

Rudd and Wisdom, Inc.

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January 7, 2021

Ms. Rachel Butler
Chief Actuary
Health and Human Services Commission
4900 North Lamar
Austin, Texas 78751

Re: STAR+PLUS Rate Amendment UMCC 529-12-0002 V2.32, STAR+PLUS Expansion 529-10-0020 V1.36, STAR+PLUS MRSA 529-13-0042 V1.21

Dear Ms. Butler:

This letter amends the report titled State of Texas Medicaid Managed Care STAR+PLUS Program Rate Setting State Fiscal Year 2021 and dated July 8, 2020. The amended FY2021 capitation rates were developed using identical methods and assumptions as the rates described in this report. The amended rates are assumed to be payable for the period March 1, 2021 through August 31, 2021.

A. Summary of the Revisions

Hepatitis C Carveout

In 2015, the Texas Medicaid program began covering 2nd generation Direct Acting Antivirals (DAAs) for Hepatitis C treatment. These drugs were covered by a non-risk payment strategy. After sufficient utilization data was collected, HHSC began including Hepatitis C DAA medications in capitated services effective September 1, 2018.

Effective March 1, 2021, HHSC will make significant changes to the prior authorization criteria for Hepatitis C DAA medications. As a result of the changes, we are unable to project the utilization of these high-cost services. Therefore, HHSC is modifying the MCO capitation rates for the STAR and STAR+PLUS managed care programs to remove Hepatitis C DAA medications until sufficient utilization data has been accumulated. At such time, the Hepatitis C DAA medications will be carved back into the MCO capitation rates. Capitation rates for the other managed care programs are unaffected by this change as the utilization of Hepatitis C DAA medications is immaterial.

UHRIP

Effective December 1, 2017, HHSC implemented a pilot of the Uniform Hospital Rate Increase Program (UHRIP) in the Bexar and El Paso service delivery areas. The program expanded statewide effective March 1, 2018. UHRIP is a Medicaid managed care hospital directed payment program authorized under federal regulations at 42 CFR 438.6(c). CMS approved HHSC's statewide implementation of the program on August 18, 2017. The UHRIP program increases the reimbursement to contracted hospitals by a level percentage that varies by hospital class.

There are two revisions to the UHRIP program that will be effective March 1, 2021 and impact the applicable UHRIP premium add on.

1. UHRIP percent increases have been recalculated for Institutes of Mental Disease (IMDs). There have been no changes for any other UHRIP class.
2. Hospital networks of the individual MCOs have been updated to reflect the most recent network information available.

HHSC has identified the following classes of hospitals within each SDA and the rate increase for each which is applicable to the period March 1, 2021 through August 31, 2021:

<u>SDA</u>	<u>Children's</u>	<u>IMD</u>	<u>Non- Urban Public</u>	<u>Other</u>	<u>Rural Private</u>	<u>Rural Public</u>	<u>State- Owned</u>	<u>Urban Public</u>
Bexar	26%	34%	56%	63%	40%	40%	0%	40%
Dallas	43%	43%	63%	66%	63%	0%	149%	63%
El Paso	57%	19%	0%	59%	0%	0%	0%	52%
Harris	11%	32%	73%	172%	73%	29%	0%	70%
Hidalgo	0%	18%	0%	69%	64%	64%	0%	0%
Jefferson	0%	0%	0%	129%	65%	65%	0%	0%
Lubbock	18%	32%	0%	60%	48%	79%	0%	60%
Nueces	0%	0%	69%	62%	62%	62%	0%	62%
Tarrant	53%	40%	0%	60%	53%	53%	0%	113%
Travis	13%	56%	0%	58%	58%	0%	0%	120%
MRSA Central	0%	68%	0%	69%	51%	51%	0%	0%
MRSA Northeast	0%	0%	0%	84%	59%	24%	0%	0%
MRSA West	0%	31%	81%	75%	47%	60%	0%	81%

There are no other changes to the UHRIP program associated with this amendment.

QIPP

The QIPP component of the premium has been revised as a result of several changes within the nursing facility provider community. These changes include SDA shifts for three nursing facilities and one terminated nursing facility. These changes shift the allocation of Medicaid days and/or funds across the SDAs resulting in adjustments to the premium component. These changes do not impact the period September 1, 2020 through February 28, 2021.

There are no other changes to the QIPP program associated with this amendment.

B. Report Amendments

This section of the letter details the amendments to the original actuarial report.

Section I. Introduction

No changes applicable to this section. The same data sources were utilized in the calculation of this mid-year adjustment.

Section II. Overview of Rate Setting Methodology

The rates have been calculated for the same service delivery areas, risk groups and services as outlined in the original report using the same general methodology.

The only difference between the rating methodology outlined in the original report and this amendment is the carve-out of Hepatitis C DAA medications, application of the updated UHRIP increases by hospital class and SDA and revisions to the QIPP add-on component of the premium.

Section III. Adjustment Factors

The following language has been added to this section.

Hepatitis C Drug Carve-out

In 2015, the Texas Medicaid program began covering 2nd generation Direct Acting Antivirals (DAAs) for Hepatitis C treatment. These drugs were covered by a non-risk payment strategy. After sufficient utilization data was collected, HHSC began including Hepatitis C DAA medications in capitated services effective September 1, 2018.

Effective March 1, 2021, HHSC will make significant changes to the prior authorization criteria for Hepatitis C DAA medications. As a result of the changes, we are unable to project the utilization of these high-cost services. Therefore, HHSC is modifying the MCO capitation rates for the STAR and STAR+PLUS managed care programs to remove Hepatitis C DAA medications until sufficient utilization data has been accumulated. At such time, the Hepatitis C DAA medications will be carved back into the MCO capitation rates. Capitation rates for the other managed care programs are unaffected by this change as the utilization of Hepatitis C DAA medications is immaterial.

The Quality Incentive Payment Program for Nursing Facilities (QIPP) section has been updated to read:

Effective September 1, 2017 HHSC implemented a Quality Incentive Payment Program (QIPP) as a performance-based payment platform designed to incentivize nursing facilities to improve on the quality and innovation of their services. As approved by CMS on August 3, 2020, QIPP Year Four, effective September 1, 2020, the program will encompass one uniform rate increase component and three performance-based payment components. Program incentive payments are dependent on improvement in several indices of success using the CMS five-star rating system as well as program specific targets.

Attachment 9 presents the development of the QIPP add-on amounts to be included in the capitation rates effective September 1, 2020 along with additional information concerning the QIPP program. Revisions to the total available funding impact the program effective March 1, 2021. Attachment 9 – Exhibit B Revised presents the development of the revised QIPP add-on amounts to be included in the capitation rates effective March 1, 2021.

The Uniform Hospital Reimbursement Program (UHRIP) section has been updated to read:

Effective December 1, 2017, HHSC implemented a pilot of the Uniform Hospital Rate Increase Program (UHRIP) in the Bexar and El Paso service delivery areas. The program expanded statewide effective March 1, 2018. UHRIP is a Medicaid managed care hospital directed payment program authorized under federal regulations at 42 CFR 438.6(c). CMS approved HHSC’s statewide implementation of the program on August 18, 2017. The UHRIP program increases the reimbursement to contracted hospitals by a level percentage that varies by hospital class. HHSC has identified the following classes of hospitals within each SDA and the rate increase for each.

Effective September 1, 2020 – February 28, 2021

<u>SDA</u>	<u>Children's</u>	<u>IMD</u>	<u>Non-Urban Public</u>	<u>Other</u>	<u>Rural Private</u>	<u>Rural Public</u>	<u>State-Owned</u>	<u>Urban Public</u>
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Nueces	0%	0%	69%	62%	62%	62%	0%	62%
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Travis	13%	0%	0%	58%	58%	0%	0%	120%
MRSA Central	0%	0%	0%	69%	51%	51%	0%	0%
MRSA Northeast	0%	0%	0%	84%	59%	24%	0%	0%
MRSA West	0%	0%	81%	75%	47%	60%	0%	81%

Effective March 1, 2021 – August 31, 2021

<u>SDA</u>	<u>Children's</u>	<u>IMD</u>	<u>Non-Urban Public</u>	<u>Other</u>	<u>Rural Private</u>	<u>Rural Public</u>	<u>State-Owned</u>	<u>Urban Public</u>
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MRSA West	0%	31%	81%	75%	47%	60%	0%	81%

All MCOs are required to increase their reimbursement rates to contracted hospitals by the established percentage rate increase. Attachment 10 - Revised presents the development of the UHRIP add-on amounts to be included in the capitation rates effective March 1, 2021 along with additional information concerning the UHRIP program.

No other changes are applicable to this section.

Section IV. Administrative Fees, Taxes and Risk Margin

No changes applicable to this section.

Section V. Summary

The tables in this section are replaced in their entirety with the following mid-year rates effective March 1, 2021 through August 31, 2021.

Health Plan	Medicaid Only OCC	Medicaid Only HCBS	Dual Eligible OCC	Dual Eligible HCBS
Monthly Premium Rates				
Amerigroup - Bexar	\$1,541.98	\$5,112.00	\$449.39	\$2,167.88
Molina - Bexar	1,639.46	4,795.45	455.10	2,047.68
Superior - Bexar	1,703.73	5,352.42	489.32	2,263.96
Molina - Dallas	1,702.21	4,752.11	485.39	1,972.99
Superior - Dallas	1,550.37	5,020.10	403.58	2,025.00
Amerigroup - El Paso	1,706.87	4,718.55	575.16	2,236.51
Molina - El Paso	1,848.98	5,022.43	662.62	2,217.34
Amerigroup - Harris	2,108.44	7,191.52	392.67	2,567.94
Molina - Harris	1,878.89	6,138.08	404.44	2,490.27
United - Harris	2,285.44	6,330.51	454.73	2,404.76
Health Spring - Hidalgo	2,025.10	5,531.24	1,045.76	2,688.49
Molina - Hidalgo	1,938.00	5,393.07	958.09	2,628.16
Superior - Hidalgo	2,167.96	5,737.22	1,167.96	2,690.02
Amerigroup - Jefferson	1,691.14	5,867.17	334.18	1,982.63
Molina - Jefferson	1,656.49	5,077.71	311.87	1,845.53
United - Jefferson	1,977.94	5,020.91	237.26	1,763.59
Amerigroup - Lubbock	1,555.07	4,644.31	196.66	1,559.44
Superior - Lubbock	1,425.69	5,038.97	202.98	1,659.36
Superior - Nueces	1,676.80	5,043.75	616.35	2,267.86
United - Nueces	2,005.89	5,004.35	565.18	2,205.85
Amerigroup - Tarrant	1,721.80	5,359.56	373.17	1,861.05
Health Spring - Tarrant	1,468.96	5,205.81	306.24	2,011.76
Amerigroup - Travis	1,556.88	5,772.87	395.12	2,095.91
United - Travis	1,631.52	5,631.88	242.72	2,073.89
Superior - MRSA Central	1,495.46	5,331.82	259.65	1,914.50
United - MRSA Central	1,571.54	5,489.92	279.59	1,984.37
Health Spring - MRSA Northeast	1,377.14	5,066.17	274.16	1,919.07
United - MRSA Northeast	1,578.60	5,309.35	302.67	1,639.24
Amerigroup - MRSA West	1,514.47	5,549.56	322.63	1,750.31
Superior - MRSA West	1,514.01	4,915.58	280.61	1,745.94

Health Plan	Medicaid Only NF	Dual Eligible NF	IDD Over 21	MBCCP
Monthly Premium Rates				
Amerigroup - Bexar	\$8,840.97	\$6,120.04	\$1,048.87	\$3,850.87
Molina - Bexar	8,732.89	6,120.04	1,010.49	4,485.22
Superior - Bexar	9,037.94	6,120.04	1,310.08	3,864.32
Molina - Dallas	9,390.31	6,242.97	871.11	3,771.21
Superior - Dallas	10,077.38	6,242.97	995.38	4,922.52
Amerigroup - El Paso	9,679.09	5,624.36	1,621.94	3,335.09
Molina - El Paso	9,664.36	5,624.36	1,823.36	2,883.45
Amerigroup - Harris	10,428.01	5,975.69	1,334.36	5,482.33
Molina - Harris	10,049.87	5,975.69	1,145.51	5,943.30
United - Harris	10,335.42	5,975.69	1,448.77	4,584.63
Health Spring - Hidalgo	9,843.65	6,401.81	1,070.85	3,288.07
Molina - Hidalgo	9,729.73	6,401.81	1,130.26	4,229.55
Superior - Hidalgo	10,169.71	6,401.81	1,316.40	3,696.06
Amerigroup - Jefferson	9,412.09	5,510.32	1,172.27	4,565.09
Molina - Jefferson	9,192.72	5,510.32	1,149.83	4,571.55
United - Jefferson	8,933.82	5,510.32	1,288.94	4,701.88
Amerigroup - Lubbock	8,810.42	6,084.12	971.98	4,220.37
Superior - Lubbock	8,911.91	6,084.12	1,081.07	4,369.47
Superior - Nueces	8,722.45	6,185.42	1,050.18	3,680.34
United - Nueces	8,667.75	6,185.42	1,090.71	3,772.38
Amerigroup - Tarrant	8,970.30	5,904.44	1,120.95	4,266.45
Health Spring - Tarrant	8,588.70	5,904.44	873.25	4,217.82
Amerigroup - Travis	8,882.53	6,495.63	1,046.19	3,453.41
United - Travis	9,131.97	6,495.63	1,169.82	3,923.74
Superior - MRSA Central	8,567.70	5,798.83	1,042.98	4,332.94
United - MRSA Central	8,509.80	5,798.83	1,188.03	5,588.18
Health Spring - MRSA Northeast	9,044.81	5,826.86	960.76	4,094.98
United - MRSA Northeast	9,037.32	5,826.86	1,063.60	3,387.68
Amerigroup - MRSA West	8,966.94	6,016.92	1,208.15	3,271.74
Superior - MRSA West	8,830.46	6,016.92	1,228.90	3,663.04

Section VI. Actuarial Certification of FY2021 STAR+PLUS Premium Rate

We, Evan L. Dial, Khiem D. Ngo, David G. Wilkes and Dustin J. Kim are with the firm Rudd and Wisdom, Inc., Consulting Actuaries (Rudd and Wisdom). Three are Fellows of the Society of Actuaries (FSAs) and one is an Associate of the Society of Actuaries (ASA). We are all members of the American Academy of Actuaries and meet the Academy's qualification standards for rendering this opinion.

Rudd and Wisdom has been retained by the Texas Health and Human Services Commission (HHSC) to assist in the development of the STAR+PLUS premium rates for the period March 1, 2021 through August 31, 2021 and to provide the actuarial certification required under Centers for Medicare and Medicaid Services (CMS) requirements 42 CFR 438.4.

We certify that the amended FY2021 premium rates developed by HHSC and Rudd and Wisdom satisfy the following:

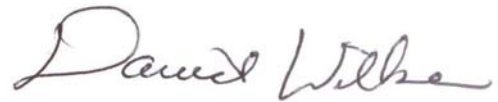
- (a) The premium rates have been developed in accordance with generally accepted actuarial principles and practices;
- (b) The premium rates are appropriate for the populations and services covered under the managed care contract; and
- (c) The premium rates are actuarially sound as defined in the regulations.

We have relied on historical experience data and program information provided to us by HHSC. We have reviewed the data for reasonableness but have not audited the data.

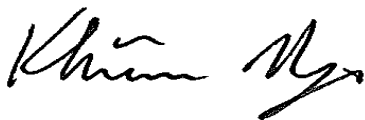
Please note that actual health plan contractor experience will differ from these projections. Rudd and Wisdom has developed these rates on behalf of the State to demonstrate compliance with the CMS requirements under 42 CFR 438.3(c), 438.3(e), 438.4, 438.5, 438.6 and 438.7. Any health plan contracting with the State should analyze its own projected premium needs before deciding whether to contract with the State.



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Dustin J. Kim, A.S.A., M.A.A.A.

Section VII. Attachments

The following sections indicate any revisions applicable to each of the attachments in the original actuarial report dated July 8, 2020.

Attachment 1 - Summary of FY2021 STAR+PLUS Rating Analysis

Exhibit A Revised. This exhibit presents summary information regarding the FY2021 rates. Included on the exhibit are current (September 1, 2020 – February 28, 2021) premium rates split between medical (acute care and long-term care), prescription drug, NAIP, QIPP and UHRIP rates; March 1, 2021 through August 31, 2021 premium rates split between medical (acute care and long-term care), prescription drug, NAIP, QIPP and UHRIP rates and a comparison of September 1, 2020 and March 1, 2021 premium rates.

Exhibit B Revised. This exhibit presents a comparison of the projected expenditures under the current (September 1, 2020 through February 28, 2021) premium rates and the March 1, 2021 through August 31, 2021 premium rates. The projection is split by each component.

The reasons for the rate changes shown in Exhibit A Revised are due solely to the carve-out of Hepatitis C DAA medications and revisions in the UHRIP and QIPP program as described above. There are no other changes to the premium rates effective March 1, 2021.

Attachment 2 - Individual Health Plan Experience Analysis

No changes applicable to this section.

Attachment 3 - Community Experience Analysis

The pharmacy community experience analysis has been updated to include the Hepatitis C Carve-out adjustment factors.

Attachment 4 - Trend Analysis

No changes applicable to this section.

Attachment 5 - Provider Reimbursement and Benefit Revisions Effective During FY2019, FY2020 and FY2021

The following language has been added to this section.

Effective March 1, 2021, HHSC will make significant changes to the prior authorization criteria for Hepatitis C DAA medications. As a result of the changes, we are unable to project the utilization of these high-cost services. Therefore, HHSC is modifying the MCO capitation rates for the STAR and STAR+PLUS managed care programs to remove Hepatitis C DAA medications until sufficient utilization data has been accumulated. Exhibit M presents a summary of the derivation of the rating adjustment factors.

Attachment 6 – Acuity Risk Adjustment – Acute Care

There have been no changes to this section.

Attachment 7 – Acuity Risk Adjustment – Long Term Care

There have been no changes to this section.

Attachment 8 – Network Access Improvement Program (NAIP)

There have been no changes to this section.

Attachment 9 – Quality Incentive Payment Program (QIPP)

Effective March 1, 2021 the distribution of Medicaid days and funding for the QIPP has been adjusted due to changes in the nursing facility provider community resulting from provider SDA shifts and terminations triggering a revision to the QIPP add-on amounts included in the capitation rates. Exhibit B Revised presents a summary of the QIPP add-on amounts effective during the period March 1, 2021 through August 31, 2021. There have been no other changes to the QIPP program.

