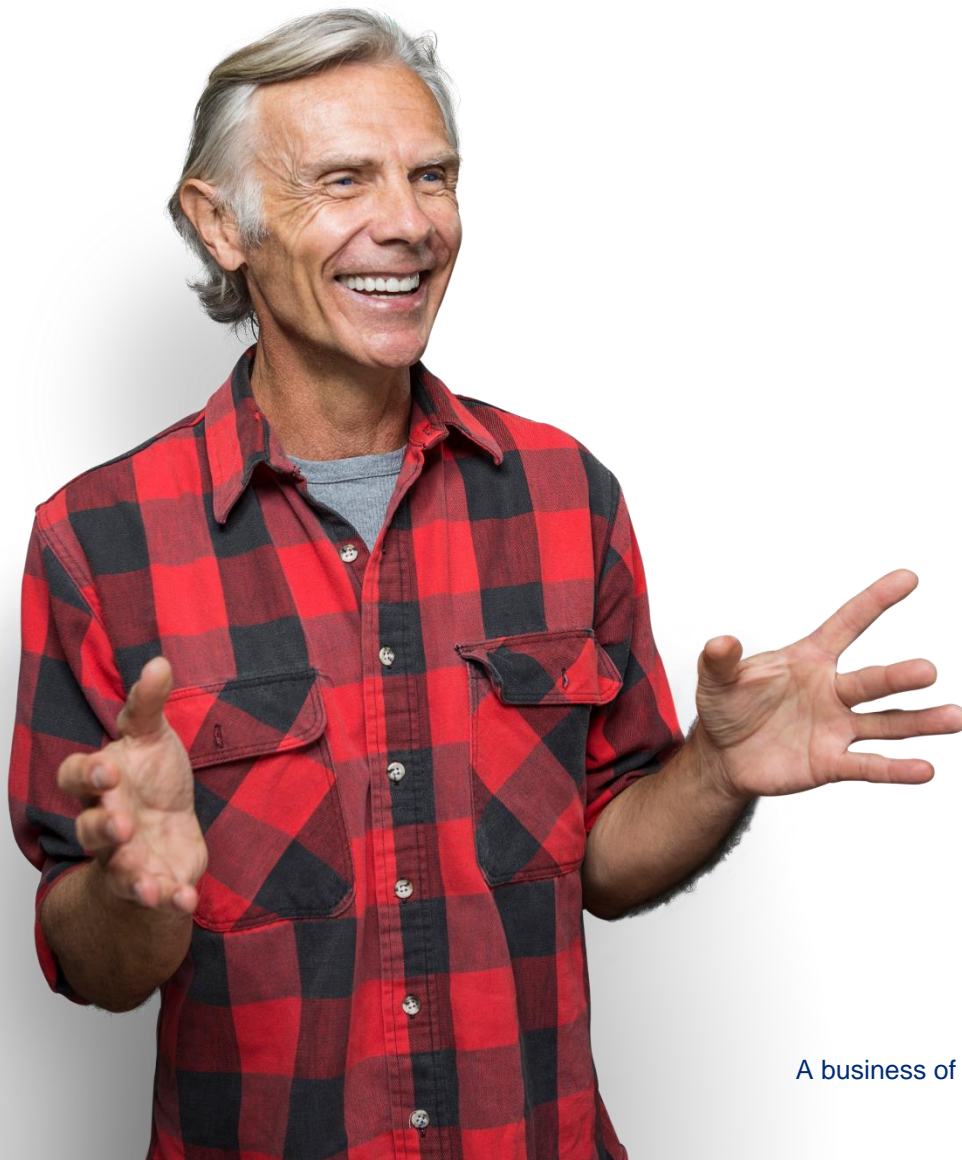


Community HealthChoices

Encounter Databook

Commonwealth of Pennsylvania

June 15, 2023



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Section 1

Introduction

Overview

The Commonwealth of Pennsylvania (Commonwealth) Department of Human Services (DHS) and the Pennsylvania Department of Aging implemented Community HealthChoices (CHC), a managed long-term care program to advance the goal of increasing opportunities for older Pennsylvanians and individuals with physical disabilities to remain in their homes. CHC is a statewide mandatory program through which eligible participants receive medical assistance (MA) physical health (PH) benefits and long-term services and supports, including nursing facility (NF) services and home- and community-based services (HCBS).

DHS contracted with Mercer Government Human Services Consulting (Mercer), part of Mercer Health & Benefits LLC, to provide actuarial rate development support for the CHC program.

Purpose of this Databook

The intent of this databook is to summarize historical Medicaid cost and utilization information for the CHC program as submitted by the CHC-managed care organizations (MCOs) through PROMISE™. The submitted CHC program encounter data reflects the covered populations and services as outlined in the agreement between DHS and the CHC-MCOs (Agreement).

The Medicaid encounter data in this databook dated June 15, 2023 will be the base data starting point for Calendar Year (CY) 2024 CHC capitation rate development. The adjustments outlined in Section 5 will be applied to this data set as necessary to develop the CHC Medicaid capitation rates.

Content of this Databook

This databook contains statewide cost and utilization encounter data from the CHC-MCOs participating in CHC (as listed in Table 1) for acute medical services, NF services, and HCBS.

Mercer and the Office of Long-Term Living (OLTL) recognize that the State Fiscal Year (SFY) 2021–2022 time period still contains impacts from the Coronavirus Disease 2019 (COVID-19) public health emergency (PHE) and will make necessary adjustments as described within Section 5 as part of the capitation rate development process.

Table 1: SFY 2021–2022 CHC-MCOs

Southwest Zone, Lehigh/Capital Zone, Northeast Zone, Northwest Zone
AmeriHealth Caritas Pennsylvania CHC (AHC)
PA Health & Wellness (PHW)
UPMC CHC (UPMC)
Southeast Zone
Keystone First CHC (KF)
PHW
UPMC

To create this databook, Mercer aggregated the CHC-MCOs’ submitted encounter data by population group and category of service (COS), as further outlined below.

Time Periods

The information in this databook is summarized for the following time period:

- CHC-MCO submitted PROMISe Encounter Data (based on date of service):
 - SFY 2021–2022 (July 1, 2021, through June 30, 2022) paid through December 31, 2022
- Member month (MM) information derived from OLTL capitation payment files (820 files):
 - SFY 2021–2022 (July 1, 2021, through June 30, 2022) as of December 31, 2022

Rating Regions

Within the Southwest and Southeast zones, separate capitation rating regions were established consistent with the CY 2023 rate-setting approach to address cost differentials within those zones.

This databook contains information regarding the CHC eligible populations in the rating regions noted in Table 2.

Table 2: Rating Regions

Rating Region	Counties Included
Southwest — Allegheny	Allegheny
Southwest — 13 counties	Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Fayette, Greene, Indiana, Lawrence, Somerset, Washington, Westmoreland
Southeast — Philadelphia	Philadelphia
Southeast — 4 counties	Bucks, Chester, Delaware, Montgomery

Rating Region	Counties Included
Lehigh/Capital	Adams, Berks, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Lancaster, Lebanon, Lehigh, Northampton, Perry, York
Northeast	Bradford, Carbon, Centre, Clinton, Columbia, Juniata, Lackawanna, Luzerne, Lycoming, Mifflin, Monroe, Montour, Northumberland, Pike, Schuylkill, Snyder, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming
Northwest	Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, McKean, Mercer, Potter, Venango, Warren

Caveats

This report covers historical encounter and eligibility data supplied by the Commonwealth for the CHC program and base data adjustments applied by Mercer for purposes of capitation rate development.

Documents included in this communication are this “CY24_ENC_PA_CHC_Databook” PDF document as well as the “CY24 ENC Databook Exhibits_to_PA.xlsx” Excel file of the Data Summaries outlined in Section 7 of this document.

This report is prepared on behalf of the Commonwealth and is intended to be relied upon by the Commonwealth. It should be read in its entirety and has been prepared under the direction of Tom Dahl, FSA, MAAA, Angela Ugstad, ASA, MAAA, and Krissy van Laarhoven, FSA, MAAA who are members of the American Academy of Actuaries and meet the US Qualification Standard for issuing the statements of actuarial opinion herein. They are available at tom.dahl@mercer.com, angela.ugstad@mercer.com and krissy.van.laarhoven@mercer.com if this audience has questions.

To the best of Mercer’s knowledge, there are no conflicts of interest in performing this work.

The suppliers of data are solely responsible for its validity and completeness. Mercer has reviewed the data and information for internal consistency and reasonableness, but we did not audit it. All estimates are based upon the information and data available at a point in time and are subject to unforeseen and random events, and actual experience will vary from estimates.

Mercer expressly disclaims responsibility, liability, or both for any reliance on this communication by third parties or the consequences of any unauthorized use.

Users of this databook are cautioned against relying solely on the data contained herein. The Commonwealth and Mercer provide no guarantee, written or implied, that this databook is 100% accurate or error-free. This document is being provided for informational purposes only. The Commonwealth and Mercer reserve the right to refine it as they see fit at any time.

Section 2

Covered Populations

Population Groups

The Agreement outlines the individuals within the Commonwealth’s Medicaid program who are eligible for the CHC program. In addition to cost differentials across rating regions, the CHC capitation rates will consider the different risk characteristics of the eligible populations. Although population grouping summaries have been prepared to inform the CHC-MCOs of the service utilization profiles and per member costs across the CHC eligible Medicaid population, it is important to note the population groups do not represent the rate cells for which capitation rates will be paid. DHS will continue to use a blended rate cell structure for the Nursing Facility Clinically Eligible (NFCE) populations. This means that for individuals within a certain age group and dual eligibility status, a single capitation payment will be made regardless of whether the individual resides in a NF or receives services in the community through the CHC HCBS Waiver.

Table 3 illustrates the population groups summarized within this databook along with the corresponding capitation payment rate cells.

Table 3: Population and Capitation Rate Cells

Population Group ¹	Capitation Rate Cell
Dually Eligible Individuals Residing in a NF (FAC)	NFCE Duals
Dually Eligible Individuals Enrolled in the HCBS Waiver (WAV)	
Medicaid Only Individuals Residing in a NF (FAC)	NFCE Non-Duals
Medicaid Only Individuals Enrolled in the HCBS Waiver (WAV)	
Dually Eligible Individuals Not Residing in a NF or Enrolled in the HCBS Waiver	Nursing Facility Ineligible (NFI) Duals

For individuals temporarily residing in a NF while concurrently enrolled in the HCBS Waiver, their cost and membership data were only counted once for a given month under the applicable NF group (and not also under the HCBS Waiver group).

¹ Population groups and capitation rate cells are further delineated by age groupings (ages 21–59 and ages 60 and older) and rating region.

Section 3

Covered Services

The specific services covered by the CHC-MCOs are detailed in the Agreement. The data summaries reflect historical costs for the covered services; any differences between historical service offerings and prospective service offerings will be considered during the capitation rate development process.

For purposes of illustrating the cost and utilization patterns of the CHC eligible population groups, the historical data was summarized by major service categories. The CHC capitation rates will be established at the rate cell level, encompassing all services therein (i.e., capitation rates will not be established on a service level). Table 4 includes the major service categories outlined in the databook summaries. Note that any service coordination encounters were excluded from this databook as consideration for those activities is included as part of the non-benefit load assumptions in CHC capitation rate development.

Table 4: Covered Services

Medical Services	HCBS Waiver Services
Ambulance	Day Habilitation and Adult Day
Dental	Employment
Durable Medical Equipment (DME)/Supplies	Home Health/Therapies
Emergency Room	Other Waiver
Federally Qualified Health Center/Rural Health Clinic (FQHC/RHC)	Participant Directed Services/Financial Management Services (PDS/FMS)
Home Health	Personal Assistance
Hospice	Residential Habilitation
Inpatient	Respite
Laboratory/Radiology	Vendor Services
NF	Waiver DME/Supplies
Other Medical	
Outpatient	
Pharmacy	
Physician	
Vision	

DHS has separate agreements for behavioral health (BH) MCOs providing BH services to the CHC eligible population, as well as PH-MCOs providing acute medical services to other MA populations.

Section 4

Base Data and Adjustments Reflected in this Databook

The Commonwealth provided Mercer with historical Medicaid CHC encounter data and OLTL capitation payment information. This section provides additional detail on the encounter data utilized as well as a brief explanation of the adjustments applied to the data. These adjustments are reflected in the summaries shown in Section 7.

As part of the encounter data review and validation process, Mercer makes several adjustments to ensure the data is appropriate for use in rate setting. The following is a summary of the data criteria and adjustments applied to the SFY 2021–2022 encounter data:

- Data reflects both voided and adjusted encounters.
- Data only includes CHC-MCO encounter records that pass the required PROMISe edits.
- The final payment is net of these claim adjustments: recipient spend-down expenses, third-party liability recoveries, participant copayments, coinsurance and deductibles, and monthly payments made by Medicaid recipients (e.g., net available monthly income).
- Pharmacy encounters are gross of all market share and state supplemental rebates.
- Encounter data is allocated to COS according to the CHC Medical Service Group Hierarchy found in Appendix B(1) and Appendix B(2) of the financial reporting requirements package and exclude service coordination.
- Eligibility was attached to the encounter data based on capitation payment data provided by DHS. Attaching eligibility to the encounter data provided member demographic information, such as population group and rating region.
- Costs related to delivery of COVID-19 vaccines (and associated boosters) have been removed from the encounter data as these are included in DHS' COVID-19 Vaccine Non-Risk Arrangement for CY 2024. This includes both the cost of the vaccine as well as the administration of the vaccine/boosters.

Completion Factors

As noted, this databook includes claims for dates of service from July 1, 2021 through June 30, 2022 and reflects payments through December 2022. Mercer performed an analysis of the encounter data and CHC-MCOs' Report #4 (lag triangles) data, covering the same incurred and paid time periods, to estimate incurred but not paid claims (those claims not yet adjudicated). The data were analyzed using broad categories of service to reflect differing payment patterns based on the service provided. Based on this review, Mercer developed the completion factors, shown in Table 5, by which paid claims and utilization were adjusted.

Table 5: Completion Factors

COS	Dual Status	SFY 2021–2022
NF	Dual	1.006
	Non-Dual	1.002
Pharmacy	Dual	1.009
	Non-Dual	1.001
Other Medical	Dual	1.025
	Non-Dual	1.019
Personal Assistance	N/A (Total)	1.001
Other HCBS Waiver	N/A (Total)	1.004
Total		1.004

Program Costs Outside Encounters Adjustment

As part of the encounter data validation efforts, Mercer analyzed comparisons between the CHC-MCOs’ encounter data and the quarter-ending December 31, 2022 financial Report #4 (lag triangles) submissions to ensure the encounter data reflects valid CHC-MCO expenses that may be missing. Mercer worked with DHS and the CHC-MCOs to better understand the known drivers and issues causing differences between the two data sets and identify where CY 2024 rate-setting adjustments may be necessary.

Based on Mercer’s review of the supplemental information the CHC-MCOs provided to help explain the observed differences between the encounter and financial data sets, Mercer applied an adjustment to consider program costs outside encounters for CHC covered services and populations, specific to the July 1, 2021 through June 30, 2022 service dates with claim payment dates through December 31, 2022. Please note, this is a shift away from the full encounter to financial alignment adjustment approach used in prior CHC databooks. Mercer made this shift in order to continue the transition to rely primarily on the encounter data.

Additionally, to capture amounts not reflected within the submitted encounters or financial Report #4 (lag triangles) submissions, Mercer reviewed CHC-MCO sub-capitation, settlement, and other purchasing arrangement amounts reported as separate line items in the quarter-ending December 31, 2022 financial Report #4 submissions, and included as applicable.

Tables 6a and 6b summarize the program costs outside encounters adjustment made to the SFY 2021–2022 submitted and completed encounter data by rating region and dual status of participants (as available within the Report #4 information) for each major COS. Additional detail specific to this adjustment is included in Appendix A.

Table 6a: Program Costs Outside Encounters Adjustment

COS		Southwest — Allegheny	Southwest — 13 Counties	Southeast — Philadelphia	Southeast — 4 Counties
NF	Dual	3.5%	3.0%	3.6%	2.2%
	Non-Dual	3.0%	1.7%	3.8%	1.4%
Pharmacy	Dual	1.0%	-2.2%	0.3%	-0.9%
	Non-Dual	-0.1%	0.1%	0.0%	0.5%
Other Medical	Dual	37.3%	7.4%	5.4%	11.0%
	Non-Dual	2.1%	1.5%	1.7%	3.7%
Personal Assistance		5.2%	6.0%	3.0%	3.3%
Other HCBS Waiver		15.0%	4.3%	4.2%	1.3%
Total		5.9%	4.0%	2.9%	2.9%

Table 6b: Program Cost Outside Encounters Adjustment

COS		Lehigh/Capital	Northeast	Northwest	Statewide
NF	Dual	2.0%	2.6%	3.0%	2.6%
	Non-Dual	-0.9%	-2.3%	3.8%	1.5%
Pharmacy	Dual	1.5%	-0.1%	2.2%	0.2%
	Non-Dual	0.0%	0.7%	0.2%	0.1%
Other Medical	Dual	6.9%	4.9%	4.1%	9.0%
	Non-Dual	2.8%	2.7%	0.3%	2.1%
Personal Assistance		3.8%	4.9%	5.6%	3.6%
Other HCBS Waiver		1.2%	1.5%	1.6%	3.2%
Total		3.0%	3.2%	3.9%	3.3%

Section 5

Capitation Rate Development

Mercer will adjust the SFY 2021–2022 base data summarized in Section 7, in order to develop the CY 2024 CHC capitation rates. These adjustments are required by Centers for Medicare & Medicaid Services in determining actuarially sound rates for Medicaid managed care programs.

Below is a list of adjustments and programmatic changes (not necessarily all-inclusive) that may be applied during the rate-setting process. These adjustments have not been reflected in the databook summaries in Section 7:

1. Mercer may make adjustments to reflect expectations for enhancements in care management and/or efficient delivery of services within the managed care delivery system.
2. Mercer may adjust data sources for programmatic changes. The Programmatic Changes Chart in Section 6 describes the programmatic changes considered in the previous capitation rate range development process. This Programmatic Changes Chart may differ from actual programmatic changes applied during the CY 2024 rate development process. Programmatic changes may reflect:
 - A. Those that occurred during the historical data time period (SFY 2021–2022) and are not fully reflected in the applicable data time periods.
 - B. Those that occurred after the historical time period.
3. Mercer will project costs and utilization as part of the rate development process. The trends used to project these costs will be based on historical CHC program financial reports and encounter data. In addition, Mercer will consider cost and utilization trends experienced by other managed care programs within the Commonwealth and national trend indices. Cost and utilization will be trended to the midpoint of the rating period.
4. Mercer will review and consider CHC program data from the CHC-MCO financial reports.
5. Mercer may make adjustments to reflect provider payment requirements included in the Agreement.
6. Mercer will develop and apply assumptions during the capitation rate development process to include consideration for the CHC-MCOs' administrative and care management responsibilities under the Agreement. This will include consideration for underwriting margin, as well as any applicable taxes and fees.
7. Mercer will make an adjustment to reflect enrollment patterns for the HCBS Waiver and NF populations that have occurred since the historical data time periods. An adjustment for prospective changes in the mix between NF and HCBS Waiver individuals may be made as well.

Section 6

Programmatic Changes Chart

Table 7 describes the programmatic changes previously considered in the capitation rate range development process. This Programmatic Changes Chart may differ from actual programmatic changes applied during the CY 2024 rate development process.

