



A MILLIMAN GLOBAL FIRM

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December 4, 2007

Mr. Jon Barley, Ph.D., Bureau Chief
Bureau of Managed Health Care
Ohio Department of Job and Family Services
Lazarus Building
50 West Town St., Suite 400
Columbus, OH 43215

RE: 2008 CAPITATION RATE CERTIFICATION – AGED, BLIND, OR DISABLED (ABD)

Dear Jon:

Milliman, Inc. (Milliman) was retained by the State of Ohio, Department of Job and Family Services (ODJFS) to develop the calendar year 2008 actuarially sound capitation rates for the Aged, Blind, or Disabled (ABD) Risk Based Managed Care (RBMC) program. This letter provides the documentation and certification for the actuarially sound capitation rates.

LIMITATIONS

The information contained in this letter, including the enclosures, has been prepared for the State of Ohio, Department of Job and Family Services and their consultants and advisors. It is our understanding that the information contained in this letter may be utilized in a public document. To the extent that the information contained in this letter is provided to third parties, the letter should be distributed in its entirety. Any user of the data must possess a certain level of expertise in actuarial science and healthcare modeling so as not to misinterpret the data presented.

Milliman makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this letter prepared for ODJFS by Milliman that would result in the creation of any duty or liability under any theory of law by Milliman or its employees to third parties. Other parties receiving this letter must rely upon their own experts in drawing conclusions about the capitation rates, assumptions, and trends.

The information contained in this letter was prepared as documentation of the actuarially sound capitation rates for Medicaid managed care organization health plans in the State of Ohio. The information may not be appropriate for any other purpose.

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Mr. Jon Barley
December 4, 2007
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EXECUTIVE SUMMARY

Capitation rates have been developed for calendar year (CY) 2008 for the Aged, Blind, or Disabled (ABD) Risk Based Managed Care (RBMC) program by geographic region.

In aggregate, the CY 2008 capitation rates will result in a 2.6% increase relative to the current CY 2007 capitation rates. The composite rate increase reflects projected health plan enrollment during CY 2008.

Enclosure 1 contains the CY 2008 capitation rates and projected expenditures for each geographic region.

Enclosure 2 contains the actuarial certification regarding the actuarial soundness of the capitation rates.

Enclosure 3 provides the crosswalk from the CMS rate setting checklist to the appropriate documentation for the development of the CY 2008 ABD capitation rates. This letter should be provided in its entirety, including the Data Book, to CMS for their review and approval of the capitation rates.

Enclosure 4 provides the ABD Data Book containing the documentation of the capitation rate development.



If you have any questions regarding the enclosed information, please do not hesitate to contact me at (317) 524-3512.

Sincerely,

Robert M. Damler, FSA, MAAA
Principal and Consulting Actuary

RMD/mle
Enclosures



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ENCLOSURE 1

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**State of Ohio
Department of Job and Family Services
CY2008 ABD Capitation Rate Development**

Region	Projected CY 2008 Member	CY 2007		CY 2008		% Change	\$ Change
	Months	CY 2007 Rate	Expenditures	CY 2008 Rate	Expenditures		
Central	284,169	\$ 1,100.43	\$ 312,708,093	\$ 1,111.88	\$ 315,961,828	1.0%	\$ 3,253,735
East Central	149,045	\$ 1,043.46	\$ 155,522,496	\$ 1,101.73	\$ 164,207,348	5.6%	\$ 8,684,852
Northeast	287,103	\$ 1,088.93	\$ 312,635,070	\$ 1,110.06	\$ 318,701,556	1.9%	\$ 6,066,486
Northeast Central	85,309	\$ 1,073.18	\$ 91,551,913	\$ 1,108.93	\$ 94,601,709	3.3%	\$ 3,049,797
Northwest	137,407	\$ 1,086.81	\$ 149,335,302	\$ 1,118.62	\$ 153,706,218	2.9%	\$ 4,370,917
Southeast	152,735	\$ 958.68	\$ 146,423,990	\$ 991.15	\$ 151,383,295	3.4%	\$ 4,959,305
Southwest	174,390	\$ 1,116.83	\$ 194,763,984	\$ 1,131.41	\$ 197,306,590	1.3%	\$ 2,542,606
West Central	123,260	\$ 1,093.08	\$ 134,733,041	\$ 1,144.06	\$ 141,016,836	4.7%	\$ 6,283,795
Statewide	1,393,418	\$ 1,074.82	\$ 1,497,673,887	\$ 1,102.96	\$ 1,536,885,380	2.6%	\$ 39,211,493



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ENCLOSURE 2



**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Aged, Blind, or Disabled – CY 2008 Capitation Rates**

Actuarial Certification

I, Robert M. Damler, am a Principal and Consulting Actuary with the firm of Milliman, Inc. I am a Fellow of the Society of Actuaries and a Member of the American Academy of Actuaries. I was retained by the State of Ohio, Department of Job and Family Services to perform an actuarial review and certification regarding the development of the capitation rates to be effective for calendar year 2008. The capitation rates were developed for the Aged, Blind, or Disabled managed care eligible populations. I have experience in the examination of financial calculations for Medicaid programs and meet the qualification standards for rendering this opinion.

I reviewed the historical claims experience for reasonableness and consistency. I have developed certain actuarial assumptions and actuarial methodologies regarding the projection of healthcare expenditures into future periods. I have complied with the elements of the rate setting checklist CMS developed for its Regional Offices regarding 42 CFR 438.6(c) for capitated Medicaid managed care plans.

The capitation rates provided with this certification are effective for a one-year rating period beginning January 1, 2008 through December 31, 2008. At the end of the one-year period, the capitation rates will be updated for calendar year 2009. The update may be based on fee-for-service experience, managed care utilization and trend experience, policy and procedure changes, and other changes in the health care market. A separate certification will be provided with the updated rates.

The capitation rates provided with this certification are considered actuarially sound, defined as:

- the capitation rates have been developed in accordance with generally accepted actuarial principles and practices;
- the capitation rates are appropriate for the populations to be covered, and the services to be furnished under the contract; and,
- the capitation rates meet the requirements of 42 CFR 438.6(c).

This actuarial certification has been based on the actuarial methods, considerations, and analyses promulgated from time to time through the Actuarial Standards of Practice by the Actuarial Standards Board.


ELECTRONIC SIGNATURE

Robert M. Damler, FSA
Member, American Academy of Actuaries

December 4, 2007

Date



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ENCLOSURE 3



**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Aged, Blind, or Disabled – CY 2008 Capitation Rates
Crosswalk to CMS Rate Setting Checklist**

Item #	Subject	Location	Comments
AA.1.0	Overview of Rate Setting Methodology	Data Book Sections I, II, III	
AA.1.1	Actuarial Certification	Certification Letter Enclosure 2	
AA.1.2	Projection of Expenditures	Certification Letter Enclosure 1	
AA.1.3	Procurement, Prior Approval and Rate Setting	Provider Agreement	The State signs contracts with entities meeting the technical programmatic requirements. The entities agree to accept the actuarially-sound, State-determined rates.
AA.1.5	Risk Contracts	Provider Agreement	
AA.1.6	Limit on Payment to other Providers	Provider Agreement	
AA.1.7	Rate Modifications	N/A	The CY 2008 capitation rates reflect a re-basing of experience.
AA.2.0	Base Year Utilization and Cost Data	Addressed individually in AA.2.1 to AA.2.5.	
AA.2.1	Medicaid Eligibles under the Contract	Data Book Section IV	
AA.2.2	Dual Eligibles (DE)	Data Book Section IV	Medicare Dual-Eligibles are not eligible for managed care and were not included in the base data.
AA.2.3	Spend-down	Data Book Section IV	Spend-down Eligibles are not eligible for managed care and were not included in the base data.
AA.2.4	State Plan Services only	Data Book Section VIII(g)	The CY 2008 capitation rates were developed to reflect State plan services only.
AA.2.5	Capitated Entity Services	Data Book Section VIII(g)	
AA.3.0	Adjustments to the Base Year	Addressed individually in AA.3.1 to AA.3.14.	
AA.3.1	Benefit Differences	Data Book Sections VIII(c), IX(b)	The CY 2008 capitation rates are appropriate for the services to be furnished and include only State plan services.
AA.3.2	Administrative Cost Allowance	Data Book Section IX(d)	
AA.3.3	Special Populations' Adjustments	Data Book Section IV	The base data reflects the population that is eligible to participate in the RBMC program.
AA.3.4	Eligibility Adjustments	Data Book Section IV	The base fee-for-service data excluded retro-active and back-dated eligibility periods.
AA.3.5	DSH Payments	Data Book Section VIII	The base fee-for-service data excluded DSH payments
AA.3.6	Third Party Liability (TPL)	Data Book Section VIII(d)	

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**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Aged, Blind, or Disabled – CY 2008 Capitation Rates
Crosswalk to CMS Rate Setting Checklist**