Attachment 10 – Uniform Hospital Rate Increase Program

Effective December 1, 2017, HHSC implemented a pilot of the Uniform Hospital Rate Increase Program (UHRIP) in the Bexar and El Paso service delivery areas. CMS approved HHSC's statewide implementation of the program on August 18, 2017 and the program was expanded statewide March 1, 2018. UHRIP is a Medicaid managed care hospital directed payment program authorized under federal regulation 42 CFR 438.6(c). UHRIP increases the reimbursement to contracted hospitals by a level percentage that varies by hospital class. HHSC has identified the following classes of hospitals within each SDA and the rate increase for each:

Effective September 1, 2020 – February 28, 2021

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Effective March 1, 2021 – August 31, 2021

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MRSA West	0%	31%	81%	75%	47%	60%	0%	81%

All MCOs within the SDA will be required to increase their reimbursement rates to contracted hospitals by the established percentage rate increase.

UHRIP will only apply to the STAR and STAR+PLUS Medicaid managed care programs. The UHRIP increase will apply to all services provided by a hospital with the following exceptions:

1. Services provided to members at a non-contracted facility.
2. Non-emergent services provided in an emergency room for non-rural facilities.
3. Services provided to a member at an out of area facility if the facility is located in a SDA in which the MCO does not participate in the STAR or STAR+PLUS program.
4. Outpatient services provided at an Institute for Mental Disease (IMD).
5. Service provided at an IMD to members over age 21.

The percentage increases by hospital were determined by HHSC according to the following methodology:

Providers were given the same percent increases as they received in FY2020, except in cases where providers had Medicare upper payment limit (UPL) room, meaning they were paid less in Medicaid compared to what they would have been paid in Medicare for the same services. Those with this room received a percentage increase up to their Medicare UPL if that room resulted in a higher rate increase than what the provider received in the FY2020 UHRIP.

In the Texas Medicaid program, the actuary is not involved in the development of provider fee schedules or reimbursement arrangements. The final UHRIP increases were determined by HHSC and the MCOs are mandated to include such increases in their provider reimbursement arrangements.

The impact of the UHRIP increase was then estimated by collecting the encounter data for all UHRIP-eligible facilities. Exclusions to the data were then applied based on the contracting status of the MCO, facility/member location and emergency room status. The UHRIP-eligible

claims were then increased by the applicable reimbursement change and the impact on the base period for each individual MCO was determined.

The UHRIP component of the premium for the period September 1, 2020 through February 28, 2021 is unchanged from the amounts determined in the original actuarial report. The calculation of the revised UHRIP component of the premium described below is based on the exact same methodology described in the original report applying the updated SDA specific increases by hospital class.

Exhibit A Revised presents a summary of the derivation of the rating adjustment factors which have been calculated at the individual plan level due to variations in each MCO's network configuration. The adjustments have been calculated by applying the applicable percentage increase to each MCO's FY2019 encounter data. Unlike other adjustment factors which are applied at the community level, the UHRIP adjustment factors have been calculated at the individual plan level due to the fact that each MCO may have varying levels of utilization at each class of hospital and could be disadvantaged if their actual utilization is higher or lower than the SDA average for a given class.

Exhibit B Revised presents a summary of the calculation of the UHRIP premium add on rates by MCO for all risk groups. The add on is calculated as an MCO-specific amount due to the varying impacts the mandated increases will have on expected reimbursement for each MCO. The add-on is calculated as the projected FY2021 claims increased by the applicable UHRIP adjustment factor plus provision for risk margin, taxes and administrative fees.

The UHRIP component of the rate includes separate administrative fees, taxes and risk margin from the medical and pharmacy components of the rate. These amounts are defined as follows:

- Administrative Fee – 2.5% of premium
- Risk Margin – 1.5% of premium (STAR) or 1.75% of premium (STAR+PLUS)
- Premium Tax – 1.75% of premium
- Health Insurance Providers Fee – not applicable

The 2.5% administrative fee was developed based on discussions between HHSC, the MCOs and the contracted hospitals. While there is an expectation of increased administrative cost associated with UHRIP as a result of contract negotiations, claims processing and other system changes it is not expected that this increased burden will be significant. As a result, the standard 5.25% of premium applicable to the overall rate development was reduced to 2.5% for the UHRIP component only.

The 1.5% (STAR) or 1.75% (STAR+PLUS) risk margin is set equal to the risk margin used in the overall rate development.

The 1.75% premium tax remains unchanged from the overall rate development.

The ACA Health Insurance Providers Fee (HIPF) is not applicable to the FY2021 UHRIP premium rates.

The revised UHRIP premiums have been accounted for in the amended FY2021 STAR+PLUS rate development in a manner that is consistent with the pre-print that is currently under CMS review.

Attachment 11– Community First Choice Initiative (CFC)

There have been no changes to this section.

Attachment 12– Pay for Quality Program

There have been no changes to this section.

Attachment 13– FY2021 STAR+PLUS Rate Certification Index

FY2021 STAR+PLUS Rate Certification Index

The index below includes the pages of this report that correspond to the applicable sections of the 2020-2021 Medicaid Managed Care Rate Development Guide, dated July 2020.

Section I. Medicaid Managed Care Rates

1. General Information

A. Rate Development Standards

- i. Rates are for the period March 1, 2021 through August 31, 2021.
- ii. (a) The certification letter is on page 7 of the amendment letter.

(b) The final capitation rates are shown on pages 5 and 6 of the amendment letter.

(c) (i) See pages 1 and 4 through 6 of the original report.

(ii) The rates included in this amendment are for the period March 1, 2021 through August 31, 2021.

(iii) See page 1 of the original report.

(iv) There have been no changes to program eligibility; however, there were changes in risk group classification as discussed on pages 12, 184-185 and 207-210 of the original report. No further changes in this amendment.

(v) Pages 242-246 (NAIP), 247-259 (QIPP), 260-275 (UHRIP) and 283-285 (P4Q) of the original report. Changes to the QIPP and UHRIP

programs are detailed on page 2 of the amendment letter.

(vi) Not applicable.

iii. Acknowledged.

iv. Acknowledged.

v. Acknowledged.

vi. Acknowledged.

vii. Acknowledged.

viii. Acknowledged.

ix. Acknowledged.

B. Appropriate Documentation

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. See pages 276 through 282 of the original report.

v. (a) See pages 21 through 42 of the amendment letter.

(b) Not applicable. All rating adjustment factors have been included in the report.

vi. Not applicable. While amendments may be necessary in future months there are no known at this time.

2. Data

A. Rate Development Standards

i. (a) Acknowledged.

(b) Acknowledged.

(c) Acknowledged.

(d) Not applicable.

B. Appropriate Documentation

i. (a) See pages 1 through 3 of the original report.

ii. (a) See pages 1 through 3 of the original report.

(b) See pages 2 through 3 of the original report.

(c) See pages 2 through 3 of the original report.

(d) Not applicable.

iii. (a) Base period data is fully credible.

(b) See page 4 of the original report.

(c) No errors found in the data.

(d) See pages 183 through 216 of the original report and pages 69 and 70 of the amendment letter.

(e) Value added services and non-capitated services have been excluded from the analysis.

3. Projected Benefit Costs and Trends

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

v. See page 184 and pages 199 through 202 of the original report.

B. Appropriate Documentation

- i. See pages 5 and 6 and Attachment 1 Revised pages 21 through 42 of the amendment letter.
- ii. (a) See Attachment 3 pages 52 through 157 of the original report and Attachment 3 Revised pages 43 through 68 of the amendment letter.

(b) The only changes since the last certification are outlined on pages 1 and 2 of the amendment letter.

(c) All recoupments and recoveries resulting from overpayments to providers have been netted out of the claim payments used in the rate development. MCOs are required to adjust encounter data to remove all overpayments and correct the submitted information. Any provider recoveries not adjusted for in the submitted encounter data are excluded from the base period as a negative add-on payment.

iii. (a) See Attachment 4 pages 158 through 182 of the original report.

(b) See Attachment 4 pages 158 through 182 of the original report.

(c) See Attachment 4 pages 158 through 182 of the original report.

(d) See Attachment 4 pages 158 through 182 of the original report.

(e) Not applicable.
- iv. Not applicable.
- v. The STAR+PLUS program stipulates the following provisions related to in lieu of services:
 - The MCO may provide inpatient services for acute psychiatric conditions in a free-standing psychiatric hospital in lieu of an acute care inpatient hospital setting.
 - The MCO may provide substance use disorder treatment services in a chemical dependency treatment facility in lieu of an acute care inpatient hospital setting.
 - For individuals between the ages of 21 and 64, services are provided in IMDs only in lieu of an acute care hospital setting. IMD services for individuals under age 21 and age 65 and over are covered pursuant to the Texas state plan.

The cost for in lieu of services is not tracked from other services and are included in the rate development and are not treated differently than any other

category of service. Historically these services have made up less than 1.0% of total base period claims.

vi. (a) Restorative enrollment can occur when an individual is deemed to have been Medicaid eligible during a prior period. If the individual was eligible for and enrolled in Medicaid managed care during the prior six months, then the individual is retrospectively enrolled in the same managed care plan as their prior enrollment segment. The managed care plan is then retrospectively responsible for all Medicaid expenses incurred during this retrospective period and is also paid a retrospective premium for this time period.

(b) All claims paid during retroactive enrollment periods are included in the base period data used to develop the FY2021 premium rate.

(c) All enrollment data during retroactive enrollment periods are included in the base period data used to develop the FY2021 premium rate.

(d) No adjustments are necessary to account for retroactive enrollment periods because the enrollment criteria has not changed from the base period to the rating period. All retroactive enrollment and claims information has been included in the base period data, the trend calculations and all other adjustment factors.

vii. See Attachment 5 pages 183 through 216 of the original report and Attachment 5 Revised pages 69 through 70 of the amendment letter.

viii. See Attachment 5 pages 183 through 216 of the original report and Attachment 5 Revised pages 69 through 70 of the amendment letter.

4. Special Contract Provisions Related to Payment

A. Incentive Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

See Attachment 12 pages 283 through 285 of the original report.

B. Withhold Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

See Attachment 12 pages 283 through 285 of the original report.

C. Risk-Sharing Arrangements

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

HHSC includes an experience rebate provision in its uniform managed care contracts which requires the MCOs to return a portion of net income before taxes if greater than the specified percentages. The net income is measured by the financial statistical reports (FSRs) submitted by the MCOs and audited by an external auditor. Net income is aggregated across all programs and service delivery areas. The aggregated net income is shared as follows:

Pre-tax Income as a % of Revenues	MCO Share	HHSC Share
≤ 3%	100%	0%
> 3% and ≤ 5%	80%	20%
> 5% and ≤ 7%	60%	40%
> 7% and ≤ 9%	40%	60%
> 9% and ≤ 12%	20%	80%
> 12%	0%	100%

D. Delivery System and Provider Payment Initiatives

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 9 pages 247 through 259 and Attachment 10 pages 260 through 275 of the original report and Attachment 9 Revised page 71 and Attachment 10 Revised pages 72 through 84 of the amendment letter for a description of the QIPP and UHRIP programs. See Attachment 1 Revised page 42 of the amendment letter for the estimated value of these programs.

(b) A minimum fee schedule for nursing facility reimbursement is a statutory requirement per Texas Government Section Code 533.00251(c). This requirement has been in place since nursing facility services were carved into the STAR+PLUS program on March 1, 2015. Reimbursement as a result of this minimum fee schedule is reflected in the historical nursing facility claims data used as the base period and all other rating analysis and requires no further adjustments in the FY2021 rate development.

(c) Confirmed.

E. Pass-Through Payments

i. Rate Development Standards

Acknowledged.

ii. Appropriate Documentation

(a) See Attachment 8 pages 242 through 246 of the original report.

(b) See Attachment 8 pages 242 through 246 of the original report.

(c) See Attachment 8 pages 242 through 246 of the original report.

5. Projected Non-Benefit Costs

A. Rate Development Standards

i. Acknowledged.

ii. Acknowledged.

iii. Acknowledged.

iv. Acknowledged.

B. Appropriate Documentation

i. See pages 16-17 of the original report.

ii. See pages 16-17 of the original report.

iii. See pages 16-17 of the original report.

iv. (a) See pages 16-17 of the original report.

(b) Not applicable.

(c) Not applicable.

(d) See pages 16-17 of the original report.

(e) See Attachment 1 Revised pages 21 through 42 of the amendment letter.

(f) See pages 16-17 of the original report.

6. Risk Adjustment and Acuity Adjustments

A. Rate Development Standards

- i. Acknowledged.
- ii. Acknowledged.
- iii. Acknowledged.

B. Appropriate Documentation

- i. See Attachments 6 and 7 pages 217 through 241 of the original report.
- ii. Not applicable, risk adjustment is only applied on a prospective basis.
- iii. No material changes have been made to the risk adjustment model applied to acute care or long term care other than annual updates of the data since the last rating period. Risk adjustment has been applied in a budget neutral manner in accordance with 42 CFR 438.5(g).
- iv. See Attachments 6 and 7 pages 217 through 241 of the original report.

Section II. Medicaid Managed Care Rates with Long-Term Services and Supports

1. Managed Long-Term Services and Supports

- A. Acknowledged.
- B. Long term care rate development follows the same methodology as all other services described throughout the report.
- C. Appropriate Documentation

- i. (a) Rates are set for the risk groups specified on page 5 of the original report. This is a “non-blended” approach.
- (b) Rate cells are specified on page 5 of the original report. Description of the rate setting methodology is included in Attachment 3 pages 52 through 157 of the original report and Attachment 3 Revised pages 43 through 68 of the amendment letter. All trend analysis and other adjustment factors follow the same methodology as described throughout the report.
- (c) Not applicable.
- (d) LTSS has been managed under STAR+PLUS since its inception. The impact of managing these services on utilization and unit costs of services is reflected in the base period utilized in the rate development and requires no further adjustments.
- (e) LTSS has been managed under STAR+PLUS since its inception. The impact of managing these services on utilization and unit costs of services is reflected in the base period utilized in the rate development and requires no further adjustments.
- ii. The development of the administrative cost is described on pages 16 and 17 of the original report. Service coordination expenditures are based on the amounts reported by the MCO as discussed on page 2 of the original report.
- iii. The rate setting is based on historical managed care data for all services, including long term care. The managed care data is fully credible and therefore no reliance is necessary on outside studies or research.

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 Acute Care Premium Rates pmpm								
Amerigroup - Bexar	634.59	1,518.94	0.00	0.00	1,343.84	0.00	465.59	2,565.08
Molina - Bexar	642.73	1,478.18	0.00	0.00	1,308.38	0.00	444.98	2,804.12
Superior - Bexar	660.66	1,544.71	0.00	0.00	1,391.28	0.00	564.02	2,439.79
Molina - Dallas	709.65	1,523.39	0.00	0.00	1,881.38	0.00	429.66	2,390.91
Superior - Dallas	680.45	1,681.17	0.00	0.00	2,206.60	0.00	479.36	3,101.05
Amerigroup - El Paso	683.54	1,417.59	0.00	0.00	2,658.87	0.00	716.38	1,842.74
Molina - El Paso	701.70	1,568.91	0.00	0.00	2,461.93	0.00	806.91	1,591.25
Amerigroup - Harris	741.11	1,871.74	0.00	0.00	1,745.87	0.00	476.33	2,533.95
Molina - Harris	666.70	1,631.96	0.00	0.00	1,684.14	0.00	406.14	2,434.72
United - Harris	815.94	1,895.52	0.00	0.00	1,855.85	0.00	540.42	2,735.24
Health Spring - Hidalgo	559.21	1,457.25	0.00	0.00	2,387.12	0.00	546.42	1,787.27
Molina - Hidalgo	543.86	1,382.26	0.00	0.00	2,187.49	0.00	571.14	2,252.22
Superior - Hidalgo	600.92	1,516.09	0.00	0.00	2,536.06	0.00	647.39	1,940.28
Amerigroup - Jefferson	654.02	1,911.71	0.00	0.00	1,678.05	0.00	421.59	2,417.80
Molina - Jefferson	640.89	1,595.70	0.00	0.00	1,497.33	0.00	386.84	2,384.28
United - Jefferson	763.92	1,726.47	0.00	0.00	1,524.27	0.00	467.06	2,778.71
Amerigroup - Lubbock	696.54	1,548.48	0.00	0.00	1,166.55	0.00	433.27	2,203.73
Superior - Lubbock	653.05	1,741.20	0.00	0.00	1,282.55	0.00	500.13	2,460.98
Superior - Nueces	583.86	1,427.44	0.00	0.00	1,258.38	0.00	442.88	2,222.55
United - Nueces	670.12	1,365.74	0.00	0.00	1,321.10	0.00	418.45	2,426.76
Amerigroup - Tarrant	727.39	1,778.34	0.00	0.00	1,590.52	0.00	476.01	2,630.82
Health Spring - Tarrant	620.86	1,709.61	0.00	0.00	1,428.54	0.00	382.89	2,595.72
Amerigroup - Travis	629.47	1,415.07	0.00	0.00	936.22	0.00	382.58	2,269.14
United - Travis	673.27	1,480.33	0.00	0.00	1,120.59	0.00	434.00	2,757.40
Superior - MRSA Central	659.00	1,566.73	0.00	0.00	1,330.69	0.00	435.51	2,493.90
United - MRSA Central	669.93	1,609.44	0.00	0.00	1,292.55	0.00	484.93	3,071.31
Health Spring - MRSA Northeast	561.67	1,478.23	0.00	0.00	1,441.68	0.00	430.31	2,618.20
United - MRSA Northeast	638.69	1,716.08	0.00	0.00	1,493.51	0.00	471.67	2,228.08
Amerigroup - MRSA West	634.38	1,818.70	0.00	0.00	1,404.17	0.00	490.74	2,147.45
Superior - MRSA West	633.65	1,528.63	0.00	0.00	1,369.22	0.00	510.61	2,381.88