Table 7: Programmatic Changes Chart

Adjustment	Effective Date	Rate Cell	COS
Agency with Choice (AWC) — adjustment to account for the impact of individuals moving to or selecting the AWC service model instead of the current consumer-directed and agency models as well as the additional cost associated with the AWC vendor’s administrative fees.	TBD	All	Personal Assistance
Change in Medicare Part B Deductible — adjustment to account for increase in Medicaid liability due to change in the Medicare Part B deductible, since Medicaid pays for these amounts for duals.	January 1, 2018	NFCE and NFI Duals	All Medical Services except: Dental, Hospice, Inpatient, NF, Pharmacy, and Vision
COVID-19 Maintenance of Effort (MOE) — adjustment made to reflect the change in cost profile of the remaining CHC population after removing ineligible members enrolled as a result of the MOE policy.	March 18, 2020	NFI Duals	Total Capitation Rate
Home Accessibility DME — adjustment to account for the modified service definition of DME to include some home accessibility equipment.	April 1, 2020	NFCE	DME/Supplies and Vendor Services
MCO Assessment — includes a factor of 1.0096 to account for differences between MMs and person counts.	January 1, 2018	All	Total Capitation Rate
Medicare Advantage Maximum Out-of-Pocket — adjustment to account for the decrease in Medicaid liability due to the change in the Medicare Advantage Maximum Out-of-Pocket calculation to include all cost-sharing dollars.	January 1, 2023	NFCE and NFI Duals	All Medical Services except: Dental, Hospice, NF, Pharmacy, and Vision

Adjustment	Effective Date	Rate Cell	COS
NF Access to Care Payments — funding for Medicaid NF services to ensure quality of, and enhance access for CHC enrollees.	January 1, 2023	NFCE	NF
NF Staffing Ratio Regulations — adjustment to include funding to support the increased staffing ratio requirements.	January 1, 2023	All	NF
Personal Assistance Services (PAS) Fee Schedule Increase — adjustment to account for the CHC Agreement requirement that CHC-MCOs pay for PAS at no less than the approved OBRA waiver fee schedule, which increased by 8%.	January 1, 2022	All	Personal Assistance
Philadelphia Ambulance Fee Schedule Increase — adjustment made to account for the impact of the requirement that the Philadelphia Ambulance provider be paid 105% of the Medicare Urban Fee for select ground ambulance procedure codes.	January 1, 2023	All	Ambulance

Section 7

Data Summaries

Data summaries for the SFY 2021–2022 historical time period is summarized by rating region, age group, population group, and COS. Each summary contains the following information:

- **Rating Region:** Data for each rating region are shown separately.
- **Age Group:** The data are summarized separately for two age bands: Ages 21–59 and Ages 60 and older.
- **Time Period:** Tables are provided for the SFY 2021–2022 time period.
- **CHC Eligible Population Group:** For each age group, the data are summarized into five population groups. As mentioned previously, these groupings differ from the rate cells that will be used to process capitation payments.
- **MMs:** Number of total months that all individuals within the population group were eligible during the historical time period.
- **COS:** As outlined in Section 3, this includes all covered services outlined in the Agreement as observed in the historical data.
- **Per Member Per Month (PMPM) Costs:** PMPM costs are calculated by taking the historical Medicaid claims expense for a given COS and dividing that total claims expense by the corresponding MMs.
- **Unit Cost:** Represents the average cost per unit of each COS; this is calculated by taking the total claims expense and dividing by the total utilization amount.
- **Utilization Per 1,000:** Calculated as the total utilization for each service divided by total MMs multiplied by 12,000.

Rating Region	Southwest — Allegheny
Age Group	21–59
Time Period	SFY 2021–2022

	CHC Eligible Population Group																	
	Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months	2,119			14,845			1,646			16,206			107,012			141,828		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services																		
Ambulance	\$ 5.43	\$ 32.31	2,018	\$ 17.79	\$ 69.85	3,057	\$ 48.78	\$ 189.78	3,084	\$ 31.29	\$ 153.15	2,452	\$ 0.61	\$ 33.97	216	\$ 6.55	\$ 94.76	829
Dental	\$ 5.00	\$ 36.24	1,656	\$ 4.11	\$ 26.41	1,867	\$ 10.26	\$ 64.00	1,924	\$ 7.51	\$ 58.53	1,541	\$ 3.40	\$ 28.53	1,429	\$ 4.05	\$ 32.44	1,497
DME/Supplies	\$ 36.58	\$ 1.42	308,195	\$ 52.20	\$ 1.01	619,634	\$ 109.98	\$ 25.98	50,791	\$ 153.55	\$ 2.91	634,000	\$ 6.25	\$ 1.72	43,643	\$ 29.55	\$ 2.02	175,425
Emergency Room	\$ 3.28	\$ 18.38	2,138	\$ 1.31	\$ 8.05	1,949	\$ 18.95	\$ 92.66	2,454	\$ 25.97	\$ 91.52	3,405	\$ 1.51	\$ 11.54	1,565	\$ 4.51	\$ 29.49	1,835
FQHC/RHC	\$ 0.21	\$ 155.28	16	\$ 0.62	\$ 85.48	87	\$ 0.15	\$ 229.12	8	\$ 4.65	\$ 187.52	298	\$ 0.53	\$ 81.70	78	\$ 1.00	\$ 117.50	102
Home Health	\$ -	\$ -	8	\$ 1.08	\$ 4.24	3,055	\$ 18.59	\$ 95.44	2,338	\$ 73.32	\$ 65.16	13,504	\$ 1.20	\$ 27.46	524	\$ 9.61	\$ 50.47	2,285
Hospice	\$ 0.24	\$ -	-	\$ 0.02	\$ 15.06	14	\$ 14.48	\$ -	-	\$ 5.45	\$ 8,380.49	8	\$ 0.03	\$ 6.09	58	\$ 0.82	\$ 212.38	46
Inpatient	\$ 106.29	\$ 212.10	6,014	\$ 56.43	\$ 168.61	4,016	\$ 1,109.21	\$ 1,483.49	8,972	\$ 527.69	\$ 1,620.83	3,907	\$ 23.40	\$ 204.01	1,376	\$ 98.32	\$ 562.00	2,099
Laboratory/Radiology	\$ 12.95	\$ 5.56	27,946	\$ 7.91	\$ 2.69	35,241	\$ 105.03	\$ 24.01	52,492	\$ 69.70	\$ 20.42	40,960	\$ 6.14	\$ 4.08	18,058	\$ 14.83	\$ 7.73	23,021
Nursing Facility	\$ 4,649.45	\$ 163.48	341,284	\$ 33.68	\$ 147.29	2,744	\$ 5,281.84	\$ 191.90	330,285	\$ 32.54	\$ 170.15	2,295	\$ 4.11	\$ 124.11	397	\$ 141.12	\$ 173.11	9,782
Other Medical	\$ 4.86	\$ 2.76	21,135	\$ 25.50	\$ 9.64	31,746	\$ 30.80	\$ 23.83	15,512	\$ 42.25	\$ 22.31	22,725	\$ 3.46	\$ 2.64	15,690	\$ 10.53	\$ 6.93	18,254
Outpatient	\$ 42.18	\$ 8.02	63,092	\$ 28.83	\$ 4.17	82,987	\$ 227.87	\$ 64.80	42,195	\$ 113.98	\$ 54.79	24,963	\$ 9.94	\$ 9.02	13,228	\$ 26.82	\$ 14.02	22,952
Pharmacy	\$ 13.30	\$ 13.63	11,710	\$ 16.88	\$ 12.20	16,605	\$ 931.33	\$ 82.56	135,369	\$ 877.76	\$ 122.43	86,031	\$ 10.82	\$ 19.84	6,546	\$ 121.23	\$ 79.70	18,253
Physician	\$ 22.62	\$ 4.81	56,463	\$ 19.16	\$ 5.69	40,419	\$ 277.36	\$ 46.83	71,072	\$ 123.53	\$ 51.57	28,744	\$ 10.28	\$ 5.28	23,354	\$ 27.44	\$ 12.28	26,805
Vision	\$ 0.82	\$ 13.66	716	\$ 0.95	\$ 19.32	589	\$ 4.04	\$ 40.35	1,203	\$ 2.78	\$ 39.92	834	\$ 0.66	\$ 18.18	435	\$ 0.97	\$ 22.90	510
Medical Services Subtotal	\$ 4,903.20	N/A	N/A	\$ 266.47	N/A	N/A	\$ 8,188.67	N/A	N/A	\$ 2,091.98	N/A	N/A	\$ 82.33	N/A	N/A	\$ 497.34	N/A	N/A
HCBS Waiver Services																		
Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 9.82	\$ 41.53	2,839	\$ -	\$ -	-	\$ 4.75	\$ 37.64	1,514	\$ -	\$ -	-	\$ 1.57	\$ 40.10	470
Employment	\$ -	\$ -	-	\$ 0.00	\$ 9.78	2	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.00	\$ 9.78	0
Home Health/Therapies	\$ -	\$ -	-	\$ 105.90	\$ 13.60	93,464	\$ -	\$ -	-	\$ 211.61	\$ 11.96	212,307	\$ -	\$ -	-	\$ 35.26	\$ 12.43	34,042
Other Waiver	\$ 0.11	\$ 51.23	26	\$ 32.78	\$ 15.79	24,917	\$ 1.63	\$ 331.48	59	\$ 12.90	\$ 16.01	9,666	\$ -	\$ -	-	\$ 4.93	\$ 15.92	3,714
PDS/FMS	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
Personal Assistance	\$ 5.97	\$ 4.50	15,916	\$ 3,049.62	\$ 4.39	8,333,933	\$ 11.57	\$ 4.36	31,843	\$ 4,182.02	\$ 4.52	11,102,170	\$ 0.36	\$ 4.43	980	\$ 797.55	\$ 4.47	2,142,233
Residential Habilitation	\$ 8.62	\$ 272.32	380	\$ 116.07	\$ 211.96	6,571	\$ -	\$ -	-	\$ 29.55	\$ 168.97	2,099	\$ -	\$ -	-	\$ 15.65	\$ 201.28	933
Respite	\$ -	\$ -	-	\$ 0.07	\$ 4.29	198	\$ -	\$ -	-	\$ 0.63	\$ 4.29	1,762	\$ -	\$ -	-	\$ 0.08	\$ 4.29	222
Vendor Services	\$ 6.67	\$ 159.08	503	\$ 121.78	\$ 9.71	150,560	\$ 21.14	\$ 72.36	3,506	\$ 91.77	\$ 8.83	124,676	\$ -	\$ -	-	\$ 23.58	\$ 9.41	30,053
Waiver DME/Supplies	\$ 0.09	\$ 7.92	131	\$ 2.04	\$ 2.55	9,602	\$ 0.02	\$ 7.92	34	\$ 1.31	\$ 3.25	4,838	\$ -	\$ -	-	\$ 0.36	\$ 2.80	1,560
HCBS Waiver Services Subtotal	\$ 21.45	N/A	N/A	\$ 3,438.09	N/A	N/A	\$ 34.36	N/A	N/A	\$ 4,534.52	N/A	N/A	\$ 0.36	N/A	N/A	\$ 878.99	N/A	N/A
Total Services	\$ 4,924.66	N/A	N/A	\$ 3,704.56	N/A	N/A	\$ 8,223.03	N/A	N/A	\$ 6,626.51	N/A	N/A	\$ 82.70	N/A	N/A	\$ 1,376.33	N/A	N/A

Rating Region	Southwest — Allegheny
Age Group	60+
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		33,600			51,537			1,794			9,081			167,661			263,673		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 2.60	\$ 29.11	1,070	\$ 7.98	\$ 50.84	1,883	\$ 34.66	\$ 172.67	2,409	\$ 38.31	\$ 215.69	2,131	\$ 0.73	\$ 37.00	237	\$ 3.91	\$ 62.97	745
	Dental	\$ 4.59	\$ 47.69	1,156	\$ 2.98	\$ 38.12	939	\$ 7.10	\$ 53.25	1,599	\$ 6.88	\$ 72.73	1,135	\$ 2.12	\$ 25.69	991	\$ 2.80	\$ 33.27	1,011
	DME/Supplies	\$ 8.33	\$ 2.21	45,218	\$ 49.16	\$ 0.80	735,948	\$ 22.38	\$ 13.67	19,647	\$ 96.69	\$ 2.64	440,042	\$ 7.70	\$ 1.25	74,111	\$ 19.04	\$ 1.08	212,024
	Emergency Room	\$ 0.51	\$ 9.06	672	\$ 0.98	\$ 8.15	1,442	\$ 18.47	\$ 98.89	2,241	\$ 22.08	\$ 83.74	3,164	\$ 0.67	\$ 8.99	888	\$ 1.57	\$ 17.78	1,056
	FQHC/RHC	\$ 0.04	\$ 107.94	5	\$ 1.61	\$ 96.75	200	\$ 0.22	\$ 129.50	21	\$ 8.53	\$ 192.24	533	\$ 0.63	\$ 78.80	96	\$ 1.02	\$ 102.36	119
	Home Health	\$ 0.06	\$ 20.54	32	\$ 0.86	\$ 9.41	1,103	\$ 11.60	\$ 92.33	1,508	\$ 62.25	\$ 81.85	9,126	\$ 0.28	\$ 11.49	289	\$ 2.57	\$ 42.44	728
	Hospice	\$ 1.01	\$ -	-	\$ 3.21	\$ 40,398.40	1	\$ 49.26	\$ 4,235.93	140	\$ 27.91	\$ -	-	\$ 0.65	\$ 948.48	8	\$ 2.47	\$ 4,637.53	6
	Inpatient	\$ 40.20	\$ 186.07	2,592	\$ 82.25	\$ 238.50	4,138	\$ 581.88	\$ 1,861.93	3,750	\$ 514.51	\$ 1,728.76	3,571	\$ 38.50	\$ 261.39	1,768	\$ 67.36	\$ 335.17	2,412
	Laboratory/Radiology	\$ 4.35	\$ 3.45	15,115	\$ 6.68	\$ 2.72	29,495	\$ 87.18	\$ 26.35	39,699	\$ 68.23	\$ 20.03	40,879	\$ 5.27	\$ 3.91	16,184	\$ 8.15	\$ 4.98	19,660
	Nursing Facility	\$ 4,710.90	\$ 160.37	352,502	\$ 72.61	\$ 153.02	5,694	\$ 5,508.26	\$ 189.08	349,592	\$ 37.69	\$ 170.08	2,660	\$ 28.80	\$ 155.19	2,227	\$ 671.58	\$ 161.44	49,918
	Other Medical	\$ 2.63	\$ 2.81	11,209	\$ 11.34	\$ 6.35	21,433	\$ 16.11	\$ 11.44	16,889	\$ 54.39	\$ 44.45	14,685	\$ 3.27	\$ 2.88	13,639	\$ 6.61	\$ 5.32	14,911
	Outpatient	\$ 9.39	\$ 10.79	10,438	\$ 14.83	\$ 9.75	18,245	\$ 105.17	\$ 21.00	60,112	\$ 126.33	\$ 105.92	14,312	\$ 5.30	\$ 9.27	6,863	\$ 12.53	\$ 14.80	10,162
	Pharmacy	\$ 7.38	\$ 7.36	12,037	\$ 13.75	\$ 12.47	13,233	\$ 553.47	\$ 57.33	115,847	\$ 715.86	\$ 95.90	89,576	\$ 8.36	\$ 17.59	5,702	\$ 37.36	\$ 38.59	11,620
	Physician	\$ 11.99	\$ 4.76	30,211	\$ 14.52	\$ 5.68	30,679	\$ 195.29	\$ 37.37	62,717	\$ 112.77	\$ 49.67	27,246	\$ 10.40	\$ 5.62	22,208	\$ 16.19	\$ 7.67	25,333
	Vision	\$ 0.99	\$ 18.46	647	\$ 0.88	\$ 14.41	736	\$ 3.46	\$ 38.08	1,090	\$ 3.17	\$ 41.78	910	\$ 0.83	\$ 14.97	668	\$ 0.96	\$ 16.74	689
Medical Services Subtotal	\$ 4,804.95	N/A	N/A	\$ 283.64	N/A	N/A	\$ 7,194.51	N/A	N/A	\$ 1,895.61	N/A	N/A	\$ 113.51	N/A	N/A	\$ 854.14	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 3.60	\$ 61.10	707	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.70	\$ 61.10	138
	Employment	\$ -	\$ -	-	\$ 0.02	\$ 11.15	26	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.00	\$ 11.15	5
	Home Health/Therapies	\$ -	\$ -	-	\$ 33.32	\$ 14.14	28,278	\$ -	\$ -	-	\$ 29.16	\$ 16.21	21,582	\$ -	\$ -	-	\$ 7.52	\$ 14.38	6,271
	Other Waiver	\$ 3.54	\$ 188.55	225	\$ 5.32	\$ 25.39	2,514	\$ 2.52	\$ 326.54	93	\$ 1.48	\$ 16.03	1,105	\$ -	\$ -	-	\$ 1.56	\$ 33.47	559
	PDS/FMS	\$ -	\$ -	-	\$ 0.93	\$ 84.81	132	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.18	\$ 84.81	26
	Personal Assistance	\$ 6.23	\$ 4.58	16,338	\$ 3,524.57	\$ 4.54	9,314,018	\$ 3.96	\$ 4.53	10,506	\$ 4,716.24	\$ 4.58	12,356,197	\$ 5.80	\$ 4.28	16,239	\$ 855.85	\$ 4.55	2,258,542
	Residential Habilitation	\$ -	\$ -	-	\$ 5.69	\$ 267.06	256	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 1.11	\$ 267.06	50
	Respite	\$ -	\$ -	-	\$ 0.42	\$ 4.24	1,196	\$ -	\$ -	-	\$ 1.59	\$ 4.29	4,445	\$ -	\$ -	-	\$ 0.14	\$ 4.26	387
	Vendor Services	\$ 4.26	\$ 96.32	531	\$ 107.95	\$ 8.32	155,715	\$ 8.79	\$ 284.60	370	\$ 71.99	\$ 9.26	93,255	\$ -	\$ -	-	\$ 24.18	\$ 8.61	33,718
	Waiver DME/Supplies	\$ 0.01	\$ 0.90	120	\$ 3.06	\$ 5.31	6,921	\$ 0.02	\$ 7.92	31	\$ 1.70	\$ 2.48	8,199	\$ -	\$ -	-	\$ 0.66	\$ 4.79	1,651
	HCBS Waiver Services Subtotal	\$ 14.05	N/A	N/A	\$ 3,684.89	N/A	N/A	\$ 15.29	N/A	N/A	\$ 4,822.15	N/A	N/A	\$ 5.80	N/A	N/A	\$ 891.90	N/A	N/A
Total Services	\$ 4,819.00	N/A	N/A	\$ 3,968.52	N/A	N/A	\$ 7,209.80	N/A	N/A	\$ 6,717.76	N/A	N/A	\$ 119.31	N/A	N/A	\$ 1,746.04	N/A	N/A	N/A