Item #	Subject	Location	Comments
AA.3.7	Copayments, Coinsurance and Deductibles	Data Book Section VIII(c)	The CY 2008 capitation rates are reduced to reflect member co-payments.
AA.3.8	Graduate Medical Education (GME)	Data Book Section VIII	The State does not make GME payments for managed care enrolled individuals. The contracted entities negotiate a total reimbursement with providers including any provisions for GME.
AA.3.9	FQHC and RHC Reimbursement	Provider Agreement and Data Book Table 11 (Note 4)	The costs for services rendered by FQHC and RHC providers are based on the fee-for-service rate schedule and do not include cost settlement amounts.
AA.3.10	Medical Cost/Trend Inflation	Data Book Sections VIII(h), IX(a)	
AA.3.11	Utilization Adjustments	Data Book Section VIII(j)	
AA.3.12	Utilization and Cost Assumptions	Data Book Section IX(c)	This is a mandatory program. The base data reflects the population to be enrolled.
AA.3.13	Post-Eligibility Treatment of Income	Data Book Section IV	Beneficiaries with post eligibility treatment of income are not eligible for managed care.
AA.3.14	Incomplete Data Adjustment	Data Book Section VIII(b)	
AA.4.0	Establish Rate Category Groupings	Data Book Section VI	
AA.4.1	Age	Data Book Section VI	
AA.4.2	Gender	Data Book Section VI	
AA.4.3	Locality/Region	Data Book	The CY 2008 capitation rates are segmented into 8 geographic regions.
AA.4.4	Eligibility Categories	Data Book Section VI	
AA.5.0	Data Smoothing	Addressed individually in AA.5.1 to AA.5.3.	
AA.5.1	Special Populations and Assessment of Data Distortions	Data Book Sections VIII	The base data was reviewed for distortions and outliers impacting the geographic regions.
AA.5.2	Cost-Neutral Data Smoothing Adjustment	N/A	
AA.5.3	Risk-Adjustment	Data Book Section X	The final rates will be adjusted for each plan using CDPS.
AA.6.0	Stop Loss, Reinsurance, or Risk-Sharing Arrangements	Addressed individually in AA.6.1 to AA.6.3.	



**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Aged, Blind, or Disabled – CY 2008 Capitation Rates
Crosswalk to CMS Rate Setting Checklist**

Item #	Subject	Location	Comments
AA.6.1	Commercial Reinsurance	Provider Agreement	The State requires contracting entities to purchase commercial reinsurance.
AA.6.2	Simple Stop Loss Program	N/A	The State does not employ a simple stop loss program.
AA.6.3	Risk Corridor Program	N/A	The State does not employ a risk corridor program.
AA.7.0	Incentive Arrangements	Provider Agreement	



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ENCLOSURE 4



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**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES**

DATA BOOK

CALENDAR YEAR 2008

**RISK BASED MANAGED CARE FOR
AGED, BLIND, OR DISABLED (ABD)**

December 4, 2007

Prepared by:

Milliman, Inc.



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Attachment 1: Illustration of Rate Development Methodology

Attachment 2: Category of Service Definitions

Attachment 3: State Fiscal Years 2005/2006 FFS Summaries

Attachment 4: Managed Care Adjustments

Attachment 5: Capitation Rate Development Summaries – Category of Service Level

Attachment 6: Capitation Rate Summary – Region Level

Attachment 7: 2008 vs. 2007 Capitation Rate Comparison



I. INTRODUCTION

The Data Book has been prepared by Milliman, Inc. (Milliman) under the direction of the State of Ohio, Department of Job and Family Services (ODJFS) to provide historical data and information to the health plans for contract capitation rates for the ABD population. The prospective contractor will be accepting rates to be effective for the twelve months of calendar year 2008.

The Data Book consists of a series of actuarial models which develop the contract capitation rates, beginning with annual fee-for-service (FFS) claim experience and ending with a final capitation rate for each geographic region. Historical claims cost and utilization has been provided by category of service for each region. The Data Book provides a series of actuarial models for each region and calendar year stratification.

The actuarial models include claim experience and eligibility information summarized from a detailed monthly data extract from the ODJFS data warehouse. The claim cost represents amounts paid by the state under the FFS program for the managed care eligible population. The 2008 contracted capitation rates are based only on FFS experience, with adjustments that reflect expected experience under a risk-based managed care plan.

The information contained in this Data Book was prepared to provide historical data and information to the health plans on the development of the contracted rates for the ABD population. This information may not be appropriate for any other purpose. The data and information presented is dependent upon the claims experience provided by ODJFS. Any user of the data must possess a certain level of expertise in actuarial science and healthcare modeling, or be advised by someone with this background, so as not to misinterpret the data presented. ODJFS and Milliman provide no guarantee, either written or implied, that the data and information is 100% accurate or error free.



II. EXECUTIVE SUMMARY

Milliman, Inc. (Milliman) was retained by the State of Ohio, Department of Job and Family Services (ODJFS) to develop data and information for the Data Book to be used by prospective contractors for the Aged, Blind, or Disabled (ABD) Risk Based Managed Care (RBMC) program.

The Data Book contains the supporting materials and documentation of the development for the CY 2008 actuarially sound capitation rates. Table 1 illustrates the CY 2007 rates, the CY 2008 rates, and the percentage change for each region as well as the statewide composite.

Table 1

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Capitation Rate Changes – 2008 over 2007**

Region	CY 2007	CY 2008	Change
Central	\$1,100.43	\$1,111.88	1.0%
East Central	1,043.46	1,101.73	5.6%
Northeast	1,088.93	1,110.06	1.9%
Northeast Central	1,073.18	1,108.93	3.3%
Northwest	1,086.81	1,118.62	2.9%
Southeast	958.68	991.15	3.4%
Southwest	1,116.83	1,131.41	1.3%
West Central	1,093.08	1,144.06	4.7%
Statewide	\$1,074.82	\$1,102.96	2.6%

Note: The changes reflect the changes in PMPM rates based on a consistent population.

The overall change of 2.6% reflects updated base experience, trend, and program adjustments from 2007 to 2008. In general, the methodology is similar to that of previous years. However, the specific assumptions and adjustments developed by Milliman may be different from prior years.

The administrative cost allowance was modified to reflect efficiencies identified by ODJFS and the health plans that are planned to begin on or after January 1, 2008. Additionally, the administrative allowance percentage was reduced to recognize (a) economies of scale, (b) the larger base claim cost associated with the ABD population, and (c) the maturing of the program.



An actuarial certification will be provided by Milliman and signed by Robert M. Damler, FSA, a Principal and Consulting Actuary in the Indianapolis office of Milliman, Inc. Mr. Damler is a Member of the American Academy of Actuaries and meets the qualification standards established by the American Academy of Actuaries.

Attachment 1 contains a chart outlining the methodology that was used to develop the CY 2008 capitation rates for the ABD population.



III. ACTUARIAL MODELS

The Data Book describes in detail the development of the CY 2008 capitation rates for the ABD population. Certain actuarial models, adjustment factors, and detailed definitions are provided as attachments to the Data Book. The following paragraphs provide a description of each of the attachments. The following sections of the Data Book provide the detailed methodology used in the development of actuarially sound capitation rates for the ABD population with reference to the attachments described in this section.

The Data Book Attachments are listed below:

- Attachment 1: Illustration of Rate Development Methodology
- Attachment 2: Category of Service Definitions
- Attachment 3: State Fiscal Years 2005/2006 FFS Summaries
- Attachment 4: Managed Care Adjustments
- Attachment 5: Capitation Rate Development Summaries – Category of Service Level
- Attachment 6: Capitation Rate Summary – Region Level
- Attachment 7: 2008 vs. 2007 Capitation Rate Comparison

Attachment 1 contains an illustrative chart outlining the methodology that was used to develop the CY 2008 capitation rates for the ABD population.

Attachment 2 contains the category of service definitions included in the development of the capitation rates. The category of service definitions rely upon service category definitions contained in the detailed monthly data extracts from the ODJFS data warehouse, as well as commonly defined DRGs, UB-92 revenue codes, CPT-4 codes, and HCPCS codes.

Attachment 3 provides the historical experience for each state fiscal year for the FFS population on a service category and geographic region basis. For each year, utilization, average cost per service, and PMPM values are shown. Attachment 3 reflects the managed care eligible population only.

Attachment 4 provides the utilization and average cost per service managed care adjustments that were applied to the FFS experience.

Attachment 5 contains the calendar year (CY) 2006 adjusted base experience and the projected CY 2008 capitation rates for each of the eight geographic regions. The base models in Attachment 3 were adjusted for historical program changes, managed care, and trended forward to the CY 2006 period as shown in Attachment 5. The adjusted CY 2006 utilization and cost per



service rates were then trended forward to CY 2008 and adjusted for prospective program changes that will be effective for the CY 2008 contract period. The resulting PMPM, after trend, historical program changes, managed care adjustments, and prospective program changes establishes the regional adjusted claim cost for the health plans in CY 2008. The administrative cost allowance and franchise fee components were applied to the adjusted claim cost to develop the CY 2008 capitation rates.

Attachment 6 contains the CY 2008 capitation rates by region, including the segmentation of the administrative cost allowance between guaranteed and at-risk components.

Attachment 7 compares the cost of the calendar year 2008 proposed capitation rates with the cost of the 2007 capitation rate based on the projected 2008 enrollment distribution by region for the ABD population. The comparison has been illustrated on a PMPM and total expenditure basis.



IV. COVERED POPULATION

The Data Book has been developed to illustrate historical experience from the FFS population. The historical experience was developed for the population eligible for managed care enrollment based on age and program assignment. The program assignments shown in Table 2 were included in the Data Book.

Table 2

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Summary of Managed Care Eligible Population**

Program Assignment	Description
AGED	Aged
RAGED	Aged as defined on RMF
BLIND	Blind
RBLIND	Blind as defined on RMF
DISABLED	Disabled
RDISABLED	Disabled as defined on RMF
RESMED	Residential State Supplement & Medicaid

Milliman extracted the eligible population information from historical data. The eligible population includes the adult ABD population excluding: retro-active periods, back-dated periods, institutionalized, waiver, spend-down, Medicare dual-eligibles, and long-term nursing facility recipients. Adults are defined based on age greater than or equal to 21 during the base experience period. Long-term nursing facility was defined as stays lasting past the last day of the month following the admission to the nursing facility.