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 Long Term Care Premium Rates pmpm								
Amerigroup - Bexar	261.27	2,146.84	449.39	2,167.88	4,715.61	4,407.19	0.00	103.38
Molina - Bexar	307.35	1,856.49	455.10	2,047.68	4,715.61	4,407.19	0.00	103.38
Superior - Bexar	325.88	2,255.65	489.32	2,263.96	4,715.61	4,407.19	0.00	103.38
Molina - Dallas	349.28	1,855.59	485.39	1,972.99	4,622.95	4,301.39	0.00	125.43
Superior - Dallas	248.42	1,902.89	403.58	2,025.00	4,622.95	4,301.39	0.00	125.43
Amerigroup - El Paso	332.69	2,037.37	575.16	2,236.51	4,653.01	4,521.89	0.00	121.59
Molina - El Paso	426.74	1,938.47	662.62	2,217.34	4,653.01	4,521.89	0.00	121.59
Amerigroup - Harris	279.77	2,753.41	392.67	2,567.94	4,837.14	4,315.81	0.00	109.55
Molina - Harris	287.71	2,580.53	404.44	2,490.27	4,837.14	4,315.81	0.00	109.55
United - Harris	353.05	2,491.65	454.73	2,404.76	4,837.14	4,315.81	0.00	109.55
Health Spring - Hidalgo	828.37	2,727.15	1,045.76	2,688.49	4,547.60	4,936.00	0.00	419.62
Molina - Hidalgo	749.07	2,652.97	958.09	2,628.16	4,547.60	4,936.00	0.00	419.62
Superior - Hidalgo	857.88	2,750.68	1,167.96	2,690.02	4,547.60	4,936.00	0.00	419.62
Amerigroup - Jefferson	195.85	2,181.93	334.18	1,982.63	4,374.13	3,948.85	0.00	93.10
Molina - Jefferson	216.82	1,819.53	311.87	1,845.53	4,374.13	3,948.85	0.00	93.10
United - Jefferson	199.76	1,781.76	237.26	1,763.59	4,374.13	3,948.85	0.00	93.10
Amerigroup - Lubbock	108.36	1,679.60	196.66	1,559.44	4,576.60	4,132.89	0.00	121.64
Superior - Lubbock	137.86	1,798.79	202.98	1,659.36	4,576.60	4,132.89	0.00	121.64
Superior - Nueces	405.64	2,177.04	616.35	2,267.86	4,458.05	4,444.01	0.00	203.84
United - Nueces	471.34	2,226.80	565.18	2,205.85	4,458.05	4,444.01	0.00	203.84
Amerigroup - Tarrant	184.17	1,924.34	373.17	1,861.05	4,146.70	4,085.51	0.00	84.18
Health Spring - Tarrant	190.66	1,975.94	306.24	2,011.76	4,146.70	4,085.51	0.00	84.18
Amerigroup - Travis	271.55	2,600.16	395.12	2,095.91	4,532.42	4,278.38	0.00	107.06
United - Travis	203.48	2,410.91	242.72	2,073.89	4,532.42	4,278.38	0.00	107.06
Superior - MRSA Central	187.32	2,053.45	259.65	1,914.50	4,634.78	4,284.53	0.00	101.58
United - MRSA Central	186.15	2,152.15	279.59	1,984.37	4,634.78	4,284.53	0.00	101.58
Health Spring - MRSA Northeast	207.09	2,091.93	274.16	1,919.07	4,530.17	4,215.41	0.00	118.38
United - MRSA Northeast	228.48	1,897.42	302.67	1,639.24	4,530.17	4,215.41	0.00	118.38
Amerigroup - MRSA West	144.89	1,890.97	322.63	1,750.31	4,318.30	4,074.57	0.00	79.90
Superior - MRSA West	160.87	1,799.74	280.61	1,745.94	4,318.30	4,074.57	0.00	79.90

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 Prescription Drug Premium Rates pmpm								
Amerigroup - Bexar	540.06	1,195.68	0.00	0.00	744.62	0.00	532.59	1,022.85
Molina - Bexar	546.99	1,163.60	0.00	0.00	724.97	0.00	509.01	1,118.17
Superior - Bexar	562.25	1,215.97	0.00	0.00	770.90	0.00	645.19	972.88
Molina - Dallas	446.87	905.18	0.00	0.00	462.79	0.00	379.87	543.31
Superior - Dallas	428.47	998.94	0.00	0.00	542.79	0.00	423.80	704.68
Amerigroup - El Paso	566.79	1,085.78	0.00	0.00	509.87	0.00	780.52	959.34
Molina - El Paso	581.85	1,201.68	0.00	0.00	472.10	0.00	879.16	828.41
Amerigroup - Harris	535.31	1,105.60	0.00	0.00	706.20	0.00	577.83	991.99
Molina - Harris	481.57	963.96	0.00	0.00	681.23	0.00	492.69	953.14
United - Harris	589.38	1,119.64	0.00	0.00	750.69	0.00	655.58	1,070.79
Health Spring - Hidalgo	512.59	1,070.76	0.00	0.00	711.01	0.00	473.20	716.18
Molina - Hidalgo	498.52	1,015.66	0.00	0.00	651.55	0.00	494.60	902.49
Superior - Hidalgo	550.82	1,113.99	0.00	0.00	755.37	0.00	560.64	777.49
Amerigroup - Jefferson	490.01	1,051.62	0.00	0.00	771.88	0.00	594.55	954.32
Molina - Jefferson	480.16	877.78	0.00	0.00	688.76	0.00	545.55	941.09
United - Jefferson	572.35	949.72	0.00	0.00	701.15	0.00	658.67	1,096.77
Amerigroup - Lubbock	487.08	980.67	0.00	0.00	683.62	0.00	450.21	786.35
Superior - Lubbock	456.67	1,102.73	0.00	0.00	751.60	0.00	519.69	878.14
Superior - Nueces	476.01	1,051.65	0.00	0.00	688.46	0.00	503.34	583.59
United - Nueces	546.34	1,006.19	0.00	0.00	722.77	0.00	475.58	637.21
Amerigroup - Tarrant	543.12	1,114.34	0.00	0.00	812.15	0.00	532.78	1,146.01
Health Spring - Tarrant	463.57	1,071.27	0.00	0.00	729.44	0.00	428.56	1,130.72
Amerigroup - Travis	500.55	1,373.37	0.00	0.00	768.79	0.00	596.58	545.72
United - Travis	535.37	1,436.71	0.00	0.00	920.19	0.00	676.77	663.15
Superior - MRSA Central	445.95	1,253.18	0.00	0.00	590.26	0.00	518.23	1,035.22
United - MRSA Central	453.34	1,287.34	0.00	0.00	573.35	0.00	577.03	1,274.90
Health Spring - MRSA Northeast	451.22	1,065.56	0.00	0.00	872.42	0.00	457.70	860.04
United - MRSA Northeast	513.08	1,237.01	0.00	0.00	903.78	0.00	501.70	731.89
Amerigroup - MRSA West	511.00	1,363.67	0.00	0.00	714.63	0.00	580.71	547.20
Superior - MRSA West	510.41	1,146.18	0.00	0.00	696.84	0.00	604.22	606.93

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 NAIP pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Bexar	7.97	7.97	0.00	0.00	0.00	0.00	7.97	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Harris	35.75	35.75	0.00	0.00	0.00	0.00	35.75	0.00
Molina - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Harris	26.90	26.90	0.00	0.00	0.00	0.00	26.90	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Hidalgo	3.45	3.45	0.00	0.00	0.00	0.00	3.45	0.00
Amerigroup - Jefferson	5.94	5.94	0.00	0.00	0.00	0.00	5.94	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Jefferson	25.02	25.02	0.00	0.00	0.00	0.00	25.02	0.00
Amerigroup - Lubbock	23.38	23.38	0.00	0.00	0.00	0.00	23.38	0.00
Superior - Lubbock	16.17	16.17	0.00	0.00	0.00	0.00	16.17	0.00
Superior - Nueces	38.44	38.44	0.00	0.00	0.00	0.00	38.44	0.00
United - Nueces	119.93	119.93	0.00	0.00	0.00	0.00	119.93	0.00
Amerigroup - Tarrant	5.00	5.00	0.00	0.00	0.00	0.00	5.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA Central	4.05	4.05	0.00	0.00	0.00	0.00	4.05	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - MRSA West	31.74	31.74	0.00	0.00	0.00	0.00	31.74	0.00
Superior - MRSA West	19.62	19.62	0.00	0.00	0.00	0.00	19.62	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 QIPP ppm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	1,756.19	1,756.19	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	1,756.19	1,756.19	0.00	0.00
Superior - Bexar	0.00	0.00	0.00	0.00	1,756.19	1,756.19	0.00	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	2,010.60	2,010.60	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	2,010.60	2,010.60	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	1,132.33	1,132.33	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	1,132.33	1,132.33	0.00	0.00
Amerigroup - Harris	0.00	0.00	0.00	0.00	1,722.57	1,722.57	0.00	0.00
Molina - Harris	0.00	0.00	0.00	0.00	1,722.57	1,722.57	0.00	0.00
United - Harris	0.00	0.00	0.00	0.00	1,722.57	1,722.57	0.00	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	1,486.18	1,486.18	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	1,486.18	1,486.18	0.00	0.00
Superior - Hidalgo	0.00	0.00	0.00	0.00	1,486.18	1,486.18	0.00	0.00
Amerigroup - Jefferson	0.00	0.00	0.00	0.00	1,593.46	1,593.46	0.00	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	1,593.46	1,593.46	0.00	0.00
United - Jefferson	0.00	0.00	0.00	0.00	1,593.46	1,593.46	0.00	0.00
Amerigroup - Lubbock	0.00	0.00	0.00	0.00	1,997.96	1,997.96	0.00	0.00
Superior - Lubbock	0.00	0.00	0.00	0.00	1,997.96	1,997.96	0.00	0.00
Superior - Nueces	0.00	0.00	0.00	0.00	1,714.01	1,714.01	0.00	0.00
United - Nueces	0.00	0.00	0.00	0.00	1,714.01	1,714.01	0.00	0.00
Amerigroup - Tarrant	0.00	0.00	0.00	0.00	1,824.83	1,824.83	0.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	1,824.83	1,824.83	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	2,296.38	2,296.38	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	2,296.38	2,296.38	0.00	0.00
Superior - MRSA Central	0.00	0.00	0.00	0.00	1,539.86	1,539.86	0.00	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	1,539.86	1,539.86	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	1,633.47	1,633.47	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	1,633.47	1,633.47	0.00	0.00
Amerigroup - MRSA West	0.00	0.00	0.00	0.00	1,985.80	1,985.80	0.00	0.00
Superior - MRSA West	0.00	0.00	0.00	0.00	1,985.80	1,985.80	0.00	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 UHRIP pmpm								
Amerigroup - Bexar	136.18	275.04	0.00	0.00	356.64	0.00	68.55	175.08
Molina - Bexar	164.63	312.86	0.00	0.00	286.77	0.00	63.30	475.74
Superior - Bexar	169.57	344.21	0.00	0.00	463.99	0.00	101.52	362.35
Molina - Dallas	175.21	335.28	0.00	0.00	482.19	0.00	69.69	525.87
Superior - Dallas	209.80	474.25	0.00	0.00	731.89	0.00	97.09	1,010.24
Amerigroup - El Paso	137.88	200.03	0.00	0.00	754.87	0.00	125.04	411.42
Molina - El Paso	152.89	337.96	0.00	0.00	974.85	0.00	137.29	342.20
Amerigroup - Harris	530.33	1,448.59	0.00	0.00	1,478.75	0.00	255.70	1,846.84
Molina - Harris	452.40	982.14	0.00	0.00	1,187.48	0.00	254.69	2,419.62
United - Harris	369.61	556.22	0.00	0.00	725.93	0.00	176.76	569.17
Health Spring - Hidalgo	129.10	263.80	0.00	0.00	641.05	0.00	56.66	364.46
Molina - Hidalgo	153.31	351.51	0.00	0.00	877.28	0.00	72.70	655.22
Superior - Hidalgo	162.35	362.80	0.00	0.00	864.87	0.00	114.19	558.67
Amerigroup - Jefferson	356.84	739.69	0.00	0.00	1,026.56	0.00	173.61	1,099.87
Molina - Jefferson	340.07	817.31	0.00	0.00	1,071.42	0.00	239.01	1,153.71
United - Jefferson	378.20	501.02	0.00	0.00	637.63	0.00	136.87	719.12
Amerigroup - Lubbock	246.50	434.54	0.00	0.00	423.78	0.00	85.34	1,121.36
Superior - Lubbock	170.36	406.17	0.00	0.00	349.93	0.00	68.79	922.90
Superior - Nueces	186.13	407.13	0.00	0.00	576.15	0.00	65.52	670.36
United - Nueces	206.90	341.14	0.00	0.00	424.42	0.00	76.75	502.48
Amerigroup - Tarrant	258.01	525.74	0.00	0.00	582.72	0.00	112.68	400.51
Health Spring - Tarrant	208.05	468.45	0.00	0.00	465.96	0.00	67.91	422.01
Amerigroup - Travis	173.08	404.29	0.00	0.00	433.42	0.00	75.57	532.39
United - Travis	239.34	321.57	0.00	0.00	348.63	0.00	70.42	386.43
Superior - MRSA Central	216.42	480.19	0.00	0.00	497.67	0.00	94.02	702.24
United - MRSA Central	269.28	463.13	0.00	0.00	442.21	0.00	136.35	1,139.78
Health Spring - MRSA Northeast	169.94	456.97	0.00	0.00	588.29	0.00	83.92	498.12
United - MRSA Northeast	207.62	491.00	0.00	0.00	487.47	0.00	102.27	309.33
Amerigroup - MRSA West	204.48	448.62	0.00	0.00	591.04	0.00	108.32	494.11
Superior - MRSA West	202.93	443.84	0.00	0.00	510.50	0.00	98.24	594.33

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
9/1/2020-2/28/2021 Total Premium Rates pmpm								
Amerigroup - Bexar	1,572.10	5,136.50	449.39	2,167.88	8,916.90	6,163.38	1,066.73	3,866.39
Molina - Bexar	1,661.70	4,811.13	455.10	2,047.68	8,791.92	6,163.38	1,017.29	4,501.41
Superior - Bexar	1,726.33	5,368.51	489.32	2,263.96	9,097.97	6,163.38	1,318.70	3,878.40
Molina - Dallas	1,681.01	4,619.44	485.39	1,972.99	9,459.91	6,311.99	879.22	3,585.52
Superior - Dallas	1,567.14	5,057.25	403.58	2,025.00	10,114.83	6,311.99	1,000.25	4,941.40
Amerigroup - El Paso	1,720.90	4,740.77	575.16	2,236.51	9,708.95	5,654.22	1,621.94	3,335.09
Molina - El Paso	1,863.18	5,047.02	662.62	2,217.34	9,694.22	5,654.22	1,823.36	2,883.45
Amerigroup - Harris	2,122.27	7,215.09	392.67	2,567.94	10,490.53	6,038.38	1,345.61	5,482.33
Molina - Harris	1,888.38	6,158.59	404.44	2,490.27	10,112.56	6,038.38	1,153.52	5,917.03
United - Harris	2,154.88	6,089.93	454.73	2,404.76	9,892.18	6,038.38	1,399.66	4,484.75
Health Spring - Hidalgo	2,029.27	5,518.96	1,045.76	2,688.49	9,772.96	6,422.18	1,076.28	3,287.53
Molina - Hidalgo	1,944.76	5,402.40	958.09	2,628.16	9,750.10	6,422.18	1,138.44	4,229.55
Superior - Hidalgo	2,175.42	5,747.01	1,167.96	2,690.02	10,190.08	6,422.18	1,325.67	3,696.06
Amerigroup - Jefferson	1,702.66	5,890.89	334.18	1,982.63	9,444.08	5,542.31	1,195.69	4,565.09
Molina - Jefferson	1,677.94	5,110.32	311.87	1,845.53	9,225.10	5,542.31	1,171.40	4,572.18
United - Jefferson	1,939.25	4,983.99	237.26	1,763.59	8,830.64	5,542.31	1,287.62	4,687.70
Amerigroup - Lubbock	1,561.86	4,666.67	196.66	1,559.44	8,848.51	6,130.85	992.20	4,233.08
Superior - Lubbock	1,434.11	5,065.06	202.98	1,659.36	8,958.64	6,130.85	1,104.78	4,383.66
Superior - Nueces	1,690.08	5,101.70	616.35	2,267.86	8,695.05	6,158.02	1,050.18	3,680.34
United - Nueces	2,014.63	5,059.80	565.18	2,205.85	8,640.35	6,158.02	1,090.71	3,770.29
Amerigroup - Tarrant	1,717.69	5,347.76	373.17	1,861.05	8,956.92	5,910.34	1,126.47	4,261.52
Health Spring - Tarrant	1,483.14	5,225.27	306.24	2,011.76	8,595.47	5,910.34	879.36	4,232.63
Amerigroup - Travis	1,574.65	5,792.89	395.12	2,095.91	8,967.23	6,574.76	1,054.73	3,454.31
United - Travis	1,651.46	5,649.52	242.72	2,073.89	9,218.21	6,574.76	1,181.19	3,914.04
Superior - MRSA Central	1,512.74	5,357.60	259.65	1,914.50	8,593.26	5,824.39	1,051.81	4,332.94
United - MRSA Central	1,578.70	5,512.06	279.59	1,984.37	8,482.75	5,824.39	1,198.31	5,587.57
Health Spring - MRSA Northeast	1,389.92	5,092.69	274.16	1,919.07	9,066.03	5,848.88	971.93	4,094.74
United - MRSA Northeast	1,587.87	5,341.51	302.67	1,639.24	9,048.40	5,848.88	1,075.64	3,387.68
Amerigroup - MRSA West	1,526.49	5,553.70	322.63	1,750.31	9,013.94	6,060.37	1,211.51	3,268.66
Superior - MRSA West	1,527.48	4,938.01	280.61	1,745.94	8,880.66	6,060.37	1,232.69	3,663.04