Rating Region	Southwest — 13 Counties
Age Group	21–59
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		3,709			23,878			2,985			16,018			198,093			244,683		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 2.59	\$ 19.51	1,590	\$ 7.85	\$ 67.48	1,396	\$ 61.41	\$ 209.52	3,517	\$ 38.17	\$ 225.23	2,034	\$ 0.43	\$ 34.67	149	\$ 4.40	\$ 115.58	457
	Dental	\$ 4.13	\$ 46.54	1,064	\$ 3.27	\$ 32.40	1,211	\$ 5.83	\$ 47.53	1,471	\$ 9.77	\$ 71.63	1,636	\$ 2.95	\$ 31.84	1,113	\$ 3.48	\$ 36.02	1,160
	DME/Supplies	\$ 13.90	\$ 1.02	163,390	\$ 46.93	\$ 0.98	572,228	\$ 83.95	\$ 19.25	52,322	\$ 260.23	\$ 3.65	856,249	\$ 5.39	\$ 1.69	38,254	\$ 27.21	\$ 2.24	145,981
	Emergency Room	\$ 1.08	\$ 11.27	1,152	\$ 0.95	\$ 8.51	1,340	\$ 21.95	\$ 99.90	2,637	\$ 29.44	\$ 100.05	3,531	\$ 0.71	\$ 8.66	988	\$ 2.88	\$ 28.54	1,211
	FQHC/RHC	\$ 0.12	\$ 74.57	19	\$ 2.19	\$ 106.83	246	\$ 0.49	\$ 126.15	46	\$ 5.16	\$ 170.11	364	\$ 1.83	\$ 97.85	225	\$ 2.04	\$ 106.29	231
	Home Health	\$ 0.10	\$ 57.67	21	\$ 4.74	\$ 19.52	2,911	\$ 18.18	\$ 77.93	2,800	\$ 106.13	\$ 58.41	21,802	\$ 0.66	\$ 20.01	395	\$ 8.17	\$ 47.44	2,066
	Hospice	\$ 0.58	\$ 166.36	42	\$ 0.04	\$ -	-	\$ 58.95	\$ 85,813.28	8	\$ 11.85	\$ 2,453.42	58	\$ 0.00	\$ 1.48	28	\$ 1.51	\$ 658.94	28
	Inpatient	\$ 48.15	\$ 184.28	3,136	\$ 38.86	\$ 148.50	3,140	\$ 747.61	\$ 1,481.70	6,055	\$ 660.19	\$ 1,737.23	4,560	\$ 10.50	\$ 145.03	869	\$ 65.36	\$ 548.55	1,430
	Laboratory/Radiology	\$ 6.24	\$ 3.28	22,819	\$ 5.99	\$ 2.62	27,432	\$ 129.14	\$ 21.32	72,669	\$ 89.39	\$ 19.80	54,185	\$ 4.46	\$ 2.74	19,521	\$ 11.72	\$ 6.05	23,260
	Nursing Facility	\$ 4,970.42	\$ 174.00	342,781	\$ 32.03	\$ 166.55	2,308	\$ 5,659.27	\$ 199.75	339,988	\$ 75.72	\$ 185.80	4,890	\$ 3.19	\$ 169.37	226	\$ 155.04	\$ 184.73	10,071
	Other Medical	\$ 7.54	\$ 4.77	18,988	\$ 22.86	\$ 10.94	25,083	\$ 55.05	\$ 28.43	23,238	\$ 65.54	\$ 28.63	27,474	\$ 2.94	\$ 3.19	11,036	\$ 9.69	\$ 8.45	13,752
	Outpatient	\$ 10.11	\$ 32.58	3,726	\$ 12.44	\$ 13.77	10,841	\$ 143.13	\$ 58.96	29,131	\$ 104.29	\$ 72.55	17,251	\$ 4.66	\$ 11.45	4,884	\$ 13.71	\$ 25.11	6,553
	Pharmacy	\$ 6.44	\$ 5.48	14,101	\$ 12.92	\$ 13.54	11,457	\$ 734.79	\$ 66.76	132,081	\$ 1,132.58	\$ 143.18	94,925	\$ 10.35	\$ 25.53	4,866	\$ 92.85	\$ 85.07	13,097
	Physician	\$ 15.28	\$ 3.90	47,034	\$ 12.32	\$ 4.96	29,789	\$ 224.52	\$ 40.28	66,884	\$ 149.07	\$ 48.26	37,063	\$ 8.40	\$ 5.77	17,484	\$ 20.73	\$ 11.84	21,017
	Vision	\$ 0.82	\$ 15.36	643	\$ 0.63	\$ 17.42	433	\$ 3.61	\$ 43.54	996	\$ 2.65	\$ 35.26	901	\$ 0.63	\$ 19.68	387	\$ 0.80	\$ 22.13	436
Medical Services Subtotal	\$ 5,087.51	N/A	N/A	\$ 204.02	N/A	N/A	\$ 7,947.88	N/A	N/A	\$ 2,740.17	N/A	N/A	\$ 57.13	N/A	N/A	\$ 419.61	N/A	N/A	
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 26.50	\$ 30.82	10,318	\$ 0.49	\$ 22.66	257	\$ 14.75	\$ 30.50	5,804	\$ -	\$ -	-	\$ 3.56	\$ 30.72	1,390
	Employment	\$ -	\$ -	-	\$ 8.61	\$ 7.60	13,584	\$ -	\$ -	-	\$ 7.39	\$ 6.29	14,092	\$ -	\$ -	-	\$ 1.32	\$ 7.07	2,248
	Home Health/Therapies	\$ -	\$ -	-	\$ 327.66	\$ 11.58	339,472	\$ -	\$ -	-	\$ 641.67	\$ 11.83	650,928	\$ 0.92	\$ 12.37	894	\$ 74.73	\$ 11.73	76,464
	Other Waiver	\$ 0.87	\$ 279.88	37	\$ 11.62	\$ 19.11	7,295	\$ 29.15	\$ 206.51	1,694	\$ 5.96	\$ 20.68	3,460	\$ 0.02	\$ 378.23	0	\$ 1.90	\$ 23.81	960
	PDS/FMS	\$ -	\$ -	-	\$ 3.18	\$ 188.35	202	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.31	\$ 188.35	20
	Personal Assistance	\$ 10.91	\$ 4.26	30,744	\$ 2,806.61	\$ 4.34	7,763,447	\$ 5.86	\$ 4.78	14,716	\$ 2,766.62	\$ 4.39	7,565,672	\$ -	\$ -	-	\$ 455.24	\$ 4.36	1,253,540
	Residential Habilitation	\$ -	\$ -	-	\$ 47.08	\$ 51.90	10,887	\$ 9.97	\$ 135.05	886	\$ 15.04	\$ 53.84	3,351	\$ -	\$ -	-	\$ 5.70	\$ 52.92	1,293
	Respite	\$ -	\$ -	-	\$ 0.83	\$ 4.24	2,338	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	0	\$ 0.08	\$ 4.24	228
	Vendor Services	\$ 14.98	\$ 113.81	1,580	\$ 116.42	\$ 9.86	141,746	\$ 18.14	\$ 192.67	1,130	\$ 114.96	\$ 8.47	162,836	\$ 0.03	\$ 5.09	61	\$ 19.36	\$ 9.45	24,580
	Waiver DME/Supplies	\$ 0.02	\$ 79.75	3	\$ 3.29	\$ 2.54	15,542	\$ 0.02	\$ 13.15	21	\$ 3.18	\$ 2.76	13,842	\$ 0.01	\$ 3.64	24	\$ 0.54	\$ 2.63	2,442
	HCBS Waiver Services Subtotal	\$ 26.78	N/A	N/A	\$ 3,351.80	N/A	N/A	\$ 63.63	N/A	N/A	\$ 3,569.57	N/A	N/A	\$ 0.97	N/A	N/A	\$ 562.74	N/A	N/A
Total Services	\$ 5,114.30	N/A	N/A	\$ 3,555.82	N/A	N/A	\$ 8,011.51	N/A	N/A	\$ 6,309.74	N/A	N/A	\$ 58.10	N/A	N/A	\$ 982.35	N/A	N/A	

Rating Region	Southwest — 13 Counties
Age Group	60+
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		61,579			52,235			2,581			5,486			260,731			382,612		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 1.97	\$ 26.35	895	\$ 5.22	\$ 63.98	979	\$ 38.53	\$ 205.77	2,247	\$ 50.47	\$ 258.44	2,344	\$ 0.51	\$ 30.52	200	\$ 2.36	\$ 61.18	463
	Dental	\$ 2.92	\$ 43.17	811	\$ 1.58	\$ 32.12	589	\$ 6.14	\$ 45.13	1,632	\$ 5.24	\$ 71.23	883	\$ 1.59	\$ 27.56	694	\$ 1.89	\$ 32.02	708
	DME/Supplies	\$ 8.28	\$ 2.21	44,953	\$ 48.36	\$ 0.85	679,198	\$ 79.85	\$ 122.78	7,804	\$ 174.74	\$ 3.56	589,163	\$ 7.81	\$ 1.38	67,842	\$ 16.30	\$ 1.26	154,691
	Emergency Room	\$ 0.26	\$ 6.45	477	\$ 0.58	\$ 6.30	1,103	\$ 13.36	\$ 99.33	1,614	\$ 26.39	\$ 96.59	3,279	\$ 0.35	\$ 6.29	670	\$ 0.83	\$ 13.40	742
	FQHC/RHC	\$ 0.05	\$ 21.34	29	\$ 1.62	\$ 93.43	208	\$ 0.31	\$ 87.07	43	\$ 5.40	\$ 162.08	399	\$ 1.40	\$ 91.52	184	\$ 1.27	\$ 92.28	165
	Home Health	\$ 0.53	\$ 40.42	157	\$ 0.49	\$ 6.00	988	\$ 6.87	\$ 82.11	1,004	\$ 109.77	\$ 77.86	16,918	\$ 0.40	\$ 16.51	287	\$ 2.04	\$ 40.49	605
	Hospice	\$ 1.66	\$ 1,020.54	20	\$ 0.42	\$ 3,420.83	1	\$ 16.55	\$ -	-	\$ 32.76	\$ 13,466.24	29	\$ 0.39	\$ 415.16	11	\$ 1.17	\$ 1,234.03	11
	Inpatient	\$ 23.12	\$ 192.57	1,441	\$ 51.42	\$ 192.51	3,205	\$ 421.13	\$ 1,652.03	3,059	\$ 753.31	\$ 1,911.88	4,728	\$ 23.73	\$ 219.47	1,298	\$ 40.55	\$ 296.36	1,642
	Laboratory/Radiology	\$ 4.05	\$ 3.33	14,593	\$ 5.37	\$ 2.44	26,373	\$ 109.33	\$ 23.91	54,874	\$ 88.83	\$ 18.87	56,506	\$ 4.50	\$ 3.47	15,534	\$ 6.46	\$ 4.38	17,715
	Nursing Facility	\$ 4,659.07	\$ 158.28	353,237	\$ 104.94	\$ 166.19	7,577	\$ 5,480.57	\$ 190.09	345,969	\$ 124.64	\$ 177.26	8,438	\$ 20.45	\$ 160.85	1,526	\$ 816.88	\$ 159.70	61,381
	Other Medical	\$ 3.11	\$ 4.04	9,233	\$ 11.61	\$ 8.87	15,700	\$ 18.86	\$ 14.78	15,313	\$ 39.57	\$ 25.89	18,340	\$ 3.50	\$ 3.49	12,029	\$ 5.16	\$ 5.08	12,193
	Outpatient	\$ 5.80	\$ 6.77	10,273	\$ 10.59	\$ 9.43	13,476	\$ 60.62	\$ 47.68	15,257	\$ 137.35	\$ 51.11	32,245	\$ 4.39	\$ 15.42	3,418	\$ 7.75	\$ 14.56	6,388
	Pharmacy	\$ 5.91	\$ 5.20	13,622	\$ 12.42	\$ 13.76	10,834	\$ 775.65	\$ 84.10	110,682	\$ 1,076.72	\$ 118.16	109,346	\$ 9.38	\$ 21.16	5,321	\$ 29.71	\$ 37.09	9,612
	Physician	\$ 7.09	\$ 4.32	19,703	\$ 10.65	\$ 4.93	25,905	\$ 156.54	\$ 39.38	47,700	\$ 158.81	\$ 44.50	42,821	\$ 9.12	\$ 5.93	18,460	\$ 12.15	\$ 7.21	20,223
	Vision	\$ 0.60	\$ 13.65	523	\$ 0.56	\$ 12.46	536	\$ 3.40	\$ 37.60	1,084	\$ 4.07	\$ 37.77	1,295	\$ 0.64	\$ 14.09	544	\$ 0.69	\$ 14.91	554
Medical Services Subtotal	\$ 4,724.40	N/A	N/A	\$ 265.84	N/A	N/A	\$ 7,187.72	N/A	N/A	\$ 2,788.10	N/A	N/A	\$ 88.16	N/A	N/A	\$ 945.21	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 2.48	\$ 32.58	914	\$ -	\$ -	-	\$ 11.53	\$ 34.56	4,004	\$ -	\$ -	-	\$ 0.50	\$ 33.20	182
	Employment	\$ -	\$ -	-	\$ 0.63	\$ 6.29	1,203	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.09	\$ 6.29	164
	Home Health/Therapies	\$ -	\$ -	-	\$ 46.48	\$ 12.21	45,664	\$ -	\$ -	-	\$ 18.47	\$ 11.39	19,455	\$ -	\$ -	-	\$ 6.61	\$ 12.18	6,513
	Other Waiver	\$ 0.51	\$ 202.13	30	\$ 10.02	\$ 84.27	1,427	\$ 0.30	\$ 244.56	15	\$ 6.33	\$ 18.94	4,012	\$ -	\$ -	-	\$ 1.54	\$ 71.95	257
	PDS/FMS	\$ -	\$ -	-	\$ 9.57	\$ 218.78	525	\$ -	\$ -	-	\$ 2.65	\$ 45.70	697	\$ -	\$ -	-	\$ 1.34	\$ 197.60	82
	Personal Assistance	\$ 2.62	\$ 4.52	6,958	\$ 2,611.48	\$ 4.55	6,892,898	\$ 6.43	\$ 5.37	14,373	\$ 2,759.75	\$ 4.58	7,232,763	\$ 0.11	\$ 3.23	418	\$ 396.63	\$ 4.55	1,046,233
	Residential Habilitation	\$ -	\$ -	-	\$ 2.15	\$ 40.19	641	\$ -	\$ -	-	\$ 22.98	\$ 56.85	4,850	\$ -	\$ -	-	\$ 0.62	\$ 47.57	157
	Respite	\$ 0.00	\$ 2.29	20	\$ 0.59	\$ 2.83	2,502	\$ -	\$ -	-	\$ 0.12	\$ 3.21	445	\$ -	\$ -	-	\$ 0.08	\$ 2.83	351
	Vendor Services	\$ 2.60	\$ 74.14	421	\$ 118.51	\$ 8.64	164,570	\$ 6.25	\$ 314.38	239	\$ 127.00	\$ 8.97	169,832	\$ -	\$ -	-	\$ 18.46	\$ 8.87	24,972
	Waiver DME/Supplies	\$ 0.03	\$ 2.10	145	\$ 4.49	\$ 1.03	52,448	\$ -	\$ -	-	\$ 2.68	\$ 3.14	10,262	\$ -	\$ -	-	\$ 0.66	\$ 1.07	7,331
HCBS Waiver Services Subtotal	\$ 5.76	N/A	N/A	\$ 2,806.39	N/A	N/A	\$ 12.98	N/A	N/A	\$ 2,951.52	N/A	N/A	\$ 0.11	N/A	N/A	\$ 426.54	N/A	N/A	N/A
Total Services	\$ 4,730.16	N/A	N/A	\$ 3,072.23	N/A	N/A	\$ 7,200.69	N/A	N/A	\$ 5,739.62	N/A	N/A	\$ 88.28	N/A	N/A	\$ 1,371.75	N/A	N/A	N/A

Rating Region	Southeast — Philadelphia
Age Group	21–59
Time Period	SFY 2021–2022

CHC Eligible Population Group																		
	Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months	2,782			82,342			4,181			134,069			171,608			394,983		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services																		
Ambulance	\$ 6.40	\$ 20.90	3,672	\$ 4.04	\$ 58.05	834	\$ 38.33	\$ 161.58	2,847	\$ 19.04	\$ 210.24	1,087	\$ 0.69	\$ 30.34	274	\$ 8.06	\$ 134.68	718
Dental	\$ 12.64	\$ 56.13	2,703	\$ 6.01	\$ 47.99	1,502	\$ 12.19	\$ 60.97	2,399	\$ 8.43	\$ 38.25	2,645	\$ 5.07	\$ 48.57	1,252	\$ 6.53	\$ 43.58	1,799
DME/Supplies	\$ 56.40	\$ 2.91	232,789	\$ 23.28	\$ 0.65	427,024	\$ 37.91	\$ 6.20	73,359	\$ 96.08	\$ 2.42	476,112	\$ 3.28	\$ 0.89	44,412	\$ 39.69	\$ 1.75	272,340
Emergency Room	\$ 2.35	\$ 15.49	1,819	\$ 2.91	\$ 23.15	1,509	\$ 32.33	\$ 143.36	2,707	\$ 42.19	\$ 164.25	3,083	\$ 3.02	\$ 24.92	1,452	\$ 16.60	\$ 97.96	2,033
FQHC/RHC	\$ 0.32	\$ 106.32	37	\$ 4.79	\$ 103.80	554	\$ 2.08	\$ 243.91	102	\$ 20.36	\$ 214.29	1,140	\$ 3.45	\$ 116.08	356	\$ 9.43	\$ 171.85	659
Home Health	\$ 2.59	\$ 61.01	509	\$ 2.46	\$ 11.14	2,646	\$ 34.98	\$ 94.93	4,422	\$ 33.35	\$ 63.78	6,275	\$ 0.87	\$ 14.23	734	\$ 12.60	\$ 49.55	3,051
Hospice	\$ 0.40	\$ 114.11	42	\$ 0.00	\$ 13.90	2	\$ 13.22	\$ -	-	\$ 3.42	\$ -	-	\$ 0.00	\$ 0.55	46	\$ 1.31	\$ 750.20	21
Inpatient	\$ 77.97	\$ 189.64	4,934	\$ 42.50	\$ 225.45	2,262	\$ 1,746.04	\$ 2,229.85	9,396	\$ 834.76	\$ 2,616.29	3,829	\$ 18.04	\$ 210.32	1,030	\$ 319.07	\$ 1,627.46	2,353
Laboratory/Radiology	\$ 7.66	\$ 4.07	22,575	\$ 6.90	\$ 3.76	22,053	\$ 124.44	\$ 28.77	51,899	\$ 65.51	\$ 29.70	26,474	\$ 4.70	\$ 3.96	14,267	\$ 27.09	\$ 15.87	20,491
Nursing Facility	\$ 6,724.92	\$ 243.96	330,790	\$ 12.94	\$ 166.78	931	\$ 6,303.18	\$ 233.75	323,581	\$ 33.10	\$ 216.51	1,834	\$ 2.71	\$ 175.40	185	\$ 129.20	\$ 233.05	6,652
Other Medical	\$ 77.58	\$ 29.19	31,898	\$ 10.06	\$ 6.41	18,833	\$ 127.93	\$ 55.74	27,543	\$ 53.54	\$ 51.22	12,544	\$ 3.01	\$ 4.24	8,514	\$ 23.48	\$ 22.72	12,400
Outpatient	\$ 21.67	\$ 38.60	6,735	\$ 22.03	\$ 10.62	24,895	\$ 228.36	\$ 376.24	7,284	\$ 130.09	\$ 278.39	5,608	\$ 11.48	\$ 12.06	11,423	\$ 56.31	\$ 55.47	12,181
Pharmacy	\$ 23.27	\$ 16.34	17,088	\$ 21.04	\$ 21.01	12,023	\$ 764.91	\$ 76.31	120,277	\$ 845.09	\$ 128.06	79,191	\$ 10.59	\$ 25.10	5,062	\$ 304.10	\$ 110.65	32,979
Physician	\$ 21.52	\$ 3.52	73,420	\$ 13.57	\$ 3.89	41,848	\$ 299.26	\$ 40.16	89,411	\$ 130.21	\$ 30.48	51,264	\$ 8.56	\$ 4.67	21,969	\$ 54.06	\$ 17.47	37,133
Vision	\$ 1.26	\$ 15.10	1,005	\$ 0.58	\$ 13.54	511	\$ 3.56	\$ 35.17	1,213	\$ 2.02	\$ 38.90	622	\$ 0.41	\$ 13.76	358	\$ 1.03	\$ 25.05	493
Medical Services Subtotal	\$ 7,036.96	N/A	N/A	\$ 173.10	N/A	N/A	\$ 9,768.73	N/A	N/A	\$ 2,317.20	N/A	N/A	\$ 75.87	N/A	N/A	\$ 1,008.54	N/A	N/A
HCBS Waiver Services																		
Day Habilitation and Adult Day	\$ 0.38	\$ 34.56	131	\$ 4.00	\$ 32.34	1,486	\$ -	\$ -	-	\$ 1.44	\$ 38.36	449	\$ -	\$ -	-	\$ 1.32	\$ 34.32	463
Employment	\$ -	\$ -	-	\$ 0.45	\$ 12.82	418	\$ -	\$ -	-	\$ 0.30	\$ 10.52	344	\$ -	\$ -	-	\$ 0.20	\$ 11.51	204
Home Health/Therapies	\$ 1.02	\$ 17.03	718	\$ 80.06	\$ 11.86	81,024	\$ 0.15	\$ 11.02	168	\$ 97.92	\$ 11.62	101,090	\$ -	\$ -	-	\$ 49.93	\$ 11.70	51,211
Other Waiver	\$ 2.86	\$ 120.46	284	\$ 59.70	\$ 119.11	6,015	\$ 4.96	\$ 251.00	237	\$ 72.23	\$ 171.10	5,066	\$ -	\$ -	-	\$ 37.04	\$ 149.24	2,978
PDS/FMS	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
Personal Assistance	\$ 48.53	\$ 5.23	111,351	\$ 4,741.19	\$ 5.11	11,124,744	\$ 15.87	\$ 5.19	36,657	\$ 4,693.41	\$ 5.15	10,925,914	\$ 15.42	\$ 4.91	37,663	\$ 2,588.69	\$ 5.14	6,045,301
Residential Habilitation	\$ 50.68	\$ 150.52	4,040	\$ 6.90	\$ 112.83	734	\$ 1.55	\$ 140.32	132	\$ 4.38	\$ 81.85	642	\$ -	\$ -	-	\$ 3.30	\$ 98.76	401
Respite	\$ -	\$ -	-	\$ 0.53	\$ 4.82	1,331	\$ -	\$ -	-	\$ 0.51	\$ 3.75	1,628	\$ -	\$ -	-	\$ 0.28	\$ 4.11	830
Vendor Services	\$ 15.80	\$ 141.83	1,337	\$ 99.88	\$ 10.15	118,136	\$ 14.56	\$ 163.56	1,068	\$ 107.50	\$ 9.01	143,190	\$ -	\$ -	-	\$ 57.57	\$ 9.43	73,252
Waiver DME/Supplies	\$ -	\$ -	-	\$ 0.60	\$ 86.95	82	\$ -	\$ -	-	\$ 0.46	\$ 86.31	65	\$ -	\$ -	-	\$ 0.28	\$ 86.59	39
HCBS Waiver Services Subtotal	\$ 119.26	N/A	N/A	\$ 4,993.31	N/A	N/A	\$ 37.10	N/A	N/A	\$ 4,978.15	N/A	N/A	\$ 15.42	N/A	N/A	\$ 2,738.62	N/A	N/A
Total Services	\$ 7,156.22	N/A	N/A	\$ 5,166.41	N/A	N/A	\$ 9,805.83	N/A	N/A	\$ 7,295.34	N/A	N/A	\$ 91.30	N/A	N/A	\$ 3,747.17	N/A	N/A

