS Waiver	0-18 Years, Male and Female	\$ 601.85	0.9996	0.9997	1.0013	0.9554		4.9%		\$ 593.75				0.9769	
02	Baton Rouge	HCBS Waiver	19+ Years, Male and Female	\$ 434.26	0.9998	0.9995	1.0057	0.9348		7.0%		\$ 409.81				0.9706	
02	Baton Rouge	Maternity Kickpayment	Matemity Kickpayment, All Ages	\$ 5,612.40	1.0000	1.0000	1.0000	0.8752		0.0%		S 5,042.42				0.9520	
03	Thibodaux	SSI	0-2 Months, Male and Female	\$ 20,312.19	1.0020	0.9990	1,1003	0.8897		1.6%							
03	Thibodaux		3-11 Months, Male and Female	\$ 3,828.31	1.0014	0.9993	1.0793	0.9035		1.9%							
03	Thibodaux	SSI	1-5 Years, Male and Female	\$ 582.02	0.9999	0.9994	1.0260	0.9390		2.8%							\$ 605.65
03	Thibodaux		6-13 Years, Male and Female	\$ 247.50	0.9995	0.9993	1.0145	0.9514		2.9%							
03	Thibodaux	SSI	14-18 Years, Male and Female	\$ 243.60	0.9994	0.9994	1.0105	0.9497		3.2%							
03	Thibodaux	SSI	19-44 Years, Male and Female	\$ 552.31	0.9998	0.9995	1.0253	0.9326		3.3%						0.9699	
03	Thibodaux		45+ Years, Male and Female	\$ 893.85	0.9998	0.9993	1.0256	0.9302		3.4%							
03	Thibodaux		0-2 Months, Male and Female	\$ 936.00	1.0001	0.9985	1.0740	0.9226		1.7%						0.9778	
03	Thibodaux		3-11 Months, Male and Female	\$ 225.89	0.9979	0.9986	1.0196	0.9487		2.8%							
03	Thibodaux	Family and Children	1-5 Years, Male and Female	\$ 116.94	0.9975	0.9986	1.0121	0.9495		3.2%							
03	Thibodaux	Family and Children	6-13 Years, Male and Female	\$ 92.79	0.9974	0.9988	1.0060	0.9561		3.0%							
03	Thibodaux		14-18 Years, Female	\$ 128.63	0.9973	0.9989	1.0076	0.9420		3.7%						0.9819	
03	Thibodaux	Family and Children	14-18 Years, Male	\$ 98.27	0.9976	0.9989	1.0125	0.9461		3.4%		\$ 99.25					
03	Thibodaux	Family and Children	19-44 Years, Female	\$ 244.77	0.9976	0.9991	1.0157	0.9322		3.9%		\$ 237.37				0.9769	
03	Thibodaux		19-44 Years, Male	\$ 268.54	0.9982	0.9991	1.0292	0.9304		3.6%						0.9771	
03	Thibodaux		45+ Years, Female	\$ 471.26	. 0.9980	0.9991	1.0221	0.9367		3.4%							
03	Thibodaux	Family and Children	45+ Years, Male	\$ 404.22	0.9980	0.9993	1.0233	0.9290		3.7%							
03	Thibodaux		Foster Care, All Ages Male & Female	\$ 194.40	0.9993	0.9988	1.0057	0.9539		3.0%							
03	Thibodaux		BCC, All Ages Female	S 2,422.94	0.9993	0.9996	1.0080	0.9018		6.8%							
03	Thibodaux		0-18 Years, Male and Female	\$ 585.66	0.9996	0.9997	1.0063	0.9549		5.4%							
03	Thibodaux		19+ Years, Male and Female	\$ 451.47	0,9998	0.9996	1.0214	0.9382		7.1%							
03	Thibodaux	Maternity Kickpayment	Matemity Kickpayment, All Ages	\$ 5,412.89	1.0000	1.0000	1.0000	0.8752	\$ 4,737.61	0.0%	S 4,737.61	\$ 5,036.47	1.0000	1.0000	1.0000	0.9520	S 4,794.66



								11/1/2012-	12/31/2012				
See DHH see				Weighted FY10 and FY11 PMPM at FY11		Projected FFS PMPM		PMPM Post MC Savings	PMPM Post Smoothing w/Statewide		Final Prepaid Premium w/ Tax (Gross of GME)		Final Prepaid Premium w/ Tax Net of GMEI
Admin. Region	Region Description	COA Description	RC Description.	PMPM or Cost/Delivery	Trend	PMPM or Cost/Delivery	MC Savings	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Premium wl Tax Load	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
02	Baton Rouge	SSI	0-2 Months, Male and Female	\$ 18,287.71	1.69%	\$ 18,887,58	-15.37%	\$ 15,985,43	\$ 14,935,87	13.1%	\$ 17,190,64	State of the State	And the second to the second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the secti
02 02	Baton Rouge	SSI SSI	3-11 Months, Male and Female	\$ 3,462.23	2.07%	\$ 3,601.81	-12.54%			13.1%	\$ 3,950,27	0.9473	\$ 16,284.43
02		SSI	1-5 Years, Male and Female	\$ 603.64	2.82%	\$ 636.86	-8.23%			13.1%	\$ 693.58	0.9541 0.9749	2 2/100://
		SSI	6-13 Years, Male and Female	\$ 278.81	2.52%	\$ 292.52	-9.44%	\$ 264.90		13.1%		0.9868	
		SSI	14-18 Years, Male and Female	\$ 265.12	2.75%	\$ 279.36	-10.46%	\$ 250.13		13.1%	\$ 323.69 \$ 313.44	0.9808	
		SSI	19-44 Years, Male and Female	\$ 669.82	2.75%	\$ 705.70	-12.59%			13.1%	\$ 710.04	0.9814	
			45+ Years, Male and Female	\$ 921.99	3.11%		-12.25%			13.1%	\$ 987.74	0.9903	\$ 703.16
		Family and Children	0-2 Months, Male and Female	\$ 1,131.50	1.47%	\$ 1,163.77	-20.74%			13.1%	\$ 1,061.67	0.9911	7
***************************************		Family and Children	3-11 Months, Male and Female	\$ 221.36	2.55%	\$ 232.35	-9.91%	\$ 209.33		13.1%	\$ 240.94	0.9938	
		Family and Children	1-5 Years, Male and Female	\$ 96.35	3.00%	\$ 101.99	-8.17%			13.1%	\$ 107.81	0.9950	\$ 239.44
		Family and Children Family and Children	6-13 Years, Male and Female	\$ 74.36	2.78%	\$ 78.39	-8.35%			13.1%	\$ 82.70		
-			14-18 Years, Female	\$ 93.55	3.56%	\$ 100.07	-9.18%			13.1%	\$ 104.61	0.9965	VE.73
		Family and Children Family and Children	14-18 Years, Male	\$ 74.12	3.27%	\$ 78.85	-9.93%			13.1%			
		Family and Children	19-44 Years, Female	\$ 200.23		\$ 215.23	-12.51%			13.1%		0.9944	ΨO1.44
		Family and Children	19-44 Years, Male	\$ 244.27	3.06%	\$ 258.88	-14.23%			13.1%			\$ 242.56
		Family and Children	45+ Years, Female	\$ 402.25	2122701	\$ 426.26	-13.52%	\$ 368.63	\$ 371.37	13.1%	\$ 427.45	0.9861	
		Foster Care Children	45+ Years, Male	\$ 334,64	2.67%	\$ 352.06	-13.91%	\$ 303.09		13.1%		0.9848	
		Breast and Cervical Cancer	Foster Care, All Ages Male & Female	\$ 175.65	2.81%	\$ 185.28	-7.45%	\$ 171.48	185.73	13.1%		0.9918	1
		HCBS Waiver	BCC, All Ages Female	\$ 1,595.34	6.27%	\$ 1,793.41	-11.95%	\$ 1,579.10	1,644,05	13.1%		0.9817	4
		HCBS Waiver	0-18 Years, Male and Female	\$ 594.54	4.87%	\$ 651.48	-2.15%	\$ 637.49	1.005.03	13.1%	\$ 1,156,79		\$ 1,057.56 \$ 1,149.61
		Maternity Kickpayment	19+ Years, Male and Female	\$ 417.48	7.26%	\$ 477.74	-12.09%	\$ 419.99	516.00	13.1%		0.9866	
		SSI	Maternity Kickpayment, All Ages 0-2 Months, Male and Female	\$ 4,845.09		\$ 4,845.09	1.74%	\$ 4,929.40	4,929,40	7.7%		0.9988	\$ 5.333.68
		SSI		\$ 20,932.15		\$ 21,582.11	-15.90%	\$ 18,150.79	14,935,87	13.1%		0.9473	\$ 16,284.43
		SSI	1 - 1 - 1 - 1	\$ 4,029.57	1,97%	\$ 4,184.16	-13.72%			13.1%		0.9541	\$ 3.768.77
				\$ 593.87	2.93%	\$ 627.83	-8.68%	\$ 573.32 5	602.59	13.1%			\$ 676.14
		SSI		\$ 253.35	3.00%		-8.89%	\$ 244.34 9		13.1%		0.9868	
				\$ 256.83	3.32%		-10.15%	\$ 245.70 5	272.32	13.1%			307.62
		SSI		\$ 523.82	3.43% 3	558.93	-12.58%	\$ 488.61 5	488.61	13.1%			553.51
			1	\$ 883.44 \$ 928.30	3.54%	017.00	-12.59%	\$ 825.67	825.67	13.1%	\$ 950.36	0.9847	935.80
			3-11 Months, Male and Female	9 520.50	1.77% 5	300.24	-17.68%	\$ 790.43 \$	790.43	13.1%	\$ 909.76	0.9697	882.18
		Family and Children	1-5 Years, Male and Female	\$ 229.81	2.92%	242.31	-7.71%	\$ 224.18	224.18	13,1%	\$ 258.04	0.9908	255.67
			6-13 Years, Male and Female	\$ 115.18	3.30% 5	122.62	-7.94%	\$ 112.88	112.88	13.1%		0.9941	129.16
		Family and Children		\$ 93.27	3.08%	98.89	-8.39%			13.1%		0.9955	103.80
				\$ 125.63	3.87% 5	135.17	-9.15%	\$ 122.80 \$	122.80	13.1%	141.35	0.9941	140.51
		Family and Children	19-44 Years, Female	\$ 98.21	3.60%	105.13	-10.54%	\$ 94.04 \$		13.1% 5	\$ 108.24	0.9920	107.38
		Family and Children	19-44 Years, Female 19-44 Years, Male	\$ 237.68	4.07% 5	256.65	-12.31%	\$ 225.05 \$		13.1% 5		0.9898	256,38
				\$ 235.37	4.02% 5	253.94	-14.89%	\$ 216.12 \$	213.89	13.1% 5		0.9853	242.56
				\$ 446.88	3.41% \$	476.63	-14.17%			13.1% 9	2.70.10	0.9861	
			45+ Years, Male	\$ 385.20	3.69% \$	413.03	-15.10%			13.1% 9		0.9848	420.41
-		Breast and Cervical Cancer		\$ 184.44	3.22% \$	100.00	-6.88%			13.1% 5	213.78	0.9918	212.03
				\$ 2,143.17	6.68% \$		-12.66%			13.1% 5		0.9817	
			0-18 Years, Male and Female	\$ 573.40	5.14% \$	0011001	-1.90%			13.1% 5		0.9938	1,057.58
			19+ Years, Male and Female	\$ 433.83	7.29% \$	496.79	-12.05%	\$ 436.95 \$	516.00	13.1% 5	593.92	0.9866	585.99
L		неполиту глекраутен	Maternity Kickpayment, All Ages	\$ 4,771.84	0.00% \$	4,771.84	1.74%	\$ 4,854.87 \$		7.7% \$		0.9856	