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Acute Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	634.59	1,518.94	0.00	0.00	1,343.84	0.00	465.59	2,565.08
Molina - Bexar	642.73	1,478.18	0.00	0.00	1,308.38	0.00	444.98	2,804.12
Superior - Bexar	660.66	1,544.71	0.00	0.00	1,391.28	0.00	564.02	2,439.79
Molina - Dallas	709.65	1,523.39	0.00	0.00	1,881.38	0.00	429.66	2,390.91
Superior - Dallas	680.45	1,681.17	0.00	0.00	2,206.60	0.00	479.36	3,101.05
Amerigroup - El Paso	683.54	1,417.59	0.00	0.00	2,658.87	0.00	716.38	1,842.74
Molina - El Paso	701.70	1,568.91	0.00	0.00	2,461.93	0.00	806.91	1,591.25
Amerigroup - Harris	741.11	1,871.74	0.00	0.00	1,745.87	0.00	476.33	2,533.95
Molina - Harris	666.70	1,631.96	0.00	0.00	1,684.14	0.00	406.14	2,434.72
United - Harris	815.94	1,895.52	0.00	0.00	1,855.85	0.00	540.42	2,735.24
Health Spring - Hidalgo	559.21	1,457.25	0.00	0.00	2,387.12	0.00	546.42	1,787.27
Molina - Hidalgo	543.86	1,382.26	0.00	0.00	2,187.49	0.00	571.14	2,252.22
Superior - Hidalgo	600.92	1,516.09	0.00	0.00	2,536.06	0.00	647.39	1,940.28
Amerigroup - Jefferson	654.02	1,911.71	0.00	0.00	1,678.05	0.00	421.59	2,417.80
Molina - Jefferson	640.89	1,595.70	0.00	0.00	1,497.33	0.00	386.84	2,384.28
United - Jefferson	763.92	1,726.47	0.00	0.00	1,524.27	0.00	467.06	2,778.71
Amerigroup - Lubbock	696.54	1,548.48	0.00	0.00	1,166.55	0.00	433.27	2,203.73
Superior - Lubbock	653.05	1,741.20	0.00	0.00	1,282.55	0.00	500.13	2,460.98
Superior - Nueces	583.86	1,427.44	0.00	0.00	1,258.38	0.00	442.88	2,222.55
United - Nueces	670.12	1,365.74	0.00	0.00	1,321.10	0.00	418.45	2,426.76
Amerigroup - Tarrant	727.39	1,778.34	0.00	0.00	1,590.52	0.00	476.01	2,630.82
Health Spring - Tarrant	620.86	1,709.61	0.00	0.00	1,428.54	0.00	382.89	2,595.72
Amerigroup - Travis	629.47	1,415.07	0.00	0.00	936.22	0.00	382.58	2,269.14
United - Travis	673.27	1,480.33	0.00	0.00	1,120.59	0.00	434.00	2,757.40
Superior - MRSA Central	659.00	1,566.73	0.00	0.00	1,330.69	0.00	435.51	2,493.90
United - MRSA Central	669.93	1,609.44	0.00	0.00	1,292.55	0.00	484.93	3,071.31
Health Spring - MRSA Northeast	561.67	1,478.23	0.00	0.00	1,441.68	0.00	430.31	2,618.20
United - MRSA Northeast	638.69	1,716.08	0.00	0.00	1,493.51	0.00	471.67	2,228.08
Amerigroup - MRSA West	634.38	1,818.70	0.00	0.00	1,404.17	0.00	490.74	2,147.45
Superior - MRSA West	633.65	1,528.63	0.00	0.00	1,369.22	0.00	510.61	2,381.88

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Long Term Care Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	261.27	2,146.84	449.39	2,167.88	4,715.61	4,407.19	0.00	103.38
Molina - Bexar	307.35	1,856.49	455.10	2,047.68	4,715.61	4,407.19	0.00	103.38
Superior - Bexar	325.88	2,255.65	489.32	2,263.96	4,715.61	4,407.19	0.00	103.38
Molina - Dallas	349.28	1,855.59	485.39	1,972.99	4,622.95	4,301.39	0.00	125.43
Superior - Dallas	248.42	1,902.89	403.58	2,025.00	4,622.95	4,301.39	0.00	125.43
Amerigroup - El Paso	332.69	2,037.37	575.16	2,236.51	4,653.01	4,521.89	0.00	121.59
Molina - El Paso	426.74	1,938.47	662.62	2,217.34	4,653.01	4,521.89	0.00	121.59
Amerigroup - Harris	279.77	2,753.41	392.67	2,567.94	4,837.14	4,315.81	0.00	109.55
Molina - Harris	287.71	2,580.53	404.44	2,490.27	4,837.14	4,315.81	0.00	109.55
United - Harris	353.05	2,491.65	454.73	2,404.76	4,837.14	4,315.81	0.00	109.55
Health Spring - Hidalgo	828.37	2,727.15	1,045.76	2,688.49	4,547.60	4,936.00	0.00	419.62
Molina - Hidalgo	749.07	2,652.97	958.09	2,628.16	4,547.60	4,936.00	0.00	419.62
Superior - Hidalgo	857.88	2,750.68	1,167.96	2,690.02	4,547.60	4,936.00	0.00	419.62
Amerigroup - Jefferson	195.85	2,181.93	334.18	1,982.63	4,374.13	3,948.85	0.00	93.10
Molina - Jefferson	216.82	1,819.53	311.87	1,845.53	4,374.13	3,948.85	0.00	93.10
United - Jefferson	199.76	1,781.76	237.26	1,763.59	4,374.13	3,948.85	0.00	93.10
Amerigroup - Lubbock	108.36	1,679.60	196.66	1,559.44	4,576.60	4,132.89	0.00	121.64
Superior - Lubbock	137.86	1,798.79	202.98	1,659.36	4,576.60	4,132.89	0.00	121.64
Superior - Nueces	405.64	2,177.04	616.35	2,267.86	4,458.05	4,444.01	0.00	203.84
United - Nueces	471.34	2,226.80	565.18	2,205.85	4,458.05	4,444.01	0.00	203.84
Amerigroup - Tarrant	184.17	1,924.34	373.17	1,861.05	4,146.70	4,085.51	0.00	84.18
Health Spring - Tarrant	190.66	1,975.94	306.24	2,011.76	4,146.70	4,085.51	0.00	84.18
Amerigroup - Travis	271.55	2,600.16	395.12	2,095.91	4,532.42	4,278.38	0.00	107.06
United - Travis	203.48	2,410.91	242.72	2,073.89	4,532.42	4,278.38	0.00	107.06
Superior - MRSA Central	187.32	2,053.45	259.65	1,914.50	4,634.78	4,284.53	0.00	101.58
United - MRSA Central	186.15	2,152.15	279.59	1,984.37	4,634.78	4,284.53	0.00	101.58
Health Spring - MRSA Northeast	207.09	2,091.93	274.16	1,919.07	4,530.17	4,215.41	0.00	118.38
United - MRSA Northeast	228.48	1,897.42	302.67	1,639.24	4,530.17	4,215.41	0.00	118.38
Amerigroup - MRSA West	144.89	1,890.97	322.63	1,750.31	4,318.30	4,074.57	0.00	79.90
Superior - MRSA West	160.87	1,799.74	280.61	1,745.94	4,318.30	4,074.57	0.00	79.90

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Prescription Drug Premium Rates pmpm (Community Rates with Risk Adjustment)								
Amerigroup - Bexar	518.04	1,179.57	0.00	0.00	728.50	0.00	525.47	1,008.04
Molina - Bexar	524.69	1,147.92	0.00	0.00	709.28	0.00	502.21	1,101.98
Superior - Bexar	539.33	1,199.58	0.00	0.00	754.21	0.00	636.57	958.80
Molina - Dallas	425.82	862.90	0.00	0.00	462.79	0.00	373.48	528.25
Superior - Dallas	408.29	952.28	0.00	0.00	542.79	0.00	416.68	685.15
Amerigroup - El Paso	552.95	1,063.56	0.00	0.00	509.87	0.00	780.52	959.34
Molina - El Paso	567.65	1,177.09	0.00	0.00	472.10	0.00	879.16	828.41
Amerigroup - Harris	521.55	1,081.65	0.00	0.00	706.20	0.00	566.54	991.99
Molina - Harris	469.19	943.08	0.00	0.00	681.23	0.00	483.06	953.14
United - Harris	574.22	1,095.39	0.00	0.00	750.69	0.00	642.77	1,070.79
Health Spring - Hidalgo	505.64	1,060.92	0.00	0.00	711.01	0.00	465.37	716.18
Molina - Hidalgo	491.76	1,006.33	0.00	0.00	651.55	0.00	486.42	902.49
Superior - Hidalgo	543.36	1,103.76	0.00	0.00	755.37	0.00	551.37	777.49
Amerigroup - Jefferson	478.10	1,027.90	0.00	0.00	771.88	0.00	571.13	954.32
Molina - Jefferson	468.49	857.98	0.00	0.00	688.76	0.00	524.06	941.09
United - Jefferson	558.43	928.30	0.00	0.00	701.15	0.00	632.73	1,096.77
Amerigroup - Lubbock	478.10	957.47	0.00	0.00	683.62	0.00	429.67	773.64
Superior - Lubbock	448.25	1,076.64	0.00	0.00	751.60	0.00	495.98	863.95
Superior - Nueces	462.73	993.70	0.00	0.00	688.46	0.00	503.34	583.59
United - Nueces	531.10	950.74	0.00	0.00	722.77	0.00	475.58	637.21
Amerigroup - Tarrant	526.51	1,094.09	0.00	0.00	811.18	0.00	525.19	1,130.68
Health Spring - Tarrant	449.39	1,051.81	0.00	0.00	728.57	0.00	422.45	1,115.60
Amerigroup - Travis	484.34	1,359.38	0.00	0.00	766.41	0.00	588.97	545.72
United - Travis	518.03	1,422.08	0.00	0.00	917.34	0.00	668.13	663.15
Superior - MRSA Central	428.67	1,227.40	0.00	0.00	590.26	0.00	509.40	1,035.22
United - MRSA Central	435.78	1,260.86	0.00	0.00	573.35	0.00	567.20	1,274.90
Health Spring - MRSA Northeast	438.23	1,038.11	0.00	0.00	872.42	0.00	446.53	860.04
United - MRSA Northeast	498.31	1,205.15	0.00	0.00	903.78	0.00	489.45	731.89
Amerigroup - MRSA West	497.51	1,336.99	0.00	0.00	707.71	0.00	577.07	547.20
Superior - MRSA West	496.94	1,123.75	0.00	0.00	690.09	0.00	600.43	606.93

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 NAIP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Bexar	7.97	7.97	0.00	0.00	0.00	0.00	7.97	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Harris	35.75	35.75	0.00	0.00	0.00	0.00	35.75	0.00
Molina - Harris	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Harris	26.90	26.90	0.00	0.00	0.00	0.00	26.90	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - Hidalgo	3.45	3.45	0.00	0.00	0.00	0.00	3.45	0.00
Amerigroup - Jefferson	5.94	5.94	0.00	0.00	0.00	0.00	5.94	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Jefferson	25.02	25.02	0.00	0.00	0.00	0.00	25.02	0.00
Amerigroup - Lubbock	23.38	23.38	0.00	0.00	0.00	0.00	23.38	0.00
Superior - Lubbock	16.17	16.17	0.00	0.00	0.00	0.00	16.17	0.00
Superior - Nueces	38.44	38.44	0.00	0.00	0.00	0.00	38.44	0.00
United - Nueces	119.93	119.93	0.00	0.00	0.00	0.00	119.93	0.00
Amerigroup - Tarrant	5.00	5.00	0.00	0.00	0.00	0.00	5.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Superior - MRSA Central	4.05	4.05	0.00	0.00	0.00	0.00	4.05	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Amerigroup - MRSA West	31.74	31.74	0.00	0.00	0.00	0.00	31.74	0.00
Superior - MRSA West	19.62	19.62	0.00	0.00	0.00	0.00	19.62	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 QIPP Rates pmpm								
Amerigroup - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Superior - Bexar	0.00	0.00	0.00	0.00	1,712.85	1,712.85	0.00	0.00
Molina - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Superior - Dallas	0.00	0.00	0.00	0.00	1,941.58	1,941.58	0.00	0.00
Amerigroup - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Molina - El Paso	0.00	0.00	0.00	0.00	1,102.47	1,102.47	0.00	0.00
Amerigroup - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Molina - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
United - Harris	0.00	0.00	0.00	0.00	1,659.88	1,659.88	0.00	0.00
Health Spring - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Molina - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Superior - Hidalgo	0.00	0.00	0.00	0.00	1,465.81	1,465.81	0.00	0.00
Amerigroup - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Molina - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
United - Jefferson	0.00	0.00	0.00	0.00	1,561.47	1,561.47	0.00	0.00
Amerigroup - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Lubbock	0.00	0.00	0.00	0.00	1,951.23	1,951.23	0.00	0.00
Superior - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
United - Nueces	0.00	0.00	0.00	0.00	1,741.41	1,741.41	0.00	0.00
Amerigroup - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Health Spring - Tarrant	0.00	0.00	0.00	0.00	1,818.93	1,818.93	0.00	0.00
Amerigroup - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
United - Travis	0.00	0.00	0.00	0.00	2,217.25	2,217.25	0.00	0.00
Superior - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
United - MRSA Central	0.00	0.00	0.00	0.00	1,514.30	1,514.30	0.00	0.00
Health Spring - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
United - MRSA Northeast	0.00	0.00	0.00	0.00	1,611.45	1,611.45	0.00	0.00
Amerigroup - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00
Superior - MRSA West	0.00	0.00	0.00	0.00	1,942.35	1,942.35	0.00	0.00

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 UHRIP Rates pmpm								
Amerigroup - Bexar	128.08	266.65	0.00	0.00	340.17	0.00	57.81	174.37
Molina - Bexar	164.69	312.86	0.00	0.00	286.77	0.00	63.30	475.74
Superior - Bexar	169.89	344.51	0.00	0.00	463.99	0.00	101.52	362.35
Molina - Dallas	217.46	510.23	0.00	0.00	481.61	0.00	67.97	726.62
Superior - Dallas	213.21	483.76	0.00	0.00	763.46	0.00	99.34	1,010.89
Amerigroup - El Paso	137.69	200.03	0.00	0.00	754.87	0.00	125.04	411.42
Molina - El Paso	152.89	337.96	0.00	0.00	974.85	0.00	137.29	342.20
Amerigroup - Harris	530.26	1,448.97	0.00	0.00	1,478.92	0.00	255.74	1,846.84
Molina - Harris	455.29	982.51	0.00	0.00	1,187.48	0.00	256.31	2,445.89
United - Harris	515.33	821.05	0.00	0.00	1,231.86	0.00	238.68	669.05
Health Spring - Hidalgo	131.88	285.92	0.00	0.00	732.11	0.00	59.06	365.00
Molina - Hidalgo	153.31	351.51	0.00	0.00	877.28	0.00	72.70	655.22
Superior - Hidalgo	162.35	363.24	0.00	0.00	864.87	0.00	114.19	558.67
Amerigroup - Jefferson	357.23	739.69	0.00	0.00	1,026.56	0.00	173.61	1,099.87
Molina - Jefferson	330.29	804.50	0.00	0.00	1,071.03	0.00	238.93	1,153.08
United - Jefferson	430.81	559.36	0.00	0.00	772.80	0.00	164.13	733.30
Amerigroup - Lubbock	248.69	435.38	0.00	0.00	432.42	0.00	85.66	1,121.36
Superior - Lubbock	170.36	406.17	0.00	0.00	349.93	0.00	68.79	922.90
Superior - Nueces	186.13	407.13	0.00	0.00	576.15	0.00	65.52	670.36
United - Nueces	213.40	341.14	0.00	0.00	424.42	0.00	76.75	504.57
Amerigroup - Tarrant	278.73	557.79	0.00	0.00	602.97	0.00	114.75	420.77
Health Spring - Tarrant	208.05	468.45	0.00	0.00	465.96	0.00	67.91	422.32
Amerigroup - Travis	171.52	398.26	0.00	0.00	430.23	0.00	74.64	531.49
United - Travis	236.74	318.56	0.00	0.00	344.37	0.00	67.69	396.13
Superior - MRSA Central	216.42	480.19	0.00	0.00	497.67	0.00	94.02	702.24
United - MRSA Central	279.68	467.47	0.00	0.00	494.82	0.00	135.90	1,140.39
Health Spring - MRSA Northeast	170.15	457.90	0.00	0.00	589.09	0.00	83.92	498.36
United - MRSA Northeast	213.12	490.70	0.00	0.00	498.41	0.00	102.48	309.33
Amerigroup - MRSA West	205.95	471.16	0.00	0.00	594.41	0.00	108.60	497.19
Superior - MRSA West	202.93	443.84	0.00	0.00	510.50	0.00	98.24	594.33

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Total Premium Rates pmpm								
Amerigroup - Bexar	1,541.98	5,112.00	449.39	2,167.88	8,840.97	6,120.04	1,048.87	3,850.87
Molina - Bexar	1,639.46	4,795.45	455.10	2,047.68	8,732.89	6,120.04	1,010.49	4,485.22
Superior - Bexar	1,703.73	5,352.42	489.32	2,263.96	9,037.94	6,120.04	1,310.08	3,864.32
Molina - Dallas	1,702.21	4,752.11	485.39	1,972.99	9,390.31	6,242.97	871.11	3,771.21
Superior - Dallas	1,550.37	5,020.10	403.58	2,025.00	10,077.38	6,242.97	995.38	4,922.52
Amerigroup - El Paso	1,706.87	4,718.55	575.16	2,236.51	9,679.09	5,624.36	1,621.94	3,335.09
Molina - El Paso	1,848.98	5,022.43	662.62	2,217.34	9,664.36	5,624.36	1,823.36	2,883.45
Amerigroup - Harris	2,108.44	7,191.52	392.67	2,567.94	10,428.01	5,975.69	1,334.36	5,482.33
Molina - Harris	1,878.89	6,138.08	404.44	2,490.27	10,049.87	5,975.69	1,145.51	5,943.30
United - Harris	2,285.44	6,330.51	454.73	2,404.76	10,335.42	5,975.69	1,448.77	4,584.63
Health Spring - Hidalgo	2,025.10	5,531.24	1,045.76	2,688.49	9,843.65	6,401.81	1,070.85	3,288.07
Molina - Hidalgo	1,938.00	5,393.07	958.09	2,628.16	9,729.73	6,401.81	1,130.26	4,229.55
Superior - Hidalgo	2,167.96	5,737.22	1,167.96	2,690.02	10,169.71	6,401.81	1,316.40	3,696.06
Amerigroup - Jefferson	1,691.14	5,867.17	334.18	1,982.63	9,412.09	5,510.32	1,172.27	4,565.09
Molina - Jefferson	1,656.49	5,077.71	311.87	1,845.53	9,192.72	5,510.32	1,149.83	4,571.55
United - Jefferson	1,977.94	5,020.91	237.26	1,763.59	8,933.82	5,510.32	1,288.94	4,701.88
Amerigroup - Lubbock	1,555.07	4,644.31	196.66	1,559.44	8,810.42	6,084.12	971.98	4,220.37
Superior - Lubbock	1,425.69	5,038.97	202.98	1,659.36	8,911.91	6,084.12	1,081.07	4,369.47
Superior - Nueces	1,676.80	5,043.75	616.35	2,267.86	8,722.45	6,185.42	1,050.18	3,680.34
United - Nueces	2,005.89	5,004.35	565.18	2,205.85	8,667.75	6,185.42	1,090.71	3,772.38
Amerigroup - Tarrant	1,721.80	5,359.56	373.17	1,861.05	8,970.30	5,904.44	1,120.95	4,266.45
Health Spring - Tarrant	1,468.96	5,205.81	306.24	2,011.76	8,588.70	5,904.44	873.25	4,217.82
Amerigroup - Travis	1,556.88	5,772.87	395.12	2,095.91	8,882.53	6,495.63	1,046.19	3,453.41
United - Travis	1,631.52	5,631.88	242.72	2,073.89	9,131.97	6,495.63	1,169.82	3,923.74
Superior - MRSA Central	1,495.46	5,331.82	259.65	1,914.50	8,567.70	5,798.83	1,042.98	4,332.94
United - MRSA Central	1,571.54	5,489.92	279.59	1,984.37	8,509.80	5,798.83	1,188.03	5,588.18
Health Spring - MRSA Northeast	1,377.14	5,066.17	274.16	1,919.07	9,044.81	5,826.86	960.76	4,094.98
United - MRSA Northeast	1,578.60	5,309.35	302.67	1,639.24	9,037.32	5,826.86	1,063.60	3,387.68
Amerigroup - MRSA West	1,514.47	5,549.56	322.63	1,750.31	8,966.94	6,016.92	1,208.15	3,271.74
Superior - MRSA West	1,514.01	4,915.58	280.61	1,745.94	8,830.46	6,016.92	1,228.90	3,663.04