Rating Region	Southeast — Philadelphia
Age Group	60+
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		36,369			304,173			4,621			62,427			414,888			822,478		
Category of Service		PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services	Ambulance	\$ 2.25	\$ 19.84	1,361	\$ 8.08	\$ 53.81	1,803	\$ 23.11	\$ 148.32	1,869	\$ 20.28	\$ 195.86	1,243	\$ 0.56	\$ 29.53	229	\$ 5.04	\$ 63.89	947
	Dental	\$ 11.75	\$ 68.40	2,062	\$ 4.76	\$ 56.54	1,011	\$ 13.25	\$ 63.47	2,506	\$ 7.89	\$ 65.11	1,455	\$ 3.94	\$ 54.28	872	\$ 4.94	\$ 57.64	1,029
	DME/Supplies	\$ 13.87	\$ 1.94	85,590	\$ 44.42	\$ 0.58	914,146	\$ 22.31	\$ 8.65	30,938	\$ 66.75	\$ 1.75	457,801	\$ 5.53	\$ 0.63	105,749	\$ 25.02	\$ 0.70	430,124
	Emergency Room	\$ 1.12	\$ 15.28	881	\$ 1.46	\$ 17.97	976	\$ 16.74	\$ 123.44	1,627	\$ 28.81	\$ 154.02	2,244	\$ 1.42	\$ 21.44	792	\$ 3.58	\$ 43.93	979
	FQHC/RHC	\$ 0.06	\$ 138.52	5	\$ 4.44	\$ 109.22	488	\$ 0.51	\$ 229.77	26	\$ 22.11	\$ 213.26	1,244	\$ 4.03	\$ 109.94	440	\$ 5.36	\$ 129.35	497
	Home Health	\$ 0.30	\$ 15.97	226	\$ 1.04	\$ 5.22	2,402	\$ 15.65	\$ 146.84	1,279	\$ 35.01	\$ 78.80	5,332	\$ 0.40	\$ 4.72	1,007	\$ 3.35	\$ 22.08	1,818
	Hospice	\$ 2.62	\$ 1,847.17	17	\$ 1.25	\$ 4,431.74	3	\$ 48.26	\$ -	-	\$ 11.47	\$ -	-	\$ 0.33	\$ 370.74	11	\$ 1.89	\$ 3,054.75	7
	Inpatient	\$ 92.07	\$ 393.93	2,805	\$ 66.42	\$ 342.16	2,329	\$ 953.98	\$ 2,606.75	4,392	\$ 845.94	\$ 2,602.14	3,901	\$ 37.48	\$ 372.45	1,207	\$ 117.10	\$ 733.70	1,915
	Laboratory/Radiology	\$ 4.88	\$ 4.43	13,217	\$ 5.32	\$ 3.88	16,454	\$ 119.72	\$ 34.18	42,028	\$ 67.28	\$ 30.22	26,716	\$ 4.32	\$ 4.51	11,493	\$ 10.14	\$ 8.26	14,731
	Nursing Facility	\$ 5,096.72	\$ 177.25	345,061	\$ 26.80	\$ 168.11	1,913	\$ 5,955.06	\$ 205.16	348,324	\$ 45.38	\$ 215.81	2,523	\$ 19.29	\$ 169.03	1,370	\$ 281.92	\$ 179.90	18,805
	Other Medical	\$ 10.20	\$ 10.17	12,030	\$ 9.32	\$ 6.65	16,823	\$ 44.52	\$ 36.29	14,723	\$ 61.91	\$ 55.34	13,424	\$ 3.78	\$ 4.92	9,237	\$ 10.76	\$ 10.31	12,515
	Outpatient	\$ 13.60	\$ 17.78	9,177	\$ 11.59	\$ 17.04	8,163	\$ 118.12	\$ 252.75	5,608	\$ 129.57	\$ 228.31	6,810	\$ 5.74	\$ 24.02	2,866	\$ 18.28	\$ 40.48	5,419
	Pharmacy	\$ 4.72	\$ 6.61	8,566	\$ 14.98	\$ 12.29	14,622	\$ 464.70	\$ 55.22	100,980	\$ 765.84	\$ 103.77	88,559	\$ 8.16	\$ 17.36	5,640	\$ 70.60	\$ 53.22	15,921
	Physician	\$ 13.10	\$ 4.69	33,518	\$ 12.52	\$ 4.47	33,625	\$ 163.35	\$ 44.53	44,017	\$ 135.31	\$ 30.96	52,453	\$ 8.70	\$ 4.72	22,136	\$ 20.79	\$ 8.51	29,312
	Vision	\$ 0.58	\$ 12.07	575	\$ 0.76	\$ 10.49	869	\$ 3.31	\$ 32.53	1,220	\$ 2.88	\$ 39.00	886	\$ 0.63	\$ 10.94	694	\$ 0.86	\$ 13.43	771
Medical Services Subtotal		\$ 5,267.83	N/A	N/A	\$ 213.17	N/A	N/A	\$ 7,962.58	N/A	N/A	\$ 2,246.44	N/A	N/A	\$ 104.31	N/A	N/A	\$ 579.63	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.04	\$ 36.86	12	\$ 90.53	\$ 72.26	15,034	\$ -	\$ -	-	\$ 23.80	\$ 68.12	4,192	\$ 0.30	\$ 65.31	55	\$ 35.44	\$ 72.00	5,906
	Employment	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
	Home Health/Therapies	\$ -	\$ -	-	\$ 15.00	\$ 12.33	14,602	\$ 0.62	\$ 11.02	674	\$ 9.69	\$ 11.71	9,925	\$ -	\$ -	-	\$ 6.29	\$ 12.25	6,157
	Other Waiver	\$ 3.68	\$ 401.65	110	\$ 72.30	\$ 40.90	21,213	\$ 13.62	\$ 383.34	427	\$ 64.10	\$ 83.91	9,167	\$ 0.87	\$ 116.02	90	\$ 32.28	\$ 45.08	8,594
	PDS/FMS	\$ -	\$ -	-	\$ 0.09	\$ 166.85	7	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.03	\$ 166.85	2
	Personal Assistance	\$ 18.97	\$ 4.97	45,819	\$ 4,634.50	\$ 5.15	10,803,330	\$ 26.12	\$ 4.89	64,146	\$ 4,616.56	\$ 5.16	10,741,598	\$ 15.40	\$ 4.84	38,144	\$ 2,073.11	\$ 5.15	4,832,267
	Residential Habilitation	\$ 0.57	\$ 255.33	27	\$ 3.20	\$ 97.95	392	\$ -	\$ -	-	\$ 1.07	\$ 56.02	229	\$ -	\$ -	-	\$ 1.29	\$ 94.63	164
	Respite	\$ -	\$ -	-	\$ 0.99	\$ 4.22	2,816	\$ -	\$ -	-	\$ 0.41	\$ 4.78	1,031	\$ 0.00	\$ 4.78	3	\$ 0.40	\$ 4.26	1,121
	Vendor Services	\$ 1.99	\$ 27.45	871	\$ 142.30	\$ 11.92	143,268	\$ 3.11	\$ 20.79	1,792	\$ 117.25	\$ 9.69	145,201	\$ 0.29	\$ 14.22	247	\$ 61.78	\$ 11.55	64,178
	Waiver DME/Supplies	\$ -	\$ -	-	\$ 1.07	\$ 77.83	164	\$ 0.01	\$ 24.00	3	\$ 0.39	\$ 91.41	52	\$ 0.00	\$ 8.26	0	\$ 0.42	\$ 78.51	65
HCBS Waiver Services Subtotal		\$ 25.25	N/A	N/A	\$ 4,959.99	N/A	N/A	\$ 43.47	N/A	N/A	\$ 4,833.26	N/A	N/A	\$ 16.86	N/A	N/A	\$ 2,211.04	N/A	N/A
Total Services		\$ 5,293.08	N/A	N/A	\$ 5,173.16	N/A	N/A	\$ 8,006.05	N/A	N/A	\$ 7,079.69	N/A	N/A	\$ 121.17	N/A	N/A	\$ 2,790.68	N/A	N/A

Rating Region	Southeast — 4 Counties
Age Group	21–59
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		4,873			27,694			5,315			24,095			116,945			178,923		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 6.30	\$ 21.44	3,528	\$ 1.94	\$ 33.72	691	\$ 49.73	\$ 164.03	3,638	\$ 18.28	\$ 204.44	1,073	\$ 0.66	\$ 26.75	298	\$ 4.85	\$ 89.42	650
	Dental	\$ 15.26	\$ 66.98	2,733	\$ 8.68	\$ 52.07	2,000	\$ 16.37	\$ 67.20	2,923	\$ 10.17	\$ 57.20	2,133	\$ 6.02	\$ 47.52	1,521	\$ 7.55	\$ 51.71	1,752
	DME/Supplies	\$ 28.52	\$ 1.19	286,955	\$ 33.79	\$ 0.71	572,996	\$ 62.49	\$ 16.91	44,350	\$ 144.35	\$ 2.33	744,817	\$ 3.87	\$ 1.05	44,142	\$ 29.83	\$ 1.58	226,977
	Emergency Room	\$ 1.35	\$ 10.24	1,582	\$ 2.25	\$ 17.20	1,570	\$ 24.18	\$ 116.75	2,485	\$ 37.54	\$ 158.54	2,841	\$ 2.27	\$ 20.51	1,327	\$ 7.64	\$ 56.96	1,610
	FQHC/RHC	\$ -	\$ -	-	\$ 1.64	\$ 126.38	155	\$ 0.60	\$ 220.10	33	\$ 8.70	\$ 208.26	501	\$ 2.40	\$ 140.83	205	\$ 3.01	\$ 159.74	226
	Home Health	\$ 0.63	\$ 33.22	228	\$ 4.77	\$ 8.38	6,840	\$ 12.04	\$ 110.69	1,305	\$ 54.99	\$ 83.78	7,877	\$ 1.36	\$ 29.90	544	\$ 9.41	\$ 44.79	2,520
	Hospice	\$ 0.03	\$ -	-	\$ 0.01	\$ 30.25	5	\$ 44.31	\$ -	-	\$ 3.21	\$ -	-	\$ 0.00	\$ 0.59	75	\$ 1.75	\$ 420.27	50
	Inpatient	\$ 105.83	\$ 275.67	4,607	\$ 36.26	\$ 176.84	2,461	\$ 1,450.90	\$ 2,443.28	7,126	\$ 758.17	\$ 2,429.07	3,746	\$ 16.33	\$ 165.27	1,186	\$ 164.37	\$ 987.55	1,997
	Laboratory/Radiology	\$ 3.56	\$ 2.07	20,667	\$ 6.57	\$ 3.79	20,817	\$ 64.69	\$ 19.42	39,975	\$ 61.34	\$ 29.46	24,986	\$ 4.64	\$ 3.98	13,985	\$ 14.33	\$ 9.84	17,478
	Nursing Facility	\$ 5,293.34	\$ 187.77	338,295	\$ 21.38	\$ 160.10	1,602	\$ 6,373.07	\$ 224.94	339,992	\$ 54.52	\$ 203.62	3,213	\$ 4.37	\$ 138.97	378	\$ 347.01	\$ 205.72	20,242
	Other Medical	\$ 116.64	\$ 35.53	39,392	\$ 12.67	\$ 5.41	28,109	\$ 150.65	\$ 50.97	35,470	\$ 61.02	\$ 42.88	17,076	\$ 3.46	\$ 3.11	13,340	\$ 20.09	\$ 13.78	17,496
	Outpatient	\$ 31.69	\$ 32.60	11,668	\$ 16.03	\$ 17.32	11,108	\$ 158.24	\$ 132.47	14,335	\$ 150.38	\$ 194.09	9,298	\$ 8.34	\$ 17.51	5,716	\$ 33.75	\$ 54.35	7,451
	Pharmacy	\$ 9.21	\$ 10.49	10,540	\$ 38.07	\$ 56.26	8,120	\$ 729.95	\$ 62.24	140,732	\$ 870.10	\$ 149.81	69,696	\$ 10.79	\$ 33.72	3,838	\$ 152.05	\$ 103.56	17,619
	Physician	\$ 18.71	\$ 3.37	66,589	\$ 11.27	\$ 2.97	45,550	\$ 281.61	\$ 39.40	85,776	\$ 115.76	\$ 31.30	44,389	\$ 8.21	\$ 3.77	26,093	\$ 31.57	\$ 11.00	34,444
	Vision	\$ 0.91	\$ 13.36	817	\$ 0.47	\$ 11.48	490	\$ 3.51	\$ 32.49	1,297	\$ 1.62	\$ 40.34	481	\$ 0.39	\$ 13.57	343	\$ 0.67	\$ 18.97	426
Medical Services Subtotal	\$ 5,631.98	N/A	N/A	\$ 195.79	N/A	N/A	\$ 9,422.35	N/A	N/A	\$ 2,350.16	N/A	N/A	\$ 73.10	N/A	N/A	\$ 827.89	N/A	N/A	
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.43	\$ 34.56	148	\$ 247.26	\$ 32.05	92,583	\$ -	\$ -	-	\$ 73.90	\$ 33.58	26,405	\$ -	\$ -	1	\$ 48.23	\$ 32.35	17,891
	Employment	\$ -	\$ -	-	\$ 6.22	\$ 4.77	15,638	\$ -	\$ -	-	\$ 3.16	\$ 5.57	6,798	\$ -	\$ -	-	\$ 1.39	\$ 4.99	3,336
	Home Health/Therapies	\$ -	\$ -	-	\$ 407.36	\$ 12.52	390,338	\$ -	\$ -	-	\$ 479.95	\$ 12.69	453,746	\$ -	\$ -	-	\$ 127.69	\$ 12.61	121,522
	Other Waiver	\$ 4.66	\$ 216.97	258	\$ 186.31	\$ 24.16	92,526	\$ 7.18	\$ 394.50	218	\$ 142.09	\$ 36.93	46,174	\$ 1.42	\$ 468.70	36	\$ 49.24	\$ 28.72	20,577
	PDS/FMS	\$ -	\$ -	-	\$ 2.40	\$ 150.36	192	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.37	\$ 150.36	30
	Personal Assistance	\$ 16.49	\$ 5.01	39,457	\$ 3,996.13	\$ 5.06	9,485,278	\$ 5.65	\$ 5.33	12,716	\$ 4,411.50	\$ 5.10	10,387,899	\$ 2.32	\$ 4.55	6,130	\$ 1,214.75	\$ 5.07	2,872,523
	Residential Habilitation	\$ 0.40	\$ 272.32	18	\$ 580.20	\$ 91.34	76,221	\$ -	\$ -	-	\$ 224.20	\$ 93.51	28,772	\$ -	\$ -	-	\$ 120.01	\$ 91.88	15,673
	Respite	\$ -	\$ -	-	\$ 1.13	\$ 4.63	2,922	\$ -	\$ -	-	\$ 1.77	\$ 3.01	7,056	\$ -	\$ -	-	\$ 0.41	\$ 3.53	1,403
	Vendor Services	\$ 4.18	\$ 74.23	676	\$ 90.34	\$ 10.72	101,092	\$ 14.72	\$ 380.37	464	\$ 105.01	\$ 11.07	113,817	\$ 0.13	\$ 12.36	122	\$ 28.76	\$ 11.10	31,087
	Waiver DME/Supplies	\$ -	\$ -	-	\$ 1.75	\$ 30.49	688	\$ -	\$ -	-	\$ 1.20	\$ 48.72	296	\$ 0.00	\$ 67.98	0	\$ 0.43	\$ 35.47	146
	HCBS Waiver Services Subtotal	\$ 26.16	N/A	N/A	\$ 5,519.10	N/A	N/A	\$ 27.54	N/A	N/A	\$ 5,442.78	N/A	N/A	\$ 3.87	N/A	N/A	\$ 1,591.28	N/A	N/A
Total Services	\$ 5,658.14	N/A	N/A	\$ 5,714.89	N/A	N/A	\$ 9,449.89	N/A	N/A	\$ 7,792.94	N/A	N/A	\$ 76.97	N/A	N/A	\$ 2,419.17	N/A	N/A	

Rating Region	Southeast — 4 Counties
Age Group	60+
Time Period	SFY 2021–2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		79,888			89,288			5,471			14,354			192,827			381,828		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 1.77	\$ 22.83	932	\$ 13.86	\$ 56.44	2,947	\$ 25.28	\$ 152.64	1,988	\$ 20.32	\$ 128.92	1,891	\$ 0.51	\$ 24.85	247	\$ 5.00	\$ 54.09	1,108
	Dental	\$ 11.76	\$ 70.84	1,992	\$ 5.27	\$ 57.10	1,108	\$ 10.76	\$ 53.41	2,418	\$ 8.75	\$ 69.97	1,501	\$ 4.22	\$ 49.13	1,030	\$ 6.31	\$ 58.80	1,287
	DME/Supplies	\$ 9.97	\$ 1.97	60,774	\$ 44.95	\$ 0.57	938,768	\$ 23.60	\$ 13.03	21,729	\$ 70.79	\$ 1.65	514,951	\$ 4.48	\$ 0.70	76,647	\$ 17.86	\$ 0.74	290,618
	Emergency Room	\$ 0.58	\$ 12.88	540	\$ 1.19	\$ 14.02	1,019	\$ 14.04	\$ 121.52	1,387	\$ 23.17	\$ 145.81	1,907	\$ 0.99	\$ 16.48	722	\$ 1.97	\$ 29.31	807
	FQHC/RHC	\$ 0.00	\$ 17.04	0	\$ 1.20	\$ 112.64	127	\$ 0.17	\$ 214.38	10	\$ 8.35	\$ 199.01	503	\$ 1.54	\$ 124.49	148	\$ 1.37	\$ 133.06	124
	Home Health	\$ 0.09	\$ 17.61	62	\$ 1.29	\$ 4.27	3,620	\$ 9.80	\$ 133.43	881	\$ 47.20	\$ 74.91	7,562	\$ 0.44	\$ 8.92	591	\$ 2.46	\$ 20.27	1,455
	Hospice	\$ 0.89	\$ 375.80	29	\$ 0.52	\$ 1,225.98	5	\$ 53.35	\$ 19,923.79	32	\$ 16.60	\$ -	-	\$ 0.24	\$ 119.46	24	\$ 1.82	\$ 1,108.27	20
	Inpatient	\$ 33.28	\$ 215.88	1,850	\$ 49.65	\$ 230.65	2,583	\$ 861.23	\$ 2,135.54	4,839	\$ 724.96	\$ 2,606.46	3,338	\$ 22.93	\$ 256.28	1,074	\$ 69.75	\$ 484.30	1,728
	Laboratory/Radiology	\$ 2.31	\$ 3.55	7,816	\$ 5.28	\$ 3.93	16,109	\$ 61.32	\$ 22.50	32,702	\$ 60.97	\$ 27.18	26,914	\$ 4.62	\$ 4.75	11,678	\$ 7.22	\$ 6.78	12,780
	Nursing Facility	\$ 4,669.80	\$ 162.08	345,733	\$ 74.62	\$ 164.55	5,442	\$ 5,572.14	\$ 194.61	343,590	\$ 64.01	\$ 203.39	3,777	\$ 23.73	\$ 164.72	1,728	\$ 1,088.72	\$ 164.24	79,547
	Other Medical	\$ 11.16	\$ 10.90	12,290	\$ 14.79	\$ 7.69	23,077	\$ 51.07	\$ 40.79	15,025	\$ 61.45	\$ 49.40	14,927	\$ 4.39	\$ 3.54	14,896	\$ 11.05	\$ 8.15	16,267
	Outpatient	\$ 7.24	\$ 15.39	5,647	\$ 10.82	\$ 19.11	6,795	\$ 64.22	\$ 323.56	2,382	\$ 112.09	\$ 494.90	2,718	\$ 6.03	\$ 15.92	4,543	\$ 12.22	\$ 28.20	5,201
	Pharmacy	\$ 5.34	\$ 8.88	7,220	\$ 14.69	\$ 18.94	9,305	\$ 500.65	\$ 53.46	112,386	\$ 740.62	\$ 121.24	73,306	\$ 9.23	\$ 31.38	3,530	\$ 44.23	\$ 53.96	9,836
	Physician	\$ 8.70	\$ 3.89	26,856	\$ 9.73	\$ 3.66	31,907	\$ 180.43	\$ 38.45	56,311	\$ 115.44	\$ 33.61	41,211	\$ 8.74	\$ 4.25	24,701	\$ 15.44	\$ 6.64	27,911
	Vision	\$ 0.68	\$ 12.87	634	\$ 0.67	\$ 9.35	857	\$ 2.91	\$ 31.23	1,120	\$ 2.64	\$ 40.11	789	\$ 0.65	\$ 10.59	737	\$ 0.77	\$ 12.27	751
Medical Services Subtotal	\$ 4,763.58	N/A	N/A	\$ 248.53	N/A	N/A	\$ 7,430.98	N/A	N/A	\$ 2,077.36	N/A	N/A	\$ 92.74	N/A	N/A	\$ 1,286.19	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.57	\$ 35.61	191	\$ 126.53	\$ 63.03	24,090	\$ -	\$ -	-	\$ 119.52	\$ 66.09	21,701	\$ 0.70	\$ 52.42	160	\$ 34.55	\$ 63.11	6,570
	Employment	\$ -	\$ -	-	\$ 0.31	\$ 4.34	869	\$ -	\$ -	-	\$ 0.70	\$ 4.05	2,082	\$ -	\$ -	-	\$ 0.10	\$ 4.26	281
	Home Health/Therapies	\$ 0.14	\$ 21.21	78	\$ 32.24	\$ 11.83	32,706	\$ -	\$ -	-	\$ 44.59	\$ 12.13	44,111	\$ 0.01	\$ 20.20	5	\$ 9.25	\$ 11.90	9,325
	Other Waiver	\$ 0.31	\$ 33.68	111	\$ 94.70	\$ 33.90	33,518	\$ 3.25	\$ 448.05	87	\$ 113.48	\$ 34.34	39,657	\$ 0.57	\$ 39.95	173	\$ 26.81	\$ 34.08	9,440
	PDS/FMS	\$ -	\$ -	-	\$ 0.95	\$ 198.55	58	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.22	\$ 198.55	13
	Personal Assistance	\$ 6.23	\$ 5.19	14,410	\$ 4,457.83	\$ 5.14	10,404,973	\$ 2.83	\$ 5.21	6,516	\$ 4,457.40	\$ 5.17	10,351,445	\$ 12.34	\$ 4.84	30,595	\$ 1,217.58	\$ 5.14	2,840,836
	Residential Habilitation	\$ 1.12	\$ 278.63	48	\$ 49.12	\$ 97.64	6,037	\$ -	\$ -	-	\$ 49.74	\$ 112.12	5,324	\$ 0.31	\$ 272.32	14	\$ 13.75	\$ 101.29	1,629
	Respite	\$ -	\$ -	-	\$ 2.79	\$ 4.16	8,047	\$ -	\$ -	-	\$ 0.41	\$ 4.78	1,041	\$ -	\$ -	-	\$ 0.67	\$ 4.17	1,921
	Vendor Services	\$ 1.82	\$ 57.34	381	\$ 158.99	\$ 12.85	148,440	\$ 3.14	\$ 142.06	265	\$ 125.88	\$ 12.40	121,863	\$ 0.39	\$ 16.33	290	\$ 42.53	\$ 12.91	39,523
	Waiver DME/Supplies	\$ -	\$ -	0	\$ 1.76	\$ 28.56	738	\$ -	\$ -	-	\$ 1.39	\$ 81.45	204	\$ 0.01	\$ 89.35	1	\$ 0.47	\$ 30.93	181
	HCBS Waiver Services Subtotal	\$ 10.18	N/A	N/A	\$ 4,925.21	N/A	N/A	\$ 9.22	N/A	N/A	\$ 4,913.13	N/A	N/A	\$ 14.34	N/A	N/A	\$ 1,345.93	N/A	N/A
Total Services	\$ 4,773.77	N/A	N/A	\$ 5,173.74	N/A	N/A	\$ 7,440.19	N/A	N/A	\$ 6,990.49	N/A	N/A	\$ 107.08	N/A	N/A	\$ 2,632.12	N/A	N/A	N/A