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### Attachment B Rate Development Overview

							11/1/2012-12	/31/2012				11/1/2012-12/31/2012					
						State	Fiscal Year 2010	Rate Develop	ment				State F	iscal Year 20	11 Rate Develop	pment	
				FY10 Prepaid Base PMPM		Adjus	stments		FY10 Prepaid PMPM Post Adjustments		Projected FY11 Prepaid PMPM			Adjust	tments		FY11 Prepaid PMPM Post Adjustments
DHH Admin.	Region			PMPM or	Completion	Program Integrity Recoupment s (Fraud &	IP and OP Hospital Cost	Fee Schedule	PMPM or	Trend to	PMPM or	PMPM or		Program Integrity Recoupment s (Fraud &	IP and OP Hospital Cost	Fee Schedule	PMPM or
Region	Description	COA Description	RC Description	Cost/Delivery	Factor	Abuse)	Settlements	Changes	Cost/Delivery	与FY11到	Cost/Delivery	Cost/Delivery	Factor	Abuse)	Settlements	Changes	Cost/Delivery
04	Lafayette	SSI	0-2 Months, Male and Female	\$ 19,289.85	1.0019	0.9988	1.0662	0.8924	\$ 18,368.55	1.7%	\$ 18,678.98	\$ 15,394.46	1.0811	0.9953	1.0260	0.9521	\$ 16,183,14
04	Lafayette	SSI	3-11 Months, Male and Female	\$ 4,570,54	1.0014	0.9994	1.0498	0.9032	\$ 4,337.09	1.9%			1,0588	0.9966	1.0143	0.9577	
04	Lafayette	SSI	1-5 Years, Male and Female	\$ 811.13	1.0004	0.9993	1.0206	0.9269		2.7%			1.0348	0.9983	1.0022	0.9662	
04	Lafayette	SSI	6-13 Years, Male and Female	\$ 400.65	0.9994	0.9995	0.9993	0.9564	\$ 382.51	2.4%			1.0105	0.9992	0.9976	0.9822	
04	Lafayette	SSI	14-18 Years, Male and Female	\$ 383.76	1.0001	0.9994	1.0164	0.9343		2.5%			1.0149	0.9989	0.9975	0.9790	
04	Lafayette	SSI	19-44 Years, Male and Female	\$ 617.59	0.9997	0.9994	1.0058	0.9361		2.9%			1.0196	0.9986	0.9958	0.9724	
04	Lafayette	SSI	45+ Years, Male and Female	\$ 938.65	0.9997	0.9992	1.0012	0.9361	\$ 878.82	2.9%			1.0223	0.9983	0.9946	0.9717	
04	Lafayette	Family and Children	0-2 Months, Male and Female	\$ 1,056.37	1.0002	0.9984	1.0502	0.9224		1.6%			1.0577	0.9960	1.0204	0.9776	
04	Lafayette	Family and Children	3-11 Months, Male and Female	\$ 254.95	0.9982	0.9987	1.0122	0.9443		2.6%			1.0147	0.9987	0.9995	0.9857	
04	Lafayette	Family and Children	1-5 Years, Male and Female	\$ 113,06	0.9977	0.9985	1,0018	0.9472		2.9%			1.0118	0.9988	0.9973	0.9860	
04	Lafayette	Family and Children	6-13 Years, Male and Female	\$ 95.41	0.9975	0,9988	0.9984	0.9561	\$ 90.74	2.6%			1.0036	0.9993	0.9961	0.9898	
04	Lafayette	Family and Children	14-18 Years, Female	\$ 119.59	0.9975	0.9989	0.9939	0.9431		3.3%			1.0075	0.9990	0.9918	0.9828	
04	Lafayette	Family and Children	14-18 Years, Male	\$ 92.03	0.9976	0.9989	0.9972	0.9469		3.1%			1.0082	0.9990	0.9958	0.9857	
04	Lafavette	Family and Children	19-44 Years, Female	\$ 226,56		0.9990	0.9933	0.9363		3.5%			1.0107	0,9987	0.9901	0,9787	
04	Lafayette	Family and Children	19-44 Years, Male	\$ 247.28	0.9979	0.9991	0.9978	0.9380		3.2%			1.0163	0.9982	0.9923	0.9785	
04	Lafayette	Family and Children	45+ Years, Female	\$ 422.64	0.9977	0.9991	0.9927	0.9459		2.9%			1.0082	0.9985	0.9850	0.9807	
04	Lafayette	Family and Children	45+ Years, Male	\$ 425.63	0.9980	0.9987	0.9982	0.9430	\$ 399.29	2.6%			1.0094	0.9985	0.9902	0.9810	
04	Lafayette	Foster Care Children	Foster Care, All Ages Male & Female	\$ 186.31	0.9994	0.9990	0.9985	0.9528		2.7%			1.0126	0.9991	0.9971	0.9803	
04	Lafayette	Breast and Cervical Cancer	BCC, All Ages Female	\$ 2,864.84	0.9994	0.9993	0.9389	0.9018		5.4%			1.0176	0.9973	0.9520	0.9484	
04	Lafayette	HCBS Waiver	0-18 Years, Male and Female	\$ 1,436.78	0.9996	0.9998	0.9988	0.9548		5.9%			1.0297	0.9992	1,0025	0.9635	
04	Lafayette	HCBS Waiver	19+ Years, Male and Female	\$ 685.71	0.9998	0.9994	1.0103	0.9361		7.0%			1.0233	0.9987	1.0017	0.9664	
04	Lafayette	Matemity Kickpayment	Maternity Kickpayment, All Ages	\$ 4,721.41	1.0000	1.0000	1.0000	0.8752	\$ 4,132.39	0.0%	\$ 4,132.39	\$ 4,522.43	1.0000	1.0000	1.0000	0.9520	\$ 4,305.30