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Acute Care Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Long Term Care Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Prescription Drug Premium Rate Change								
Amerigroup - Bexar	-4.1%	-1.3%	0.0%	0.0%	-2.2%	0.0%	-1.3%	-1.4%
Molina - Bexar	-4.1%	-1.3%	0.0%	0.0%	-2.2%	0.0%	-1.3%	-1.4%
Superior - Bexar	-4.1%	-1.3%	0.0%	0.0%	-2.2%	0.0%	-1.3%	-1.4%
Molina - Dallas	-4.7%	-4.7%	0.0%	0.0%	0.0%	0.0%	-1.7%	-2.8%
Superior - Dallas	-4.7%	-4.7%	0.0%	0.0%	0.0%	0.0%	-1.7%	-2.8%
Amerigroup - El Paso	-2.4%	-2.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	-2.4%	-2.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	-2.6%	-2.2%	0.0%	0.0%	0.0%	0.0%	-2.0%	0.0%
Molina - Harris	-2.6%	-2.2%	0.0%	0.0%	0.0%	0.0%	-2.0%	0.0%
United - Harris	-2.6%	-2.2%	0.0%	0.0%	0.0%	0.0%	-2.0%	0.0%
Health Spring - Hidalgo	-1.4%	-0.9%	0.0%	0.0%	0.0%	0.0%	-1.7%	0.0%
Molina - Hidalgo	-1.4%	-0.9%	0.0%	0.0%	0.0%	0.0%	-1.7%	0.0%
Superior - Hidalgo	-1.4%	-0.9%	0.0%	0.0%	0.0%	0.0%	-1.7%	0.0%
Amerigroup - Jefferson	-2.4%	-2.3%	0.0%	0.0%	0.0%	0.0%	-3.9%	0.0%
Molina - Jefferson	-2.4%	-2.3%	0.0%	0.0%	0.0%	0.0%	-3.9%	0.0%
United - Jefferson	-2.4%	-2.3%	0.0%	0.0%	0.0%	0.0%	-3.9%	0.0%
Amerigroup - Lubbock	-1.8%	-2.4%	0.0%	0.0%	0.0%	0.0%	-4.6%	-1.6%
Superior - Lubbock	-1.8%	-2.4%	0.0%	0.0%	0.0%	0.0%	-4.6%	-1.6%
Superior - Nueces	-2.8%	-5.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	-2.8%	-5.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	-3.1%	-1.8%	0.0%	0.0%	-0.1%	0.0%	-1.4%	-1.3%
Health Spring - Tarrant	-3.1%	-1.8%	0.0%	0.0%	-0.1%	0.0%	-1.4%	-1.3%
Amerigroup - Travis	-3.2%	-1.0%	0.0%	0.0%	-0.3%	0.0%	-1.3%	0.0%
United - Travis	-3.2%	-1.0%	0.0%	0.0%	-0.3%	0.0%	-1.3%	0.0%
Superior - MRSA Central	-3.9%	-2.1%	0.0%	0.0%	0.0%	0.0%	-1.7%	0.0%
United - MRSA Central	-3.9%	-2.1%	0.0%	0.0%	0.0%	0.0%	-1.7%	0.0%
Health Spring - MRSA Northeast	-2.9%	-2.6%	0.0%	0.0%	0.0%	0.0%	-2.4%	0.0%
United - MRSA Northeast	-2.9%	-2.6%	0.0%	0.0%	0.0%	0.0%	-2.4%	0.0%
Amerigroup - MRSA West	-2.6%	-2.0%	0.0%	0.0%	-1.0%	0.0%	-0.6%	0.0%
Superior - MRSA West	-2.6%	-2.0%	0.0%	0.0%	-1.0%	0.0%	-0.6%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 NAIP Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 QIPP Premium Rate Change								
Amerigroup - Bexar	0.0%	0.0%	0.0%	0.0%	-2.5%	-2.5%	0.0%	0.0%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	-2.5%	-2.5%	0.0%	0.0%
Superior - Bexar	0.0%	0.0%	0.0%	0.0%	-2.5%	-2.5%	0.0%	0.0%
Molina - Dallas	0.0%	0.0%	0.0%	0.0%	-3.4%	-3.4%	0.0%	0.0%
Superior - Dallas	0.0%	0.0%	0.0%	0.0%	-3.4%	-3.4%	0.0%	0.0%
Amerigroup - El Paso	0.0%	0.0%	0.0%	0.0%	-2.6%	-2.6%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	-2.6%	-2.6%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	-3.6%	-3.6%	0.0%	0.0%
Molina - Harris	0.0%	0.0%	0.0%	0.0%	-3.6%	-3.6%	0.0%	0.0%
United - Harris	0.0%	0.0%	0.0%	0.0%	-3.6%	-3.6%	0.0%	0.0%
Health Spring - Hidalgo	0.0%	0.0%	0.0%	0.0%	-1.4%	-1.4%	0.0%	0.0%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	-1.4%	-1.4%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.0%	0.0%	0.0%	-1.4%	-1.4%	0.0%	0.0%
Amerigroup - Jefferson	0.0%	0.0%	0.0%	0.0%	-2.0%	-2.0%	0.0%	0.0%
Molina - Jefferson	0.0%	0.0%	0.0%	0.0%	-2.0%	-2.0%	0.0%	0.0%
United - Jefferson	0.0%	0.0%	0.0%	0.0%	-2.0%	-2.0%	0.0%	0.0%
Amerigroup - Lubbock	0.0%	0.0%	0.0%	0.0%	-2.3%	-2.3%	0.0%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	-2.3%	-2.3%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	1.6%	1.6%	0.0%	0.0%
United - Nueces	0.0%	0.0%	0.0%	0.0%	1.6%	1.6%	0.0%	0.0%
Amerigroup - Tarrant	0.0%	0.0%	0.0%	0.0%	-0.3%	-0.3%	0.0%	0.0%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	-0.3%	-0.3%	0.0%	0.0%
Amerigroup - Travis	0.0%	0.0%	0.0%	0.0%	-3.4%	-3.4%	0.0%	0.0%
United - Travis	0.0%	0.0%	0.0%	0.0%	-3.4%	-3.4%	0.0%	0.0%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	-1.7%	-1.7%	0.0%	0.0%
United - MRSA Central	0.0%	0.0%	0.0%	0.0%	-1.7%	-1.7%	0.0%	0.0%
Health Spring - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	-1.3%	-1.3%	0.0%	0.0%
United - MRSA Northeast	0.0%	0.0%	0.0%	0.0%	-1.3%	-1.3%	0.0%	0.0%
Amerigroup - MRSA West	0.0%	0.0%	0.0%	0.0%	-2.2%	-2.2%	0.0%	0.0%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	-2.2%	-2.2%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 UHRIP Premium Rate Change								
Amerigroup - Bexar	-5.9%	-3.1%	0.0%	0.0%	-4.6%	0.0%	-15.7%	-0.4%
Molina - Bexar	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Bexar	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Dallas	24.1%	52.2%	0.0%	0.0%	-0.1%	0.0%	-2.5%	38.2%
Superior - Dallas	1.6%	2.0%	0.0%	0.0%	4.3%	0.0%	2.3%	0.1%
Amerigroup - El Paso	-0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - El Paso	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Harris	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	1.1%
United - Harris	39.4%	47.6%	0.0%	0.0%	69.7%	0.0%	35.0%	17.5%
Health Spring - Hidalgo	2.2%	8.4%	0.0%	0.0%	14.2%	0.0%	4.2%	0.1%
Molina - Hidalgo	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Hidalgo	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Amerigroup - Jefferson	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Molina - Jefferson	-2.9%	-1.6%	0.0%	0.0%	0.0%	0.0%	0.0%	-0.1%
United - Jefferson	13.9%	11.6%	0.0%	0.0%	21.2%	0.0%	19.9%	2.0%
Amerigroup - Lubbock	0.9%	0.2%	0.0%	0.0%	2.0%	0.0%	0.4%	0.0%
Superior - Lubbock	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Superior - Nueces	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - Nueces	3.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%
Amerigroup - Tarrant	8.0%	6.1%	0.0%	0.0%	3.5%	0.0%	1.8%	5.1%
Health Spring - Tarrant	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%
Amerigroup - Travis	-0.9%	-1.5%	0.0%	0.0%	-0.7%	0.0%	-1.2%	-0.2%
United - Travis	-1.1%	-0.9%	0.0%	0.0%	-1.2%	0.0%	-3.9%	2.5%
Superior - MRSA Central	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
United - MRSA Central	3.9%	0.9%	0.0%	0.0%	11.9%	0.0%	-0.3%	0.1%
Health Spring - MRSA Northeast	0.1%	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%
United - MRSA Northeast	2.6%	-0.1%	0.0%	0.0%	2.2%	0.0%	0.2%	0.0%
Amerigroup - MRSA West	0.7%	5.0%	0.0%	0.0%	0.6%	0.0%	0.3%	0.6%
Superior - MRSA West	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
3/1/2021-8/31/2021 Total Premium Rate Change								
Amerigroup - Bexar	-1.9%	-0.5%	0.0%	0.0%	-0.9%	-0.7%	-1.7%	-0.4%
Molina - Bexar	-1.3%	-0.3%	0.0%	0.0%	-0.7%	-0.7%	-0.7%	-0.4%
Superior - Bexar	-1.3%	-0.3%	0.0%	0.0%	-0.7%	-0.7%	-0.7%	-0.4%
Molina - Dallas	1.3%	2.9%	0.0%	0.0%	-0.7%	-1.1%	-0.9%	5.2%
Superior - Dallas	-1.1%	-0.7%	0.0%	0.0%	-0.4%	-1.1%	-0.5%	-0.4%
Amerigroup - El Paso	-0.8%	-0.5%	0.0%	0.0%	-0.3%	-0.5%	0.0%	0.0%
Molina - El Paso	-0.8%	-0.5%	0.0%	0.0%	-0.3%	-0.5%	0.0%	0.0%
Amerigroup - Harris	-0.7%	-0.3%	0.0%	0.0%	-0.6%	-1.0%	-0.8%	0.0%
Molina - Harris	-0.5%	-0.3%	0.0%	0.0%	-0.6%	-1.0%	-0.7%	0.4%
United - Harris	6.1%	4.0%	0.0%	0.0%	4.5%	-1.0%	3.5%	2.2%
Health Spring - Hidalgo	-0.2%	0.2%	0.0%	0.0%	0.7%	-0.3%	-0.5%	0.0%
Molina - Hidalgo	-0.3%	-0.2%	0.0%	0.0%	-0.2%	-0.3%	-0.7%	0.0%
Superior - Hidalgo	-0.3%	-0.2%	0.0%	0.0%	-0.2%	-0.3%	-0.7%	0.0%
Amerigroup - Jefferson	-0.7%	-0.4%	0.0%	0.0%	-0.3%	-0.6%	-2.0%	0.0%
Molina - Jefferson	-1.3%	-0.6%	0.0%	0.0%	-0.4%	-0.6%	-1.8%	0.0%
United - Jefferson	2.0%	0.7%	0.0%	0.0%	1.2%	-0.6%	0.1%	0.3%
Amerigroup - Lubbock	-0.4%	-0.5%	0.0%	0.0%	-0.4%	-0.8%	-2.0%	-0.3%
Superior - Lubbock	-0.6%	-0.5%	0.0%	0.0%	-0.5%	-0.8%	-2.1%	-0.3%
Superior - Nueces	-0.8%	-1.1%	0.0%	0.0%	0.3%	0.4%	0.0%	0.0%
United - Nueces	-0.4%	-1.1%	0.0%	0.0%	0.3%	0.4%	0.0%	0.1%
Amerigroup - Tarrant	0.2%	0.2%	0.0%	0.0%	0.1%	-0.1%	-0.5%	0.1%
Health Spring - Tarrant	-1.0%	-0.4%	0.0%	0.0%	-0.1%	-0.1%	-0.7%	-0.3%
Amerigroup - Travis	-1.1%	-0.3%	0.0%	0.0%	-0.9%	-1.2%	-0.8%	0.0%
United - Travis	-1.2%	-0.3%	0.0%	0.0%	-0.9%	-1.2%	-1.0%	0.2%
Superior - MRSA Central	-1.1%	-0.5%	0.0%	0.0%	-0.3%	-0.4%	-0.8%	0.0%
United - MRSA Central	-0.5%	-0.4%	0.0%	0.0%	0.3%	-0.4%	-0.9%	0.0%
Health Spring - MRSA Northeast	-0.9%	-0.5%	0.0%	0.0%	-0.2%	-0.4%	-1.1%	0.0%
United - MRSA Northeast	-0.6%	-0.6%	0.0%	0.0%	-0.1%	-0.4%	-1.1%	0.0%
Amerigroup - MRSA West	-0.8%	-0.1%	0.0%	0.0%	-0.5%	-0.7%	-0.3%	0.1%
Superior - MRSA West	-0.9%	-0.5%	0.0%	0.0%	-0.6%	-0.7%	-0.3%	0.0%

FY2021 STAR+PLUS Rating Summary - Amended

	Projected PMPM		Projected 3/1/2021-8/31/2021 Premium		% Rate Change
	Current Rates	Proposed Rates	Current Rates	Proposed Rates	
Non-Nursing Facility					
Medical (1)	997.66	997.66	3,021,236,409	3,021,236,409	0.0%
Pharmacy	282.63	274.83	855,895,836	832,266,881	-2.8%
NAIP	5.96	5.96	18,044,999	18,044,999	0.0%
UHRIP	135.25	147.18	409,572,710	445,696,592	8.8%
Total	1,421.49	1,425.62	4,304,749,954	4,317,244,881	0.3%
Nursing Facility					
Medical (1)	4,502.77	4,502.77	1,302,313,379	1,302,313,379	0.0%
Pharmacy	85.82	85.52	24,821,008	24,733,727	-0.4%
QIPP	1,787.92	1,749.60	517,110,626	506,029,140	-2.1%
UHRIP	74.53	80.34	21,556,561	23,236,145	7.8%
Total	6,451.03	6,418.22	1,865,801,573	1,856,312,390	-0.5%
Total					
Medical (1)	1,303.23	1,303.23	4,323,549,787	4,323,549,787	0.0%
Pharmacy	265.47	258.32	880,716,844	857,000,608	-2.7%
NAIP & QIPP	161.31	157.97	535,155,624	524,074,138	-2.1%
UHRIP	129.95	141.35	431,129,272	468,932,738	8.8%
Total	1,859.97	1,860.88	6,170,551,527	6,173,557,271	0.0%

Notes:

(1) Includes LTSS.

FY2021 STAR+PLUS Rating Summary Amended

Bexar SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	221,615		25,883		7,103		20,916	
Experience Period Cost								
Estimated Incurred Claims	112,294,487	506.71	28,391,220	1,096.91	5,084,902	715.84	11,637,272	556.39
Pay and Chase Recoveries	-1,180,278	-5.33	-143,277	-5.54	-34,605	-4.87	-120,766	-5.77
Total Cost	111,114,209	501.38	28,247,943	1,091.37	5,050,297	710.97	11,516,506	550.62
Projected FY2021 Member Months	223,508		26,595		7,268		21,041	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9994		0.9995		0.9998		0.9997	
PDL Adjustment - 7/1/2019	0.9943		0.9956		0.9999		0.9978	
NF Eligibility Adjustment	1.0010		0.9994		1.0142		0.9983	
Hemostatic Carve-Out	0.9949		0.9987		1.0000		1.0000	
Hepatitis C Carve-Out	0.9591		0.9865		0.9783		0.9866	
Projected Incurred Claims	114,641,897	512.92	30,457,386	1,145.25	5,159,360	709.91	12,346,412	586.79
Administrative Expenses	402,314	1.80	47,870	1.80	13,082	1.80	37,873	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	119,216,798	533.39	31,611,665	1,188.65	5,360,043	737.52	12,833,456	609.93

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended

Bexar SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	4,323		279,840	
Experience Period Cost				
Estimated Incurred Claims	3,031,455	701.21	160,439,337	573.33
Pay and Chase Recoveries	-25,298	-5.85	-1,504,225	-5.38
Total Cost	3,006,157	695.36	158,935,112	567.95
Projected FY2021 Member Months	4,368		282,779	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9978			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	0.9855			
Projected Incurred Claims	4,120,961	943.36	166,726,016	589.60
Administrative Expenses	7,863	1.80	509,002	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	4,278,574	979.44	173,300,537	612.85

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Dallas SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	306,208		34,763		10,163		26,807	
Experience Period Cost								
Estimated Incurred Claims	124,342,377	406.07	29,570,624	850.63	5,045,909	496.49	9,771,890	364.52
Pay and Chase Recoveries	-1,839,055	-6.01	-202,394	-5.82	-60,323	-5.94	-164,378	-6.13
Total Cost	122,503,321	400.07	29,368,231	844.80	4,985,586	490.56	9,607,512	358.39
Projected FY2021 Member Months	307,898		37,568		10,225		27,227	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9994		0.9992		0.9998		0.9995	
PDL Adjustment - 7/1/2019	0.9967		0.9972		0.9989		0.9982	
NF Eligibility Adjustment	1.0030		1.0003		0.9659		0.9997	
Hemostatic Carve-Out	0.9780		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9527		0.9532		1.0000		0.9831	
Projected Incurred Claims	123,587,764	401.39	32,292,161	859.58	4,870,765	476.37	10,378,492	381.19
Administrative Expenses	554,216	1.80	67,622	1.80	18,405	1.80	49,008	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	128,644,539	417.82	33,533,453	892.62	5,066,497	495.51	10,805,700	396.88