Rating Region	Lehigh/Capital
Age Group	21-59
Time Period	SFY 2021-2022

CHC Eligible Population Group																		
	Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months	6,133			28,675			3,620			32,141			259,675			330,245		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services																		
Ambulance	\$ 1.09	\$ 13.41	977	\$ 4.42	\$ 53.45	993	\$ 42.39	\$ 172.77	2,944	\$ 18.08	\$ 207.46	1,046	\$ 0.50	\$ 28.89	207	\$ 3.02	\$ 90.39	401
Dental	\$ 5.98	\$ 48.68	1,475	\$ 4.31	\$ 46.68	1,109	\$ 10.56	\$ 55.59	2,279	\$ 6.69	\$ 61.25	1,311	\$ 4.30	\$ 49.44	1,044	\$ 4.64	\$ 50.69	1,097
DME/Supplies	\$ 43.47	\$ 1.55	337,102	\$ 48.53	\$ 0.71	819,226	\$ 98.59	\$ 50.94	23,222	\$ 156.64	\$ 2.34	803,355	\$ 4.15	\$ 1.32	37,799	\$ 24.61	\$ 1.59	185,557
Emergency Room	\$ 0.48	\$ 6.61	868	\$ 1.09	\$ 6.70	1,961	\$ 21.34	\$ 112.56	2,275	\$ 25.12	\$ 109.24	2,760	\$ 1.21	\$ 9.47	1,533	\$ 3.73	\$ 26.59	1,686
FQHC/RHC	\$ 0.23	\$ 116.33	24	\$ 5.00	\$ 107.94	556	\$ 1.87	\$ 211.42	106	\$ 15.73	\$ 213.65	883	\$ 5.59	\$ 118.97	564	\$ 6.39	\$ 132.29	579
Home Health	\$ 11.90	\$ 64.95	2,198	\$ 13.64	\$ 25.43	6,437	\$ 18.94	\$ 64.33	3,533	\$ 37.99	\$ 52.36	8,708	\$ 1.30	\$ 10.05	1,548	\$ 6.33	\$ 28.10	2,703
Hospice	\$ 0.05	\$ -	-	\$ 0.00	\$ 4.66	10	\$ 26.82	\$ 15,599.46	21	\$ 6.21	\$ -	-	\$ 0.00	\$ 0.42	66	\$ 0.90	\$ 204.82	53
Inpatient	\$ 34.82	\$ 158.96	2,629	\$ 35.91	\$ 122.92	3,506	\$ 1,095.11	\$ 1,890.24	6,952	\$ 512.74	\$ 1,804.40	3,410	\$ 12.46	\$ 139.66	1,070	\$ 75.47	\$ 564.98	1,603
Laboratory/Radiology	\$ 3.64	\$ 2.97	14,676	\$ 5.70	\$ 2.62	26,115	\$ 92.52	\$ 21.25	52,236	\$ 64.61	\$ 23.75	32,639	\$ 4.69	\$ 3.76	14,963	\$ 11.55	\$ 7.68	18,055
Nursing Facility	\$ 6,335.69	\$ 215.09	353,472	\$ 36.90	\$ 164.13	2,698	\$ 6,519.99	\$ 231.49	337,983	\$ 37.08	\$ 350.90	1,268	\$ 3.06	\$ 136.29	270	\$ 198.36	\$ 219.60	10,839
Other Medical	\$ 51.42	\$ 25.56	24,144	\$ 26.11	\$ 11.97	26,178	\$ 90.12	\$ 37.56	28,793	\$ 57.38	\$ 30.92	22,270	\$ 3.21	\$ 3.05	12,628	\$ 12.32	\$ 9.77	15,134
Outpatient	\$ 15.11	\$ 7.73	23,449	\$ 19.58	\$ 12.46	18,852	\$ 85.51	\$ 38.62	26,567	\$ 117.91	\$ 76.74	18,439	\$ 7.24	\$ 12.70	6,839	\$ 20.09	\$ 25.28	9,536
Pharmacy	\$ 29.60	\$ 22.75	15,613	\$ 25.43	\$ 30.22	10,099	\$ 978.85	\$ 70.26	167,171	\$ 882.73	\$ 136.25	77,743	\$ 14.08	\$ 33.16	5,097	\$ 110.47	\$ 90.97	14,573
Physician	\$ 13.86	\$ 4.23	39,369	\$ 17.06	\$ 4.68	43,720	\$ 255.82	\$ 38.04	80,689	\$ 128.36	\$ 35.81	43,011	\$ 10.37	\$ 5.56	22,396	\$ 25.19	\$ 11.11	27,208
Vision	\$ 0.64	\$ 10.70	718	\$ 0.56	\$ 11.01	613	\$ 5.53	\$ 48.51	1,368	\$ 2.61	\$ 37.90	825	\$ 0.44	\$ 14.26	373	\$ 0.72	\$ 19.07	455
Medical Services Subtotal	\$ 6,547.98	N/A	N/A	\$ 244.26	N/A	N/A	\$ 9,343.94	N/A	N/A	\$ 2,069.86	N/A	N/A	\$ 72.60	N/A	N/A	\$ 503.79	N/A	N/A
HCBS Waiver Services																		
Day Habilitation and Adult Day	\$ 0.98	\$ 32.95	356	\$ 90.71	\$ 33.79	32,216	\$ -	\$ -	-	\$ 26.35	\$ 38.82	8,146	\$ -	\$ -	-	\$ 10.46	\$ 34.90	3,597
Employment	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	2	\$ -	\$ -	-	\$ -	\$ -	0
Home Health/Therapies	\$ 1.39	\$ 11.02	1,513	\$ 422.22	\$ 11.37	445,737	\$ -	\$ -	-	\$ 294.85	\$ 11.46	308,825	\$ -	\$ -	-	\$ 65.38	\$ 11.41	68,788
Other Waiver	\$ 0.19	\$ 19.02	121	\$ 41.71	\$ 31.76	15,760	\$ 2.38	\$ 1,213.09	24	\$ 25.38	\$ 114.21	2,667	\$ -	\$ -	-	\$ 6.12	\$ 45.06	1,630
PDS/FMS	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
Personal Assistance	\$ 6.16	\$ 4.50	16,420	\$ 3,497.52	\$ 4.53	9,257,789	\$ 6.93	\$ 4.39	18,967	\$ 4,794.95	\$ 4.74	12,132,900	\$ -	\$ -	-	\$ 770.55	\$ 4.66	1,985,206
Residential Habilitation	\$ 1.18	\$ 193.32	74	\$ 168.19	\$ 120.59	16,736	\$ -	\$ -	-	\$ 48.34	\$ 148.28	3,912	\$ -	\$ -	-	\$ 19.33	\$ 126.39	1,835
Respite	\$ -	\$ -	-	\$ 0.84	\$ 4.06	2,481	\$ -	\$ -	-	\$ 0.36	\$ 4.40	980	\$ -	\$ -	-	\$ 0.11	\$ 4.17	311
Vendor Services	\$ 4.88	\$ 71.78	816	\$ 99.56	\$ 12.53	95,335	\$ 9.61	\$ 127.62	904	\$ 63.42	\$ 10.74	70,884	\$ -	\$ -	-	\$ 15.01	\$ 11.85	15,202
Waiver DME/Supplies	\$ -	\$ -	4	\$ 4.61	\$ 16.09	3,436	\$ -	\$ -	-	\$ 4.24	\$ 17.60	2,889	\$ -	\$ -	-	\$ 0.81	\$ 16.82	580
HCBS Waiver Services Subtotal	\$ 14.79	N/A	N/A	\$ 4,325.37	N/A	N/A	\$ 18.93	N/A	N/A	\$ 5,257.90	N/A	N/A	\$ -	N/A	N/A	\$ 887.78	N/A	N/A
Total Services	\$ 6,562.77	N/A	N/A	\$ 4,569.63	N/A	N/A	\$ 9,362.86	N/A	N/A	\$ 7,327.76	N/A	N/A	\$ 72.60	N/A	N/A	\$ 1,391.57	N/A	N/A

Rating Region	Lehigh/Capital
Age Group	60+
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		102,122			97,018			2,970			19,938			352,437			574,485		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 0.77	\$ 21.18	436	\$ 4.73	\$ 45.53	1,247	\$ 29.81	\$ 183.71	1,947	\$ 17.12	\$ 126.22	1,628	\$ 0.41	\$ 25.00	197	\$ 1.94	\$ 48.84	476
	Dental	\$ 5.47	\$ 51.63	1,271	\$ 3.46	\$ 58.29	712	\$ 9.65	\$ 54.43	2,128	\$ 7.13	\$ 72.36	1,182	\$ 2.80	\$ 49.55	679	\$ 3.57	\$ 52.63	815
	DME/Supplies	\$ 9.47	\$ 3.36	33,773	\$ 44.18	\$ 0.59	899,549	\$ 25.52	\$ 12.64	24,222	\$ 69.94	\$ 1.39	604,708	\$ 4.48	\$ 1.00	53,726	\$ 14.45	\$ 0.82	211,990
	Emergency Room	\$ 0.31	\$ 9.72	382	\$ 0.90	\$ 6.98	1,554	\$ 13.02	\$ 107.41	1,454	\$ 19.98	\$ 109.74	2,185	\$ 0.54	\$ 6.94	940	\$ 1.30	\$ 15.77	990
	FQHC/RHC	\$ 0.08	\$ 176.88	6	\$ 5.13	\$ 101.20	609	\$ 0.07	\$ 210.62	4	\$ 16.32	\$ 215.57	909	\$ 5.68	\$ 110.14	619	\$ 4.93	\$ 114.95	515
	Home Health	\$ 0.23	\$ 45.64	61	\$ 1.91	\$ 11.56	1,978	\$ 3.32	\$ 90.42	441	\$ 19.93	\$ 58.00	4,124	\$ 0.47	\$ 17.36	322	\$ 1.36	\$ 23.68	688
	Hospice	\$ 1.01	\$ 2,451.52	5	\$ 2.92	\$ 5,077.24	7	\$ 45.78	\$ -	-	\$ 17.56	\$ 8,056.55	26	\$ 0.29	\$ 1,055.65	3	\$ 1.69	\$ 4,104.41	5
	Inpatient	\$ 17.23	\$ 165.35	1,251	\$ 47.91	\$ 192.34	2,989	\$ 680.56	\$ 2,369.55	3,447	\$ 426.83	\$ 2,106.52	2,431	\$ 21.10	\$ 186.11	1,360	\$ 42.43	\$ 306.01	1,664
	Laboratory/Radiology	\$ 2.18	\$ 3.47	7,531	\$ 4.93	\$ 2.65	22,321	\$ 70.01	\$ 18.15	46,294	\$ 60.68	\$ 22.62	32,196	\$ 4.51	\$ 4.03	13,418	\$ 6.45	\$ 5.27	14,697
	Nursing Facility	\$ 4,631.46	\$ 158.08	351,573	\$ 71.67	\$ 162.95	5,278	\$ 5,339.47	\$ 185.76	344,934	\$ 53.48	\$ 308.47	2,080	\$ 23.28	\$ 158.24	1,765	\$ 879.15	\$ 159.06	66,327
	Other Medical	\$ 6.75	\$ 10.74	7,540	\$ 9.75	\$ 6.82	17,170	\$ 24.08	\$ 16.43	17,589	\$ 37.83	\$ 32.36	14,028	\$ 3.62	\$ 3.43	12,645	\$ 6.50	\$ 6.21	12,576
	Outpatient	\$ 4.99	\$ 19.26	3,112	\$ 11.71	\$ 13.89	10,118	\$ 104.56	\$ 19.58	64,069	\$ 107.79	\$ 106.20	12,180	\$ 4.56	\$ 14.39	3,802	\$ 9.94	\$ 22.31	5,349
	Pharmacy	\$ 6.98	\$ 5.77	14,518	\$ 15.04	\$ 17.59	10,256	\$ 552.10	\$ 41.14	161,036	\$ 591.88	\$ 90.42	78,554	\$ 11.37	\$ 26.22	5,205	\$ 34.15	\$ 37.04	11,065
	Physician	\$ 7.45	\$ 5.27	16,975	\$ 14.63	\$ 5.90	29,759	\$ 185.55	\$ 33.64	66,189	\$ 116.84	\$ 38.98	35,967	\$ 11.37	\$ 6.20	22,024	\$ 15.79	\$ 8.19	23,145
	Vision	\$ 0.67	\$ 13.08	614	\$ 0.68	\$ 9.75	838	\$ 4.41	\$ 35.69	1,483	\$ 3.87	\$ 38.95	1,193	\$ 0.70	\$ 11.77	713	\$ 0.82	\$ 13.35	737
Medical Services Subtotal	\$ 4,695.05	N/A	N/A	\$ 239.55	N/A	N/A	\$ 7,087.91	N/A	N/A	\$ 1,567.18	N/A	N/A	\$ 95.18	N/A	N/A	\$ 1,024.49	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.01	\$ 34.56	4	\$ 16.34	\$ 51.14	3,833	\$ -	\$ -	-	\$ 17.40	\$ 62.83	3,323	\$ -	\$ -	-	\$ 3.36	\$ 52.89	763
	Employment	\$ -	\$ -	-	\$ 0.01	\$ 3.98	36	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.00	\$ 3.98	6
	Home Health/Therapies	\$ 0.01	\$ 11.02	14	\$ 36.61	\$ 11.70	37,535	\$ -	\$ -	-	\$ 11.04	\$ 12.77	10,369	\$ -	\$ -	-	\$ 6.57	\$ 11.76	6,701
	Other Waiver	\$ 0.10	\$ 419.49	3	\$ 16.05	\$ 60.10	3,205	\$ -	\$ -	-	\$ 14.94	\$ 147.28	1,217	\$ -	\$ -	-	\$ 3.25	\$ 66.73	584
	PDS/FMS	\$ -	\$ -	-	\$ 1.66	\$ 244.01	82	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.28	\$ 244.01	14
	Personal Assistance	\$ 3.88	\$ 4.88	9,542	\$ 4,384.77	\$ 4.77	11,030,590	\$ 3.17	\$ 4.38	8,685	\$ 5,812.17	\$ 4.85	14,368,612	\$ 4.26	\$ 4.62	11,079	\$ 945.53	\$ 4.79	2,370,038
	Residential Habilitation	\$ 0.04	\$ 272.32	2	\$ 13.01	\$ 84.63	1,844	\$ -	\$ -	-	\$ 2.89	\$ 267.42	130	\$ -	\$ -	-	\$ 2.30	\$ 87.41	316
	Respite	\$ 0.05	\$ 4.49	134	\$ 0.97	\$ 4.23	2,742	\$ -	\$ -	-	\$ 0.73	\$ 4.49	1,948	\$ -	\$ -	-	\$ 0.20	\$ 4.27	555
	Vendor Services	\$ 0.95	\$ 67.97	168	\$ 94.15	\$ 9.58	117,889	\$ 3.26	\$ 139.94	279	\$ 50.61	\$ 11.16	54,419	\$ -	\$ -	-	\$ 17.84	\$ 9.81	21,829
	Waiver DME/Supplies	\$ 0.00	\$ 44.97	1	\$ 6.61	\$ 30.51	2,600	\$ -	\$ -	-	\$ 4.70	\$ 36.98	1,525	\$ -	\$ -	-	\$ 1.28	\$ 31.22	492
HCBS Waiver Services Subtotal	\$ 5.05	N/A	N/A	\$ 4,570.17	N/A	N/A	\$ 6.43	N/A	N/A	\$ 5,914.48	N/A	N/A	\$ 4.26	N/A	N/A	\$ 980.62	N/A	N/A	N/A
Total Services	\$ 4,700.11	N/A	N/A	\$ 4,809.72	N/A	N/A	\$ 7,094.34	N/A	N/A	\$ 7,481.66	N/A	N/A	\$ 99.44	N/A	N/A	\$ 2,005.11	N/A	N/A	N/A