If a member was ineligible during a month, all claims and eligibility for the month were excluded from the actuarial models.



V. CATEGORY OF SERVICE DEFINITIONS

The categories of service listed in Table 3 describe the actuarial model service groupings. The units associated with the categories have been indicated. Further, the primary method of classifying the claims has been provided. Attachment 2 provides further detail regarding the service level codes used to create the categories of service listed in Table 3.

Table 3

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Categories of Service**

Type of Service	Service Category	Utilization Units	Classification Basis
<i>Inpatient Hospital</i>	Medical/Surgical	Admits/Days	COS, DRG
	MH/SA	Admits/Days	
	Maternity Delivery	Admits/Days	
	Well Newborn	Admits/Days	
	Maternity Non-Deliveries	Admits/Days	
	Nursing Facility	Admits/Days	
	Other Inpatient	Admits/Days	
<i>Outpatient Hospital</i>	Emergency Room	Claims	COS, Revenue Code
	Surgery/ASC	Services	
	Cardiovascular	Services	
	PT/ST/OT	Services	
	Clinic	Services	
	Other	Services	
<i>Professional</i>	Inpatient/Outpatient Surgery	Services	COS, Provider Type, Procedure, Modifier
	Anesthesia	Line Items	
	Obstetrics	Services	
	Office Visits/Consults	Services	
	Hospital Inpatient Visits	Services	
	Emergency Room Visits	Services	
	Immunizations & Injections	Services	
	Physical Medicine	Services	
	Miscellaneous Services	Line Items, Services	
<i>Rad/Path/Lab</i>	Radiology	Services	COS, Revenue Code, Provider Type, Procedure
	Pathology/Laboratory	Services	
<i>Ancillaries</i>	MH/SA	Services	COS, Provider Type, Procedure
	FQHC/RHF/OP Health Facility	Services	COS
	Pharmacy	Line Items	COS
	Dental	Services	COS
	Vision	Services	COS, Provider Type, Procedure
	Home Health	Line Items	COS
	Non-Emergent Transportation	Line Items	COS
	Ambulance	Line Items	COS, Procedure Code
	Supplies and DME	Line Items	COS, Provider Type, Procedure
	Miscellaneous Services	Line Items	COS



VI. RATE GROUPS

The Data Book includes the documentation of the development of the CY 2008 capitation rates for each region. The ABD capitation rates will be risk adjusted using the Chronic Illness and Disability Payment System (CDPS). As such, the ABD capitation rates are provided in one single rate group. Further information regarding the CDPS risk adjustment is contained in a later section as well as documented in detail in other correspondence provided by Milliman.



VII. ACTUARIAL MODEL DATA SUMMARY

Attachments 3 and 5 illustrate annual utilization rates per 1,000, net payments per service, and per member per month claims cost. The following provides a brief description of each of the data fields.

a. Category of Service

The category of service was defined by a combination of the ODJFS category of service, DRG, revenue code, provider type, procedure code, and procedure modifier code.

b. Annual Utilization Per 1,000

This value represents the annual utilization rates per 1,000 by category of service. The unit value varies for each category of service. The unit value was defined in a prior section. The value was calculated by dividing the total units for each service category by the member months in the corresponding period and multiplying by 12 times 1,000.

c. Average Cost Per Service

This value represents the payment amount per unit of service. The value was calculated net of third party liability recoveries and member co-payments.

d. Member Months

This value represents the number of enrollee months in each period. A member's age was determined as of the first day of each month that the member was enrolled. Each enrollee was assumed to be eligible for the entire month.

e. PMPM

The per member per month value represents the net claim cost for each category of service. The value was calculated by multiplying the annual utilization per 1,000 times the net payment and dividing by the product of 12 times 1,000.



VIII. DEVELOPMENT OF CY 2006 ADJUSTED FFS DATA

As discussed in other sections of this document, several adjustments were applied to the base FFS data to develop the CY 2008 capitation rates. The following outlines each of the adjustments applied to the base FFS data.

a. Historical Data Summaries

Attachment 3 incorporates ABD FFS claims for two state fiscal year periods for the experience incurred during the 12 months ending June 30, 2005 and June 30, 2006. The actuarial models contained in Attachment 3 were developed from claims paid through May 31, 2007.

The claims data was provided by ODJFS from the data warehouse. The experience was stratified into geographic region based on the member's county of residence.

The reimbursement amounts captured on the FFS actuarial models reflect the amount paid by ODJFS, net of third party liability recoveries and member co-payment amounts. The reimbursement amounts have not been adjusted for payments made outside the claims processing system. These amounts are discussed later in the documentation.

The Data Book represents historical experience for those services that are included in the capitation payment. Services that are not covered under the capitation payment have been excluded from the experience. The excluded services were identified by the state-assigned Category of Service field, as shown in Table 4.



Table 4

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Claims Excluded from the Data Book - FFS**

COS Field Value	Description
08	PACE
13	ICF/MR Public
18	ICF/MR Private
35	Core Services
36	Home Care Facilitator Services
41	Mental Health Services
42	Mental Retardation
46	Model 50 Waiver Services
58	HMO Services
59	Mental Health Support Services
60	Mental Retardation Support Services
63	PPO Services
64	Passport
66	Passport Waiver III
67	OBRA MR/DD Waiver
80	Alcohol and Drug Abuse
82	Department of Education
84	ODADAS

b. Completion Factors

Milliman utilized 24 months of claims experience for the FFS population that was incurred through June 2006 and paid through May 2007 (eleven months of run-out). Milliman applied claim completion factors to the twelve months of fiscal year 2005 and twelve months of fiscal year 2006 claims experience. The claim completion factors were developed by service category based on claims experience for the FFS population incurred and paid through May 2007. Table 5 summarizes the completion factors used to adjust the FFS base experience.



Table 5

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Claim Completion Factors - FFS**

Service Category	SFY 2005	SFY 2006
Inpatient Hospital	0.9990	0.9971
Outpatient Hospital	0.9966	0.9909
Professional	1.0000	0.9997
Rad./Path./Lab.	0.9987	0.9972
Pharmacy	1.0000	1.0000
Dental	1.0000	0.9997
Other	1.0000	0.9993

Note: Adjusted experience calculated as base experience divided by completion factor.

c. Historical Program Adjustments

The base experience data represents a historical time period from which projections were developed. Certain program changes have occurred during and subsequent to the base data time period. The program adjustments were estimated and applied to the portion of the base experience data prior to the program change effective date. For example, a program change implemented on January 1, 2006 will only be reflected in the second half of SFY 2006. As such, an adjustment was applied to all of SFY 2005 and half of SFY 2006 to include the program change in all periods of the base experience data.

ODJFS has provided a listing of all program changes impacting the base experience data. Table 6 summarizes the historical program changes that were reflected in the development of the CY 2008 capitation rates.



Table 6

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Historical Program Adjustments - FFS**

Program Adjustment	Effective Date	Service Category(s)	Annualized Adjustment Factor
Inpatient Market Basket Increase	1/1/2005	Inpatient Hospital	3.00%
Dental Fee Schedule Reduction	1/1/2006	Dental	(3.30%)
Inpatient Recalibration and Outlier Policy	1/1/2006	Inpatient	(8.17%)
Pharmacy Co-pay (\$2 Per Brand Prescription)	1/1/2006	Pharmacy	(0.94%)
Dental Co-pay (\$3 Per Date of Service)	1/1/2006	Dental	(2.00%)
Vision Exam Co-Pay (\$2 Per Exam)	1/1/2006	Vision / Optometric	(2.46%)
Vision Hardware Co-Pay (\$1 Per Item)	1/1/2006	Vision / Optometric	(2.39%)
ER Co-Pay (\$3 Per Non-Emergency Visit)	1/1/2006	Emergency Room	(0.06%)
Dental Benefit Reduction	1/1/2006	Dental	(24.16%)

Note: Proportional adjustments were applied when a program change impacted only a portion of the fiscal year.

d. Third-Party Liability

The FFS experience was calculated using the net paid claim data from the FFS data provided by ODJFS. The paid amounts reflect a reduction for the amounts paid by third party carriers. Additionally, Milliman reduced the FFS experience to reflect third party liability recoveries following payment of claims. The reduction represents the average third party liability recovery rate received by the state under the “pay-and-chase” recovery program for each base year. It is expected that the health plans will collect the third party liability recoveries for managed care enrolled individuals. Table 7 contains the adjustments for each fiscal year.

Table 7

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Third-Party Liability Adjustments - FFS**

State Fiscal Year	
2005	(1.05%)
2006	(0.85%)



e. Fraud and Abuse

The FFS experience was calculated using the net paid claim data from the FFS data provided by ODJFS. Milliman reduced the FFS experience to reflect fraud and abuse recoveries following payment of claims. The reduction represents the average fraud and abuse recovery rate received by the state for each base year. It is expected that the health plans will pursue fraud and abuse detection activities for managed care enrolled individuals. Table 8 contains the adjustments for each fiscal year.

Table 8

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Fraud and Abuse Adjustments - FFS**

State Fiscal Year	
2005	(0.09%)
2006	(0.02%)

f. Gross Adjustments

The FFS experience was calculated using the net paid claim data from the FFS data provided by ODJFS. Milliman adjusted the FFS experience to reflect payments/refunds occurring outside of normal claim adjudication. Milliman received a “gross adjustments” file from ODJFS containing the additional adjustments. Table 9 contains the adjustments for each fiscal year.