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Dallas SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	5,845		383,788	
Experience Period Cost				
Estimated Incurred Claims	2,667,544	456.34	171,398,344	446.60
Pay and Chase Recoveries	-36,572	-6.26	-2,302,721	-6.00
Total Cost	2,630,972	450.09	169,095,623	440.60
Projected FY2021 Member Months	5,901		388,818	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9984			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	0.9722			
Projected Incurred Claims	3,556,953	602.73	174,686,136	449.28
Administrative Expenses	10,622	1.80	699,872	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	3,696,970	626.46	181,747,158	467.44

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
El Paso SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	70,382		9,500		1,001		5,946	
Experience Period Cost								
Estimated Incurred Claims	38,448,978	546.29	10,430,521	1,097.99	482,383	482.06	4,284,546	720.61
Pay and Chase Recoveries	-153,822	-2.19	-27,602	-2.91	-3,216	-3.21	-8,661	-1.46
Total Cost	38,295,156	544.11	10,402,919	1,095.09	479,167	478.84	4,275,885	719.15
Projected FY2021 Member Months	71,354		9,967		1,081		6,125	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9989		0.9971		1.0000		0.9986	
PDL Adjustment - 7/1/2019	0.9976		0.9986		0.9902		0.9973	
NF Eligibility Adjustment	1.0009		0.9987		0.9821		0.9999	
Hemostatic Carve-Out	0.9419		0.9479		1.0000		1.0000	
Hepatitis C Carve-Out	0.9755		0.9795		1.0000		1.0000	
Projected Incurred Claims	38,350,950	537.47	10,793,071	1,082.83	506,865	468.77	4,757,643	776.80
Administrative Expenses	128,437	1.80	17,941	1.80	1,946	1.80	11,024	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	39,875,013	558.83	11,203,122	1,123.97	527,265	487.64	4,941,624	806.84

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
El Paso SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	3,320		90,147	
Experience Period Cost				
Estimated Incurred Claims	2,113,724	636.73	55,760,151	618.54
Pay and Chase Recoveries	-7,034	-2.12	-200,334	-2.22
Total Cost	2,106,690	634.61	55,559,817	616.32
Projected FY2021 Member Months	3,375		91,903	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9993			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	2,953,014	874.93	57,361,542	624.16
Administrative Expenses	6,075	1.80	165,425	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	3,066,414	908.53	59,613,437	648.66

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Harris SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	491,150		38,541		10,694		45,514	
Experience Period Cost								
Estimated Incurred Claims	254,226,270	517.61	38,504,897	999.08	7,588,273	709.57	25,929,255	569.70
Pay and Chase Recoveries	-982,784	-2.00	-80,098	-2.08	-22,275	-2.08	-91,341	-2.01
Total Cost	253,243,486	515.61	38,424,799	997.00	7,565,998	707.49	25,837,915	567.70
Projected FY2021 Member Months	500,204		40,113		10,677		46,069	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9988		0.9991		0.9998		0.9991	
PDL Adjustment - 7/1/2019	0.9946		0.9930		0.9960		0.9956	
NF Eligibility Adjustment	1.0006		0.9998		1.0022		1.0000	
Hemostatic Carve-Out	0.9738		0.9905		0.9813		0.9639	
Hepatitis C Carve-Out	0.9742		0.9783		1.0000		0.9804	
Projected Incurred Claims	262,141,652	524.07	41,169,670	1,026.34	7,447,354	697.50	26,665,705	578.83
Administrative Expenses	900,368	1.80	72,203	1.80	19,219	1.80	82,923	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	272,582,404	544.94	42,737,692	1,065.43	7,737,381	724.66	27,718,786	601.69

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Harris SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	10,647		596,545	
Experience Period Cost				
Estimated Incurred Claims	7,744,309	727.34	333,993,004	559.88
Pay and Chase Recoveries	-23,859	-2.24	-1,200,357	-2.01
Total Cost	7,720,450	725.10	332,792,647	557.87
Projected FY2021 Member Months	10,646		607,709	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9953			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	10,599,992	995.68	348,024,372	572.68
Administrative Expenses	19,163	1.80	1,093,876	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	11,004,305	1,033.66	361,780,569	595.32

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Hidalgo SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	167,610		30,465		2,943		11,567	
Experience Period Cost								
Estimated Incurred Claims	84,963,712	506.91	30,173,555	990.43	2,030,678	690.10	5,486,856	474.35
Pay and Chase Recoveries	-1,145,920	-6.84	-216,519	-7.11	-19,024	-6.46	-78,996	-6.83
Total Cost	83,817,792	500.08	29,957,036	983.32	2,011,655	683.64	5,407,860	467.52
Projected FY2021 Member Months	168,222		31,279		2,910		11,622	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9999		0.9998		1.0000		0.9999	
PDL Adjustment - 7/1/2019	0.9924		0.9923		1.0025		0.9939	
NF Eligibility Adjustment	1.0011		1.0000		0.9963		0.9998	
Hemostatic Carve-Out	0.9522		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9864		0.9908		1.0000		0.9834	
Projected Incurred Claims	84,599,841	502.91	32,379,990	1,035.18	2,000,342	687.37	5,758,818	495.52
Administrative Expenses	302,799	1.80	56,303	1.80	5,238	1.80	20,919	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	87,982,010	523.01	33,612,739	1,074.59	2,078,322	714.16	5,989,365	515.35

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Hidalgo SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period Member Months	6,440		219,025	
Experience Period Cost				
Estimated Incurred Claims	3,628,103	563.35	126,282,904	576.57
Pay and Chase Recoveries	-49,266	-7.65	-1,509,725	-6.89
Total Cost	3,578,837	555.70	124,773,179	569.68
Projected FY2021 Member Months	6,494		220,527	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9971			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	4,964,319	764.44	129,703,310	588.15
Administrative Expenses	11,689	1.80	396,949	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	5,156,485	794.03	134,818,921	611.35

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Jefferson SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	91,636		8,167		2,520		4,543	
Experience Period Cost								
Estimated Incurred Claims	43,701,212	476.90	6,983,520	855.09	1,739,545	690.22	2,558,372	563.19
Pay and Chase Recoveries	-220,105	-2.40	-21,264	-2.60	-5,700	-2.26	-12,275	-2.70
Total Cost	43,481,107	474.50	6,962,257	852.49	1,733,844	687.95	2,546,097	560.48
Projected FY2021 Member Months	91,934		8,704		2,464		4,518	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9998		0.9998		1.0000		1.0000	
PDL Adjustment - 7/1/2019	0.9932		0.9940		0.9995		0.9910	
NF Eligibility Adjustment	1.0006		0.9992		1.0048		1.0003	
Hemostatic Carve-Out	0.9939		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9756		0.9774		1.0000		0.9605	
Projected Incurred Claims	45,297,367	492.71	7,712,836	886.12	1,713,841	695.52	2,615,557	578.87
Administrative Expenses	165,482	1.80	15,667	1.80	4,435	1.80	8,133	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	47,111,761	512.45	8,008,811	920.12	1,780,598	722.61	2,718,850	601.73

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 Jefferson SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	1,771		108,636	
Experience Period Cost				
Estimated Incurred Claims	1,293,187	730.39	56,275,837	518.02
Pay and Chase Recoveries	-5,034	-2.84	-264,378	-2.43
Total Cost	1,288,153	727.55	56,011,458	515.59
Projected FY2021 Member Months	1,823		109,444	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9994			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	1,828,956	1,003.16	59,168,557	540.63
Administrative Expenses	3,282	1.80	197,000	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	1,898,692	1,041.41	61,518,711	562.10

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Lubbock SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	56,206		3,597		2,224		6,919	
Experience Period Cost								
Estimated Incurred Claims	24,026,575	427.47	3,416,536	949.92	1,541,803	693.35	3,074,373	444.32
Pay and Chase Recoveries	-243,749	-4.34	-14,464	-4.02	-8,995	-4.04	-30,563	-4.42
Total Cost	23,782,826	423.14	3,402,072	945.90	1,532,808	689.30	3,043,811	439.90
Projected FY2021 Member Months	56,661		3,664		2,190		6,941	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9996		0.9998		1.0000		1.0000	
PDL Adjustment - 7/1/2019	0.9935		0.9980		0.9958		0.9926	
NF Eligibility Adjustment	1.0015		0.9990		1.0050		0.9996	
Hemostatic Carve-Out	0.9936		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9815		0.9763		1.0000		0.9542	
Projected Incurred Claims	25,064,706	442.36	3,612,371	985.86	1,520,573	694.44	3,135,879	451.76
Administrative Expenses	101,990	1.80	6,596	1.80	3,941	1.80	12,495	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	26,079,477	460.27	3,750,224	1,023.49	1,579,807	721.50	3,262,563	470.01

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Lubbock SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	1,377		70,323	
Experience Period Cost				
Estimated Incurred Claims	824,320	598.63	32,883,608	467.61
Pay and Chase Recoveries	-6,718	-4.88	-304,488	-4.33
Total Cost	817,602	593.76	32,579,119	463.28
Projected FY2021 Member Months	1,395		70,851	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9968			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	0.9838			
Projected Incurred Claims	1,120,598	803.32	34,454,126	486.29
Administrative Expenses	2,511	1.80	127,532	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	1,163,843	834.33	35,835,915	505.79

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Nueces SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	82,105		10,403		2,307		5,652	
Experience Period Cost								
Estimated Incurred Claims	38,313,422	466.64	9,873,196	949.09	1,547,143	670.70	2,509,823	444.09
Pay and Chase Recoveries	-458,218	-5.58	-64,300	-6.18	-13,060	-5.66	-32,430	-5.74
Total Cost	37,855,204	461.06	9,808,896	942.91	1,534,083	665.04	2,477,393	438.35
Projected FY2021 Member Months	82,095		10,564		2,408		5,536	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9997		0.9996		1.0000		1.0000	
PDL Adjustment - 7/1/2019	0.9903		0.9939		0.9977		0.9934	
NF Eligibility Adjustment	1.0004		1.0012		1.0162		0.9979	
Hemostatic Carve-Out	1.0000		0.9931		1.0000		1.0000	
Hepatitis C Carve-Out	0.9720		0.9448		1.0000		1.0000	
Projected Incurred Claims	39,273,872	478.39	9,955,629	942.45	1,634,196	678.76	2,609,629	471.35
Administrative Expenses	147,772	1.80	19,014	1.80	4,334	1.80	9,966	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	40,851,445	497.61	10,336,418	978.50	1,697,958	705.25	2,714,606	490.31

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 Nueces SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	2,524		102,990	
Experience Period Cost				
Estimated Incurred Claims	1,077,637	426.96	53,321,221	517.73
Pay and Chase Recoveries	-15,424	-6.11	-583,432	-5.66
Total Cost	1,062,213	420.85	52,737,789	512.07
Projected FY2021 Member Months	2,572		103,175	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	1.0000			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	1,493,348	580.62	54,966,674	532.75
Administrative Expenses	4,630	1.80	185,715	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	1,552,308	603.54	57,152,735	553.94

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Tarrant SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	191,135		16,500		8,207		24,454	
Experience Period Cost								
Estimated Incurred Claims	89,273,571	467.07	16,481,864	998.89	6,329,687	771.22	10,999,572	449.82
Pay and Chase Recoveries	0	0.00	0	0.00	0	0.00	0	0.00
Total Cost	89,273,571	467.07	16,481,864	998.89	6,329,687	771.22	10,999,572	449.82
Projected FY2021 Member Months	193,392		16,867		8,211		24,994	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9998		0.9997		0.9997		0.9993	
PDL Adjustment - 7/1/2019	0.9948		0.9963		0.9966		0.9952	
NF Eligibility Adjustment	1.0034		1.0001		0.9811		1.0002	
Hemostatic Carve-Out	1.0000		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9693		0.9818		0.9988		0.9857	
Projected Incurred Claims	94,179,160	486.99	17,646,970	1,046.22	6,223,710	757.97	11,957,145	478.40
Administrative Expenses	348,105	1.80	30,361	1.80	14,780	1.80	44,990	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	97,955,714	506.52	18,318,478	1,086.03	6,464,757	787.32	12,437,445	497.61

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Tarrant SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period Member Months	4,582		244,878	
Experience Period Cost				
Estimated Incurred Claims	3,661,648	799.14	126,746,342	517.59
Pay and Chase Recoveries	0	0.00	0	0.00
Total Cost	3,661,648	799.14	126,746,342	517.59
Projected FY2021 Member Months	4,611		248,076	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9991			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	0.9866			
Projected Incurred Claims	5,011,657	1,086.77	135,018,642	544.26
Administrative Expenses	8,301	1.80	446,536	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	5,202,028	1,128.06	140,378,423	565.87

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
Travis SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	109,861		7,714		4,591		14,432	
Experience Period Cost								
Estimated Incurred Claims	52,438,471	477.32	9,777,223	1,267.47	3,813,925	830.77	8,496,313	588.72
Pay and Chase Recoveries	-176,964	-1.61	-10,095	-1.31	-6,771	-1.47	-29,890	-2.07
Total Cost	52,261,507	475.71	9,767,128	1,266.16	3,807,154	829.30	8,466,423	586.65
Projected FY2021 Member Months	111,624		8,005		4,607		14,624	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9993		1.0000		0.9997		0.9989	
PDL Adjustment - 7/1/2019	0.9952		0.9958		0.9991		0.9950	
NF Eligibility Adjustment	1.0030		1.0016		0.9812		0.9992	
Hemostatic Carve-Out	0.9793		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9675		0.9898		0.9969		0.9872	
Projected Incurred Claims	54,088,747	484.56	10,715,666	1,338.69	3,757,926	815.62	9,123,645	623.88
Administrative Expenses	200,923	1.80	14,408	1.80	8,293	1.80	26,323	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	56,258,726	504.00	11,119,248	1,389.11	3,902,819	847.07	9,481,833	648.37

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended

Travis SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	3,099		139,697	
Experience Period Cost				
Estimated Incurred Claims	1,384,281	446.66	75,910,214	543.39
Pay and Chase Recoveries	-6,439	-2.08	-230,159	-1.65
Total Cost	1,377,843	444.58	75,680,055	541.75
Projected FY2021 Member Months	3,130		141,990	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9947			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	1,909,558	610.12	79,595,543	560.57
Administrative Expenses	5,634	1.80	255,582	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	1,984,654	634.11	82,747,280	582.77

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
MRSA Central SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	136,874		7,779		6,107		10,173	
Experience Period Cost								
Estimated Incurred Claims	57,269,871	418.41	8,947,564	1,150.19	3,434,067	562.34	4,923,064	483.93
Pay and Chase Recoveries	-706,700	-5.16	-42,420	-5.45	-29,752	-4.87	-56,077	-5.51
Total Cost	56,563,172	413.25	8,905,144	1,144.73	3,404,315	557.47	4,866,987	478.41
Projected FY2021 Member Months	138,321		7,690		6,328		10,143	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9994		0.9999		0.9999		0.9989	
PDL Adjustment - 7/1/2019	0.9908		0.9956		0.9979		0.9957	
NF Eligibility Adjustment	1.0013		0.9984		0.9997		1.0003	
Hemostatic Carve-Out	0.9770		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9611		0.9794		1.0000		0.9829	
Projected Incurred Claims	57,360,953	414.69	9,176,766	1,193.41	3,542,058	559.78	5,147,163	507.47
Administrative Expenses	248,978	1.80	13,841	1.80	11,390	1.80	18,257	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	59,699,410	431.60	9,523,945	1,238.56	3,682,329	581.95	5,352,767	527.74

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 MRSA Central SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	2,071		163,004	
Experience Period Cost				
Estimated Incurred Claims	1,617,892	781.21	76,192,459	467.43
Pay and Chase Recoveries	-11,519	-5.56	-846,468	-5.19
Total Cost	1,606,373	775.65	75,345,990	462.23
Projected FY2021 Member Months	2,025		164,506	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9975			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	2,161,709	1,067.45	77,388,648	470.43
Administrative Expenses	3,645	1.80	296,111	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	2,243,891	1,108.03	80,502,341	489.36

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 MRSA Northeast SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	202,583		18,071		7,131		13,068	
Experience Period Cost								
Estimated Incurred Claims	89,701,390	442.79	18,699,408	1,034.75	5,986,351	839.49	5,646,910	432.12
Pay and Chase Recoveries	-264,507	-1.31	-18,693	-1.03	-9,710	-1.36	-16,728	-1.28
Total Cost	89,436,883	441.48	18,680,715	1,033.72	5,976,641	838.13	5,630,183	430.84
Projected FY2021 Member Months	204,893		18,071		7,253		13,060	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9998		0.9999		1.0000		1.0000	
PDL Adjustment - 7/1/2019	0.9911		0.9905		0.9966		0.9900	
NF Eligibility Adjustment	1.0002		1.0012		1.0195		0.9997	
Hemostatic Carve-Out	0.9883		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9711		0.9742		1.0000		0.9755	
Projected Incurred Claims	92,741,600	452.63	19,326,344	1,069.45	6,217,418	857.25	5,892,401	451.19
Administrative Expenses	368,808	1.80	32,528	1.80	13,055	1.80	23,507	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	96,487,470	470.92	20,061,007	1,110.10	6,456,448	890.21	6,130,475	469.42

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 MRSA Northeast SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period				
Member Months	3,243		244,096	
Experience Period Cost				
Estimated Incurred Claims	1,772,854	546.62	121,806,913	499.01
Pay and Chase Recoveries	-4,965	-1.53	-314,602	-1.29
Total Cost	1,767,889	545.09	121,492,311	497.72
Projected FY2021 Member Months	3,279		246,556	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9963			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	2,456,518	749.25	126,634,281	513.61
Administrative Expenses	5,902	1.80	443,800	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	2,551,730	778.29	131,687,131	534.11

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 MRSA West SDA Total - Pharmacy

	Medicaid Only - OCC		Medicaid Only - HCBS		Medicaid Only - NF		IDD	
	Amount	pmpm	Amount	pmpm	Amount	pmpm	Amount	pmpm
CY2019 Experience Period								
Member Months	133,723		9,900		5,906		12,530	
Experience Period Cost								
Estimated Incurred Claims	65,120,540	486.98	10,964,489	1,107.57	4,021,816	680.96	6,714,427	535.85
Pay and Chase Recoveries	-595,711	-4.45	-46,718	-4.72	-24,409	-4.13	-61,984	-4.95
Total Cost	64,524,830	482.52	10,917,772	1,102.85	3,997,407	676.83	6,652,442	530.90
Projected FY2021 Member Months	134,561		10,304		5,877		12,410	
Annual Trend Assumption	4.6 %		4.2 %		0.4 %		5.0 %	
Rating Adjustments								
IMD Adjustment	0.9995		0.9999		0.9992		0.9999	
PDL Adjustment - 7/1/2019	0.9945		0.9961		0.9980		0.9963	
NF Eligibility Adjustment	1.0010		1.0008		0.9979		1.0007	
Hemostatic Carve-Out	0.9488		1.0000		1.0000		1.0000	
Hepatitis C Carve-Out	0.9735		0.9804		0.9903		0.9937	
Projected Incurred Claims	64,314,205	477.96	11,893,397	1,154.26	3,946,041	671.44	7,079,802	570.47
Administrative Expenses	242,209	1.80	18,547	1.80	10,579	1.80	22,339	1.80
Risk Margin	1.75 %		1.75 %		1.75 %		1.75 %	
Premium Tax	1.75 %		1.75 %		1.75 %		1.75 %	
Projected Total Cost	66,897,839	497.16	12,343,983	1,197.99	4,100,124	697.66	7,359,731	593.03

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating Summary Amended
 MRSA West SDA Total - Pharmacy

	MBCCP		Total*	
	Amount	pmpm	Amount	pmpm
CY2019 Experience Period Member Months	3,364		165,424	
Experience Period Cost				
Estimated Incurred Claims	1,380,424	410.34	88,201,696	533.19
Pay and Chase Recoveries	-13,918	-4.14	-742,740	-4.49
Total Cost	1,366,505	406.21	87,458,956	528.70
Projected FY2021 Member Months	3,473		166,625	
Annual Trend Assumption	21.3 %			
Rating Adjustments				
IMD Adjustment	1.0000			
PDL Adjustment - 7/1/2019	0.9978			
NF Eligibility Adjustment	1.0000			
Hemostatic Carve-Out	1.0000			
Hepatitis C Carve-Out	1.0000			
Projected Incurred Claims	1,942,118	559.19	89,175,563	535.19
Administrative Expenses	6,252	1.80	299,925	1.80
Risk Margin	1.75 %			
Premium Tax	1.75 %			
Projected Total Cost	2,019,036	581.33	92,720,713	556.46

*Excludes Dual Eligible risk groups which do not receive prescription drug coverage through the STAR+PLUS program.