				Colored Section 1000 Section 100 A Proposition Com-				11/1/2012-	12/31/2012				
DHH			AS A A CONTRACTOR AND A CASA A	Weighted FY10 and FY11 PMPM at FY11		Projected FFS PMPM		PMPM Post MC Savings	PMPM Post Smoothing w/Statewide		Final Prepaid Premium w/ Tax (Gross of GME)		Final Prepaid Premium w/ Tax Net of GME)
Admin. Region	Region Description	COA Description	RC Description	PMPM or Cost/Delivery	Trend	PMPM or Cost/Delivery	MC Savings	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Premium w/ Tax	PMPM or	GME	PMPM or
04		SSI	0-2 Months, Male and Female	\$ 17,181,48	1.71%	\$ 17.751.04	-14.49%	Andrew Comment of the		Load		Adjustment	Cost/Delivery
04		SSI	3-11 Months, Male and Female	\$ 3,798.02	2.07%		-12.55%		\$ 14,935.87 \$ 3,432.08	13.1%		0.9473	
04		SSI SSI	1-5 Years, Male and Female	\$ 668.43	2.89%		-6.43%			13.1%		0.9541	
04		ISSI	6-13 Years, Male and Female	\$ 403.49	2.42%		-9.08%			13.1% 13.1%		0.9749	7.7.7
04		SSI	14-18 Years, Male and Female	\$ 339.13	2.69%	\$ 356,91	-10.45%			13.1%	***************************************	0.9868	
		SSI	19-44 Years, Male and Female	\$ 591.70	3.01%	\$ 626.50	-12.11%			13.1%		0.9814	
	Lafavette	Family and Children	45+ Years, Male and Female	\$ 885.02	2.95%		-12.06%			13.1%	\$ 633.80	0.9901	
		Family and Children	0-2 Months, Male and Female	\$ 1,091.49	1.63%	\$ 1,126.01	-18.32%			13.1%	\$ 947.49	0.9902	
		Family and Children	3-11 Months, Male and Female	\$ 236.04	2.74%	\$ 248.66	-8.21%	\$ 228.23		13.1%		0.9741	
		Family and Children	1-5 Years, Male and Female	\$ 108.42	3.00%	\$ 114.78	-8.56%			13.1%	T	0.9924	2.00,10
		Family and Children	6-13 Years, Male and Female	\$ 93.76	2.65%	\$ 98.61	-8.93%			13.1%		0.9944	
		Family and Children	14-18 Years, Female	\$ 114.54	3.44%		-9.91%			13.1%		0.9970	
		Family and Children	14-18 Years, Male	\$ 90.02	3.09%		-10.76%			13.1%		0.9953	
		Family and Children	19-44 Years, Female	\$ 214.76	3.68%		-12.25%	\$ 202.03	\$ 202.03	13.1%	\$ 232.54	0.9938 0.9940	
		Family and Children	19-44 Years, Male 45+ Years, Female	\$ 229.78	3.40%		-14.48%	\$ 209.60		13.1%	\$ 246.19	0.9940	2
		Family and Children	45+ Years, Male	\$ 404.61	3.19%		-13.03%	\$ 373.81		13.1%	\$ 427.45	0.9853	
		Foster Care Children	Foster Care, All Ages Male & Female	\$ 395.56	2.79%		-13.91%		370.87	13.1%		0.9848	74770
		Breast and Cervical Cancer	BCC, All Ages Female	\$ 191.61	2.78%		-6.98%			13.1%		0.9918	
04		HCBS Waiver	0-18 Years, Male and Female	\$ 2,191.09	5.47%		-12.19%			13.1%	\$ 1,892.25	0.9817	
04		HCBS Waiver	19+ Years, Male and Female	\$ 1,526.94	5.84%		0.48%			13.1%		0.9938	
04		Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 665.39	7.06%	1 771141	-11.68%			13.1%		0.9866	
			materialy rockpayment, All Ages	\$ 4,236.13	0.00%	\$ 4,236.13	1.74%	\$ 4,309.85	4,309.85	7.7%		0.9996	

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### Attachment B Rate Development Overview

			;	11/1/2012-12/31/2012							11/1/2012-12/31/2012						
						State Fi	scal Year 2010		oment				State	Fiscal Year 201	Rate Developn	ent	
				FY10 Prepaid Base PMPM		Adjustr			FY10 Prepaid PMPM Post Adjustments		Projected FY11 Prepaid PMPM			Adjustr	nents		FY11 Prepaid PMPM Post Adjustments
DHH Admin. Region	Region Description	COA Description	RC Description	PMPM or Cost/Delivery	Completion Factor	Program Integrity Recoupments (Fraud & Abuse)	IP and OP Hospital Cost Settlements	Fee Schedule Changes	PMPM or Cost/Delivery	Trend to	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Completion Factor	Abuse)	IP and OP Hospital Cost Settlements	Fee Schedule Changes	PMPM or Cost/Delivery
05	Lake Charles	SSI	0-2 Months. Male and Fernale	\$ 9,268,44	1.0014	0.9980	1,0075	0.9036	S 8,432.42	2.2%			1.0827	0.9953	1,0054	0.9519	\$ 29,363.11
05	Lake Charles	SSI	3-11 Months, Male and Female	\$ 2,511.72	1.0003	0.9990	1,0039	0.9337		2.1%				0.9974	1,0050	0.9657	
05	Lake Charles	SSI	1-5 Years, Male and Female	\$ 1,013.59	0,9999	0.9995	1.0022	0.9419		2.6%			1,0349		1,0058	0.9674	
05	Lake Charles	SSI	6-13 Years, Male and Female	\$ 373.38	1,0000	0.9994	1.0028	0.9398	\$ 351.69				1.0149	0.9989	1,0066	0.9786	
05	Lake Charles	SSI	14-18 Years, Male and Female	\$ 274.97	0.9993	0.9995	1.0008	0.9544					1,0358	0,9978	1,0053	0.9687	
05	Lake Charles	SSI	19-44 Years, Male and Female	\$ 565.91	0.9999	0,9995	1.0025	0.9313					1.0231	0.9983	1,0085	0.9693	
05	Lake Charles	SSI	45+ Years, Male and Female	\$ 916.63	1,0000	0.9993	1,0026	0.9290		3.1%			1.0260	0.9980	1.0106	0.9676	
05	Lake Charles	Family and Children	0-2 Months, Male and Female	\$ 960.92	0,9999	0.9983	1.0067	0.9236					1.0521	0.9964	1.0045	0.9780	
05	Lake Charles	Family and Children	3-11 Months, Male and Female	\$ 281.07	0.9982	0.9989		0.9481					1.0164	0.9986	1.0032	0.9858	
05	Lake Charles	Family and Children	1-5 Years, Male and Female	5 131,69	0.9976	0,9987	1,0010	0.9504					1.0104	0.9989	1.0046	0.9866	
05	Lake Charles	Family and Children	6-13 Years, Male and Female	\$ 106,35	0.9975	0.9989		0,9563					1.0035	0.9993	1,0033	0.9899	
05	Lake Charles	Family and Children	14-18 Years, Female	\$ 135,66	0.9974	0.9991	1,0005	0.9457					1.0085	0.9990	1.0070	0.9823	
05	Lake Charles	Family and Children	14-18 Years, Male	S 102.39	0.9976	0.9990		0.9474		32%		\$ 102.43	1,0066	0.9991	1.0054	0.9848	
05	Lake Charles	Family and Children	19-44 Years, Female	\$ 269.69	0.9979	0.9993		0.9345					1,0140		1.0110	0.9764	
05	Lake Charles	Family and Children	19-44 Years, Male	\$ 256,19	0.9983	0.9992		0.9326					1.0183	0.9984	1,0076	0.9775	
05	Lake Charles	Family and Children	45+ Years, Female	\$ 518.99	0.9984	0.9992		0.9383		2.7%		\$ 507.74	1.0143		1.0132	0.9773	
05	Lake Charles	Family and Children	45+ Years, Male	\$ 520.99	0,9980	0.9988		0.9279		3.6%			1.0270		1.0224	0.9702	
05	Lake Charles	Foster Care Children	Foster Care, All Ages Male & Female	\$ 221.54	0.9994	0.9992		0.9509		2.8%			1.0197	0.9982	1.0119	0.9665	
05	Lake Charles	Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,914.87	0.9994	0.9998		0,9021		6.5%		\$ 1,889.79	1.0195	0.9963	1,0446	0.9324	
05	Lake Charles	HCBS Waiver	0-18 Years, Male and Female	\$ 1,089.94	0.9997	0.9998		0.9494		5.4%	\$ 1,091.32		1.0201	0.9997	1.0015	0.9723	
05	Lake Charles	HCBS Waiver	19+ Years, Male and Female	\$ 486.01	0.9997	0.9998									1.0036	0.9695	
05	Lake Charles	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 4,710.61	1,0000	1.0000						\$ 4,688.10			1.0000	0.9520 0.9540	
06	Alexandria	SSI	0-2 Months, Male and Female	\$ 13,524.84	1.0015	0.9977		0.9029		2.0%							
06	Alexandria	ISSI	3-11 Months, Male and Female	\$ 4,482.37	1.0015	0.9993		0.9024							1.0096	0.9572	
06	Alexandria	SSI	1-5 Years, Male and Female	S 473,49	0.9999			0.9366					1.0300		1.0036	0.9699	
06	Alexandria	SSI	6-13 Years, Male and Female	\$ 313.62	0.9997	0.9994		0,9459		2.7%			1.0187		1,0026	0.97/5	
06	Alexandria	SSI	14-18 Years, Male and Female	\$ 268.68	0.9994	0.9995		0.9479							1,0021	0.9761	
06	Alexandria	SSI	19-44 Years, Male and Female	\$ 479.94	0,9998	0,9995									1.0034		
06	Alexandria	SSI	45+ Years, Male and Female	\$ 883.14	1.0000										1.0042		
06	Alexandria	Family and Children	0-2 Months, Male and Female	\$ 1,460.29		0.9988		0.9207							1.0107	0.9762	
06	Alexandria	Family and Children	3-11 Months, Male and Female	\$ 255.37	0,9982										1.0035	0.9847	
06	Alexandria	Family and Children	1-5 Years, Male and Female	\$ 131,52	0.9976			0.9490							1,0022		
06	Alexandria	Family and Children	6-13 Years, Male and Female	\$ 97.55	0.9974	0.9989		0.9555					1,0062		1,0012	0.9796	
06	Alexandria	Family and Children	14-18 Years, Female	S 126.34		0.9991									1,0015	0.9823	
06	Alexandria	Family and Children	14-18 Years, Male	\$ 92.06	0.9975										1,0020		
06	Alexandria	Family and Children	19-44 Years, Female	\$ 241.94	0.9977	0.9993									1,0023		
06	Alexandria	Family and Children	19-44 Years, Male	\$ 258.73		0.9991									1.0023	0,9805	
08	Alexandria	Family and Children	45+ Years, Female	\$ 502.17				0.9404							1,0028		
06	Alexandria	Family and Children	45+ Years, Male	\$ 672.20				0.9348							1.0013		
06	Alexandria	Foster Care Children	Foster Care, All Ages Male & Female	\$ 161,68	0.9995										1.0036	0.9421	
06	Alexandria	Breast and Cervical Cancer	BCC, All Ages Female	\$ 2,007.78	0.9997										1,0002	0.9668	
06	Alexandria	HCBS Waiver	0-18 Years, Male and Female	\$ 990.65	0,9997	0.9998									1,002	0.9687	
06	Alexandria	HCBS Waiver	19+ Years, Male and Female	\$ 502.50	0.9997			0.9413								0.9520	
06	Alexandria	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 5,008.80	1,0000	1,0000	1,0000	0.8752	\$ 4,383.93	0.0%	1 3 4,363.93	1 9 4,031,82	1.0000	1.0000	1 1.0000	1 0.0320	1.7 7,000.04