Table 9

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Gross Adjustments - FFS**

State Fiscal Year	
2005	(0.49%)
2006	0.03%

g. Non-State Plan Services

CMS requires removal of non-state plan services from rate-setting. The FFS data does not contain any such services. As such, no adjustment was applied to the base FFS data for non-state plan services.



h. Trends/Inflation to CY 2006

Milliman developed trend rates to progress the historical experience from state fiscal years 2005 and 2006 forward to a common center point (CY 2006). Milliman reviewed historical experience and performed linear regression on the experience data to develop trend rates by category of service for both utilization and unit cost. Additionally, Milliman reviewed the resulting trends with internal data sources to develop the trends in Table 10.

Table 10

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Annual Trend Rates - FFS**

Category of Service	Utilization	Cost Per Service
Inpatient Hospital	3.0%	2.0%
Outpatient Hospital	5.0%	4.0%
Professional	4.0%	1.0%
Rad./Path./Lab.	5.0%	2.5%
Pharmacy	2.0%	4.5%
Dental	3.0%	1.0%
Other	6.0%	4.0%

The base experience data was normalized for artificial program adjustments prior to the trend rate development. Milliman did not consider items such as fee schedule changes or benefit modifications as standard components of trend. Removing the impact of historical changes allows for transparent inclusion of prospective program changes for future periods.

i. Blend Base Experience Years

Each of the base experience years was trended to CY 2006. At this point, each base year was on a comparable basis and could be aggregated. The weighting was developed with the intention of placing more credibility on the most recent experience and is consistent with the CY 2007 methodology. Specifically, SFY 2005 received a weight of 30% and SFY 2006 received a weight of 70%.

j. Managed Care Adjustments

Utilization

Milliman adjusted the FFS utilization and cost per service to reflect the managed care environment. After reviewing utilization benchmarks in the Milliman Medicaid Guidelines (*Guidelines*) as well as other sources, Milliman calculated percentage adjustments to reflect the utilization differential between an economic and efficiently managed plan and the FFS base experience.



Cost Per Service

Milliman adjusted the average reimbursement rates to reflect changes in the mix / intensity of services due to the management of health care. The reimbursement rate changes were also developed following a review of benchmarks in the *Guidelines* as well as other sources.

In addition to the intensity adjustments applied to the cost per service amounts, Milliman also included adjustments to reflect the health plan contracted rates with providers in the managed care adjustments.

Table 11 illustrates the percentage of Medicaid FFS assumed in the development of the capitation rates.

Table 11

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Percentage of Medicaid FFS Reimbursement**

Region	Inpatient	Outpatient	Professional	Pharmacy	Other
Central	103.6%	101.1%	105.0%	90.3%	100.0%
East Central	103.8%	102.5%	105.0%	90.3%	100.0%
Northeast	103.0%	103.0%	105.4%	90.3%	100.0%
Northeast Central	103.8%	102.1%	105.1%	90.3%	100.0%
Northwest	103.2%	102.4%	105.0%	90.3%	100.0%
Southeast	104.4%	101.9%	105.0%	90.3%	100.0%
Southwest	107.9%	100.9%	105.0%	90.3%	100.0%
West Central	103.8%	100.7%	105.0%	90.3%	100.0%

Notes:

1. *Values have been rounded.*
2. *Outpatient additionally includes emergency room, home health, ambulance, transportation, and durable medical equipment.*
3. *Professional additionally includes MH/SA and vision.*
4. *Other includes dental and FQHC/RHC.*

Table 12 contains the pricing discounts, dispensing fees, and rebate percentage assumptions for the pharmacy component.



Table 12

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Pharmacy Pricing Assumptions**

	Brand Name	Generic
Ingredient Cost	AWP less 18%	MAC less 50%
Dispensing Fee	\$1.60	\$1.60
Rebates	4%	0%

Utilization and cost per service adjustments were developed for each service category and region. The detailed adjustments are illustrated in Attachment 4.



IX. CY 2006 ADJUSTED BASE DATA TO CY 2008 CAPITATION RATES

The adjusted CY 2006 utilization and cost per service rates are trended forward to CY 2008 and adjusted for prospective program changes that will be effective for the CY 2008 contract period. The resulting PMPM, after trend and prospective program changes establishes the regional adjusted claim cost for the health plans in CY 2008. The administrative cost allowance and franchise fee components are applied to the adjusted claim cost to develop the CY 2008 capitation rate.

a. Trend to CY 2008

The trend rates that were used to progress the CY 2006 experience forward to the CY 2008 rating period were developed from the historical experience, the experience from other Medicaid managed care programs, and our actuarial judgment. The trend rates include a component for utilization and unit cost by major category of service as summarized in Table 13.

Table 13

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Annual Trend Rates**

Category of Service	Utilization	Cost Per Service
Inpatient Hospital	3.0%	2.0%
Outpatient Hospital	5.0%	4.0%
Professional	4.0%	1.0%
Rad./Path./Lab.	5.0%	2.5%
Pharmacy	2.0%	4.5%
Dental	3.0%	1.0%
Other	6.0%	4.0%

b. Prospective Program Adjustments

The SFY 2008/2009 Budget contains several program changes that impacted the development of the capitation rates. The program changes include items such as provider fee changes, benefit changes, and administrative changes. Adjustments to the CY 2006 experience were developed for each item based on its expected impact to the prospective claims cost. Table 14 lists the program changes that were included in the CY 2008 capitation rate development.



Table 14

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Prospective Program Adjustments**

Program Adjustment	Effective Date	Service Category(s)	Adjustment Factor
Nursing Facility Fee Increase	7/1/2007	Nursing Facility	1.20%
	7/1/2008		0.70%
Chiropractor Benefit Restoration	1/1/2008	Miscellaneous Services	14.40%
Independent Psychologists Benefit Restoration	1/1/2008	Mental Health / Substance Abuse	0.96%
Occupational Therapy-Independent Provider Status	1/1/2008	Miscellaneous Services	8.11%
Improved TPL Management	1/1/2008	All Service Categories	(0.55%)
Prior Authorization Policy Change	1/1/2008	Pharmacy	0.00%*
Prior Authorization of Atypical Anti-Psychotic Medication	1/1/2008	Pharmacy	0.00%*

Note: Impacts of Prior Authorization policies are implicit in the managed care utilization adjustments.

c. Prospective Selection Adjustment

Milliman adjusted the CY 2006 experience to reflect the expected penetration of managed care in CY 2008. Table 15 provides the prospective selection adjustments used in the development of the CY 2008 capitation rates.

Table 15

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Prospective Selection Adjustments**

Region	June 2007 MC Penetration	Target MC Penetration	Selection Adjustment
Central	89.5%	93%	(0.40%)
East Central	88.8%	93%	(0.40%)
Northeast	89.7%	93%	(0.40%)
Northeast Central	0.0%	93%	(0.40%)
Northwest	87.6%	93%	(0.40%)
Southeast	92.3%	93%	(0.40%)
Southwest	86.0%	93%	(0.40%)
West Central	87.7%	93%	(0.40%)



d. Administrative Allowance

Milliman included an administrative cost allowance in the development of the actuarially sound capitation rates for CY 2008. The administrative cost allowance contains provision for administrative expenses, profit/contingency, and surplus contribution and was calculated as a percentage of the capitation rate prior to the franchise fee. As such, the pre-franchise fee capitation rate will be determined by dividing the projected managed care claim cost by one minus the administrative cost allowance. By determining the pre-franchise fee capitation rate in this manner, the administrative allowance may be expressed as a percentage of the pre-franchise fee capitation rate. Milliman developed the administrative cost allowance following a review of health plan cost information contained in the cost reports as well as information from other representative Medicaid managed care organizations.

For health plans in plan year 3 or later, 1% of the administrative component will be at-risk and contingent upon performance requirements defined in the ODJFS provider agreements. Table 16 provides the administrative cost allowance for each plan year.

Table 16

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Administrative Cost Allowance**

Plan Year	Guaranteed %	At-Risk %	Total %
Plan Year 1 (1-12 Months)	11.5%	0.0%	11.5%
Plan Year 2 (13-24 Months)	10.5%	0.0%	10.5%
Plan Year 3 (25 + Months)	9.5%	1.0%	10.5%

The administrative cost allowance percentages contained in Table 16 reflect a change from the 2007 methodology. Certain administrative efficiencies have been identified by ODJFS and the contracted health plans to reduce the overall administrative burden. The result of these changes was estimated to be 0.5% of the total administrative percentage. Further, the administrative component was reduced by 1% to recognize (a) economies of scale, (b) the larger base claim cost associated with the ABD population, and (c) the maturing of the program.

Table 17 illustrates the primary components of the administrative cost allowance for plans effective for more than 12 months.



Table 17

**STATE OF OHIO
DEPARTMENT OF JOB AND FAMILY SERVICES
Administrative Cost Allowance - Components**

Component	
Administration	8.0%
Profit/Contingency	1.0%
Surplus Contribution	1.5%
Total	10.5%

e. Franchise Fee

Milliman included a franchise fee component in the development of the actuarially sound capitation rates for CY 2008. The franchise fee was calculated as a percentage of the capitation rates. Therefore, the capitation rate will be determined by dividing the pre-franchise fee capitation rate by one minus the franchise fee component. By determining the pre-franchise fee capitation rate in this manner, the franchise fee may be expressed as a percentage of the capitation rate. The franchise fee component is 4.5% of the capitation rate.