Rating Region	Northeast
Age Group	21-59
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		3,299			17,992			1,940			11,772			195,942			230,945		
Category of Service		PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services	Ambulance	\$ 1.93	\$ 11.18	2,076	\$ 4.81	\$ 78.93	732	\$ 48.66	\$ 194.63	3,000	\$ 29.19	\$ 237.94	1,472	\$ 0.58	\$ 32.41	213	\$ 2.79	\$ 90.95	368
	Dental	\$ 8.35	\$ 54.90	1,825	\$ 4.96	\$ 60.96	977	\$ 10.39	\$ 45.67	2,730	\$ 7.71	\$ 66.01	1,402	\$ 4.66	\$ 54.88	1,018	\$ 4.94	\$ 55.87	1,060
	DME/Supplies	\$ 21.47	\$ 1.14	225,291	\$ 47.96	\$ 0.76	754,520	\$ 27.88	\$ 6.84	48,952	\$ 203.34	\$ 2.53	966,287	\$ 4.63	\$ 1.35	41,183	\$ 18.57	\$ 1.52	146,605
	Emergency Room	\$ 0.76	\$ 4.67	1,947	\$ 0.74	\$ 4.78	1,850	\$ 17.26	\$ 104.72	1,978	\$ 24.45	\$ 85.74	3,422	\$ 1.03	\$ 8.96	1,377	\$ 2.33	\$ 18.27	1,531
	FQHC/RHC	\$ 2.15	\$ 55.52	464	\$ 7.13	\$ 132.75	644	\$ 6.25	\$ 220.80	340	\$ 18.90	\$ 208.99	1,085	\$ 5.28	\$ 121.56	521	\$ 6.08	\$ 130.97	557
	Home Health	\$ 0.01	\$ 2.57	31	\$ 5.08	\$ 24.58	2,481	\$ 7.97	\$ 73.82	1,295	\$ 63.32	\$ 59.84	12,697	\$ 0.38	\$ 18.76	243	\$ 4.01	\$ 45.52	1,058
	Hospice	\$ 0.02	\$ -	-	\$ 0.00	\$ -	-	\$ 51.71	\$ -	-	\$ 9.86	\$ -	-	\$ 0.02	\$ 4.67	47	\$ 0.95	\$ 288.66	40
	Inpatient	\$ 41.13	\$ 152.84	3,229	\$ 34.12	\$ 144.02	2,843	\$ 800.35	\$ 2,063.75	4,654	\$ 702.21	\$ 2,023.03	4,165	\$ 11.68	\$ 148.01	947	\$ 55.67	\$ 505.19	1,322
	Laboratory/Radiology	\$ 6.15	\$ 2.80	26,392	\$ 5.04	\$ 2.61	23,221	\$ 134.93	\$ 27.01	59,953	\$ 75.05	\$ 22.98	39,187	\$ 4.99	\$ 4.00	14,958	\$ 9.67	\$ 6.68	17,378
	Nursing Facility	\$ 4,560.84	\$ 161.86	338,137	\$ 32.90	\$ 149.96	2,632	\$ 5,064.74	\$ 184.90	328,708	\$ 91.85	\$ 259.26	4,251	\$ 3.75	\$ 154.44	292	\$ 118.13	\$ 171.60	8,261
	Other Medical	\$ 19.09	\$ 8.52	26,909	\$ 5.33	\$ 2.79	22,906	\$ 26.88	\$ 25.97	12,418	\$ 53.91	\$ 24.90	25,982	\$ 3.90	\$ 3.34	14,021	\$ 6.97	\$ 5.40	15,493
	Outpatient	\$ 19.67	\$ 12.81	18,420	\$ 14.69	\$ 9.95	17,703	\$ 112.98	\$ 45.53	29,778	\$ 90.27	\$ 214.28	5,055	\$ 6.33	\$ 7.64	9,947	\$ 12.35	\$ 13.99	10,590
	Pharmacy	\$ 14.64	\$ 17.77	9,891	\$ 21.64	\$ 32.21	8,063	\$ 775.32	\$ 51.48	180,729	\$ 1,269.89	\$ 182.39	83,552	\$ 10.69	\$ 32.19	3,985	\$ 82.21	\$ 99.37	9,927
	Physician	\$ 12.98	\$ 2.96	52,607	\$ 10.70	\$ 3.20	40,067	\$ 168.38	\$ 44.88	45,019	\$ 128.87	\$ 30.08	51,411	\$ 7.85	\$ 4.19	22,467	\$ 15.66	\$ 7.25	25,934
	Vision	\$ 0.57	\$ 9.54	711	\$ 0.47	\$ 8.73	644	\$ 3.48	\$ 35.39	1,180	\$ 2.21	\$ 34.63	767	\$ 0.42	\$ 11.36	441	\$ 0.54	\$ 13.42	484
Medical Services Subtotal		\$ 4,709.76	N/A	N/A	\$ 195.57	N/A	N/A	\$ 7,257.18	N/A	N/A	\$ 2,771.02	N/A	N/A	\$ 66.18	N/A	N/A	\$ 340.88	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 32.40	\$ 35.42	10,976	\$ -	\$ -	-	\$ 10.64	\$ 34.52	3,699	\$ -	\$ -	-	\$ 3.07	\$ 35.26	1,044
	Employment	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.01	\$ 10.21	15	\$ -	\$ -	-	\$ 0.00	\$ 10.21	1
	Home Health/Therapies	\$ -	\$ -	-	\$ 241.83	\$ 11.17	259,781	\$ -	\$ -	-	\$ 232.39	\$ 11.23	248,274	\$ -	\$ -	-	\$ 30.69	\$ 11.19	32,893
	Other Waiver	\$ 0.31	\$ 508.33	7	\$ 18.21	\$ 21.98	9,940	\$ 0.20	\$ 375.00	6	\$ 42.79	\$ 107.88	4,760	\$ -	\$ -	-	\$ 3.61	\$ 42.54	1,017
	PDS/FMS	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.57	\$ 126.92	54	\$ -	\$ -	-	\$ 0.03	\$ 126.92	3
	Personal Assistance	\$ 8.41	\$ 4.32	23,345	\$ 3,070.11	\$ 4.60	8,006,294	\$ 28.51	\$ 5.40	63,414	\$ 3,151.81	\$ 4.61	8,208,873	\$ 0.39	\$ 5.03	932	\$ 400.52	\$ 4.60	1,043,812
	Residential Habilitation	\$ -	\$ -	-	\$ 146.60	\$ 99.94	17,602	\$ -	\$ -	-	\$ 56.49	\$ 141.60	4,788	\$ -	\$ -	-	\$ 14.30	\$ 106.23	1,615
	Respite	\$ -	\$ -	-	\$ 0.70	\$ 4.13	2,041	\$ -	\$ -	-	\$ 0.36	\$ 4.44	980	\$ -	\$ -	-	\$ 0.07	\$ 4.20	209
	Vendor Services	\$ 4.46	\$ 62.69	853	\$ 124.07	\$ 14.25	104,505	\$ 3.72	\$ 136.25	327	\$ 121.09	\$ 14.31	101,537	\$ -	\$ -	-	\$ 15.93	\$ 14.34	13,332
	Waiver DME/Supplies	\$ -	\$ -	-	\$ 5.23	\$ 49.56	1,266	\$ -	\$ -	-	\$ 6.02	\$ 36.42	1,985	\$ -	\$ -	-	\$ 0.71	\$ 42.91	200
	HCBS Waiver Services Subtotal		\$ 13.18	N/A	N/A	\$ 3,639.14	N/A	N/A	\$ 32.43	N/A	N/A	\$ 3,622.19	N/A	N/A	\$ 0.39	N/A	N/A	\$ 468.93	N/A
Total Services		\$ 4,722.93	N/A	N/A	\$ 3,834.71	N/A	N/A	\$ 7,289.61	N/A	N/A	\$ 6,393.21	N/A	N/A	\$ 66.57	N/A	N/A	\$ 809.81	N/A	N/A

Rating Region	Northeast
Age Group	60+
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		76,017			51,344			2,087			5,176			266,551			401,175		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 0.93	\$ 17.12	650	\$ 9.99	\$ 89.17	1,345	\$ 37.71	\$ 158.75	2,851	\$ 36.74	\$ 148.82	2,962	\$ 0.53	\$ 25.91	246	\$ 2.48	\$ 58.09	512
	Dental	\$ 5.21	\$ 52.07	1,201	\$ 2.77	\$ 74.57	447	\$ 7.20	\$ 49.72	1,737	\$ 6.01	\$ 78.99	913	\$ 2.45	\$ 52.75	558	\$ 3.09	\$ 54.78	676
	DME/Supplies	\$ 5.71	\$ 1.98	34,576	\$ 54.04	\$ 0.62	1,044,102	\$ 32.26	\$ 9.39	41,231	\$ 114.81	\$ 1.31	1,053,191	\$ 6.21	\$ 0.95	78,198	\$ 13.77	\$ 0.80	205,939
	Emergency Room	\$ 0.35	\$ 7.56	558	\$ 0.68	\$ 5.90	1,381	\$ 16.43	\$ 100.28	1,966	\$ 20.90	\$ 84.06	2,983	\$ 0.54	\$ 7.34	875	\$ 0.86	\$ 11.36	913
	FQHC/RHC	\$ 1.60	\$ 46.23	415	\$ 3.42	\$ 104.50	393	\$ 8.71	\$ 135.23	773	\$ 17.37	\$ 189.35	1,101	\$ 3.92	\$ 110.70	425	\$ 3.62	\$ 101.02	430
	Home Health	\$ 0.02	\$ 6.01	33	\$ 1.92	\$ 11.23	2,047	\$ 4.07	\$ 98.89	493	\$ 46.15	\$ 71.34	7,762	\$ 0.26	\$ 9.36	332	\$ 1.04	\$ 21.03	592
	Hospice	\$ 0.13	\$ 458.52	3	\$ 0.39	\$ 998.02	5	\$ 32.45	\$ -	-	\$ 32.92	\$ 4,599.07	86	\$ 0.05	\$ 53.50	11	\$ 0.70	\$ 849.12	10
	Inpatient	\$ 19.41	\$ 171.76	1,356	\$ 40.00	\$ 158.76	3,024	\$ 869.55	\$ 1,798.26	5,803	\$ 681.75	\$ 1,845.55	4,433	\$ 20.36	\$ 194.40	1,257	\$ 35.65	\$ 273.07	1,567
	Laboratory/Radiology	\$ 3.75	\$ 3.44	13,090	\$ 5.25	\$ 2.81	22,431	\$ 135.71	\$ 27.85	58,481	\$ 76.25	\$ 22.42	40,817	\$ 4.68	\$ 3.88	14,474	\$ 6.18	\$ 4.70	15,799
	Nursing Facility	\$ 4,373.38	\$ 151.69	345,966	\$ 143.60	\$ 161.07	10,698	\$ 5,051.93	\$ 180.84	335,228	\$ 123.77	\$ 290.48	5,113	\$ 26.09	\$ 161.87	1,934	\$ 892.28	\$ 152.92	70,019
	Other Medical	\$ 2.62	\$ 3.32	9,479	\$ 8.98	\$ 6.29	17,148	\$ 36.51	\$ 19.85	22,072	\$ 51.04	\$ 24.22	25,284	\$ 5.19	\$ 4.16	14,952	\$ 5.94	\$ 4.96	14,366
	Outpatient	\$ 5.14	\$ 13.35	4,616	\$ 7.62	\$ 16.82	5,433	\$ 71.31	\$ 55.92	15,302	\$ 113.90	\$ 297.45	4,595	\$ 3.55	\$ 15.81	2,694	\$ 6.15	\$ 21.08	3,499
	Pharmacy	\$ 5.89	\$ 8.76	8,079	\$ 9.80	\$ 18.03	6,522	\$ 596.56	\$ 42.63	167,936	\$ 783.62	\$ 105.69	88,974	\$ 10.41	\$ 31.95	3,911	\$ 22.50	\$ 38.66	6,985
	Physician	\$ 7.08	\$ 4.37	19,419	\$ 9.55	\$ 4.43	25,863	\$ 172.67	\$ 46.09	44,958	\$ 124.26	\$ 29.99	49,718	\$ 8.26	\$ 4.67	21,195	\$ 10.55	\$ 5.77	21,948
	Vision	\$ 0.55	\$ 9.52	696	\$ 0.46	\$ 7.48	733	\$ 4.14	\$ 31.67	1,567	\$ 2.72	\$ 35.08	931	\$ 0.56	\$ 8.79	771	\$ 0.59	\$ 9.42	758
Medical Services Subtotal	\$ 4,431.78	N/A	N/A	\$ 298.47	N/A	N/A	\$ 7,077.19	N/A	N/A	\$ 2,232.20	N/A	N/A	\$ 93.07	N/A	N/A	\$ 1,005.40	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 9.94	\$ 54.05	2,208	\$ -	\$ -	-	\$ 23.56	\$ 60.21	4,694	\$ 0.00	\$ 71.79	0	\$ 1.58	\$ 55.14	343
	Employment	\$ -	\$ -	-	\$ 0.00	\$ 10.21	0	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.00	\$ 10.21	0
	Home Health/Therapies	\$ 0.03	\$ 98.98	3	\$ 27.24	\$ 11.56	28,272	\$ -	\$ -	-	\$ 101.02	\$ 10.98	110,411	\$ -	\$ -	-	\$ 4.80	\$ 11.41	5,043
	Other Waiver	\$ 0.49	\$ 1,581.89	4	\$ 11.18	\$ 49.40	2,715	\$ 2.34	\$ 2,399.10	12	\$ 40.94	\$ 92.97	5,284	\$ 0.06	\$ 689.16	1	\$ 2.10	\$ 60.43	417
	PDS/FMS	\$ -	\$ -	-	\$ 1.14	\$ 163.20	84	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.15	\$ 163.20	11
	Personal Assistance	\$ 5.62	\$ 4.83	13,979	\$ 3,342.84	\$ 4.84	8,288,403	\$ 0.36	\$ 4.97	869	\$ 3,259.78	\$ 4.84	8,087,218	\$ 0.46	\$ 5.05	1,100	\$ 471.26	\$ 4.84	1,168,508
	Residential Habilitation	\$ -	\$ -	-	\$ 19.77	\$ 80.15	2,960	\$ -	\$ -	-	\$ 23.02	\$ 125.33	2,204	\$ -	\$ -	-	\$ 2.83	\$ 83.30	407
	Respite	\$ -	\$ -	-	\$ 0.98	\$ 4.64	2,532	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.13	\$ 4.64	324
	Vendor Services	\$ 1.39	\$ 38.57	433	\$ 118.62	\$ 11.11	128,129	\$ 2.19	\$ 93.52	281	\$ 108.73	\$ 11.70	111,522	\$ 0.01	\$ 11.23	11	\$ 16.87	\$ 11.29	17,928
	Waiver DME/Supplies	\$ 0.03	\$ 54.69	7	\$ 8.99	\$ 48.98	2,202	\$ -	\$ -	-	\$ 7.59	\$ 32.74	2,783	\$ 0.00	\$ 23.47	0	\$ 1.26	\$ 47.16	319
HCBS Waiver Services Subtotal	\$ 7.56	N/A	N/A	\$ 3,540.71	N/A	N/A	\$ 4.89	N/A	N/A	\$ 3,564.63	N/A	N/A	\$ 0.53	N/A	N/A	\$ 500.96	N/A	N/A	N/A
Total Services	\$ 4,439.34	N/A	N/A	\$ 3,839.18	N/A	N/A	\$ 7,082.09	N/A	N/A	\$ 5,796.83	N/A	N/A	\$ 93.60	N/A	N/A	\$ 1,506.36	N/A	N/A	N/A

Rating Region	Northwest
Age Group	21-59
Time Period	SFY 2021-2022

CHC Eligible Population Group																			
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		1,833			14,835			983			13,585			114,733			145,969		
Category of Service		PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000
Medical Services	Ambulance	\$ 4.02	\$ 27.14	1,779	\$ 3.20	\$ 60.18	637	\$ 51.66	\$ 243.86	2,542	\$ 29.24	\$ 233.93	1,500	\$ 0.54	\$ 40.74	160	\$ 3.87	\$ 125.62	370
	Dental	\$ 4.36	\$ 47.14	1,110	\$ 5.11	\$ 53.34	1,150	\$ 7.60	\$ 47.69	1,911	\$ 6.74	\$ 62.09	1,302	\$ 3.59	\$ 40.38	1,067	\$ 4.07	\$ 44.30	1,104
	DME/Supplies	\$ 52.02	\$ 4.01	155,685	\$ 39.83	\$ 0.93	514,005	\$ 212.43	\$ 26.73	95,356	\$ 161.08	\$ 3.64	531,081	\$ 4.37	\$ 1.73	30,372	\$ 24.56	\$ 2.30	128,135
	Emergency Room	\$ 1.91	\$ 17.57	1,303	\$ 0.93	\$ 7.06	1,575	\$ 23.74	\$ 109.49	2,602	\$ 27.20	\$ 91.47	3,569	\$ 0.88	\$ 9.18	1,155	\$ 3.50	\$ 29.32	1,434
	FQHC/RHC	\$ 3.82	\$ 100.57	456	\$ 4.09	\$ 87.08	564	\$ 12.02	\$ 208.15	693	\$ 8.25	\$ 173.92	569	\$ 3.84	\$ 94.07	490	\$ 4.33	\$ 102.77	506
	Home Health	\$ 0.06	\$ 47.61	15	\$ 3.05	\$ 15.71	2,332	\$ 5.61	\$ 87.81	767	\$ 50.28	\$ 64.30	9,382	\$ 0.79	\$ 27.56	346	\$ 5.65	\$ 48.89	1,387
	Hospice	\$ 0.01	\$ -	-	\$ 0.00	\$ 0.09	15	\$ 17.81	\$ -	-	\$ 6.11	\$ -	-	\$ 0.01	\$ 2.33	28	\$ 0.69	\$ 347.84	24
	Inpatient	\$ 36.38	\$ 78.18	5,584	\$ 30.12	\$ 148.62	2,432	\$ 1,330.76	\$ 1,926.84	8,288	\$ 487.30	\$ 1,764.82	3,313	\$ 10.49	\$ 169.23	744	\$ 66.08	\$ 626.19	1,266
	Laboratory/Radiology	\$ 6.28	\$ 3.35	22,501	\$ 6.03	\$ 3.43	21,106	\$ 99.34	\$ 23.98	49,706	\$ 74.09	\$ 23.49	37,854	\$ 4.44	\$ 4.26	12,482	\$ 11.74	\$ 8.75	16,097
	Nursing Facility	\$ 4,365.93	\$ 150.97	347,023	\$ 32.93	\$ 156.40	2,527	\$ 5,216.83	\$ 180.32	347,178	\$ 21.27	\$ 172.14	1,483	\$ 2.00	\$ 156.18	154	\$ 96.86	\$ 161.17	7,212
	Other Medical	\$ 19.00	\$ 6.74	33,828	\$ 10.21	\$ 5.82	21,032	\$ 31.89	\$ 21.93	17,447	\$ 48.29	\$ 24.42	23,727	\$ 2.99	\$ 3.45	10,409	\$ 8.34	\$ 7.65	13,069
	Outpatient	\$ 20.07	\$ 3.28	73,461	\$ 18.17	\$ 5.59	39,046	\$ 195.28	\$ 27.29	85,864	\$ 96.76	\$ 58.80	19,748	\$ 5.08	\$ 5.63	10,826	\$ 16.41	\$ 12.45	15,816
	Pharmacy	\$ 12.78	\$ 10.39	14,761	\$ 18.15	\$ 17.55	12,411	\$ 873.79	\$ 75.79	138,345	\$ 891.69	\$ 125.56	85,218	\$ 10.94	\$ 26.10	5,028	\$ 99.47	\$ 83.70	14,262
	Physician	\$ 16.19	\$ 4.15	46,866	\$ 12.09	\$ 5.29	27,423	\$ 208.14	\$ 40.73	61,315	\$ 116.34	\$ 42.65	32,729	\$ 9.09	\$ 4.07	26,812	\$ 20.81	\$ 8.95	27,909
	Vision	\$ 0.92	\$ 15.67	708	\$ 0.65	\$ 15.32	511	\$ 3.86	\$ 41.38	1,121	\$ 2.71	\$ 30.81	1,054	\$ 0.61	\$ 17.54	417	\$ 0.84	\$ 20.27	494
Medical Services Subtotal		\$ 4,543.75	N/A	N/A	\$ 184.57	N/A	N/A	\$ 8,290.76	N/A	N/A	\$ 2,027.35	N/A	N/A	\$ 59.67	N/A	N/A	\$ 367.22	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ -	\$ -	-	\$ 72.53	\$ 34.43	25,277	\$ 2.19	\$ 34.56	761	\$ 21.29	\$ 34.54	7,397	\$ -	\$ -	-	\$ 9.37	\$ 34.45	3,262
	Employment	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
	Home Health/Therapies	\$ -	\$ -	-	\$ 174.52	\$ 11.14	187,961	\$ -	\$ -	-	\$ 136.45	\$ 11.30	144,932	\$ -	\$ -	-	\$ 30.44	\$ 11.21	32,591
	Other Waiver	\$ -	\$ -	-	\$ 8.44	\$ 44.08	2,299	\$ -	\$ -	-	\$ 2.42	\$ 24.43	1,189	\$ -	\$ -	-	\$ 1.08	\$ 37.77	344
	PDS/FMS	\$ -	\$ -	-	\$ 2.52	\$ 137.30	220	\$ -	\$ -	-	\$ 10.68	\$ 175.24	731	\$ -	\$ -	-	\$ 1.25	\$ 165.84	90
	Personal Assistance	\$ 2.21	\$ 4.68	5,672	\$ 2,854.90	\$ 4.58	7,472,440	\$ 17.46	\$ 4.63	45,206	\$ 3,831.14	\$ 4.86	9,459,044	\$ -	\$ -	-	\$ 646.85	\$ 4.73	1,640,147
	Residential Habilitation	\$ -	\$ -	-	\$ 163.11	\$ 156.15	12,535	\$ 6.90	\$ 255.33	324	\$ 54.78	\$ 189.70	3,465	\$ -	\$ -	-	\$ 21.72	\$ 163.05	1,599
	Respite	\$ -	\$ -	-	\$ 0.02	\$ 3.10	66	\$ -	\$ -	-	\$ 0.18	\$ 4.77	447	\$ -	\$ -	-	\$ 0.02	\$ 4.54	48
	Vendor Services	\$ 10.26	\$ 249.53	494	\$ 96.97	\$ 13.08	88,951	\$ 11.12	\$ 93.26	1,431	\$ 69.76	\$ 10.06	83,183	\$ -	\$ -	-	\$ 16.55	\$ 11.82	16,798
	Waiver DME/Supplies	\$ 0.09	\$ 79.00	13	\$ 1.45	\$ 5.96	2,913	\$ -	\$ -	-	\$ 2.41	\$ 6.56	4,404	\$ -	\$ -	-	\$ 0.37	\$ 6.33	706
	HCBS Waiver Services Subtotal		\$ 12.56	N/A	N/A	\$ 3,374.46	N/A	N/A	\$ 37.67	N/A	N/A	\$ 4,129.11	N/A	N/A	\$ -	N/A	N/A	\$ 727.65	N/A
Total Services		\$ 4,556.31	N/A	N/A	\$ 3,559.03	N/A	N/A	\$ 8,328.44	N/A	N/A	\$ 6,156.46	N/A	N/A	\$ 59.67	N/A	N/A	\$ 1,094.88	N/A	N/A