05 L 05 L				Weighted and FY11 F at FY1			Projected FFS			PMPM Post			25 V S. P. W. G. S. Z.	(75) ESTE A (15) A
Admin. Region I 05 L 05 L	ake Charles			Level of Messic Care,			PMPM	9	PMPM Post MC Savings	Smoothing w/Statewide		Final Prepaid Premium w/ Tax (Gross of GME)		Final Prepaid Premium w/ Tax Net of GME)
05 L 05 L		COA Description	RC Description	PMPM ( Cost/Deli		ıd	PMPM or Cost/Delivery	MC Savings	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Premium w/ Tax Load	PMPM or Cost/Delivery	GME Adjustment	PMPM or Cost/Delivery
05 L		SSI	0-2 Months, Male and Female	\$ 21,0		77%	\$ 21,787.82	-15,64%	\$ 18,380.71	\$ 14,935,87	13.1%			
		SSI	3-11 Months, Male and Female	\$ 2,9	11.07 2.3	34%	\$ 3,043,47	-9.93%			13.1%		0.9473	\$ 16,284,43
		SSI	1-5 Years, Male and Female			72%	\$ 1,046.95	-8.77%		\$ 602.59	13.1%		0.9541	\$ 3,768.77
		SSI SSI	6-13 Years, Male and Female			31%	\$ 363.59	-9.40%			13.1%		0.9749	
			14-18 Years, Male and Female	\$ 3		34% 5	\$ 365.11	-11.02%			13.1%		0.9868	\$ 319.43
		SSI	19-44 Years, Male and Female	\$ 5		34% 5	\$ 543.31	-12.23%		\$ 476.88	13.1%		0.9814	\$ 307.62
		SSI	45+ Years, Male and Female	\$ 8	13.48 3.2		S 897.45	-12.33%		\$ 786.83	13.1%		0.9996	S 548.66
		Family and Children	0-2 Months, Male and Female		5.68 1.8	2% 5	S 937.65	-16.89%	S 779.24		13.1%		0.9992	\$ 904.97
<u> </u>		Family and Children	3-11 Months, Male and Female			1% 5	\$ 269.11	-8.73%	\$ 245.61		13.1%		0.9974	
		Family and Children	1-5 Years, Male and Female			8% 5	\$ 128.60	-8.69%	\$ 117,43	\$ 117,43	13.1%		0.9985	\$ 282.28
		Family and Children	6-13 Years, Male and Female			5% 5	\$ 110.07	-9.28%	\$ 99.86	\$ 99.86	13.1%			\$ 135.10
		Family and Children	14-18 Years, Female	\$ 1	2.00 3.5		\$ 141.17	-10.02%	\$ 127.02		13.1%		0.9997	
101		Family and Children	14-18 Years, Male	\$ 1	11.13 3.2	3% \$	\$ 107.52	-10.90%	\$ 95.80		13.1%		0.9999 0.9998	170,10
		Family and Children	19-44 Years, Female			1% \$	\$ 276.11	-13.03%	\$ 240.14		13.1%			
***************************************		Family and Children	19-44 Years, Male		6.08 3.5	2% \$	\$ 241.66	-15,32%		\$ 213.89	13.1%		0.9998 0.9853	
			45+ Years, Female		5.46 3.2		S 537.03	-14.31%	S 460.20		13.1%		0.9861	
			45+ Years, Male		2.94 3.9		\$ 595.23	-15.58%	\$ 502,47		13.1%		0.9848	
		Foster Care Children	Foster Care, All Ages Male & Female		0.90 3.2		\$ 245.70	-8.73%	\$ 224.26		13.1%			
		Breast and Cervical Cancer	BCC, All Ages Female		5.26 6.7	2% \$	\$ 2,102.59	-12.54%	\$ 1,839,02	\$ 1,644,05	13.1%		0.9918	
		HCBS Waiver	0-18 Years, Male and Female		6.93 5.6		1,173.97	0.82%	\$ 1,183,62	\$ 1,005,03	13.1%		0.9817 0.9938	
-		HCBS Waiver	19+ Years, Male and Female		5.36 7.2		555.27	-11.11%	S 493.56			\$ 593.92	0.9938	
			Matemity Kickpayment, All Ages	S 4,32			4,326.99	1.74%	\$ 4,402,28	S 4,402,28	7.7%		0.9866	
			0-2 Months, Male and Female	\$ 13,55			14,052.63	-13.99%	\$ 12,086,63	\$ 14,935,87	13,1%		0.9993	
			3-11 Months, Male and Female	\$ 4,37			4,532.57	-13.62%	\$ 3,915,04	\$ 3,432.08	13.1%		0.9473	
			1-5 Years, Male and Female		6.90 3.32		486.51	-7.66%	\$ 449.26		13.1%		0.9541	7
			6-13 Years, Male and Female			2% S		-9.63%			13.1%		0.9868	
			14-18 Years, Male and Female			6% S		-10.15%	\$ 258.56	\$ 272.32		\$ 313,44	0.9814	
			19-44 Years, Male and Female			4% S		-12.42%	S 446.17		13.1%	\$ 513.55	0.9966	
6 41			45+ Years, Male and Female			2% S		-12.37%	\$ 790.13	\$ 790.13	13.1%	S 909.45	-0.9974	
			0-2 Months, Male and Female	\$ 1,42		3% S		-20.12%	S 1,168,18	5 1,168,18		\$ 1,344.55	0.9961	7
			3-11 Months, Male and Female			6% \$	267.69	-9,56%	\$ 242.10	\$ 242.10		\$ 278.66	0.9979	1,000,01
			1-5 Years, Male and Female		0.41 3.41		139.11	-9.22%	\$ 126.28	\$ 126.28		\$ 145.35	0.9983	270.00
			6-13 Years, Male and Female		7.81 3.14		103.80	-9.18%		94.27		\$ 108.51	0.9983	\$ 145.10 \$ 108.39
			14-18 Years, Female			1% S		-10.15%	\$ 118.55	***************************************	13.1%	\$ 136.45	0.9989	
			14-18 Years, Male			1% S		-10.98%	\$ 86.94	86.94	13.1%	\$ 100.07	0.9979	\$ 136.20
			19-44 Years, Female			)% S		-13.19%	\$ 211.10		13.1%	\$ 242.97	0.9979	\$ 99.86
			19-44 Years, Male		0.41 4.21		271.10	-14.25%	\$ 232.47			S 246.19	0.9853	\$ 242.42
			45+ Years, Female		5.08 3.18		495.05	-14.16%	S 424.93		13.1%		0.9853   3	\$ 242.56
			45+ Years, Male		5.52 3.34		474.59	-15.37%	\$ 401.67		13.1%		0.9861	\$ 421.51
			Foster Care, All Ages Male & Female		0.87 3.21		170.96	-7.85%	\$ 157.55	185.73	13.1%	\$ 213.78	0.9848   3	
			BCC, All Ages Female	\$ 1,67			1,854.02	-11.90%			13.1%	S 1.892.25	0.9918	
			0-18 Years, Male and Female	\$ 1,00			1,133,61	3.79%	S 1,176,59 S	1,005.03	13.1%	S 1,092.23	0.9817   3	11001100
			19+ Years, Male and Female		2.40 7.35		587.32	-10.82%	5 523.76		13.1%	5 593.92		1,149.61
J IAII	evangus	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 4,51	3.48 0.00	)% S	4,513.48	1.74%	4.592.02		7.7%		0.9866 5	5 585.99 5 4.959.49