X. CDPS RISK ADJUSTMENT

The methodology described in this Data Book was used to develop the base capitation rates for CY 2008 for each region. Milliman will then apply the Chronic Illness and Disability Payment System (CDPS) to adjust the actuarially sound base capitation rates for the ABD population on a regional basis for each MCP. The CDPS risk adjustment will be updated each six month period for existing regions and plans. For the initial period of managed care within a region and plan, a monthly risk score will be developed for the first three months.

The next anticipated risk score update will be January 1, 2008. The CDPS risk scores will be developed for ABD recipients enrolled in managed care during December 2007 using diagnosis information from claims incurred in calendar year 2006 with paid dates between January 1, 2006 and June 30, 2007. Health plan and region specific prevalence reports will be provided with the updated risk scores.

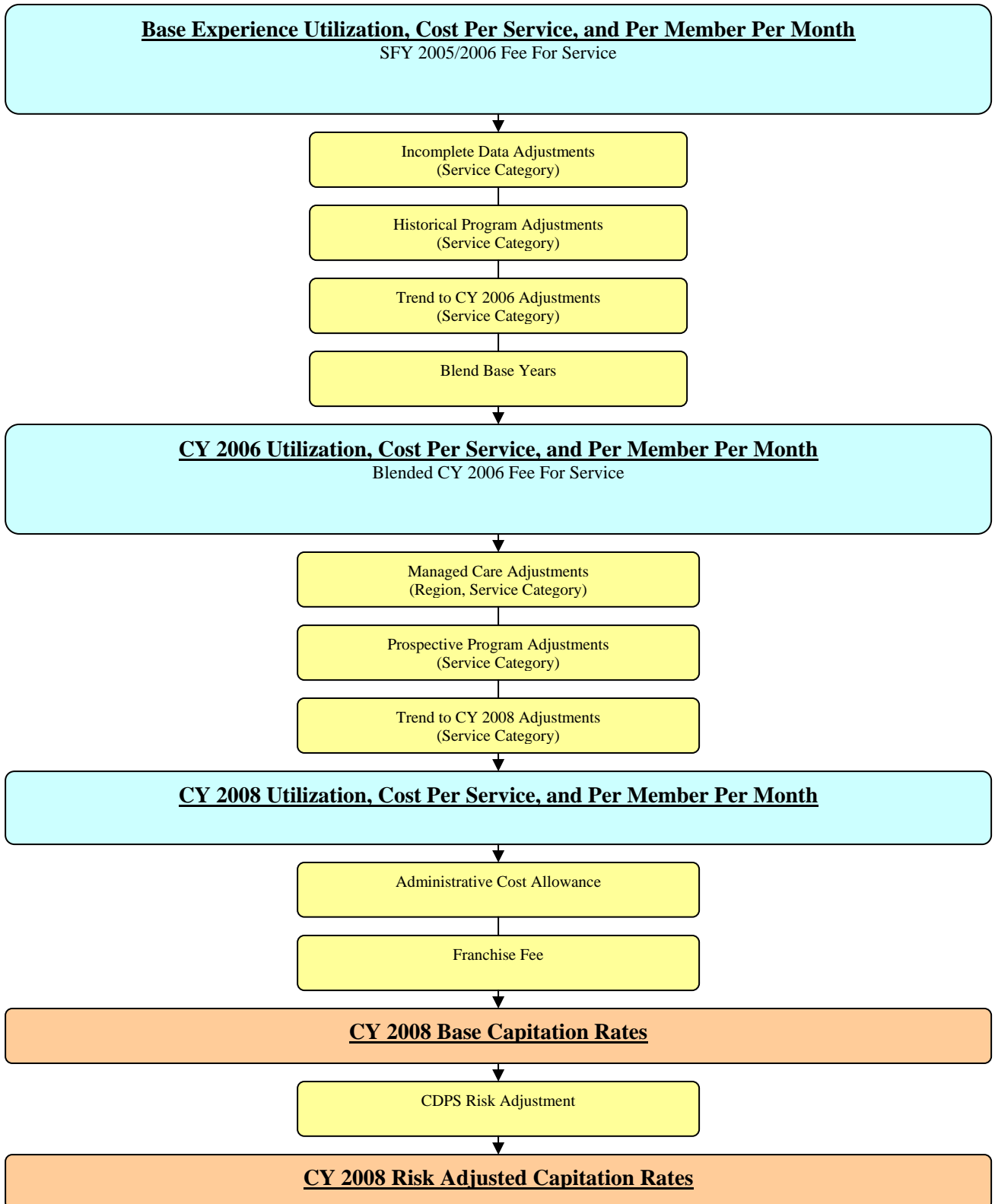




ATTACHMENT 1



Illustration of Rate Development Methodology





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ATTACHMENT 2

OFFICES IN PRINCIPAL CITIES WORLDWIDE

Milliman makes no representations or warranties regarding the contents of this letter to third parties. Likewise, third parties are instructed that they are to place no reliance upon this letter prepared for ODJFS by Milliman that would result in the creation of any duty or liability under any theory of law by Milliman or its employees to third parties. Other parties receiving this letter must rely upon their own experts in drawing conclusions about the capitation rates, assumptions, and trends.

State of Ohio
Department of Job and Family Services
Category of Service Definitions

<u>Category/Sub-Category</u>	<u>Primary Criteria</u>	<u>Secondary Criteria</u>
<i>Inpatient</i>		
Medical/Surgical	Cat_Svc = 01, 03 AND DRG_CD = 0001 - 0369, 0376, 0377, 0385 - 0390, 0392 - 0424, 0439 - 0468, 0471 - 0513, 0515, 0518 - 0520, 0524, 0525, 0528 - 0559.	
Psychiatric/SA	Cat_Svc = 01, 03 AND DRG_CD = 0425 - 0438, 0521 - 0523.	
Maternity - Deliveries	Cat_Svc = 01, 03 AND DRG_CD = 0370 - 0375 .	
Well Newborn	Cat_Svc = 01, 03 AND DRG_CD = 0391.	
Maternity - Nondeliveries	Cat_Svc = 01, 03 AND DRG_CD = 0378 - 0384.	
Other Inpatient	All Remaining Cat_Svc = 01, 03.	
Nursing Facility	Cat_Svc = 11, 16, 86 AND Continuous span up to last day of 2nd month, then ALL services excluded.	

State of Ohio
Department of Job and Family Services
Category of Service Definitions

<u>Category/Sub-Category</u>	<u>Primary Criteria</u>	<u>Secondary Criteria</u>
Outpatient Emergency Room	Cat_Svc = 07 AND Rev_Cd 45x anywhere on claim.	
Surgery/ASC	Cat_Svc = 07 AND Rev_Cd = 360 - 379, 490 - 499, 720 - 729, 963, 964, 975	or Cat_Svc = 44.
Cardiovascular	Cat_Svc = 07 AND Rev_Cd = 480 - 489, 730 - 749, 985 - 986.	
PT/OT/ST	Cat_Svc = 07 AND Rev_Cd = 420 - 449, 976 - 979.	
Clinic	Cat_Svc = 07 AND Rev_Cd = 500 - 529, 983.	
Other	All Remaining Cat_Svc = 07, excluding Rev_Cd = 300 - 359, 400 - 409, 610 - 619, 971 - 974	or Cat_Svc = 15.

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**State of Ohio
Department of Job and Family Services
Category of Service Definitions**

<u>Category/Sub-Category</u>	<u>Primary Criteria</u>	<u>Secondary Criteria</u>
<i>Professional</i> Surgery	(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 10000 - 11971, 11975 - 11977, 12001 - 36299, 36420 - 58999, 60000 - 69999, X3960, V2630 - V2785	or (Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 10000 - 58999, 60000 - 69999, and modifier = 80.
Anesthesia	(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 00170, Any Proc with the following modifiers: AA, AB, AC, AE, QX, QZ.	
Obstetrics	(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 59000 - 59414, 59430 - 59999.	
Office Visits/Consults	(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 99050, 99052, 99201 - 99215, 99241 - 99275.	
Inpatient Visits	(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 99175 - 99195, 99217 - 99239, 99291 - 99297, 99301 - 99313, 99356, 99357, 99431 - 99440, X9331 - X9335, X9360.	