Rating Region	Northwest
Age Group	60+
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		38,738			38,663			1,022			5,521			127,819			211,762		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 0.84	\$ 19.54	513	\$ 3.11	\$ 42.92	869	\$ 43.48	\$ 240.06	2,173	\$ 26.28	\$ 234.21	1,347	\$ 0.44	\$ 28.71	183	\$ 1.88	\$ 55.22	408
	Dental	\$ 2.66	\$ 39.11	815	\$ 2.53	\$ 49.28	617	\$ 6.10	\$ 45.98	1,593	\$ 4.68	\$ 65.67	855	\$ 2.08	\$ 37.39	667	\$ 2.36	\$ 40.69	695
	DME/Supplies	\$ 11.61	\$ 4.17	33,367	\$ 38.77	\$ 0.76	608,317	\$ 43.67	\$ 8.52	61,477	\$ 87.99	\$ 2.50	421,826	\$ 5.94	\$ 1.22	58,500	\$ 15.29	\$ 1.12	163,772
	Emergency Room	\$ 0.30	\$ 8.49	422	\$ 0.64	\$ 5.68	1,353	\$ 16.77	\$ 93.88	2,144	\$ 21.62	\$ 87.14	2,978	\$ 0.43	\$ 7.20	710	\$ 1.07	\$ 15.32	841
	FQHC/RHC	\$ 1.49	\$ 57.25	311	\$ 2.92	\$ 77.73	450	\$ 8.34	\$ 141.09	710	\$ 10.00	\$ 177.60	676	\$ 3.39	\$ 88.33	461	\$ 3.15	\$ 86.30	438
	Home Health	\$ 0.02	\$ 13.80	18	\$ 0.81	\$ 10.94	891	\$ 7.67	\$ 85.89	1,072	\$ 46.12	\$ 75.66	7,316	\$ 0.41	\$ 24.70	198	\$ 1.64	\$ 40.82	481
	Hospice	\$ 1.07	\$ 1,728.44	7	\$ 0.03	\$ 19.82	18	\$ 21.46	\$ -	-	\$ 19.52	\$ -	-	\$ 0.08	\$ 173.12	6	\$ 0.86	\$ 1,287.32	8
	Inpatient	\$ 14.21	\$ 154.47	1,104	\$ 42.89	\$ 187.58	2,744	\$ 804.68	\$ 1,578.34	6,118	\$ 456.72	\$ 1,871.81	2,928	\$ 21.01	\$ 235.90	1,069	\$ 38.90	\$ 321.07	1,454
	Laboratory/Radiology	\$ 2.73	\$ 3.22	10,197	\$ 5.07	\$ 1.22	49,952	\$ 92.90	\$ 24.09	46,285	\$ 66.25	\$ 22.69	35,042	\$ 4.75	\$ 4.48	12,709	\$ 6.47	\$ 3.92	19,793
	Nursing Facility	\$ 4,180.28	\$ 143.75	348,973	\$ 89.64	\$ 156.60	6,869	\$ 4,985.45	\$ 169.17	353,648	\$ 66.90	\$ 162.91	4,928	\$ 17.76	\$ 147.20	1,448	\$ 817.59	\$ 144.70	67,801
	Other Medical	\$ 2.96	\$ 4.90	7,257	\$ 6.55	\$ 4.71	16,664	\$ 39.60	\$ 23.46	20,254	\$ 39.89	\$ 26.43	18,110	\$ 3.27	\$ 3.62	10,830	\$ 4.94	\$ 5.17	11,477
	Outpatient	\$ 4.74	\$ 3.39	16,807	\$ 10.94	\$ 4.90	26,773	\$ 134.30	\$ 26.86	59,989	\$ 72.54	\$ 90.46	9,622	\$ 3.62	\$ 8.88	4,894	\$ 7.59	\$ 7.95	11,457
	Pharmacy	\$ 5.31	\$ 5.12	12,458	\$ 13.44	\$ 15.28	10,550	\$ 770.91	\$ 68.11	135,823	\$ 748.39	\$ 107.68	83,404	\$ 6.83	\$ 16.81	4,875	\$ 30.78	\$ 37.02	9,978
	Physician	\$ 5.72	\$ 5.24	13,115	\$ 11.10	\$ 6.14	21,701	\$ 164.76	\$ 42.69	46,313	\$ 120.29	\$ 41.31	34,941	\$ 9.50	\$ 7.11	16,032	\$ 12.74	\$ 8.90	17,173
	Vision	\$ 0.46	\$ 11.38	482	\$ 0.51	\$ 10.45	586	\$ 3.48	\$ 39.42	1,060	\$ 3.16	\$ 35.99	1,054	\$ 0.59	\$ 13.06	545	\$ 0.63	\$ 13.67	557
Medical Services Subtotal	\$ 4,234.41	N/A	N/A	\$ 228.95	N/A	N/A	\$ 7,143.59	N/A	N/A	\$ 1,790.36	N/A	N/A	\$ 80.09	N/A	N/A	\$ 945.89	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.01	\$ 71.79	2	\$ 8.73	\$ 37.46	2,796	\$ -	\$ -	-	\$ 0.85	\$ 34.56	297	\$ -	\$ -	-	\$ 1.62	\$ 37.44	519
	Employment	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
	Home Health/Therapies	\$ 0.01	\$ 13.68	8	\$ 55.24	\$ 11.57	57,312	\$ -	\$ -	-	\$ 0.82	\$ 35.04	282	\$ -	\$ -	-	\$ 10.11	\$ 11.58	10,472
	Other Waiver	\$ -	\$ -	-	\$ 2.66	\$ 75.00	425	\$ -	\$ -	-	\$ 1.77	\$ 502.47	42	\$ -	\$ -	-	\$ 0.53	\$ 80.96	79
	PDS/FMS	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-
	Personal Assistance	\$ 5.06	\$ 4.87	12,448	\$ 3,046.98	\$ 4.77	7,663,976	\$ 3.21	\$ 3.94	9,782	\$ 4,238.82	\$ 4.99	10,192,488	\$ 0.53	\$ 3.71	1,727	\$ 668.08	\$ 4.81	1,668,354
	Residential Habilitation	\$ -	\$ -	-	\$ 14.13	\$ 164.27	1,032	\$ -	\$ -	-	\$ 1.46	\$ 255.33	69	\$ -	\$ -	-	\$ 2.62	\$ 165.12	190
	Respite	\$ -	\$ -	-	\$ 0.56	\$ 3.78	1,791	\$ -	\$ -	-	\$ -	\$ -	-	\$ -	\$ -	-	\$ 0.10	\$ 3.78	327
	Vendor Services	\$ 2.56	\$ 65.86	467	\$ 103.41	\$ 11.16	111,227	\$ 5.53	\$ 42.25	1,570	\$ 80.50	\$ 10.19	94,758	\$ -	\$ -	-	\$ 21.47	\$ 11.27	22,871
	Waiver DME/Supplies	\$ 0.01	\$ 10.24	8	\$ 3.24	\$ 5.74	6,763	\$ -	\$ -	-	\$ 1.57	\$ 3.75	5,023	\$ -	\$ -	-	\$ 0.63	\$ 5.56	1,367
HCBS Waiver Services Subtotal	\$ 7.65	N/A	N/A	\$ 3,234.94	N/A	N/A	\$ 8.74	N/A	N/A	\$ 4,325.79	N/A	N/A	\$ 0.53	N/A	N/A	\$ 705.16	N/A	N/A	N/A
Total Services	\$ 4,242.05	N/A	N/A	\$ 3,463.89	N/A	N/A	\$ 7,152.33	N/A	N/A	\$ 6,116.16	N/A	N/A	\$ 80.62	N/A	N/A	\$ 1,651.05	N/A	N/A	N/A

Rating Region	Statewide
Age Group	21-59
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		24,749			210,260			20,670			247,886			1,164,008			1,667,574		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 3.64	\$ 20.13	2,169	\$ 5.22	\$ 60.57	1,035	\$ 47.74	\$ 179.99	3,183	\$ 21.92	\$ 206.87	1,271	\$ 0.56	\$ 31.50	213	\$ 4.95	\$ 110.07	540
	Dental	\$ 8.39	\$ 54.89	1,834	\$ 5.53	\$ 46.18	1,437	\$ 11.52	\$ 58.85	2,349	\$ 8.27	\$ 46.13	2,152	\$ 4.26	\$ 43.82	1,168	\$ 5.17	\$ 45.21	1,373
	DME/Supplies	\$ 34.66	\$ 1.61	258,652	\$ 36.11	\$ 0.77	563,987	\$ 74.60	\$ 17.54	51,038	\$ 131.64	\$ 2.61	605,838	\$ 4.50	\$ 1.35	39,863	\$ 28.70	\$ 1.78	193,467
	Emergency Room	\$ 1.33	\$ 11.09	1,443	\$ 1.91	\$ 14.14	1,624	\$ 23.92	\$ 116.20	2,471	\$ 35.98	\$ 138.82	3,110	\$ 1.46	\$ 13.02	1,347	\$ 6.93	\$ 50.09	1,660
	FQHC/RHC	\$ 0.70	\$ 76.29	110	\$ 3.96	\$ 107.60	442	\$ 2.14	\$ 214.57	120	\$ 15.88	\$ 210.47	906	\$ 3.63	\$ 114.37	380	\$ 5.43	\$ 141.92	459
	Home Health	\$ 3.38	\$ 61.91	656	\$ 4.72	\$ 15.14	3,738	\$ 18.61	\$ 85.98	2,597	\$ 45.72	\$ 63.08	8,697	\$ 0.92	\$ 15.78	699	\$ 8.31	\$ 43.49	2,294
	Hospice	\$ 0.18	\$ 191.17	11	\$ 0.01	\$ 21.85	5	\$ 34.13	\$ 85,257.26	5	\$ 4.89	\$ 13,796.48	4	\$ 0.01	\$ 1.95	50	\$ 1.16	\$ 383.13	36
	Inpatient	\$ 62.73	\$ 190.95	3,942	\$ 39.76	\$ 173.93	2,743	\$ 1,252.74	\$ 2,039.67	7,370	\$ 728.87	\$ 2,297.78	3,806	\$ 14.02	\$ 165.44	1,017	\$ 139.60	\$ 945.76	1,771
	Laboratory/Radiology	\$ 5.79	\$ 3.27	21,242	\$ 6.44	\$ 3.22	24,019	\$ 102.41	\$ 23.37	52,590	\$ 67.73	\$ 26.14	31,094	\$ 4.81	\$ 3.70	15,577	\$ 15.59	\$ 9.60	19,491
	Nursing Facility	\$ 5,442.72	\$ 190.55	342,766	\$ 24.07	\$ 160.20	1,803	\$ 6,016.92	\$ 215.64	334,829	\$ 40.56	\$ 219.41	2,218	\$ 3.27	\$ 148.35	265	\$ 166.71	\$ 200.46	9,979
	Other Medical	\$ 49.93	\$ 21.34	28,073	\$ 14.74	\$ 7.63	23,182	\$ 94.84	\$ 43.24	26,321	\$ 54.53	\$ 38.21	17,127	\$ 3.28	\$ 3.24	12,119	\$ 14.17	\$ 11.59	14,671
	Outpatient	\$ 21.66	\$ 11.44	22,724	\$ 19.40	\$ 9.26	25,143	\$ 160.56	\$ 79.43	24,256	\$ 124.05	\$ 143.18	10,397	\$ 7.42	\$ 10.38	8,573	\$ 28.37	\$ 30.03	11,338
	Pharmacy	\$ 16.77	\$ 15.02	13,393	\$ 22.52	\$ 24.14	11,194	\$ 808.45	\$ 67.75	143,191	\$ 895.84	\$ 134.24	80,081	\$ 11.42	\$ 28.17	4,865	\$ 154.25	\$ 99.06	18,685
	Physician	\$ 16.70	\$ 3.75	53,489	\$ 13.64	\$ 4.10	39,951	\$ 257.96	\$ 40.34	76,733	\$ 128.52	\$ 33.44	46,127	\$ 8.99	\$ 4.82	22,404	\$ 30.55	\$ 12.52	29,277
	Vision	\$ 0.82	\$ 12.96	756	\$ 0.59	\$ 13.33	530	\$ 3.94	\$ 38.74	1,222	\$ 2.19	\$ 37.73	697	\$ 0.50	\$ 15.24	392	\$ 0.81	\$ 20.62	470
Medical Services Subtotal	\$ 5,669.39	N/A	N/A	\$ 198.63	N/A	N/A	\$ 8,910.49	N/A	N/A	\$ 2,306.61	N/A	N/A	\$ 69.04	N/A	N/A	\$ 610.70	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.37	\$ 33.48	132	\$ 58.10	\$ 32.79	21,264	\$ 0.17	\$ 28.53	73	\$ 14.31	\$ 34.90	4,921	\$ -	\$ -	0	\$ 9.46	\$ 33.24	3,416
	Employment	\$ -	\$ -	-	\$ 1.97	\$ 6.28	3,766	\$ -	\$ -	-	\$ 0.95	\$ 6.47	1,758	\$ -	\$ -	-	\$ 0.39	\$ 6.35	736
	Home Health/Therapies	\$ 0.46	\$ 12.08	456	\$ 220.28	\$ 11.77	224,572	\$ 0.03	\$ 11.02	34	\$ 211.65	\$ 11.84	214,498	\$ 0.16	\$ 12.37	152	\$ 59.35	\$ 11.81	60,314
	Other Waiver	\$ 1.47	\$ 144.90	122	\$ 59.40	\$ 35.13	20,292	\$ 7.62	\$ 255.46	358	\$ 59.56	\$ 81.96	8,721	\$ 0.15	\$ 466.69	4	\$ 16.56	\$ 51.44	3,864
	PDS/FMS	\$ -	\$ -	-	\$ 0.86	\$ 160.87	64	\$ -	\$ -	-	\$ 0.61	\$ 172.34	43	\$ -	\$ -	-	\$ 0.20	\$ 165.92	14
	Personal Assistance	\$ 13.66	\$ 4.84	33,859	\$ 3,858.24	\$ 4.85	9,550,907	\$ 11.15	\$ 5.00	26,769	\$ 4,400.77	\$ 4.97	10,615,088	\$ 2.61	\$ 4.88	6,415	\$ 1,142.82	\$ 4.92	2,787,506
	Residential Habilitation	\$ 6.81	\$ 160.68	508	\$ 139.65	\$ 100.35	16,700	\$ 2.08	\$ 146.78	170	\$ 39.02	\$ 105.88	4,422	\$ -	\$ -	-	\$ 23.54	\$ 101.86	2,773
	Respite	\$ -	\$ -	-	\$ 0.63	\$ 4.46	1,703	\$ -	\$ -	-	\$ 0.56	\$ 3.59	1,880	\$ -	\$ -	0	\$ 0.16	\$ 3.96	494
	Vendor Services	\$ 7.98	\$ 104.57	916	\$ 103.87	\$ 10.88	114,527	\$ 13.59	\$ 157.62	1,035	\$ 99.57	\$ 9.50	125,752	\$ 0.02	\$ 9.03	23	\$ 28.20	\$ 10.20	33,176
	Waiver DME/Supplies	\$ 0.02	\$ 15.14	14	\$ 2.16	\$ 7.74	3,348	\$ 0.01	\$ 10.70	6	\$ 1.63	\$ 9.84	1,985	\$ 0.00	\$ 3.78	4	\$ 0.52	\$ 8.58	720
	HCBS Waiver Services Subtotal	\$ 30.76	N/A	N/A	\$ 4,445.16	N/A	N/A	\$ 34.66	N/A	N/A	\$ 4,828.64	N/A	N/A	\$ 2.93	N/A	N/A	\$ 1,281.19	N/A	N/A
Total Services	\$ 5,700.15	N/A	N/A	\$ 4,643.79	N/A	N/A	\$ 8,945.15	N/A	N/A	\$ 7,135.24	N/A	N/A	\$ 71.97	N/A	N/A	\$ 1,891.90	N/A	N/A	N/A