			•	11/1/2012-12/31/2012						11/1/2012-12/31/2012							
						State Ei	cal Year 2010		ment				State	Fiscal Year 2011	Rate Developn	nent	
				FY10 Prepaid Base PMPM		Adjustr			FY10 Prepaid PMPM Post Adjustments		Projected FY11 Prepaid PMPM	FY11 Prepaid Base PMPM		Adjustn	nents		FY11 Prepaid PMPM Post Adjustments
DHH Admin.			RC Description	PMPM or Cost/Delivery	Completion Factor	Program Integrity Recoupments (Fraud & Abuse)	IP and OP Hospital Cost Settlements	Fee Schedule Changes	PMPM or Cost/Delivery	Trend to	PMPM or Cost/Delivery	PMPM or Cost/Delivery	Completion Factor	Program Integrity Recoupments (Fraud & Abuse)	IP and OP Hospital Cost Settlements	Fee Schedule Changes	PMPM or Cost/Delivery
Region	Region Description	COA Description	0-2 Months, Male and Female	S 14.135.46	1.0017	0.9982	0.9997	0.8987	S 12.698.17	1.9%		\$ 12,308,17	1.0751	0.9956	1.0023	0.9565	\$ 12,630.58
07		SSI	3-11 Months, Male and Female	\$ 5,042.74	1.0013	0.9991	1.0128	0.9059		2.1%		\$ 1,966.18	1.0573	0.9966	1.0147	0.9600	
07	Shreveport	SSI	1-5 Years, Male and Female	\$ 492.62	1.0013	0.9993		0.9258		3.0%			1,0364		1.0387	0.9652	
07	Shreveport	SSI		\$ 254.23	0.9996	0.9994	1.0325	0.9460		2.9%			1,0161	0.9988	1.0290	0.9775	\$ 264.1
07	Shreveport	SSI	6-13 Years, Male and Female	S 358.13	0.9999	0.9996		0.9384	\$ 346.02	2.8%			1.0170	0.9987	1,0316	0.9753	\$ 295.3
07	Shreveport	SSI	14-18 Years, Male and Female	\$ 568.30	1.0003	0.9996		0.9234		3.1%			1.0299		1.0507	0.9655	\$ 505.1
07	Shreveport	SSI	19-44 Years, Male and Female		1.0003	0.9994	1.0582	0.9255					1,0290		1.0549	0.9661	\$ 741.1
07		SSI	45+ Years, Male and Female	\$ 818.40		0.9994	1.0049	0.9233					1,0599		1.0067	0.9779	
07	Shreveport	Family and Children	0-2 Months, Male and Female	S 1,281.40	1,0006			0.9393	S 226.57	3.0%		\$ 201.35	1.0220		1.0265	0.9828	
07	Shreveport	Family and Children	3-11 Months, Male and Female	\$ 235.33	0.9985	0.9990		0.9393					1.0151	0.9986	1.0361	0.9831	
07	Shreveport	Family and Children	1-5 Years, Male and Female	\$ 107.10	0.9980	0.9989		0.9500					1,0076	0.9991	1.0293	0.9859	
07	Shreveport	Family and Children	6-13 Years, Male and Female	\$ 74.42	0.9976	0.9990		0.9372	S 112.00				1,0111	0.9988	1,0614	0,9779	
07	Shreveport	Family and Children	14-18 Years, Female	\$ 112.68	0.9976	0.9992						\$ 70.12	1.0106	0.9988	1,0447	0.9810	
07	Shreveport	Family and Children	14-18 Years, Male	\$ 71.99	0.9976	0.9991		0.9424					1.0163	0.9983	1.0763	0.9737	
07	Shreveport	Family and Children	19-44 Years, Female	\$ 217.19	0.9979	0.9993		0.9282					1.0103		1,1028	0.9748	
07	Shreveport	Family and Children	19-44 Years, Male	\$ 255.38	0.9986	0.9993		0.9310					1.0158	0.9983	1.0584	0.9778	
07	Shreveport	Family and Children	45+ Years, Female	\$ 382.43	0.9981	0.9993							1.0166		1.0368	0.9801	
07	Shreveport	Family and Children	45+ Years, Male	\$ 566.48	0.9981	0.9993							1.0135		1.0303		
07	Shreveport	Foster Care Children	Foster Care, All Ages Male & Female	\$ 199.72	0.9997	0.9993							1.0135		1.2290	0.9433	
07	Shreveport	Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,856.22	0.9994	0.9996							1.0237		1.0043	0.9680	
07	Shreveport	HCBS Waiver	0-18 Years, Male and Female	\$ 791.10	0.9997	0.9999		0.9544					1.0237		1.0324	0.9640	
07	Shreveport	HCBS Waiver	19+ Years, Male and Female	\$ 479.00	1.0001	0.9996		0.9282					1.0000		1.0000	0.9520	
07	Shreveport	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 5,474.37	1.0000	1.0000							1.0000		1.0070	0.9544	
08	Monroe	SSI	0-2 Months, Male and Female	\$ 19,015.92	1.0017	0.9983									1.0070	0.9593	
08	Monroe	SSI	3-11 Months, Male and Female	\$ 3,180.73	1.0008	0.9990									1.0030	0.9393	
08	Monroe	SSI	1-5 Years, Male and Female	\$ 753.27	1.0001	0.9994									1.0019	0.9794	
08	Monroe	SSI	6-13 Years, Male and Female	\$ 274.71	0.9998	0.9994									1.0011	0.9753	
08	Monroe	SSI	14-18 Years, Male and Female	\$ 320.53	0.9998	0.9995		0.9426							1.0013	0.9677	
08	Monroe	SSI	19-44 Years, Male and Female	\$ 549.34	0.9999										1.0024	0.9689	
08	Monroe	ISSI	45+ Years, Male and Female	\$ 887.77	1.0000										1,0021	0.9809	
08	Monroe	Family and Children	0-2 Months, Male and Female	\$ 1,454.37	1.0005	0.9985											
08	Monroe	Family and Children	3-11 Months, Male and Female	\$ 321.21	0.9981	0.9991									1.0018		
08	Monroe	Family and Children	1-5 Years. Male and Female	\$ 148.09	0.9977	0.9991									1.0009	0.9862	
08	Monroe	Family and Children	6-13 Years, Male and Female	\$ 90.04	0.9975	0.9991									1.0004	0.9884	
08	Monroe	Family and Children	14-18 Years, Female	\$ 123.62	0.9975										1.0004		
08	Monroe	Family and Children	14-18 Years, Male	\$ 87.18	0.9977	0.9991									1.0006		
08	Monroe	Family and Children	19-44 Years, Female	\$ 214.34	0.9979	0.9993	1.0000								1.0012		
08	Monroe	Family and Children	19-44 Years, Male	\$ 253.61	0.9980	0.9994									1.0012		
08	Monroe	Family and Children	45+ Years, Female	\$ 494,11	0.9982			0.9422							1.0015		
IOR	Monroe	Family and Children	45+ Years, Male	S 461.44	0.9986			0.9349							1.0016		
108	Monroe	Foster Care Children	Foster Care, All Ages Male & Female	S 216.12				0.9582							1.0003		
08	Monroe	Breast and Cervical Cancer	BCC. All Ages Female	\$ 1,520.01	0.9993												
na .	Monroe	HCBS Waiver	0-18 Years, Male and Female	\$ 1,341.61	0.9999					5.5%	\$ 1,339.68	\$ 1,474.85			1.0010		
08	Monroe	HCBS Waiver	19+ Years, Male and Female	\$ 586.21	0.9997										1.0015		
08	Monroe	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 5,674.85						3 0.0%	S 4,966.88	\$ 5,121.63	1.0000	1.0000	1.0000	0.952	\$ 4,875.