State of Ohio
Department of Job and Family Services
Category of Service Definitions

Category/Sub-Category
Professional (continued)

Primary Criteria

Secondary Criteria

Emergency Room

(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 99281 - 99285.	
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Immunizations & Injection

(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 90700 - 90749, 90780, 90781, 90799, J0120 - J9999, W0703 - W0731, X0701 - X0799.	
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Physical Medicine

(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 97010 - 97799, 98925 - 98929, Q0103, Q0104, Z5831, Z7210, Z7217, Z7225, Z7226.	
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Miscellaneous Services

(Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND all remaining procedures.	
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State of Ohio
Department of Job and Family Services
Category of Service Definitions

Category/Sub-Category

Primary Criteria

Secondary Criteria

Rad/Path/Lab

Radiology

Cat_Svc = 07 AND Rev_Cd = 320 - 359, 400 - 409, 610 - 619, 972 - 974	OR (Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 70000 - 79999, A4641 - A4647.
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Path/Lab

Cat_Svc = 07 AND Rev_Cd = 300 - 319, 971	or Cat_Svc = 22, 23 OR (Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 80002 - 89399, M0838, Q0095 - Q0102, Q0111 - Q0114, P9610 - P9615, W0021, X5018, X7210 - X7220, X9354 - X9356.
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State of Ohio
Department of Job and Family Services
Category of Service Definitions

<u>Category/Sub-Category</u>	<u>Primary Criteria</u>	<u>Secondary Criteria</u>
<i>Other</i> Mental Health / Substance Abuse	Proc = 90801 - 90899, H5010 - H5025, Z0802 - Z0819 regardless of Cat_Svc OR Cat_Svc = 48	or Cat_Svc = 25 AND Prov_Type = 51.
FQHC/RHF/OP Health Facility	Cat_Svc = 29, 31, 85.	
Pharmacy	Cat_Svc = 30.	
Dental	Cat_Svc = 45.	
Vision	Cat_Svc = 34, 47	OR (Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = 92002 - 92015, 92310 - 92317, W2004 - W2014, W2048.
Home Health	Cat_Svc = 20.	
Non-Emergent Transportation	Cat_Svc = 38.	
Ambulance	Cat_Svc = 37.	
Supplies & DME	Cat_Svc = 32	OR (Cat_Svc = 21, 40, 43, 50, 83 or (Cat_Svc = 25 and Prov_Type = 53, 58, 59)) AND Proc = A4190 - A4480, A4554 - A4595, A4635 - A4640, A4649 - A5149, B4034 - B5200, B9998, B9999, K0118 - K0242, XX001 - XX010, Y2064, Y2067, Y9101, Y9102, Y9106, Y9107, Y9110 - Y9120, Y9127, Y9131 - Y9163, Y9165 - Y9188, Z7007 - Z7050.
Miscellaneous Services	Cat_Svc = 27, 49, 51, 53, 54, 55, 57, 65, 81, 99.	

State of Ohio
Department of Job and Family Services
Category of Service Definitions

Cat_Svc	Definition
01	Inpatient Hospital - Physical Health (PH)
03	Inpatient Hospital - Behavioral Health (BH)
07	Outpatient Hospital
08	PACE
11	Skilled Nursing Facility
13	ICF/MR Public
15	Birthing Centers
16	Intermediate Care Facility
18	ICF/MR Private
20	Home Health Services
22	Physiological Laboratory
23	Independent Laboratory
25	Clinics
27	Family Planning
29	Outpatient Health Facility
30	Pharmacy
31	Rural Health Facility
32	Supplies and Medical Equipment
34	Eyeglasses
35	Core Services - Wvr Recipient
36	Home Care Facilitator Svcs
37	Ambulance Services
38	Ambulette Services
41	Mental Health Services
42	Mental Retard
43	Primary Care Physician (PCP)
44	Ambulatory Surgical Services
45	Dental
46	Model 50 Waiver Services
47	Optometric
48	Psychological Services
49	Private Duty Nursing
50	CRNA
51	Physical Therapy
53	Speech Therapy
54	Occupational Therapy
55	Podiatry
57	Chiropractor
58	HMO Services
59	MH Support Services
60	MR Support Services
63	PPO Services
64	Passport
65	Hospice
66	Passport Waiver III
67	OBRA MR/DD Waiver
80	Alcohol and Drug Abuse
81	Personal Care
82	Department of Education
83	Maternal Global Fee
84	ODADAS
85	FQHC
86	Nursing Home Therapy
99	Other Services



ATTACHMENT 3

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Central
Population: ABD 21 +

Member Months: 282,906

Member Months: 294,143

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	327.1	1,613.1	\$ 1,474.56	\$ 198.22	336.7	1,666.8	\$ 1,582.96	\$ 219.88
Psychiatric/SA	53.8	321.2	632.17	16.92	50.6	306.1	601.07	15.33
Maternity - Deliveries	8.9	27.2	1,073.91	2.44	8.7	24.6	1,064.50	2.18
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	2.1	8.7	680.04	0.49	2.7	12.4	640.39	0.66
Nursing Facility	94.8	1,209.3	132.65	13.37	106.1	1,298.9	128.59	13.92
Other Inpatient	<u>16.5</u>	<u>235.6</u>	<u>1,989.74</u>	<u>39.06</u>	<u>16.6</u>	<u>223.5</u>	<u>2,318.22</u>	<u>43.18</u>
<i>Inpatient - Subtotal</i>	503.2	3,415.2	\$ 950.47	\$ 270.50	521.4	3,532.2	\$ 1,002.70	\$ 295.15
Emergency Room		1,715.1	\$ 253.76	\$ 36.27		1,764.1	\$ 270.04	\$ 39.70
Surgery/ASC		1,913.1	103.91	16.57		2,177.4	105.71	19.18
Cardiovascular		330.6	178.49	4.92		337.8	173.27	4.88
PT/OT/ST		1,624.5	19.40	2.63		1,860.0	19.49	3.02
Clinic		679.1	68.67	3.89		745.6	75.37	4.68
Other		<u>4,945.7</u>	<u>52.32</u>	<u>21.56</u>		<u>5,909.1</u>	<u>57.10</u>	<u>28.12</u>
<i>Outpatient - Subtotal</i>		11,208.1	\$ 91.89	\$ 85.83		12,794.0	\$ 93.40	\$ 99.58
Surgery		1,652.0	\$ 158.99	\$ 21.89		1,920.8	\$ 155.77	\$ 24.93
Anesthesia		203.0	147.98	2.50		211.4	147.62	2.60
Obstetrics		19.9	294.31	0.49		22.8	266.89	0.51
Office Visits/Consults		8,286.8	42.02	29.02		8,361.3	42.31	29.48
Inpatient Visits		2,913.9	35.23	8.55		2,966.4	35.85	8.86
Emergency Room		1,854.1	49.39	7.63		1,911.0	51.32	8.17
Immunizations & Injection		9,213.9	8.50	6.52		12,353.7	7.29	7.51
Physical Medicine		1,168.7	14.15	1.38		1,052.2	14.24	1.25
Miscellaneous Services		<u>7,045.2</u>	<u>37.40</u>	<u>21.96</u>		<u>7,258.3</u>	<u>36.06</u>	<u>21.81</u>
<i>Professional - Subtotal</i>		32,357.6	\$ 37.06	\$ 99.94		36,057.8	\$ 34.98	\$ 105.12
Radiology		6,952.3	\$ 61.66	\$ 35.72		7,092.8	\$ 64.94	\$ 38.38
Path/Lab		<u>17,463.9</u>	<u>14.06</u>	<u>20.46</u>		<u>18,443.5</u>	<u>14.91</u>	<u>22.92</u>
<i>Rad/Path/Lab - Subtotal</i>		24,416.2	\$ 27.61	\$ 56.18		25,536.4	\$ 28.81	\$ 61.31
MH/SA		2,320.8	\$ 11.93	\$ 2.31		6,015.7	\$ 7.27	\$ 3.65
FQHC/RHF/OP Health Facility		602.2	90.55	4.54		705.5	94.03	5.53
Pharmacy		73,187.6	59.51	362.96		71,357.3	60.78	361.45
Dental		2,460.3	62.72	12.86		2,443.2	61.08	12.44
Vision - Optometric		1,757.7	15.78	2.31		1,768.7	15.65	2.31
Home Health		32,258.0	33.49	90.02		44,378.5	33.27	123.04
Non-Emergent Transportation		1,320.2	14.82	1.63		1,850.2	14.61	2.25
Ambulance		952.7	69.56	5.52		1,055.4	68.84	6.05
Supplies & DME		5,176.3	62.66	27.03		5,160.1	65.76	28.28
Miscellaneous Services		<u>1,294.3</u>	<u>74.34</u>	<u>8.02</u>		<u>1,560.2</u>	<u>81.83</u>	<u>10.64</u>
<i>Other - Subtotal</i>		121,330.2	\$ 51.15	\$ 517.21		136,294.8	\$ 48.92	\$ 555.63
Total All Benefits		192,727.2	\$ 64.11	\$ 1,029.65		214,215.2	\$ 62.56	\$ 1,116.79

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: East Central
Population: ABD 21 +