FY2021 STAR+PLUS Rating - Pharmacy Amended
 Pharmacy Adjustments
 Hepatitis C Drug Carve-out

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Impact of Hepatitis C Drug Carve-out (1)									
Bexar	-4,548,537	-384,738	0	0	-118,766	0	-156,484	-43,365	-5,251,890
Dallas	-5,769,901	-1,395,211	0	0	0	0	-167,127	-73,736	-7,405,975
El Paso	-936,549	-214,566	0	0	0	0	0	0	-1,151,115
Harris	-6,458,661	-828,144	0	0	0	0	-504,535	0	-7,791,340
Hidalgo	-1,150,039	-276,132	0	0	0	0	-91,708	0	-1,517,880
Jefferson	-1,049,905	-158,682	0	0	0	0	-100,094	0	-1,308,681
Lubbock	-439,630	-77,986	0	0	0	0	-141,576	-13,053	-672,245
Nueces	-1,060,956	-544,634	0	0	0	0	0	0	-1,605,591
Tarrant	-2,730,254	-301,374	0	0	-7,610	0	-155,886	-48,924	-3,244,047
Travis	-1,689,611	-97,923	0	0	-12,133	0	-106,912	0	-1,906,579
MRSA Central	-2,202,565	-184,163	0	0	0	0	-83,841	0	-2,470,570
MRSA Northeast	-2,547,916	-479,887	0	0	0	0	-138,436	0	-3,166,240
MRSA West	-1,714,119	-213,967	0	0	-41,722	0	-42,052	0	-2,011,860
Total	-32,298,644	-5,157,407	0	0	-180,230	0	-1,688,652	-179,078	-39,504,011
CY2019 Total Incurred Claims (2)									
Bexar	111,195,389	28,512,199	0	0	5,470,185	0	11,699,096	2,994,801	159,871,669
Dallas	122,096,130	29,841,392	0	0	5,928,913	0	9,880,263	2,654,140	170,400,839
El Paso	38,273,035	10,453,807	0	0	605,810	0	4,259,034	2,109,025	55,700,711
Harris	250,499,667	38,249,260	0	0	7,740,037	0	25,739,093	7,723,421	329,951,478
Hidalgo	84,375,050	29,984,986	0	0	2,346,595	0	5,535,363	3,627,135	125,869,129
Jefferson	43,020,321	7,025,182	0	0	1,764,155	0	2,535,322	1,291,643	55,636,622
Lubbock	23,736,098	3,287,306	0	0	1,637,745	0	3,094,445	807,260	32,562,854
Nueces	37,879,272	9,871,352	0	0	1,706,088	0	2,480,152	1,074,773	53,011,639
Tarrant	88,929,227	16,545,614	0	0	6,401,320	0	10,927,146	3,654,529	126,457,836
Travis	52,013,117	9,643,309	0	0	3,904,559	0	8,349,762	1,370,123	75,280,870
MRSA Central	56,677,060	8,937,423	0	0	3,688,625	0	4,904,837	1,573,418	75,781,363
MRSA Northeast	88,184,322	18,610,776	0	0	6,193,932	0	5,656,790	1,759,682	120,405,502
MRSA West	64,603,237	10,935,368	0	0	4,295,191	0	6,691,918	1,373,159	87,898,873
Total	1,061,481,926	221,897,975	0	0	51,683,154	0	101,753,219	32,013,110	1,468,829,384

FY2021 STAR+PLUS Rating - Pharmacy Amended
 Pharmacy Adjustments
 Hepatitis C Drug Carve-out

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Rate Adjustment Factor (3)									
Bexar	-4.09%	-1.35%	0.00%	0.00%	-2.17%	0.00%	-1.34%	-1.45%	-3.29%
Dallas	-4.73%	-4.68%	0.00%	0.00%	0.00%	0.00%	-1.69%	-2.78%	-4.35%
El Paso	-2.45%	-2.05%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-2.07%
Harris	-2.58%	-2.17%	0.00%	0.00%	0.00%	0.00%	-1.96%	0.00%	-2.36%
Hidalgo	-1.36%	-0.92%	0.00%	0.00%	0.00%	0.00%	-1.66%	0.00%	-1.21%
Jefferson	-2.44%	-2.26%	0.00%	0.00%	0.00%	0.00%	-3.95%	0.00%	-2.35%
Lubbock	-1.85%	-2.37%	0.00%	0.00%	0.00%	0.00%	-4.58%	-1.62%	-2.06%
Nueces	-2.80%	-5.52%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	-3.03%
Tarrant	-3.07%	-1.82%	0.00%	0.00%	-0.12%	0.00%	-1.43%	-1.34%	-2.57%
Travis	-3.25%	-1.02%	0.00%	0.00%	-0.31%	0.00%	-1.28%	0.00%	-2.53%
MRSA Central	-3.89%	-2.06%	0.00%	0.00%	0.00%	0.00%	-1.71%	0.00%	-3.26%
MRSA Northeast	-2.89%	-2.58%	0.00%	0.00%	0.00%	0.00%	-2.45%	0.00%	-2.63%
MRSA West	-2.65%	-1.96%	0.00%	0.00%	-0.97%	0.00%	-0.63%	0.00%	-2.29%
Total	-3.04%	-2.32%	0.00%	0.00%	-0.35%	0.00%	-1.66%	-0.56%	-2.69%

Footnotes

- (1) Equals calendar year 2019 Hepatitis C drug cost.
 (2) Equals calendar year 2019 managed care pharmacy incurred claims.
 (3) Equals Cost Impact of Hepatitis C Drug Carve-out divided by CY2019 pharmacy incurred Claims.

FY2021 STAR+PLUS Rating Amended
Quality Incentive Payment Program (QIPP) Summary

MCOs (1)	Impacted Programs	SDA	Contracted Cost (2)	Projected Member Months (3)	PMPM Impact
Amerigroup, Molina, Superior	STAR+PLUS, Dual Demo	Bexar	\$ 45,612,160	26,629	\$ 1,712.85
Molina, Superior	STAR+PLUS, Dual Demo	Dallas	71,876,853	37,020	1,941.58
Amerigroup, Molina	STAR+PLUS, Dual Demo	El Paso	6,443,729	5,845	1,102.47
Amerigroup, Molina, United	STAR+PLUS, Dual Demo	Harris	74,832,991	45,083	1,659.88
HealthSpring, Molina, Superior	STAR+PLUS, Dual Demo	Hidalgo	26,644,731	18,177	1,465.81
Amerigroup, Molina, United	STAR+PLUS	Jefferson	17,576,402	11,256	1,561.47
Amerigroup, Superior	STAR+PLUS	Lubbock	20,027,672	10,264	1,951.23
Superior, United	STAR+PLUS	Nueces	20,446,083	11,741	1,741.41
Amerigroup, HealthSpring	STAR+PLUS, Dual Demo	Tarrant	61,904,220	34,033	1,818.93
Amerigroup, United	STAR+PLUS	Travis	42,955,045	19,373	2,217.25
Superior, United	STAR+PLUS	MRSA Central	42,008,978	27,742	1,514.30
HealthSpring, United	STAR+PLUS	MRSA Northeast	57,406,615	35,624	1,611.45
Amerigroup, Superior	STAR+PLUS	MRSA West	57,725,631	29,719	1,942.35

Footnotes:

(1) All MCOs will participate with all QIPP providers in their SDAs.

(2) Based on the total funding available that is allocated by the number of historical Medicaid days for each facility.

(3) Based on HHSC most recent caseload forecast. Includes the following risk groups: (i) STAR+PLUS Medicaid Only Nursing Facility, (ii) STAR+PLUS Dual Eligible Nursing Facility, and (iii) Dual Demo Nursing Facility.

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Impact of Reimbursement Change (1)									
Bexar SDA									
Amerigroup	5,119,931	921,837	0	0	542,307	0	157,534	68,157	6,809,767
Molina	4,050,874	1,099,833	0	0	593,819	0	83,169	165,339	5,993,033
Superior	22,167,509	5,908,089	0	0	2,106,706	0	1,361,654	906,718	32,450,675
Bexar Total	31,338,313	7,929,759	0	0	3,242,831	0	1,602,357	1,140,215	45,253,475
Dallas SDA									
Molina	32,722,701	10,026,192	0	0	2,798,695	0	688,760	1,249,588	47,485,935
Superior	26,795,259	5,460,501	0	0	3,596,493	0	1,245,881	2,713,032	39,811,166
Dallas Total	59,517,960	15,486,693	0	0	6,395,188	0	1,934,640	3,962,621	87,297,102
El Paso SDA									
Amerigroup	5,287,600	760,560	0	0	363,743	0	449,207	634,092	7,495,202
Molina	3,830,483	1,549,984	0	0	450,711	0	199,723	342,557	6,373,458
El Paso Total	9,118,083	2,310,544	0	0	814,454	0	648,930	976,649	13,868,660
Harris SDA									
Amerigroup	90,649,799	17,873,990	0	0	5,719,217	0	3,661,985	4,439,770	122,344,761
Molina	20,465,491	5,318,173	0	0	1,813,033	0	903,342	2,308,543	30,808,582
United	106,242,305	15,173,423	0	0	7,034,105	0	4,552,588	3,355,778	136,358,200
Harris Total	217,357,596	38,365,586	0	0	14,566,355	0	9,117,915	10,104,091	289,511,543
Hidalgo SDA									
Health Spring	5,099,055	1,829,030	0	0	577,862	0	155,642	315,113	7,976,703
Molina	4,713,979	1,779,963	0	0	711,520	0	153,154	696,571	8,055,187
Superior	13,015,715	5,833,551	0	0	1,199,038	0	596,199	1,619,339	22,263,843
Hidalgo Total	22,828,750	9,442,544	0	0	2,488,421	0	904,995	2,631,023	38,295,733
Jefferson SDA									
Amerigroup	9,523,448	1,419,346	0	0	894,752	0	150,923	244,381	12,232,850
Molina	6,709,230	2,631,077	0	0	662,962	0	155,250	298,261	10,456,779
United	14,125,502	1,046,747	0	0	768,105	0	375,772	632,108	16,948,234
Jefferson Total	30,358,179	5,097,170	0	0	2,325,819	0	681,945	1,174,750	39,637,863

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Lubbock SDA									
Amerigroup	4,998,996	686,319	0	0	396,841	0	192,244	435,276	6,709,675
Superior	5,194,151	753,072	0	0	523,202	0	260,181	634,496	7,365,102
Lubbock Total	10,193,147	1,439,391	0	0	920,043	0	452,425	1,069,772	14,074,778
Nueces SDA									
Superior	6,856,507	2,426,994	0	0	684,954	0	164,703	798,121	10,931,279
United	7,233,684	1,199,021	0	0	561,854	0	146,034	325,668	9,466,261
Nueces Total	14,090,191	3,626,015	0	0	1,246,808	0	310,737	1,123,789	20,397,540
Tarrant SDA									
Amerigroup	34,647,607	6,855,590	0	0	3,671,590	0	1,738,562	1,249,841	48,163,191
Health Spring	8,106,073	1,284,970	0	0	1,043,391	0	363,794	250,549	11,048,776
Tarrant Total	42,753,680	8,140,560	0	0	4,714,981	0	2,102,357	1,500,390	59,211,967
Travis SDA									
Amerigroup	8,006,162	1,509,915	0	0	854,102	0	258,234	309,055	10,937,467
United	11,828,631	1,384,248	0	0	1,139,296	0	534,196	683,446	15,569,815
Travis Total	19,834,793	2,894,162	0	0	1,993,397	0	792,429	992,500	26,507,283
MRSA Central SDA									
Superior	16,109,674	2,411,745	0	0	1,759,380	0	567,323	771,361	21,619,483
United	12,987,288	1,209,239	0	0	1,790,684	0	362,565	563,717	16,913,492
Central Total	29,096,962	3,620,983	0	0	3,550,063	0	929,887	1,335,078	38,532,975
MRSA Northeast SDA									
Health Spring	13,829,680	4,118,311	0	0	1,762,812	0	457,077	434,649	20,602,529
United	19,776,412	3,961,692	0	0	2,144,594	0	619,273	525,316	27,027,286
Northeast Total	33,606,092	8,080,003	0	0	3,907,406	0	1,076,350	959,965	47,629,816
MRSA West SDA									
Amerigroup	9,837,444	1,540,475	0	0	1,539,407	0	413,913	579,038	13,910,277
Superior	14,954,583	2,677,062	0	0	1,871,844	0	723,744	815,212	21,042,445
West Total	24,792,027	4,217,537	0	0	3,411,251	0	1,137,658	1,394,250	34,952,723

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
FY2019 Total Acute Care Incurred Claims (2)									
Bexar SDA									
Amerigroup	21,304,221	5,005,663	0	0	1,931,202	0	876,090	934,305	30,051,482
Molina	15,139,272	4,764,966	0	0	2,326,600	0	482,225	1,108,375	23,821,438
Superior	82,852,934	25,713,206	0	0	6,501,852	0	6,400,791	5,858,595	127,327,379
Bexar Total	119,296,428	35,483,835	0	0	10,759,654	0	7,759,106	7,901,275	181,200,298
Dallas SDA									
Molina	104,568,623	28,741,512	0	0	11,162,105	0	3,881,823	3,275,615	151,629,678
Superior	76,586,851	18,201,270	0	0	9,237,086	0	4,564,889	8,807,337	117,397,433
Dallas Total	181,155,473	46,942,783	0	0	20,399,191	0	8,446,712	12,082,952	269,027,112
El Paso SDA									
Amerigroup	24,204,236	4,533,814	0	0	1,000,156	0	2,151,737	2,850,880	34,740,824
Molina	17,277,586	7,587,881	0	0	1,250,548	0	1,226,598	1,393,127	28,735,742
El Paso Total	41,481,823	12,121,696	0	0	2,250,704	0	3,378,335	4,244,008	63,476,566
Harris SDA									
Amerigroup	119,468,224	23,895,349	0	0	6,923,276	0	5,863,728	7,173,363	163,323,940
Molina	34,113,255	9,955,736	0	0	2,848,970	0	1,735,813	2,754,552	51,408,326
United	152,580,434	29,913,998	0	0	9,319,038	0	7,931,235	11,180,477	210,925,181
Harris Total	306,161,913	63,765,083	0	0	19,091,284	0	15,530,775	21,108,392	425,657,447
Hidalgo SDA									
Health Spring	19,588,022	8,790,721	0	0	1,891,694	0	987,578	1,150,849	32,408,862
Molina	17,607,510	6,510,442	0	0	2,002,653	0	804,665	2,655,079	29,580,349
Superior	44,123,972	23,714,058	0	0	2,993,659	0	3,261,509	5,463,424	79,556,622
Hidalgo Total	81,319,504	39,015,220	0	0	6,888,006	0	5,053,752	9,269,352	141,545,834
Jefferson SDA									
Amerigroup	15,011,830	2,929,355	0	0	1,371,010	0	427,944	467,084	20,207,223
Molina	14,193,112	5,900,489	0	0	1,191,712	0	276,673	546,503	22,108,488
United	22,875,385	2,722,296	0	0	1,127,095	0	677,593	2,397,145	29,799,514
Jefferson Total	52,080,327	11,552,140	0	0	3,689,816	0	1,382,210	3,410,732	72,115,225