Shreveport   SS    1-5 Years, Male and Female   S   438.25   3.27%   S   466.24   -9.08%   S   423.33   S   602.59   13.1%   S   3.950.27   0.9541   S   3.07   Shreveport   SS    6-13 Years, Male and Female   S   260.58   2.92%   S   275.42   -9.98%   S   247.93   S   281.21   13.1%   S   323.69   0.9749   S   2.07   Shreveport   SS    14-18 Years, Male and Female   S   319.46   2.93%   S   337.73   -11.63%   S   298.45   S   272.32   13.1%   S   323.69   0.9688   S   3.07   Shreveport   SS    19-44 Years, Male and Female   S   528.58   3.40%   S   563.77   -13.05%   S   490.18   13.1%   S   334.44   0.9914   S   3.07   Shreveport   SS    45 Years, Male and Female   S   775.84   3.45%   S   828.18   -12.49%   S   724.76	
Region   Region Description   Region Description   Region Description   RCDescription   RCDe	w/Tax
Shreveport   SS	
Shreveport   SS    3-11 Months, Male and Female   S   3,101.80   2.20%   S   3,234.43   -12.74%   S   2,822.36   S   3,432.08   13.1%   S   3,950.27   0.9543   S   3,075   S   S   S   S   S   S   S   S   S	1 - 1 - 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 -
Streeport   SS    14-18 Years, Male and Female   S   260.58   2.92%   S   275.42   -9.98%   S   247.33   S   281.21   13.1%   S   693.58   0.9749   S   275.42   -9.98%   S   247.33   S	5,284.43 3,768.77
Solid   Soli	
Sime   Sign	676.14
Single   S	319.43
Shreveport   Sail   40+ Years, Male and Female   \$ 775.84   3.45%   \$ 828.18   -12.49%   \$ 724.76   \$ 724.76   13.1%   \$ 834.20   0.9630   \$ 724.76   13.1%   \$ 834.20   0.9	541.59
Shreveport   Family and Children   10-2 Months, Male and Female   \$ 1,156.65   1.62%   \$ 1,192.92   -19.39%   \$ 961.59   \$ 961.59   13.1%   \$ 1,106.77   0.9185   \$ 1   1.5	803.30
Shreveport   Family and Children   3-11 Months, Male and Female   \$ 217.69   3.15%   \$ 231.10   -9.88%   \$ 208.27   \$ 208.27   13.1%   \$ 239.72   0.9720   \$ 207.00	.016.54
1-3 Fears, Male and Female   5   101.75   3.63%   5   108.98   -9.95%   5   98.13   5   98.13   13.1%   5   112.95   0.9802   5	233.00
107   Shreveport   Family and Children   14-18 Years, Female   S   73.43   3.35%   S   78.25   -9.76%   S   70.61   S   70.61   13.1%   S   81.27   0.9879   S   70.75   Shreveport   Family and Children   14-18 Years, Female   S   111.61   4.22%   S   120.87   -10.80%   S   107.81   S   107.81   13.1%   S   124.08   0.9835   S   70.75   Shreveport   Family and Children   19-44 Years, Female   S   219.68   4.32%   S   238.31   13.64%   S   205.81   S   205	110.72
14-16 Tears, Female   5   111.61   4.22%   5   120.87   -10.80%   5   107.81   5   107.81   13.1%   5   124.08   0.9835   5	80.28
14-16 Teals, Male   S   72.98   3.92%   S   78.59   -11.23%   S   69.76   S   69.76   13.1%   S   80.30   0.9842   S	122.04
O7   Shreveport   Family and Children   19-44 Years, Male   S   248.18   4.20%   S   238.31   -13.64%   S   205.81   S   205.81   13.1%   S   236.89   0.9749   S   236.89   S   236.89   S   236.89   S   236.89   S   23	79.03
07   Shrayangt   Sprilly and Children   19-44 Tears, Male   \$ 248.18   4.20% \$ 268.64   -15.08% \$ 228.12 \$ 213.89   13.1% \$ 246.19   0.9853 \$	230.95
	242.56
107 Ch	421.51
17 Sheeport Family and Children 45+ Years, Male \$ 493.86 3.09% \$ 523.64 -14.86% \$ 445.81 \$ 370.87 13.1% \$ 426.89 0.000 \$	420.41
For Collection Proster Care Children   Foster Children	212.03
107 Sheweort UPON With Ages Female \$ 2,244.69 6.14% \$ 2,517.36 -12.37% \$ 2,206.06 \$ 1,644.05 13.1% \$ 1,892.25 0.991.7 \$	.857.58
07 Shrungert LLCS Wales U-18 tears, Male and Female \$ 796.02 6.25% \$ 894.61 3.74% \$ 928.09 \$ 1.005.03 13.1% \$ 1156.70 0.9029 \$	.149.61
107   Shrayened   Holes World   13 + Tears, Male and Female   \$ 474.89   7.06% \$ 541.57   -12.64% \$ 473.09 \$ 516.00   13.1% \$ 593.92   0.986 \$ 5	585.99
Indemnity Nickpayment, All Ages S 4,861.05 0.00% S 4,861.05 1.74% S 4,945.63 7.7% S 5,357.57 0.0000 S 5	356.99
108   Manage   SSI   0-2 Months, Male and Female   \$ 20,027.35   1.84%   \$ 20,742.01   -12.33%   \$ 18,185.05   \$ 14,935.87   13,1%   \$ 17,190.64   0.9473   \$ 18	.284.43
108   Marging   SSI   3-11 Months, Male and Female   \$ 3,610.67   2.13%   \$ 3,760.39   -10.75%   \$ 3,356.28   \$ 3,432.08   13.1%   \$ 3,950.77   0.954.1   \$ 3,000.00   \$ 3,000	.768.77
18 Marco   SCI   1-5 Years, Male and Female   S   683.30   2.88%   S   721.69   -7.12%   S   670.29   S   602.59   13.1%   S   693.58   0.9749   S	676.14
08 Monroe   SCI   14-10% watering terring   3 253.14   2.93% \$ 278.18   -8.51% \$ 254.52 \$ 281.21   13.1% \$ 323.69   0.9868 \$	319.43
108 Marron   SCI   14-14 Teals, Water and Termine   \$ 299.89   2.87%   \$ 316.68   -10.54%   \$ 283.31   \$ 272.32   13.1%   \$ 313.44   0.981.4   \$	307.62
19   Manage   Script   19-44 rears, Male and Female   \$ 537.99   3.01%   \$ 569.62   -12.46%   \$ 498.64   \$ 498.64   \$ 13.1%   \$ 573.04   0.004.0   \$	570.49
08 Manage   Seguilla and Children   93 Feats, male and Female   \$ 839.89   2.98%   \$ 888.73   -12.07%   \$ 781.42   \$ 781.42   \$ 13.1%   \$ 899.43   0.9940   \$	894.02
08 Morgon Completed Orlines, water the state of the state	296.04
08 Monroe Ferrillo and Children 15.7 (Willish Water Study Ferrillo 2007) 13.1% \$ 331.23 0.0065 \$	330.07
108 Mapping   Semillion of Children   10 (104), while an of remains   3 (14), 33 (3.0%   \$ (14),82   -9.29%   \$ (135.89   \$ (1	155.99
08 Marroe Family and Children 14.18 S 97.66 0.9980 S	97.46
08 Monroe Family and Children 14-10 Fear, Pellidle 3 116.03 3.71% \$ 124.45 -8.75% \$ 113.56 \$ 113.56 \$ 13.1% \$ 130.71 0.9973 \$	130.35
08 Magrae Camilla and Children 10-10 Team, Wale 3 78.89 3.78% \$ 84.73 -10.14% \$ 76.14 \$ 76.14 \$ 13.1% \$ 87.64 0.996d \$	87.32
08 Monroe [Femiliand Children 19-44 Femilian 208.08] 3.72% \$ 223.24 -12.71% \$ 194.87 \$ 194.87 \$ 13.1% \$ 224.29 0.9955 \$	223.30
108 Monroe Family and Children 15-44 Fears, Wale \$ 205.48 3.46% \$ 219.38 -13.85% \$ 189.00 \$ 213.89 13.1% \$ 246.19 0.9853 \$	242.56
108 Maprop Camily and Children 45* Years, Female \$ 458.28 2.92% \$ 484.44 -14.17% \$ 415.79 \$ 371.37 13.1% \$ 427.45 0.9961 \$	421.51
108 Monroe Figure Children   43*Years Male   \$ 368.57   3.00% \$ 390.16   -15.33% \$ 330.33 \$ 370.87   13.1% \$ 426.88   0.9848 \$ 5	420.41
108 Manage Personal Poster Care, All Ages Male & Female \$ 219.08   2.80% \$ 231.04   -7.73% \$ 213.17 \$ 185.73   13.1% \$ 213.78   0.001.1 \$	212.03
108 Magrice UCRS Midwell Cell Control of the Contro	857.58
108 Monroe IMPS Maker 10-18 Years, Male and Female \$ 1,414.37 5.44% \$ 1,566.30 -0.88% \$ 1,552.48 \$ 1,005.03 13.1% \$ 1,156.79 0.9938 \$ 1,566.30   1,566.30	149.61
108 Montroe Motor Moto	585.99
Invalently Nickpayment, All Ages   \$ 4,912,19   0.00%   \$ 4,912,19   1.74%   \$ 4,007,67   \$ 4,007,67   \$	413.37



DHH Admin. Region	Region Description	COA Description	RC Description	PMPM Post Smoothing w/Statewide	FY11 Family Planning Percentage	Family Planning PMPM
01	New Orleans	SSI	0-2 Months, Male and Female	\$ 14,935.87		
01	New Orleans	SSI	3-11 Months, Male and Female	\$ 3,432.08		
01	New Orleans	SSI	1-5 Years, Male and Female	\$ 602.59		
01	New Orleans	SSI	6-13 Years, Male and Female	\$ 281.21		
01	New Orleans	SSI	14-18 Years, Male and Female	\$ 272.32	1.1%	
01	New Orleans	SSI	19-44 Years, Male and Female	\$ 540.51		
01	New Orleans	SSI	45+ Years, Male and Female	\$ 832.59		\$ 0.24
01	New Orleans	Family and Children	0-2 Months, Male and Female	\$ 944.75		
01	New Orleans	Family and Children	3-11 Months, Male and Female	\$ 188.57		
01	New Orleans	Family and Children	1-5 Years, Male and Female	\$ 92.20		
01	New Orleans	Family and Children	6-13 Years, Male and Female	\$ 68.69		
01	New Orleans	Family and Children	14-18 Years, Female	\$ 88.93		
01	New Orleans	Family and Children	14-18 Years, Male	\$ 70.19		
01	New Orleans	Family and Children	19-44 Years, Female	\$ 179.85		
01	New Orleans	Family and Children	19-44 Years, Male	\$ 213.89		
01	New Orleans	Family and Children	45+ Years, Female	\$ 371.37		
01	New Orleans	Family and Children	45+ Years, Male	\$ 370.87		
01	New Orleans	Foster Care Children	Foster Care, All Ages Male & Female	\$ 185.73		\$ 1.36
01	New Orleans	Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,644.05		
01	New Orleans	HCBS Waiver	0-18 Years, Male and Female	\$ 1,005.03		
01	New Orleans	HCBS Waiver	19+ Years, Male and Female	\$ 516.00		
01	New Orleans	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 6,116.24		
09	Mandeville	SSI	0-2 Months, Male and Female	\$ 14,935.87		
09	Mandeville	SSI	3-11 Months, Male and Female	\$ 3,432.08		
09	Mandeville	SSI	1-5 Years, Male and Female	\$ 602.59		
09	Mandeville	SSI	6-13 Years, Male and Female	\$ 281.21		
09	Mandeville	SSI	14-18 Years, Male and Female	\$ 272.32		
09	Mandeville	SSI	19-44 Years, Male and Female	\$ 573.62		
09	Mandeville	SSI	45+ Years, Male and Female	\$ 888.53		\$ 0.11
09	Mandeville	Family and Children	0-2 Months, Male and Female	\$ 847.65	0.0%	
09	Mandeville	Family and Children	3-11 Months, Male and Female	\$ 221.67		
09	Mandeville	Family and Children	1-5 Years, Male and Female	\$ 118.4		
09	Mandeville	Family and Children	6-13 Years, Male and Female	\$ 101.09		
09	Mandeville	Family and Children	14-18 Years, Female	\$ 121.99		
09	Mandeville	Family and Children	14-18 Years, Male	\$ 100.43		
09	Mandeville	Family and Children	19-44 Years, Female	\$ 230.9		
09	Mandeville	Family and Children	19-44 Years, Male	\$ 213.8		
09	Mandeville	Family and Children	45+ Years, Female	\$ 371.3	7 0.19	
09	Mandeville	Family and Children	45+ Years, Male	\$ 370.8		
09	Mandeville	Foster Care Children	Foster Care, All Ages Male & Female	\$ 185.7		
09	Mandeville	Breast and Cervical Cancer	BCC, All Ages Female	\$ 1,644.0		
09	Mandeville	HCBS Waiver	0-18 Years, Male and Female	\$ 1,005.0		
09	Mandeville	HCBS Waiver	19+ Years, Male and Female	\$ 516.0		
09	Mandeville	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$ 4,550.3	8 0.19	6 \$ 5.08