Member Months: 157,173

Member Months: 158,194

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	327.9	1,744.8	\$ 1,601.92	\$ 232.92	346.1	1,831.8	\$ 1,592.02	\$ 243.02
Psychiatric/SA	67.2	449.9	672.06	25.20	65.5	435.2	605.18	21.95
Maternity - Deliveries	8.3	25.3	1,269.28	2.68	6.6	31.9	1,191.85	3.16
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	3.4	14.3	752.51	0.90	2.6	9.2	838.60	0.64
Nursing Facility	99.5	1,320.7	132.48	14.58	108.4	1,460.5	125.35	15.26
Other Inpatient	<u>10.1</u>	<u>195.4</u>	<u>1,468.74</u>	<u>23.91</u>	<u>11.7</u>	<u>223.2</u>	<u>1,415.94</u>	<u>26.33</u>
<i>Inpatient - Subtotal</i>	516.4	3,750.4	\$ 960.50	\$ 300.19	540.8	3,991.6	\$ 933.03	\$ 310.36
Emergency Room		1,776.3	\$ 223.78	\$ 33.13		1,765.6	\$ 240.23	\$ 35.35
Surgery/ASC		480.7	456.85	18.30		630.5	350.76	18.43
Cardiovascular		382.0	182.27	5.80		378.8	182.53	5.76
PT/OT/ST		2,002.6	20.59	3.44		2,092.4	20.18	3.52
Clinic		1,469.4	48.57	5.95		1,528.1	56.21	7.16
Other		<u>8,590.3</u>	<u>31.21</u>	<u>22.34</u>		<u>6,048.9</u>	<u>49.35</u>	<u>24.87</u>
<i>Outpatient - Subtotal</i>		14,701.4	\$ 72.61	\$ 88.95		12,444.4	\$ 91.69	\$ 95.09
Surgery		1,355.2	\$ 174.51	\$ 19.71		1,536.5	\$ 165.84	\$ 21.23
Anesthesia		224.0	123.05	2.30		228.2	124.99	2.38
Obstetrics		32.9	189.54	0.52		27.8	190.75	0.44
Office Visits/Consults		6,736.2	42.03	23.59		6,880.0	42.84	24.56
Inpatient Visits		3,282.0	35.34	9.66		3,634.2	36.09	10.93
Emergency Room		1,876.4	51.64	8.07		1,864.8	52.03	8.09
Immunizations & Injection		15,972.1	9.69	12.90		23,923.6	6.90	13.76
Physical Medicine		460.4	15.44	0.59		537.6	15.48	0.69
Miscellaneous Services		<u>6,655.0</u>	<u>41.00</u>	<u>22.74</u>		<u>6,542.4</u>	<u>36.83</u>	<u>20.08</u>
<i>Professional - Subtotal</i>		36,594.2	\$ 32.82	\$ 100.08		45,175.1	\$ 27.14	\$ 102.16
Radiology		6,358.5	\$ 64.64	\$ 34.25		6,493.8	\$ 67.64	\$ 36.61
Path/Lab		<u>13,598.4</u>	<u>13.81</u>	<u>15.65</u>		<u>14,327.7</u>	<u>14.43</u>	<u>17.22</u>
<i>Rad/Path/Lab - Subtotal</i>		19,956.9	\$ 30.01	\$ 49.90		20,821.5	\$ 31.02	\$ 53.83
MH/SA		3,700.5	\$ 13.45	\$ 4.15		8,497.0	\$ 8.03	\$ 5.69
FQHC/RHF/OP Health Facility		240.8	98.09	1.97		318.6	100.20	2.66
Pharmacy		62,864.2	63.66	333.47		62,404.4	65.46	340.43
Dental		2,236.2	62.95	11.73		2,302.8	60.63	11.63
Vision - Optometric		1,651.6	15.93	2.19		1,688.3	15.65	2.20
Home Health		6,589.1	41.05	22.54		8,388.5	39.63	27.70
Non-Emergent Transportation		2,216.6	14.13	2.61		2,696.0	14.15	3.18
Ambulance		980.1	65.62	5.36		1,037.5	66.81	5.78
Supplies & DME		4,109.2	68.79	23.56		4,356.8	71.37	25.91
Miscellaneous Services		<u>1,425.4</u>	<u>57.37</u>	<u>6.81</u>		<u>1,624.9</u>	<u>64.98</u>	<u>8.80</u>
<i>Other - Subtotal</i>		86,013.7	\$ 57.81	\$ 414.39		93,314.7	\$ 55.81	\$ 433.98
Total All Benefits		161,016.6	\$ 71.06	\$ 953.52		175,747.4	\$ 67.97	\$ 995.42

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Northeast
Population: ABD 21 +

Member Months: 295,690

Member Months: 302,299

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	398.6	1,981.3	\$ 1,665.40	\$ 274.97	429.4	2,118.9	\$ 1,647.10	\$ 290.84
Psychiatric/SA	137.6	909.0	720.98	54.61	134.7	848.2	687.48	48.59
Maternity - Deliveries	9.3	26.8	1,283.14	2.86	9.3	28.1	1,280.65	3.00
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	3.4	12.3	1,063.31	1.09	3.1	13.1	1,097.45	1.20
Nursing Facility	157.0	2,249.5	143.74	26.95	169.4	2,382.5	135.26	26.85
Other Inpatient	<u>7.3</u>	<u>163.6</u>	<u>1,391.63</u>	<u>18.97</u>	<u>8.7</u>	<u>202.3</u>	<u>1,365.78</u>	<u>23.03</u>
<i>Inpatient - Subtotal</i>	713.0	5,342.4	\$ 852.31	\$ 379.45	754.6	5,593.1	\$ 844.28	\$ 393.51
Emergency Room		1,434.8	\$ 282.95	\$ 33.83		1,509.4	\$ 292.53	\$ 36.80
Surgery/ASC		590.0	375.84	18.48		698.7	341.27	19.87
Cardiovascular		336.3	153.17	4.29		339.0	155.03	4.38
PT/OT/ST		1,667.8	20.00	2.78		1,504.7	20.13	2.52
Clinic		1,918.9	60.37	9.65		1,976.3	59.70	9.83
Other		<u>8,663.3</u>	<u>35.92</u>	<u>25.93</u>		<u>13,750.9</u>	<u>30.59</u>	<u>35.05</u>
<i>Outpatient - Subtotal</i>		14,611.1	\$ 78.00	\$ 94.97		19,779.1	\$ 65.80	\$ 108.46
Surgery		1,202.6	\$ 186.11	\$ 18.65		1,313.7	\$ 187.93	\$ 20.57
Anesthesia		161.7	127.47	1.72		160.7	127.37	1.71
Obstetrics		36.4	195.68	0.59		34.7	197.24	0.57
Office Visits/Consults		6,789.2	42.70	24.16		6,726.7	43.74	24.52
Inpatient Visits		4,058.3	35.61	12.04		4,378.8	36.31	13.25
Emergency Room		1,650.5	56.04	7.71		1,714.7	56.17	8.03
Immunizations & Injection		12,409.7	7.05	7.29		15,556.7	7.83	10.15
Physical Medicine		758.4	14.12	0.89		622.9	13.53	0.70
Miscellaneous Services		<u>6,081.1</u>	<u>54.25</u>	<u>27.49</u>		<u>5,898.8</u>	<u>50.32</u>	<u>24.73</u>
<i>Professional - Subtotal</i>		33,148.0	\$ 36.40	\$ 100.55		36,407.8	\$ 34.35	\$ 104.23
Radiology		7,231.0	\$ 58.26	\$ 35.10		6,631.3	\$ 63.81	\$ 35.26
Path/Lab		<u>13,257.7</u>	<u>13.82</u>	<u>15.26</u>		<u>14,596.0</u>	<u>14.55</u>	<u>17.69</u>
<i>Rad/Path/Lab - Subtotal</i>		20,488.7	\$ 29.50	\$ 50.37		21,227.3	\$ 29.94	\$ 52.95
MH/SA		1,499.3	\$ 19.61	\$ 2.45		3,208.4	\$ 11.08	\$ 2.96
FQHC/RHF/OP Health Facility		408.8	101.35	3.45		465.7	103.87	4.03
Pharmacy		50,944.8	67.24	285.44		50,980.9	69.26	294.27
Dental		2,163.8	60.68	10.94		2,029.5	57.09	9.66
Vision - Optometric		1,479.2	17.07	2.10		1,453.5	16.76	2.03
Home Health		8,302.9	41.24	28.53		11,322.4	39.53	37.30
Non-Emergent Transportation		15,587.3	14.37	18.66		10,261.0	14.20	12.15
Ambulance		1,126.3	68.86	6.46		1,205.4	69.67	7.00
Supplies & DME		4,314.6	67.01	24.09		4,536.4	70.10	26.50
Miscellaneous Services		<u>1,558.8</u>	<u>79.93</u>	<u>10.38</u>		<u>1,692.4</u>	<u>75.61</u>	<u>10.66</u>
<i>Other - Subtotal</i>		87,385.9	\$ 53.90	\$ 392.53		87,155.5	\$ 55.98	\$ 406.55
Total All Benefits		160,976.2	\$ 75.88	\$ 1,017.86		170,162.7	\$ 75.15	\$ 1,065.70

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Northeast Central
Population: ABD 21 +