Rating Region	Statewide
Age Group	60+
Time Period	SFY 2021-2022

		CHC Eligible Population Group																	
		Dually Eligible Individuals Residing in a Nursing Facility			Dually Eligible Individuals Enrolled in the HCBS Waiver			Medicaid Only Individuals Residing in a Nursing Facility			Medicaid Only Individuals Enrolled in the HCBS Waiver			Dually Eligible Individuals Not Residing in a Nursing Facility or Enrolled in the HCBS Waiver			Total		
Member Months		428,313			684,258			20,546			121,982			1,782,914			3,038,013		
Category of Service	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	PMPM	Unit Cost	Util/1000	
Medical Services	Ambulance	\$ 1.43	\$ 22.37	768	\$ 8.00	\$ 55.50	1,729	\$ 30.10	\$ 170.25	2,121	\$ 23.44	\$ 178.56	1,575	\$ 0.52	\$ 28.39	220	\$ 3.45	\$ 58.82	705
	Dental	\$ 6.44	\$ 57.51	1,344	\$ 3.99	\$ 54.50	879	\$ 9.67	\$ 54.84	2,115	\$ 7.45	\$ 67.93	1,316	\$ 2.88	\$ 44.57	774	\$ 3.86	\$ 50.95	909
	DME/Supplies	\$ 9.20	\$ 2.41	45,820	\$ 45.51	\$ 0.62	876,403	\$ 32.42	\$ 14.86	26,187	\$ 77.83	\$ 1.81	516,758	\$ 5.88	\$ 0.92	76,293	\$ 18.34	\$ 0.82	269,554
	Emergency Room	\$ 0.44	\$ 10.13	525	\$ 1.14	\$ 11.78	1,160	\$ 15.18	\$ 110.38	1,650	\$ 25.43	\$ 128.52	2,374	\$ 0.77	\$ 11.37	811	\$ 1.89	\$ 24.75	918
	FQHC/RHC	\$ 0.45	\$ 50.32	108	\$ 3.53	\$ 104.25	406	\$ 1.53	\$ 140.96	130	\$ 17.03	\$ 208.70	979	\$ 3.32	\$ 106.77	373	\$ 3.50	\$ 114.82	366
	Home Health	\$ 0.18	\$ 28.19	78	\$ 1.20	\$ 6.57	2,183	\$ 9.28	\$ 117.56	947	\$ 40.35	\$ 75.73	6,393	\$ 0.38	\$ 9.30	495	\$ 2.20	\$ 25.03	1,056
	Hospice	\$ 1.07	\$ 1,064.08	12	\$ 1.34	\$ 3,431.57	5	\$ 42.42	\$ 24,545.65	21	\$ 16.53	\$ 21,481.82	9	\$ 0.29	\$ 340.92	10	\$ 1.57	\$ 2,036.34	9
	Inpatient	\$ 29.34	\$ 215.69	1,632	\$ 58.34	\$ 256.01	2,735	\$ 774.32	\$ 2,121.46	4,380	\$ 709.78	\$ 2,375.32	3,586	\$ 27.01	\$ 251.96	1,287	\$ 66.87	\$ 452.13	1,775
	Laboratory/Radiology	\$ 3.20	\$ 3.52	10,905	\$ 5.35	\$ 3.01	21,322	\$ 93.13	\$ 25.72	43,455	\$ 66.83	\$ 25.87	31,005	\$ 4.59	\$ 4.09	13,459	\$ 7.66	\$ 5.83	15,777
	Nursing Facility	\$ 4,601.71	\$ 158.22	349,013	\$ 61.13	\$ 162.77	4,507	\$ 5,525.54	\$ 192.01	345,323	\$ 56.19	\$ 217.98	3,093	\$ 22.53	\$ 160.92	1,680	\$ 715.39	\$ 159.96	53,666
	Other Medical	\$ 5.94	\$ 7.39	9,657	\$ 10.24	\$ 6.84	17,965	\$ 36.55	\$ 26.58	16,502	\$ 54.90	\$ 44.72	14,730	\$ 3.90	\$ 3.80	12,314	\$ 7.88	\$ 7.09	13,337
	Outpatient	\$ 6.61	\$ 11.00	7,210	\$ 11.34	\$ 13.25	10,273	\$ 89.50	\$ 46.98	22,860	\$ 120.81	\$ 162.13	8,942	\$ 4.82	\$ 15.18	3,809	\$ 11.77	\$ 23.23	6,079
	Pharmacy	\$ 6.02	\$ 6.56	10,999	\$ 14.19	\$ 14.09	12,078	\$ 562.35	\$ 54.53	123,749	\$ 744.66	\$ 104.00	85,924	\$ 9.35	\$ 22.57	4,972	\$ 43.23	\$ 45.21	11,476
	Physician	\$ 8.25	\$ 4.55	21,738	\$ 12.16	\$ 4.74	30,785	\$ 174.06	\$ 39.56	52,801	\$ 128.18	\$ 34.02	45,217	\$ 9.45	\$ 5.33	21,282	\$ 15.77	\$ 7.67	24,661
	Vision	\$ 0.64	\$ 12.63	607	\$ 0.69	\$ 10.39	801	\$ 3.48	\$ 33.94	1,230	\$ 3.09	\$ 38.91	954	\$ 0.65	\$ 11.57	679	\$ 0.78	\$ 13.13	711
Medical Services Subtotal	\$ 4,680.92	N/A	N/A	\$ 238.14	N/A	N/A	\$ 7,399.51	N/A	N/A	\$ 2,092.51	N/A	N/A	\$ 96.34	N/A	N/A	\$ 904.18	N/A	N/A	N/A
HCBS Waiver Services	Day Habilitation and Adult Day	\$ 0.11	\$ 35.78	38	\$ 60.77	\$ 67.42	10,817	\$ -	\$ -	-	\$ 30.64	\$ 65.26	5,635	\$ 0.15	\$ 57.92	30	\$ 15.02	\$ 67.11	2,686
	Employment	\$ -	\$ -	-	\$ 0.09	\$ 5.24	212	\$ -	\$ -	-	\$ 0.08	\$ 4.05	245	\$ -	\$ -	-	\$ 0.02	\$ 5.03	58
	Home Health/Therapies	\$ 0.03	\$ 21.61	19	\$ 27.29	\$ 12.10	27,056	\$ 0.14	\$ 11.02	152	\$ 19.33	\$ 12.12	19,144	\$ 0.00	\$ 20.20	0	\$ 6.93	\$ 12.11	6,867
	Other Waiver	\$ 0.83	\$ 187.30	53	\$ 48.93	\$ 39.71	14,784	\$ 4.43	\$ 407.80	130	\$ 50.81	\$ 60.70	10,046	\$ 0.27	\$ 82.43	40	\$ 13.37	\$ 42.61	3,765
	PDS/FMS	\$ -	\$ -	-	\$ 1.29	\$ 197.11	78	\$ -	\$ -	-	\$ 0.12	\$ 45.70	31	\$ -	\$ -	-	\$ 0.29	\$ 187.04	19
	Personal Assistance	\$ 6.02	\$ 4.90	14,742	\$ 4,151.38	\$ 4.98	10,006,790	\$ 8.44	\$ 4.89	20,715	\$ 4,642.50	\$ 5.01	11,113,442	\$ 6.43	\$ 4.75	16,252	\$ 1,126.11	\$ 4.98	2,711,833
	Residential Habilitation	\$ 0.27	\$ 273.91	12	\$ 12.55	\$ 95.80	1,572	\$ -	\$ -	-	\$ 8.95	\$ 99.47	1,079	\$ 0.03	\$ 272.32	1	\$ 3.24	\$ 97.32	400
	Respite	\$ 0.01	\$ 4.31	35	\$ 1.12	\$ 4.13	3,263	\$ -	\$ -	-	\$ 0.50	\$ 4.56	1,319	\$ 0.00	\$ 4.78	1	\$ 0.27	\$ 4.16	793
	Vendor Services	\$ 1.92	\$ 56.78	406	\$ 129.27	\$ 11.08	139,962	\$ 4.05	\$ 71.23	683	\$ 102.41	\$ 10.14	121,145	\$ 0.11	\$ 14.90	90	\$ 33.59	\$ 11.04	36,503
	Waiver DME/Supplies	\$ 0.01	\$ 4.46	33	\$ 3.07	\$ 6.57	5,610	\$ 0.00	\$ 10.89	3	\$ 1.77	\$ 12.39	1,717	\$ 0.00	\$ 48.62	0	\$ 0.77	\$ 6.87	1,337
HCBS Waiver Services Subtotal	\$ 9.21	N/A	N/A	\$ 4,435.77	N/A	N/A	\$ 17.06	N/A	N/A	\$ 4,857.13	N/A	N/A	\$ 7.00	N/A	N/A	\$ 1,199.62	N/A	N/A	N/A
Total Services	\$ 4,690.14	N/A	N/A	\$ 4,673.92	N/A	N/A	\$ 7,416.57	N/A	N/A	\$ 6,949.65	N/A	N/A	\$ 103.34	N/A	N/A	\$ 2,103.80	N/A	N/A	N/A

Appendix A

Program Costs Outside Encounters Adjustment

Rating Region	COS	Dual Status	SFY 2021–2022 Base Encounters ¹	SFY 2021–2022 Program Costs Outside Encounters					Program Costs Outside Encounters Impact
				CHC–MCO Reported Dollars ²	Report #4 Financial Dollars ³			Total Adjustment Dollars	
					Sub-Capitation Payments Made	Settlements ⁴	Other Purchasing Arrangements ⁵		
			(A)	(B)	(C)	(D)	(E)	(F) = SUM (B to E)	(G) = (F) / (A)
SW-Allegheny	Nursing Facility	Dual	\$ 171,641,638	\$ 5,950,416	\$ -	\$ 51,521	\$ -	\$ 6,001,938	3.5%
		Non-Dual	\$ 18,877,002	\$ 564,164	\$ -	\$ 5,979	\$ -	\$ 570,143	3.0%
	Pharmacy	Dual	\$ 3,757,228	\$ (3,998)	\$ -	\$ 41,779	\$ -	\$ 37,781	1.0%
		Non-Dual	\$ 23,274,187	\$ (42,815)	\$ -	\$ 27,522	\$ -	\$ (15,293)	-0.1%
	Other Medical	Dual	\$ 26,808,281	\$ 1,880,086	\$ 517,826	\$ 7,610,537	\$ 4,131	\$ 10,012,580	37.3%
		Non-Dual	\$ 34,088,007	\$ 176,868	\$ 36,061	\$ 492,764	\$ 26,340	\$ 732,033	2.1%
	Personal Assistance	N/A	\$ 322,032,525	\$ 11,509,800	\$ -	\$ 695,404	\$ 4,382,421	\$ 16,587,625	5.2%
	Other HCBS Waiver	N/A	\$ 18,310,162	\$ 642,894	\$ -	\$ 2,100,000	\$ -	\$ 2,742,894	15.0%
Total		\$ 618,789,030	\$ 20,677,414	\$ 553,887	\$ 11,025,507	\$ 4,412,891	\$ 36,669,699	5.9%	
SW-13Cty	Nursing Facility	Dual	\$ 308,298,388	\$ 9,244,631	\$ -	\$ -	\$ -	\$ 9,244,631	3.0%
		Non-Dual	\$ 32,384,933	\$ 553,571	\$ -	\$ -	\$ -	\$ 553,571	1.7%
	Pharmacy	Dual	\$ 5,973,236	\$ 26,424	\$ -	\$ (159,543)	\$ -	\$ (133,119)	-2.2%
		Non-Dual	\$ 28,215,532	\$ 9,026	\$ -	\$ 7,283	\$ -	\$ 16,309	0.1%
	Other Medical	Dual	\$ 36,746,565	\$ 1,899,420	\$ 677,528	\$ 131,192	\$ 13,895	\$ 2,722,034	7.4%
		Non-Dual	\$ 39,688,963	\$ 472,433	\$ 34,432	\$ 17,964	\$ 60,610	\$ 585,438	1.5%
	Personal Assistance	N/A	\$ 248,251,433	\$ 10,940,929	\$ -	\$ 520,171	\$ 3,390,734	\$ 14,851,834	6.0%
	Other HCBS Waiver	N/A	\$ 36,190,263	\$ 1,171,992	\$ -	\$ 400,000	\$ -	\$ 1,571,992	4.3%
Total		\$ 735,749,313	\$ 24,318,425	\$ 711,960	\$ 917,066	\$ 3,465,239	\$ 29,412,691	4.0%	
SW Zone Total	Nursing Facility	Dual	\$ 479,940,026	\$ 15,195,047	\$ -	\$ 51,521	\$ -	\$ 15,246,568	3.2%
		Non-Dual	\$ 51,261,935	\$ 1,117,735	\$ -	\$ 5,979	\$ -	\$ 1,123,713	2.2%
	Pharmacy	Dual	\$ 9,730,464	\$ 22,426	\$ -	\$ (117,764)	\$ -	\$ (95,338)	-1.0%
		Non-Dual	\$ 51,489,719	\$ (33,789)	\$ -	\$ 34,805	\$ -	\$ 1,016	0.0%
	Other Medical	Dual	\$ 63,554,846	\$ 3,779,505	\$ 1,195,354	\$ 7,741,729	\$ 18,026	\$ 12,734,614	20.0%
		Non-Dual	\$ 73,776,970	\$ 649,300	\$ 70,493	\$ 510,728	\$ 86,950	\$ 1,317,472	1.8%
	Personal Assistance	N/A	\$ 570,283,957	\$ 22,450,729	\$ -	\$ 1,215,575	\$ 7,773,155	\$ 31,439,459	5.5%
	Other HCBS Waiver	N/A	\$ 54,500,425	\$ 1,814,886	\$ -	\$ 2,500,000	\$ -	\$ 4,314,886	7.9%
Total		\$ 1,354,538,343	\$ 44,995,839	\$ 1,265,847	\$ 11,942,573	\$ 7,878,130	\$ 66,082,390	4.9%	

Notes:

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⁵ Other Purchasing Arrangements include dollars reported for value-based purchasing (VBP) arrangements, to the extent the VBP dollars are not included in the Report #4 claims triangle or other appropriate line item.

Rating Region	COS	Dual Status	SFY 2021–2022 Base Encounters ¹	SFY 2021–2022 Program Costs Outside Encounters					Program Costs Outside Encounters Impact
				CHC–MCO Reported Dollars ²	Report #4 Financial Dollars ³			Total Adjustment Dollars	
					Sub-Capitation Payments Made	Settlements ⁴	Other Purchasing Arrangements ⁵		
			(A)	(B)	(C)	(D)	(E)	(F) = SUM (B to E)	(G) = (F) / (A)
SE-Philadelphia	Nursing Facility	Dual	\$ 214,055,630	\$ 7,715,089	\$ -	\$ -	\$ -	\$ 7,715,089	3.6%
		Non-Dual	\$ 58,901,899	\$ 2,219,422	\$ -	\$ -	\$ -	\$ 2,219,422	3.8%
	Pharmacy	Dual	\$ 11,692,076	\$ (105,568)	\$ -	\$ 146,430	\$ -	\$ 40,862	0.3%
		Non-Dual	\$ 166,454,396	\$ 7,286	\$ -	\$ 34,797	\$ -	\$ 42,082	0.0%
	Other Medical	Dual	\$ 107,273,873	\$ 3,875,321	\$ 1,688,713	\$ 180,711	\$ 863	\$ 5,745,608	5.4%
		Non-Dual	\$ 295,912,130	\$ 4,586,445	\$ 387,188	\$ 58,353	\$ 37,183	\$ 5,069,169	1.7%
	Personal Assistance	N/A	\$ 2,648,130,073	\$ 70,590,925	\$ -	\$ 1,363,916	\$ 6,862,976	\$ 78,817,818	3.0%
	Other HCBS Waiver	N/A	\$ 165,710,355	\$ 7,002,541	\$ -	\$ -	\$ -	\$ 7,002,541	4.2%
Total		\$ 3,668,130,432	\$ 95,891,460	\$ 2,075,902	\$ 1,784,207	\$ 6,901,022	\$ 106,652,591	2.9%	
SE-4Cty	Nursing Facility	Dual	\$ 402,344,695	\$ 8,774,181	\$ -	\$ -	\$ -	\$ 8,774,181	2.2%
		Non-Dual	\$ 65,675,723	\$ 924,890	\$ -	\$ -	\$ -	\$ 924,890	1.4%
	Pharmacy	Dual	\$ 5,932,341	\$ (135,541)	\$ -	\$ 81,754	\$ -	\$ (53,787)	-0.9%
		Non-Dual	\$ 38,025,399	\$ 169,820	\$ -	\$ 5,669	\$ -	\$ 175,490	0.5%
	Other Medical	Dual	\$ 40,511,295	\$ 3,034,783	\$ 1,346,920	\$ 83,546	\$ 588	\$ 4,465,838	11.0%
		Non-Dual	\$ 69,794,334	\$ 2,433,814	\$ 152,142	\$ (3,490)	\$ -	\$ 2,582,466	3.7%
	Personal Assistance	N/A	\$ 660,457,661	\$ 20,123,634	\$ -	\$ 259,824	\$ 1,143,994	\$ 21,527,452	3.3%
	Other HCBS Waiver	N/A	\$ 114,885,937	\$ 1,507,724	\$ -	\$ -	\$ -	\$ 1,507,724	1.3%
Total		\$ 1,397,627,384	\$ 36,833,305	\$ 1,499,062	\$ 427,304	\$ 1,144,582	\$ 39,904,253	2.9%	
SE Zone Total	Nursing Facility	Dual	\$ 616,400,325	\$ 16,489,270	\$ -	\$ -	\$ -	\$ 16,489,270	2.7%
		Non-Dual	\$ 124,577,622	\$ 3,144,312	\$ -	\$ -	\$ -	\$ 3,144,312	2.5%
	Pharmacy	Dual	\$ 17,624,417	\$ (241,109)	\$ -	\$ 228,184	\$ -	\$ (12,925)	-0.1%
		Non-Dual	\$ 204,479,794	\$ 177,106	\$ -	\$ 40,466	\$ -	\$ 217,572	0.1%
	Other Medical	Dual	\$ 147,785,168	\$ 6,910,104	\$ 3,035,634	\$ 264,257	\$ 1,451	\$ 10,211,446	6.9%
		Non-Dual	\$ 365,706,464	\$ 7,020,259	\$ 539,330	\$ 54,863	\$ 37,183	\$ 7,651,635	2.1%
	Personal Assistance	N/A	\$ 3,308,587,734	\$ 90,714,559	\$ -	\$ 1,623,740	\$ 8,006,970	\$ 100,345,270	3.0%
	Other HCBS Waiver	N/A	\$ 280,596,292	\$ 8,510,265	\$ -	\$ -	\$ -	\$ 8,510,265	3.0%
Total		\$ 5,065,757,816	\$ 132,724,765	\$ 3,574,964	\$ 2,211,511	\$ 8,045,604	\$ 146,556,844	2.9%	

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Rating Region	COS	Dual Status	SFY 2021–2022 Base Encounters ¹	SFY 2021–2022 Program Costs Outside Encounters					Program Costs Outside Encounters Impact
				CHC–MCO Reported Dollars ²	Report #4 Financial Dollars ³			Total Adjustment Dollars	
					Sub-Capitation Payments Made	Settlements ⁴	Other Purchasing Arrangements ⁵		
			(A)	(B)	(C)	(D)	(E)	(F) = SUM (B to E)	(G) = (F) / (A)
L/C	Nursing Facility	Dual	\$ 518,475,303	\$ 10,596,893	\$ -	\$ -	\$ -	\$ 10,596,893	2.0%
		Non-Dual	\$ 42,100,896	\$ (398,685)	\$ -	\$ -	\$ -	\$ (398,685)	-0.9%
	Pharmacy	Dual	\$ 10,587,700	\$ 56,310	\$ -	\$ 102,796	\$ -	\$ 159,106	1.5%
		Non-Dual	\$ 45,356,800	\$ (9,974)	\$ -	\$ 21,697	\$ -	\$ 11,723	0.0%
	Other Medical	Dual	\$ 58,635,792	\$ 2,710,850	\$ 1,266,238	\$ 65,903	\$ 1,345	\$ 4,044,336	6.9%
		Non-Dual	\$ 63,790,894	\$ 1,661,240	\$ 96,627	\$ 15,444	\$ 1,279	\$ 1,774,590	2.8%
	Personal Assistance	N/A	\$ 768,461,362	\$ 23,885,927	\$ -	\$ 796,915	\$ 4,843,066	\$ 29,525,909	3.8%
	Other HCBS Waiver	N/A	\$ 58,173,480	\$ 695,464	\$ -	\$ -	\$ -	\$ 695,464	1.2%
Total		\$ 1,565,582,229	\$ 39,198,026	\$ 1,362,865	\$ 1,002,755	\$ 4,845,691	\$ 46,409,336	3.0%	
NE	Nursing Facility	Dual	\$ 353,948,115	\$ 9,133,178	\$ -	\$ -	\$ -	\$ 9,133,178	2.6%
		Non-Dual	\$ 22,611,163	\$ (526,997)	\$ -	\$ -	\$ -	\$ (526,997)	-2.3%
	Pharmacy	Dual	\$ 6,265,195	\$ (77,433)	\$ -	\$ 74,002	\$ -	\$ (3,431)	-0.1%
		Non-Dual	\$ 21,602,709	\$ 153,566	\$ -	\$ 4,076	\$ -	\$ 157,642	0.7%
	Other Medical	Dual	\$ 37,783,470	\$ 878,531	\$ 964,047	\$ 3,206	\$ 170	\$ 1,845,953	4.9%
		Non-Dual	\$ 28,410,570	\$ 715,928	\$ 43,987	\$ 1,287	\$ -	\$ 761,201	2.7%
	Personal Assistance	N/A	\$ 268,405,041	\$ 11,468,216	\$ -	\$ 195,889	\$ 1,357,913	\$ 13,022,018	4.9%
	Other HCBS Waiver	N/A	\$ 27,301,270	\$ 422,817	\$ -	\$ -	\$ -	\$ 422,817	1.5%
Total		\$ 766,327,533	\$ 22,167,807	\$ 1,008,033	\$ 278,460	\$ 1,358,083	\$ 24,812,383	3.2%	
NW	Nursing Facility	Dual	\$ 171,255,927	\$ 5,123,073	\$ -	\$ -	\$ -	\$ 5,123,073	3.0%
		Non-Dual	\$ 10,479,956	\$ 395,640	\$ -	\$ -	\$ -	\$ 395,640	3.8%
	Pharmacy	Dual	\$ 3,078,116	\$ 20,487	\$ -	\$ 47,421	\$ -	\$ 67,908	2.2%
		Non-Dual	\$ 17,856,154	\$ 17,439	\$ -	\$ 24,567	\$ -	\$ 42,006	0.2%
	Other Medical	Dual	\$ 20,649,050	\$ 382,382	\$ 363,762	\$ 89,532	\$ 3,936	\$ 839,613	4.1%
		Non-Dual	\$ 24,029,776	\$ 23,345	\$ 24,772	\$ 11,665	\$ 17,290	\$ 77,072	0.3%
	Personal Assistance	N/A	\$ 223,384,461	\$ 9,119,541	\$ -	\$ 390,886	\$ 2,910,513	\$ 12,420,939	5.6%
	Other HCBS Waiver	N/A	\$ 19,338,332	\$ 307,075	\$ -	\$ -	\$ -	\$ 307,075	1.6%
Total		\$ 490,071,773	\$ 15,388,982	\$ 388,534	\$ 564,071	\$ 2,931,739	\$ 19,273,325	3.9%	
Statewide Total	Nursing Facility	Dual	\$ 2,140,019,697	\$ 56,537,461	\$ -	\$ 51,521	\$ -	\$ 56,588,983	2.6%
		Non-Dual	\$ 251,031,572	\$ 3,732,004	\$ -	\$ 5,979	\$ -	\$ 3,737,983	1.5%
	Pharmacy	Dual	\$ 47,285,893	\$ (219,319)	\$ -	\$ 334,640	\$ -	\$ 115,321	0.2%
		Non-Dual	\$ 340,785,177	\$ 304,348	\$ -	\$ 125,611	\$ -	\$ 429,959	0.1%
	Other Medical	Dual	\$ 328,408,326	\$ 14,661,372	\$ 6,825,034	\$ 8,164,627	\$ 24,928	\$ 29,675,962	9.0%
		Non-Dual	\$ 555,714,673	\$ 10,070,073	\$ 775,209	\$ 593,988	\$ 142,701	\$ 11,581,970	2.1%
	Personal Assistance	N/A	\$ 5,139,122,555	\$ 157,638,972	\$ -	\$ 4,223,005	\$ 24,891,618	\$ 186,753,595	3.6%
	Other HCBS Waiver	N/A	\$ 439,909,800	\$ 11,750,507	\$ -	\$ 2,500,000	\$ -	\$ 14,250,507	3.2%
Total		\$ 9,242,277,694	\$ 254,475,419	\$ 7,600,243	\$ 15,999,370	\$ 25,059,247	\$ 303,134,278	3.3%	

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