DHH Admin.				2000 1000 1000	MPM Post	FY11 Family	
Region	Region Description	COA Description	RC Description		moothing /Statewide	Planning Percentage	Family Planning PMPM
02	Baton Rouge	SSI	0-2 Months, Male and Female	S	14,935,87	0.0%	Section and the second section of the second section is
02	Baton Rouge	SSI	3-11 Months, Male and Female	\$	3.432.08	0.0%	\$ -
02	Baton Rouge	SSI	1-5 Years, Male and Female	<del>\$</del>	602.59	0.0%	
02	Baton Rouge	SSI	6-13 Years, Male and Female	\$	281.21	0.0%	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
02	Baton Rouge	SSI	14-18 Years, Male and Female	s	272.32	1.1%	
02	Baton Rouge	SSI	19-44 Years, Male and Female	\$	616.88	0.4%	
02	Baton Rouge	SSI	45+ Years, Male and Female	\$	858.15	0.0%	
02	Baton Rouge	Family and Children	0-2 Months, Male and Female	s	922.41	0.0%	
02	Baton Rouge	Family and Children	3-11 Months, Male and Female	\$	209.33	0.0%	<u> </u>
02	Baton Rouge	Family and Children	1-5 Years, Male and Female	1 \$	93.66	0.0%	
02	Baton Rouge	Family and Children	6-13 Years, Male and Female	\$	71.84		\$ - \$ 0.07
02	Baton Rouge	Family and Children	14-18 Years, Female	\$	90.89	5.9%	\$ 0.07 \$ 5.41
02	Baton Rouge	Family and Children	14-18 Years, Male	15	71.02		\$ 5.41
02	Baton Rouge	Family and Children	19-44 Years, Female	<del>  \$</del>	188.30	3.7%	
02	Baton Rouge	Family and Children	19-44 Years, Male	1 \$	213.89	0.0%	
02	Baton Rouge	Family and Children	45+ Years, Female	<del>\$</del>	371.37	0.0%	\$ 0.65
02	Baton Rouge	Family and Children	45+ Years, Male	<del>\$</del>	370.87	0.2%	
02	Baton Rouge	Foster Care Children	Foster Care, All Ages Male & Female	\$	185.73	0.0%	
02	Baton Rouge	Breast and Cervical Cancer	BCC, All Ages Female	1 \$	1.644.05	0.9%	
02	Baton Rouge	HCBS Waiver	0-18 Years, Male and Female	\$	1,005.03		\$ 1.25 \$ 2.20
02	Baton Rouge	HCBS Waiver	19+ Years, Male and Female	\$	516.00	0.2%	
02	Baton Rouge	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4.929.40		<del></del>
03	Thibodaux	SSI	0-2 Months, Male and Female	\$	14,935.87	0.0%	
03	Thibodaux	SSI	3-11 Months, Male and Female	\$	3,432.08		<u>\$</u> -
03	Thibodaux	SSI	1-5 Years, Male and Female	\$	602.59	0.0%	
03	Thibodaux	SSI	6-13 Years, Male and Female	\$	281.21	0.0%	
03	Thibodaux	SSI	14-18 Years, Male and Female	\$	272.32	1.5%	
03	Thibodaux	SSI	19-44 Years, Male and Female	1 \$	488.61	0.8%	
03	Thibodaux	SSI	45+ Years, Male and Female	1 \$	825.67	0.0%	
03	Thibodaux	Family and Children	0-2 Months, Male and Female	\$	790.43	0.0%	
03	Thibodaux	Family and Children	3-11 Months, Male and Female	15	224.18	0.0%	
03	Thibodaux	Family and Children	1-5 Years, Male and Female	\$	112.88	0.0%	
03	Thibodaux	Family and Children	6-13 Years, Male and Female	1\$	90.59		\$ 0.14
03	Thibodaux	Family and Children	14-18 Years, Female	\$	122.80		
03	Thibodaux	Family and Children	14-18 Years, Male	<del>   </del>	94.04		\$ 8.06 \$ 0.00
03	Thibodaux	Family and Children	19-44 Years, Female	\$	225.05	4.3%	
03	Thibodaux	Family and Children	19-44 Years, Male	<del>\$</del>	213.89		
03	Thibodaux	Family and Children	45+ Years, Female	\$	371.37	0.0%	
03	Thibodaux	Family and Children	45+ Years, Male	\$	370.87	0.2%	
03	Thibodaux	Foster Care Children	Foster Care, All Ages Male & Female	\$	185.73	0.0%	
03	Thibodaux	Breast and Cervical Cancer	BCC. All Ages Female	\$	1.644.05	0.8%	
03	Thibodaux	HCBS Waiver	0-18 Years, Male and Female	\$	1,044.03	0.0%	
03	Thibodaux	HCBS Waiver	19+ Years, Male and Female	\$	516.00		
03	Thibodaux	Maternity Kickpayment	Maternity Kickpayment, All Ages	S S	4.854.87	0.5% 0.1%	



DHH Admin. Region	Region Description	COA Description	RC Description	s	MPM Post moothing /Statewide	FY11 Family Planning Percentage	Fam	ily Planning PMPM
04	Lafayette	SSI	0-2 Months, Male and Female	\$	14,935.87	0.0%	***************************************	-
04	Lafayette	SSI	3-11 Months, Male and Female	\$	3,432.08	0.0%		
04	Lafayette	SSI	1-5 Years, Male and Female	\$	602.59	0.0%		
04	Lafayette	SSI	6-13 Years, Male and Female	\$	281.21	0.0%		0.07
04	Lafayette	SSI	14-18 Years, Male and Female	\$	272.32	0.9%		2.34
04	Lafayette	SSI	19-44 Years, Male and Female	\$	550.64	0.4%		2.19
04	Lafayette	SSI	45+ Years, Male and Female	\$	823.17	0.0%		0.22
04	Lafayette	Family and Children	0-2 Months, Male and Female	\$	919.70	0.0%		
04	Lafayette	Family and Children	3-11 Months, Male and Female	\$	228.23	0.0%	\$	-
04	Lafayette	Family and Children	1-5 Years, Male and Female	\$	104.95	0.0%		-
04	Lafayette	Family and Children	6-13 Years, Male and Female	\$	89.80	0.1%	·	0.08
04	Lafayette	Family and Children	14-18 Years, Female	\$	110.12	5.2%		5.74
04	Lafayette	Family and Children	14-18 Years, Male	\$	85.18	0.0%	\$	0.00
04	Lafayette	Family and Children	19-44 Years, Female	\$	202.03	4.2%		8.57
04	Lafayette	Family and Children	19-44 Years, Male	\$	213.89	0.0%		0.01
04	Lafayette	Family and Children	45+ Years, Female	\$	371.37	0.3%		0.93
04	Lafavette	Family and Children	45+ Years, Male	\$	370.87	0.0%		
04	Lafayette	Foster Care Children	Foster Care, All Ages Male & Female	\$	185.73	0.8%	_	1.42
04	Lafayette	Breast and Cervical Cancer	BCC, All Ages Female	\$	1,644.05	0.0%		0.50
04	Lafayette	HCBS Waiver	0-18 Years, Male and Female	\$	1,005.03	0.0%		0.40
04	Lafavette	HCBS Waiver	19+ Years, Male and Female	\$	516.00	0.2%		0.88
04	Lafavette	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4,309.85	0.0%	\$	1.78