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Lubbock SDA									
Amerigroup	13,751,696	2,220,015	0	0	1,030,387	0	879,218	947,390	18,828,706
Superior	17,897,466	3,213,568	0	0	1,849,704	0	1,456,017	1,554,570	25,971,324
Lubbock Total	31,649,162	5,433,583	0	0	2,880,091	0	2,335,235	2,501,960	44,800,031
Nueces SDA									
Superior	21,257,461	8,531,817	0	0	1,595,282	0	896,444	2,743,251	35,024,255
United	20,028,374	4,128,005	0	0	1,481,481	0	586,704	1,348,890	27,573,454
Nueces Total	41,285,835	12,659,822	0	0	3,076,763	0	1,483,148	4,092,141	62,597,709
Tarrant SDA									
Amerigroup	81,251,305	20,410,941	0	0	9,267,233	0	5,894,564	7,165,911	123,989,954
Health Spring	26,449,405	5,137,484	0	0	3,161,324	0	1,815,375	1,817,534	38,381,122
Tarrant Total	107,700,711	25,548,425	0	0	12,428,557	0	7,709,938	8,983,445	162,371,076
Travis SDA									
Amerigroup	25,869,234	5,714,317	0	0	2,111,978	0	1,462,105	1,303,939	36,461,573
United	32,496,411	5,450,181	0	0	3,067,693	0	2,394,451	4,521,933	47,930,670
Travis Total	58,365,645	11,164,498	0	0	5,179,671	0	3,856,556	5,825,872	84,392,243
MRSA Central SDA									
Superior	44,646,324	7,390,120	0	0	4,552,344	0	2,112,270	2,640,301	61,341,359
United	30,007,539	4,157,994	0	0	4,468,882	0	987,362	1,521,775	41,143,552
Central Total	74,653,863	11,548,115	0	0	9,021,225	0	3,099,632	4,162,076	102,484,911
MRSA Northeast SDA									
Health Spring	44,392,254	13,828,281	0	0	4,744,009	0	2,028,764	2,063,393	67,056,701
United	53,663,667	12,079,524	0	0	5,537,496	0	2,116,608	3,771,530	77,168,825
Northeast Total	98,055,921	25,907,805	0	0	10,281,504	0	4,145,372	5,834,923	144,225,526
MRSA West SDA									
Amerigroup	27,959,220	5,418,615	0	0	3,636,575	0	1,567,410	2,109,052	40,690,872
Superior	43,895,348	9,120,989	0	0	4,699,651	0	3,062,607	3,454,595	64,233,189
West Total	71,854,568	14,539,603	0	0	8,336,226	0	4,630,016	5,563,647	104,924,061

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Rate Adjustment Factor (3)									
Bexar SDA									
Amerigroup	24.03%	18.42%	0.00%	0.00%	28.08%	0.00%	17.98%	7.29%	22.66%
Molina	26.76%	23.08%	0.00%	0.00%	25.52%	0.00%	17.25%	14.92%	25.16%
Superior	26.76%	22.98%	0.00%	0.00%	32.40%	0.00%	21.27%	15.48%	25.49%
Bexar Total	26.27%	22.35%	0.00%	0.00%	30.14%	0.00%	20.65%	14.43%	24.97%
Dallas SDA									
Molina	31.29%	34.88%	0.00%	0.00%	25.07%	0.00%	17.74%	38.15%	31.32%
Superior	34.99%	30.00%	0.00%	0.00%	38.94%	0.00%	27.29%	30.80%	33.91%
Dallas Total	32.85%	32.99%	0.00%	0.00%	31.35%	0.00%	22.90%	32.80%	32.45%
El Paso SDA									
Amerigroup	21.85%	16.78%	0.00%	0.00%	36.37%	0.00%	20.88%	22.24%	21.57%
Molina	22.17%	20.43%	0.00%	0.00%	36.04%	0.00%	16.28%	24.59%	22.18%
El Paso Total	21.98%	19.06%	0.00%	0.00%	36.19%	0.00%	19.21%	23.01%	21.85%
Harris SDA									
Amerigroup	75.88%	74.80%	0.00%	0.00%	82.61%	0.00%	62.45%	61.89%	74.91%
Molina	59.99%	53.42%	0.00%	0.00%	63.64%	0.00%	52.04%	83.81%	59.93%
United	69.63%	50.72%	0.00%	0.00%	75.48%	0.00%	57.40%	30.01%	64.65%
Harris Total	70.99%	60.17%	0.00%	0.00%	76.30%	0.00%	58.71%	47.87%	68.02%
Hidalgo SDA									
Health Spring	26.03%	20.81%	0.00%	0.00%	30.55%	0.00%	15.76%	27.38%	24.61%
Molina	26.77%	27.34%	0.00%	0.00%	35.53%	0.00%	19.03%	26.24%	27.23%
Superior	29.50%	24.60%	0.00%	0.00%	40.05%	0.00%	18.28%	29.64%	27.98%
Hidalgo Total	28.07%	24.20%	0.00%	0.00%	36.13%	0.00%	17.91%	28.38%	27.06%
Jefferson SDA									
Amerigroup	63.44%	48.45%	0.00%	0.00%	65.26%	0.00%	35.27%	52.32%	60.54%
Molina	47.27%	44.59%	0.00%	0.00%	55.63%	0.00%	56.11%	54.58%	47.30%
United	61.75%	38.45%	0.00%	0.00%	68.15%	0.00%	55.46%	26.37%	56.87%
Jefferson Total	58.29%	44.12%	0.00%	0.00%	63.03%	0.00%	49.34%	34.44%	54.96%

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
Lubbock SDA									
Amerigroup	36.35%	30.92%	0.00%	0.00%	38.51%	0.00%	21.87%	45.94%	35.64%
Superior	29.02%	23.43%	0.00%	0.00%	28.29%	0.00%	17.87%	40.81%	28.36%
Lubbock Total	32.21%	26.49%	0.00%	0.00%	31.94%	0.00%	19.37%	42.76%	31.42%
Nueces SDA									
Superior	32.25%	28.45%	0.00%	0.00%	42.94%	0.00%	18.37%	29.09%	31.21%
United	36.12%	29.05%	0.00%	0.00%	37.93%	0.00%	24.89%	24.14%	34.33%
Nueces Total	34.13%	28.64%	0.00%	0.00%	40.52%	0.00%	20.95%	27.46%	32.59%
Tarrant SDA									
Amerigroup	42.64%	33.59%	0.00%	0.00%	39.62%	0.00%	29.49%	17.44%	38.84%
Health Spring	30.65%	25.01%	0.00%	0.00%	33.00%	0.00%	20.04%	13.79%	28.79%
Tarrant Total	39.70%	31.86%	0.00%	0.00%	37.94%	0.00%	27.27%	16.70%	36.47%
Travis SDA									
Amerigroup	30.95%	26.42%	0.00%	0.00%	40.44%	0.00%	17.66%	23.70%	30.00%
United	36.40%	25.40%	0.00%	0.00%	37.14%	0.00%	22.31%	15.11%	32.48%
Travis Total	33.98%	25.92%	0.00%	0.00%	38.49%	0.00%	20.55%	17.04%	31.41%
MRSA Central SDA									
Superior	36.08%	32.63%	0.00%	0.00%	38.65%	0.00%	26.86%	29.21%	35.24%
United	43.28%	29.08%	0.00%	0.00%	40.07%	0.00%	36.72%	37.04%	41.11%
Central Total	38.98%	31.36%	0.00%	0.00%	39.35%	0.00%	30.00%	32.08%	37.60%
MRSA Northeast SDA									
Health Spring	31.15%	29.78%	0.00%	0.00%	37.16%	0.00%	22.53%	21.06%	30.72%
United	36.85%	32.80%	0.00%	0.00%	38.73%	0.00%	29.26%	13.93%	35.02%
Northeast Total	34.27%	31.19%	0.00%	0.00%	38.00%	0.00%	25.97%	16.45%	33.02%

FY2021 STAR+PLUS Rating - Medical Amended
 UHRIP Adjustment
 Impact of UHRIP Rate Increase

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP	Grand Total
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible			
MRSA West SDA									
Amerigroup	35.18%	28.43%	0.00%	0.00%	42.33%	0.00%	26.41%	27.45%	34.19%
Superior	34.07%	29.35%	0.00%	0.00%	39.83%	0.00%	23.63%	23.60%	32.76%
West Total	34.50%	29.01%	0.00%	0.00%	40.92%	0.00%	24.57%	25.06%	33.31%

Footnotes

- (1) Equals the cost impact from increased UHRIP reimbursement effective 3/1/2021.
 (2) Equals FY2019 health plan fee-for-service claims for all acute care services (from Encounter database).
 (3) Equals Cost Impact divided by FY2019 Total Acute Care Incurred Claims.

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
FY2021 Projected Acute Care Incurred Claims (1)								
Bexar SDA								
Amerigroup	501.01	1,360.73	0.00	0.00	1,138.73	0.00	302.25	2,248.35
Molina	578.51	1,274.21	0.00	0.00	1,056.30	0.00	344.93	2,997.27
Superior	596.77	1,409.23	0.00	0.00	1,346.15	0.00	448.68	2,200.34
Dallas SDA								
Molina	653.28	1,375.06	0.00	0.00	1,805.79	0.00	360.16	1,790.36
Superior	572.79	1,515.78	0.00	0.00	1,842.96	0.00	342.19	3,085.19
El Paso SDA								
Amerigroup	592.34	1,120.56	0.00	0.00	1,951.01	0.00	562.92	1,738.91
Molina	648.26	1,554.96	0.00	0.00	2,542.61	0.00	792.69	1,308.11
Harris SDA								
Amerigroup	656.89	1,820.90	0.00	0.00	1,682.83	0.00	384.94	2,805.03
Molina	713.40	1,728.86	0.00	0.00	1,753.98	0.00	462.98	2,743.27
United	695.70	1,521.67	0.00	0.00	1,534.12	0.00	390.87	2,095.65
Hidalgo SDA								
Health Spring	476.26	1,291.50	0.00	0.00	2,252.65	0.00	352.28	1,253.09
Molina	538.33	1,208.55	0.00	0.00	2,320.99	0.00	359.13	2,347.22
Superior	517.33	1,387.99	0.00	0.00	2,029.90	0.00	587.20	1,771.76
Jefferson SDA								
Amerigroup	529.31	1,435.10	0.00	0.00	1,478.64	0.00	462.69	1,976.06
Molina	656.80	1,695.97	0.00	0.00	1,809.76	0.00	400.27	1,985.88
United	655.80	1,367.48	0.00	0.00	1,065.94	0.00	278.19	2,613.96
Lubbock SDA								
Amerigroup	643.11	1,323.61	0.00	0.00	1,055.51	0.00	368.16	2,294.47
Superior	551.81	1,629.55	0.00	0.00	1,162.74	0.00	361.85	2,125.76
Nueces SDA								
Superior	542.52	1,345.16	0.00	0.00	1,261.24	0.00	335.25	2,166.18
United	555.35	1,103.87	0.00	0.00	1,051.82	0.00	289.85	1,964.75

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
Tarrant SDA								
Amerigroup	614.46	1,560.96	0.00	0.00	1,430.56	0.00	365.76	2,267.93
Health Spring	638.08	1,760.65	0.00	0.00	1,327.29	0.00	318.56	2,878.76
Travis SDA								
Amerigroup	520.95	1,416.99	0.00	0.00	1,000.04	0.00	397.30	2,108.02
United	611.35	1,178.92	0.00	0.00	871.58	0.00	285.20	2,464.34
MRSA Central SDA								
Superior	563.86	1,383.33	0.00	0.00	1,210.39	0.00	329.04	2,259.87
United	607.44	1,511.06	0.00	0.00	1,160.80	0.00	347.90	2,894.09
MRSA Northeast SDA								
Health Spring	513.47	1,445.34	0.00	0.00	1,490.16	0.00	350.12	2,224.40
United	543.64	1,406.27	0.00	0.00	1,209.66	0.00	329.22	2,087.37
MRSA West SDA								
Amerigroup	550.28	1,557.82	0.00	0.00	1,319.98	0.00	386.55	1,702.58
Superior	559.88	1,421.51	0.00	0.00	1,204.79	0.00	390.82	2,367.23
Rate Adjustment (2)								
Bexar SDA								
Amerigroup	0.2403	0.1842	0.0000	0.0000	0.2808	0.0000	0.1798	0.0729
Molina	0.2676	0.2308	0.0000	0.0000	0.2552	0.0000	0.1725	0.1492
Superior	0.2676	0.2298	0.0000	0.0000	0.3240	0.0000	0.2127	0.1548
Dallas SDA								
Molina	0.3129	0.3488	0.0000	0.0000	0.2507	0.0000	0.1774	0.3815
Superior	0.3499	0.3000	0.0000	0.0000	0.3894	0.0000	0.2729	0.3080
El Paso SDA								
Amerigroup	0.2185	0.1678	0.0000	0.0000	0.3637	0.0000	0.2088	0.2224
Molina	0.2217	0.2043	0.0000	0.0000	0.3604	0.0000	0.1628	0.2459

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
Harris SDA								
Amerigroup	0.7588	0.7480	0.0000	0.0000	0.8261	0.0000	0.6245	0.6189
Molina	0.5999	0.5342	0.0000	0.0000	0.6364	0.0000	0.5204	0.8381
United	0.6963	0.5072	0.0000	0.0000	0.7548	0.0000	0.5740	0.3001
Hidalgo SDA								
Health Spring	0.2603	0.2081	0.0000	0.0000	0.3055	0.0000	0.1576	0.2738
Molina	0.2677	0.2734	0.0000	0.0000	0.3553	0.0000	0.1903	0.2624
Superior	0.2950	0.2460	0.0000	0.0000	0.4005	0.0000	0.1828	0.2964
Jefferson SDA								
Amerigroup	0.6344	0.4845	0.0000	0.0000	0.6526	0.0000	0.3527	0.5232
Molina	0.4727	0.4459	0.0000	0.0000	0.5563	0.0000	0.5611	0.5458
United	0.6175	0.3845	0.0000	0.0000	0.6815	0.0000	0.5546	0.2637
Lubbock SDA								
Amerigroup	0.3635	0.3092	0.0000	0.0000	0.3851	0.0000	0.2187	0.4594
Superior	0.2902	0.2343	0.0000	0.0000	0.2829	0.0000	0.1787	0.4081
Nueces SDA								
Superior	0.3225	0.2845	0.0000	0.0000	0.4294	0.0000	0.1837	0.2909
United	0.3612	0.2905	0.0000	0.0000	0.3793	0.0000	0.2489	0.2414
Tarrant SDA								
Amerigroup	0.4264	0.3359	0.0000	0.0000	0.3962	0.0000	0.2949	0.1744
Health Spring	0.3065	0.2501	0.0000	0.0000	0.3300	0.0000	0.2004	0.1379
Travis SDA								
Amerigroup	0.3095	0.2642	0.0000	0.0000	0.4044	0.0000	0.1766	0.2370
United	0.3640	0.2540	0.0000	0.0000	0.3714	0.0000	0.2231	0.1511
MRSA Central SDA								
Superior	0.3608	0.3263	0.0000	0.0000	0.3865	0.0000	0.2686	0.2921
United	0.4328	0.2908	0.0000	0.0000	0.4007	0.0000	0.3672	0.3704

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
MRSA Northeast SDA								
Health Spring	0.3115	0.2978	0.0000	0.0000	0.3716	0.0000	0.2253	0.2106
United	0.3685	0.3280	0.0000	0.0000	0.3873	0.0000	0.2926	0.1393
MRSA West SDA								
Amerigroup	0.3518	0.2843	0.0000	0.0000	0.4233	0.0000	0.2641	0.2745
Superior	0.3407	0.2935	0.0000	0.0000	0.3983	0.0000	0.2363	0.2360
Non Benefit Component								
Risk Margin	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %
Admin. Fee	2.50 %	2.50 %	2.50 %	2.50 %	2.50 %	2.50 %	2.50 %	2.50 %
Premium Tax	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %	1.75 %
Health Insurer Fee								
Non-Exempt	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
Exempt	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %	0.00 %
UHRIP Premium PMPM (3)								
Bexar SDA								
Amerigroup	128.08	266.65	0.00	0.00	340.17	0.00	57.81	174.37
Molina	164.69	312.86	0.00	0.00	286.77	0.00	63.30	475.74
Superior	169.89	344.51	0.00	0.00	463.99	0.00	101.52	362.35
Dallas SDA								
Molina	217.46	510.23	0.00	0.00	481.61	0.00	67.97	726.62
Superior	213.21	483.76	0.00	0.00	763.46	0.00	99.34	1,010.89
El Paso SDA								
Amerigroup	137.69	200.03	0.00	0.00	754.87	0.00	125.04	411.42
Molina	152.89	337.96	0.00	0.00	974.85	0.00	137.29	342.20
Harris SDA								
Amerigroup	530.26	1,448.97	0.00	0.00	1,478.92	0.00	255.74	1,846.84
Molina	455.29	982.51	0.00	0.00	1,187.48	0.00	256.31	2,445.89
United	515.33	821.05	0.00	0.00	1,231.86	0.00	238.68	669.05

FY2021 STAR+PLUS Rating - Medical Amended
UHRIP Adjustment
Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
Hidalgo SDA								
Health Spring	131.88	285.92	0.00	0.00	732.11	0.00	59.06	365.00
Molina	153.31	351.51	0.00	0.00	877.28	0.00	72.70	655.22
Superior	162.35	363.24	0.00	0.00	864.87	0.00	114.19	558.67
Jefferson SDA								
Amerigroup	357.23	739.69	0.00	0.00	1,026.56	0.00	173.61	1,099.87
Molina	330.29	804.50	0.00	0.00	1,071.03	0.00	238.93	1,153.08
United	430.81	559.36	0.00	0.00	772.80	0.00	164.13	733.30
Lubbock SDA								
Amerigroup	248.69	435.38	0.00	0.00	432.42	0.00	85.66	1,121.36
Superior	170.36	406.17	0.00	0.00	349.93	0.00	68.79	922.90
Nueces SDA								
Superior	186.13	407.13	0.00	0.00	576.15	0.00	65.52	670.36
United	213.40	341.14	0.00	0.00	424.42	0.00	76.75	504.57
Tarrant SDA								
Amerigroup	278.73	557.79	0.00	0.00	602.97	0.00	114.75	420.77
Health Spring	208.05	468.45	0.00	0.00	465.96	0.00	67.91	422.32
Travis SDA								
Amerigroup	171.52	398.26	0.00	0.00	430.23	0.00	74.64	531.49
United	236.74	318.56	0.00	0.00	344.37	0.00	67.69	396.13
MRSA Central SDA								
Superior	216.42	480.19	0.00	0.00	497.67	0.00	94.02	702.24
United	279.68	467.47	0.00	0.00	494.82	0.00	135.90	1,140.39

FY2021 STAR+PLUS Rating - Medical Amended
 UHRIP Adjustment
 Calculation of UHRIP Premium Rate PMPM

	Medicaid Only		Dual Eligible		Nursing Facility		IDD	MBCCP
	OCC	HCBS	OCC	HCBS	Medicaid Only	Dual Eligible		
MRSA Northeast SDA								
Health Spring	170.15	457.90	0.00	0.00	589.09	0.00	83.92	498.36
United	213.12	490.70	0.00	0.00	498.41	0.00	102.48	309.33
MRSA West SDA								
Amerigroup	205.95	471.16	0.00	0.00	594.41	0.00	108.60	497.19
Superior	202.93	443.84	0.00	0.00	510.50	0.00	98.24	594.33

Footnotes

- (1) Projected claims pmpm based on individual MCO rating described in Attachment 2.
- (2) From Exhibit A Revised.
- (3) (1) x (2) divided by (1 - non-benefit component).