DHH Admin. Region	Region Description	COA Description	RC Description		PMPM Post Smoothing w/Statewide	FY11 Family Planning Percentage	Family Planning PMPM
05	Lake Charles	SSI	0-2 Months, Male and Female	\$	14,935.87	Carried and a median harmonic and the company of th	The property of the property o
05	Lake Charles	SSI	3-11 Months, Male and Female	\$	3,432.08	0.0% 0.0%	\$ -
05	Lake Charles	SSI	1-5 Years, Male and Female	18	602.59	0.0%	
05	Lake Charles	SSI	6-13 Years, Male and Female	15	281.21	0.0%	
05	Lake Charles	SSI	14-18 Years, Male and Female	1 \$	272.32	0.0%	
05	Lake Charles	SSI	19-44 Years, Male and Female	18	476.88	0.5%	
05	Lake Charles	SSI	45+ Years, Male and Female	18	786.83	0.0%	
05	Lake Charles	Family and Children	0-2 Months, Male and Female	15	779.24	0.0%	
05	Lake Charles	Family and Children	3-11 Months, Male and Female	<u>\$</u>	245.61	0.0%	
05	Lake Charles	Family and Children	1-5 Years, Male and Female	\$	117.43	0.0%	
05	Lake Charles	Family and Children	6-13 Years, Male and Female	18	99.86		\$ - \$ 0.12
05	Lake Charles	Family and Children	14-18 Years, Female	\$	127.02		
05	Lake Charles	Family and Children	14-18 Years, Male	-   <del>S</del>	95.80		\$ 7.51 \$ 0.00
05	Lake Charles	Family and Children	19-44 Years, Female	18	240.14		
05	Lake Charles	Family and Children	19-44 Years, Male	\$	213.89	0.0%	
05	Lake Charles	Family and Children	45+ Years, Female	1\$	371.37		\$ 0.89
05	Lake Charles	Family and Children	45+ Years, Male	\$	370.87	0.2%	
05	Lake Charles	Foster Care Children	Foster Care, All Ages Male & Female	8	185.73		\$ - \$ 0.67
05	Lake Charles	Breast and Cervical Cancer	BCC, All Ages Female	\$	1,644.05	0.4%	
05	Lake Charles	HCBS Waiver	0-18 Years, Male and Female	\$	1,005,03	0.0%	
05	Lake Charles	HCBS Waiver	19+ Years, Male and Female	\$	516.00	0.2%	
05	Lake Charles	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4,402.28	0.2%	
06	Alexandria	SSI	0-2 Months, Male and Female	\$	14,935.87	0.2%	
06	Alexandria	SSI	3-11 Months, Male and Female	1 \$	3,432,08	0.0%	
06	Alexandria	SSI	1-5 Years, Male and Female	\$	602.59	0.0%	
06	Alexandria	SSI	6-13 Years, Male and Female	1\$	281.21	0.0%	
06	Alexandria	SSI	14-18 Years, Male and Female	\$	272.32	1.3%	
06	Alexandria	SSI	19-44 Years, Male and Female	\$	446.17	0.5%	
06	Alexandria	SSI	45+ Years, Male and Female	1\$	790.13	0.0%	
06	Alexandria	Family and Children	0-2 Months, Male and Female	Š	1,168,18	0.0%	
06	Alexandria	Family and Children	3-11 Months, Male and Female	\$	242.10	0.0%	
06	Alexandria	Family and Children	1-5 Years, Male and Female	\$	126.28	0.0%	
06	Alexandria	Family and Children	6-13 Years, Male and Female	\$	94.27	0.0 %	
06	Alexandria	Family and Children	14-18 Years, Female	\$	118.55	6.0%	
06	Alexandria	Family and Children	14-18 Years, Male	18	86.94	0.0%	
06	Alexandria	Family and Children	19-44 Years, Female	\$	211.10	4.1%	
06	Alexandria	Family and Children	19-44 Years, Male	\$	213.89	0.0%	
06	Alexandria	Family and Children	45+ Years, Female	18	371.37	0.0%	
06	Alexandria	Family and Children	45+ Years, Male	15	370.87	0.0%	
06	Alexandria	Foster Care Children	Foster Care, All Ages Male & Female	18	185.73	0.0%	
06	Alexandria	Breast and Cervical Cancer	BCC, All Ages Female	\$	1,644.05	0.9%	
06	Alexandria	HCBS Waiver	0-18 Years, Male and Female	18	1,005.03	0.0%	
06	Alexandria	HCBS Waiver	19+ Years, Male and Female	18	516.00	0.0%	
06	Alexandria	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4,592.02	0.1%	



DHH Admin. Region	Region Description	COA Description	RC Description	Sn	PM Post noothing Statewide	FY11 Family Planning Percentage	Family Planning PMPM
07	Shreveport	SSI	0-2 Months, Male and Female	\$	14,935.87	0.0%	
07	Shreveport	SSI	3-11 Months, Male and Female	\$	3,432.08	0.0%	
07	Shreveport	SSI	1-5 Years, Male and Female	\$	602.59	0.0%	
07	Shreveport	SSI	6-13 Years, Male and Female	\$	281.21	0.1%	
07	Shreveport	SSI	14-18 Years, Male and Female	\$	272.32	1.9%	
07	Shreveport	SSI	19-44 Years, Male and Female	\$	490.18	0.5%	
07	Shreveport	SSI	45+ Years, Male and Female	\$	724.76	0.0%	
07	Shreveport	Family and Children	0-2 Months, Male and Female	\$	961.59	0.0%	
07	Shreveport	Family and Children	3-11 Months, Male and Female	\$	208.27	0.0%	
07	Shreveport	Family and Children	1-5 Years, Male and Female	\$	98.13	0.0%	
07	Shreveport	Family and Children	6-13 Years, Male and Female	\$	70.61	0.2%	
07	Shreveport	Family and Children	14-18 Years, Female	\$	107.81	7.0%	
07	Shreveport	Family and Children	14-18 Years, Male	\$	69.76	0.0%	
07	Shreveport	Family and Children	19-44 Years, Female	\$	205.81	4.4%	
07	Shreveport	Family and Children	19-44 Years, Male	\$	213.89	0.1%	
07	Shreveport	Family and Children	45+ Years, Female	\$	371.37	0.4%	
07	Shreveport	Family and Children	45+ Years, Male	\$	370.87	0.0%	
07	Shreveport	Foster Care Children	Foster Care, All Ages Male & Female	\$	185.73	1.5%	
07	Shreveport	Breast and Cervical Cancer	BCC, All Ages Female	\$	1,644.05	0.0%	
07	Shreveport	HCBS Waiver	0-18 Years, Male and Female	\$	1,005.03	0.1%	
07	Shreveport	HCBS Waiver	19+ Years, Male and Female	\$	516.00	0.4%	
07	Shreveport	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4,945.63	0.1%	\$ 3.61
08	Monroe	SSI	0-2 Months, Male and Female	\$	14,935.87	0.0%	
08	Monroe	SSI	3-11 Months, Male and Female	\$	3,432.08	0.0%	
08	Monroe	SSI	1-5 Years, Male and Female	\$	602.59	0.0%	
08	Monroe	SSI	6-13 Years, Male and Female	\$	281.21	0.1%	
08	Monroe	SSI	14-18 Years, Male and Female	\$	272.32	1.4%	
08	Monroe	SSI	19-44 Years, Male and Female	\$	498.64	0.5%	
08	Monroe	SSI	45+ Years, Male and Female	\$	781.42	0.0%	
08	Monroe	Family and Children	0-2 Months, Male and Female	\$	1,138.41		
08	Monroe	Family and Children	3-11 Months, Male and Female	\$	287.77	0.0%	
08	Monroe	Family and Children	1-5 Years, Male and Female	\$	135.89	0.0%	
08	Monroe	Family and Children	6-13 Years, Male and Female	\$	84.85	0.2%	
08	Monroe	Family and Children	14-18 Years, Female	\$	113.56		
08	Monroe	Family and Children	14-18 Years, Male	\$	76.14		\$ 0.00
08	Monroe	Family and Children	19-44 Years, Female	\$	194.87	4.8%	
08	Monroe	Family and Children	19-44 Years, Male	\$	213.89		\$ 0.10
08	Monroe	Family and Children	45+ Years, Female	\$	371.37	0.3%	
08	Monroe	Family and Children	45+ Years, Male	\$	370.87	0.0%	\$ -
08	Monroe	Foster Care Children	Foster Care, All Ages Male & Female	\$	185.73		
08	Monroe	Breast and Cervical Cancer	BCC, All Ages Female	\$	1,644.05		
08	Monroe	HCBS Waiver	0-18 Years, Male and Female	\$	1,005.03		
08	Monroe	HCBS Waiver	19+ Years, Male and Female	\$	516.00	0.3%	\$ 1.41
08	Monroe	Maternity Kickpayment	Maternity Kickpayment, All Ages	\$	4,997.67	0.1%	\$ 4.71



## Data Certification Attachment D

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Bobby Jindal GOVERNOR



Bruce D. Greenstein

# State of Louisiana

Department of Health and Hospitals BAYOU HEALTH

Mr. Nick Simmons, FIA, FSA, MAAA Principa

Mercer Government Human Service Consulting 3560 Lenox Road, Suite 2400 Atlanta, GA 30326

- December 31, 2012 Prepaid RE: Actuarial Certification of July 1, 2012 Rates

Dear Nick:

I, Madeline W. McAndrew, BAYOU HEALTH Project Director, for the Louisiana Department of Health and Hospitals (DHH), hereby affirm that the data prepared and submitted to Mercer Government Human Service Consulting (Mercer) for the purpose of certifying the July 1, 2012 – December 31, 2012 Prepaid rates were prepared under my direction, and to the best of my knowledge and belief are accurate, complete, and consistent with the data used to develop the capitation rates. This data includes Fee For Service (FFS) data files and supplemental information on payments made outside of Louisiana's Medicaid Management Information System (MMIS).

Mercer relied on DHH for the collection and processing of the FFS data. Mercer but did assess the data for reasonableness as did not audit the FFS data,

documented in the prepaid rate report.

Signature

Date