Member Months: 89,946

Member Months: 90,612

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	317.9	1,736.0	\$ 1,604.85	\$ 232.16	329.2	1,742.2	\$ 1,622.31	\$ 235.53
Psychiatric/SA	79.5	526.0	664.07	29.11	80.4	535.6	618.34	27.60
Maternity - Deliveries	10.1	25.2	1,339.27	2.81	7.0	19.1	1,176.47	1.87
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	2.8	7.3	901.81	0.55	4.8	21.2	711.15	1.26
Nursing Facility	75.1	927.2	124.62	9.63	69.0	949.0	122.36	9.68
Other Inpatient	<u>12.9</u>	<u>231.3</u>	<u>1,256.60</u>	<u>24.22</u>	<u>10.5</u>	<u>222.5</u>	<u>1,352.50</u>	<u>25.08</u>
<i>Inpatient - Subtotal</i>	498.4	3,453.1	\$ 1,037.30	\$ 298.50	500.9	3,489.5	\$ 1,035.12	\$ 301.00
Emergency Room		1,353.2	\$ 277.09	\$ 31.25		1,392.0	\$ 291.48	\$ 33.81
Surgery/ASC		582.5	452.33	21.96		609.3	461.13	23.41
Cardiovascular		278.3	166.16	3.85		263.7	166.58	3.66
PT/OT/ST		1,290.0	23.22	2.50		1,251.6	23.37	2.44
Clinic		1,030.0	40.16	3.45		1,052.8	40.52	3.55
Other		<u>3,990.0</u>	<u>75.65</u>	<u>25.16</u>		<u>4,461.7</u>	<u>61.74</u>	<u>22.96</u>
<i>Outpatient - Subtotal</i>		8,523.9	\$ 124.10	\$ 88.15		9,031.1	\$ 119.37	\$ 89.84
Surgery		1,287.2	\$ 180.09	\$ 19.32		1,343.0	\$ 172.32	\$ 19.29
Anesthesia		304.3	86.66	2.20		298.4	84.09	2.09
Obstetrics		34.7	222.73	0.64		28.7	191.35	0.46
Office Visits/Consults		9,212.9	40.17	30.84		8,936.3	40.28	30.00
Inpatient Visits		3,703.3	32.26	9.96		3,684.9	32.22	9.89
Emergency Room		1,507.0	56.44	7.09		1,571.2	57.28	7.50
Immunizations & Injection		12,510.4	6.32	6.59		14,236.7	8.90	10.56
Physical Medicine		2,118.6	15.73	2.78		2,241.3	15.77	2.95
Miscellaneous Services		<u>7,110.7</u>	<u>44.63</u>	<u>26.45</u>		<u>6,579.8</u>	<u>40.26</u>	<u>22.07</u>
<i>Professional - Subtotal</i>		37,789.1	\$ 33.61	\$ 105.86		38,920.3	\$ 32.31	\$ 104.81
Radiology		7,216.6	\$ 61.46	\$ 36.96		6,409.7	\$ 66.61	\$ 35.58
Path/Lab		<u>16,265.4</u>	<u>14.73</u>	<u>19.97</u>		<u>16,039.7</u>	<u>15.38</u>	<u>20.56</u>
<i>Rad/Path/Lab - Subtotal</i>		23,482.0	\$ 29.09	\$ 56.93		22,449.5	\$ 30.01	\$ 56.14
MH/SA		1,274.6	\$ 28.76	\$ 3.05		3,868.9	\$ 10.92	\$ 3.52
FQHC/RHF/OP Health Facility		510.7	98.54	4.19		521.5	99.45	4.32
Pharmacy		59,610.2	68.81	341.83		59,489.7	70.04	347.23
Dental		2,524.2	56.97	11.98		2,335.2	55.11	10.72
Vision - Optometric		1,972.3	16.13	2.65		1,894.7	16.03	2.53
Home Health		5,334.3	45.64	20.29		6,866.2	44.34	25.37
Non-Emergent Transportation		649.5	14.47	0.78		749.2	14.12	0.88
Ambulance		1,146.4	67.16	6.42		1,188.6	68.31	6.77
Supplies & DME		4,223.7	68.29	24.04		4,513.4	73.59	27.68
Miscellaneous Services		<u>2,537.5</u>	<u>49.06</u>	<u>10.37</u>		<u>2,804.8</u>	<u>51.54</u>	<u>12.05</u>
<i>Other - Subtotal</i>		79,783.3	\$ 64.01	\$ 425.61		84,232.3	\$ 62.84	\$ 441.07
Total All Benefits		153,031.4	\$ 76.46	\$ 975.04		158,122.6	\$ 75.35	\$ 992.85

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Northwest
Population: ABD 21 +

Member Months: 137,962

Member Months: 142,527

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	348.9	1,797.4	\$ 1,804.13	\$ 270.22	361.7	1,852.1	\$ 1,756.03	\$ 271.03
Psychiatric/SA	102.9	922.8	678.38	52.17	110.5	936.0	624.72	48.73
Maternity - Deliveries	7.7	25.3	1,236.70	2.61	10.9	30.4	1,322.03	3.35
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	2.4	11.8	733.89	0.72	3.7	13.2	1,008.60	1.11
Nursing Facility	94.0	1,313.7	132.86	14.54	115.0	1,363.5	128.68	14.62
Other Inpatient	<u>4.3</u>	<u>89.1</u>	<u>1,990.95</u>	<u>14.78</u>	<u>4.0</u>	<u>71.6</u>	<u>1,844.67</u>	<u>11.00</u>
<i>Inpatient - Subtotal</i>	560.2	4,160.0	\$ 1,024.16	\$ 355.04	605.8	4,266.8	\$ 983.89	\$ 349.84
Emergency Room		2,105.3	\$ 273.18	\$ 47.93		2,238.1	\$ 285.58	\$ 53.26
Surgery/ASC		780.4	307.60	20.00		813.4	304.40	20.63
Cardiovascular		426.7	168.12	5.98		414.4	170.34	5.88
PT/OT/ST		2,382.0	19.87	3.94		2,242.3	19.99	3.74
Clinic		1,860.4	50.73	7.87		2,020.9	54.31	9.15
Other		<u>4,247.5</u>	<u>75.81</u>	<u>26.83</u>		<u>4,275.2</u>	<u>79.68</u>	<u>28.39</u>
<i>Outpatient - Subtotal</i>		11,802.4	\$ 114.44	\$ 112.55		12,004.4	\$ 121.01	\$ 121.05
Surgery		1,288.7	\$ 186.70	\$ 20.05		1,558.9	\$ 186.39	\$ 24.21
Anesthesia		188.9	140.07	2.21		199.7	134.52	2.24
Obstetrics		16.2	348.24	0.47		24.8	270.70	0.56
Office Visits/Consults		6,832.3	40.15	22.86		6,801.5	41.30	23.41
Inpatient Visits		3,417.5	33.09	9.42		3,486.7	34.26	9.96
Emergency Room		2,234.4	50.92	9.48		2,374.6	52.66	10.42
Immunizations & Injection		13,163.0	8.35	9.16		18,995.6	8.08	12.79
Physical Medicine		754.6	15.38	0.97		690.1	15.26	0.88
Miscellaneous Services		<u>5,444.5</u>	<u>43.98</u>	<u>19.96</u>		<u>6,025.2</u>	<u>42.04</u>	<u>21.11</u>
<i>Professional - Subtotal</i>		33,340.1	\$ 34.04	\$ 94.57		40,157.2	\$ 31.55	\$ 105.57
Radiology		7,243.3	\$ 60.99	\$ 36.82		7,462.6	\$ 61.62	\$ 38.32
Path/Lab		<u>14,387.9</u>	<u>13.01</u>	<u>15.60</u>		<u>14,402.2</u>	<u>13.75</u>	<u>16.50</u>
<i>Rad/Path/Lab - Subtotal</i>		21,631.2	\$ 29.08	\$ 52.41		21,864.8	\$ 30.09	\$ 54.82
MH/SA		4,013.5	\$ 13.98	\$ 4.68		13,843.6	\$ 6.55	\$ 7.56
FQHC/RHF/OP Health Facility		358.7	84.64	2.53		393.3	89.96	2.95
Pharmacy		56,153.1	63.43	296.82		55,983.8	64.97	303.10
Dental		2,120.0	56.51	9.98		2,125.8	55.26	9.79
Vision - Optometric		1,717.0	15.99	2.29		1,661.8	15.64	2.17
Home Health		3,655.2	46.43	14.14		4,601.2	43.44	16.66
Non-Emergent Transportation		1,528.7	14.92	1.90		1,700.4	15.27	2.16
Ambulance		882.9	73.96	5.44		958.9	74.27	5.93
Supplies & DME		3,994.3	73.93	24.61		4,332.4	73.69	26.61
Miscellaneous Services		<u>1,330.2</u>	<u>89.60</u>	<u>9.93</u>		<u>1,210.6</u>	<u>85.19</u>	<u>8.59</u>
<i>Other - Subtotal</i>		75,753.5	\$ 58.98	\$ 372.32		86,811.9	\$ 53.29	\$ 385.52
Total All Benefits		146,687.1	\$ 80.74	\$ 986.91		165,105.1	\$ 73.90	\$ 1,016.81

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Southeast
Population: ABD 21 +

Member Months: 156,149

Member Months: 159,862

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	347.4	1,597.5	\$ 1,459.23	\$ 194.26	336.1	1,590.2	\$ 1,488.98	\$ 197.32
Psychiatric/SA	54.5	277.4	647.76	14.98	53.4	272.3	591.22	13.41
Maternity - Deliveries	6.7	16.7	1,028.13	1.43	7.2	19.6	979.33	1.60
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	1.5	3.4	986.54	0.28	2.1	6.4	826.28	0.44
Nursing Facility	50.2	595.3	119.52	5.93	48.2	594.6	113.05	5.60
Other Inpatient	<u>6.6</u>	<u>95.1</u>	<u>2,247.20</u>	<u>17.80</u>	<u>7.3</u>	<u>118.3</u>	<u>2,453.41</u>	<u>24.19</u>
<i>Inpatient - Subtotal</i>	466.9	2,585.3	\$ 1,089.25	\$ 234.67	454.3	2,601.4	\$ 1,118.93	\$ 242.56
Emergency Room		1,755.2	\$ 234.38	\$ 34.28		1,700.7	\$ 240.45	\$ 34.08
Surgery/ASC		681.0	298.97	16.97		874.4	263.79	19.22
Cardiovascular		406.5	182.70	6.19		482.5	221.67	8.91
PT/OT/ST		1,289.0	19.70	2.12		1,489.6	19.58	2.43
Clinic		311.3	56.56	1.47		381.7	54.92	1.75
Other		<u>4,818.9</u>	<u>49.11</u>	<u>19.72</u>		<u>3,568.1</u>	<u>61.61</u>	<u>18.32</u>
<i>Outpatient - Subtotal</i>		9,262.0	\$ 104.62	\$ 80.75		8,497.0	\$ 119.63	\$ 84.71
Surgery		1,315.3	\$ 180.78	\$ 19.81		1,451.8	\$ 176.10	\$ 21.31
Anesthesia		204.8	136.89	2.34		234.3	136.26	2.66
Obstetrics		25.7	214.69	0.46		24.0	229.94	0.46
Office Visits/Consults		8,013.8	41.29	27.57		8,045.6	42.23	28.32
Inpatient Visits		2,610.7	36.44	7.93		2,621.9	36.35	7.94
Emergency Room		1,869.8	47.96	7.47		1,821.8	49.78	7.56
Immunizations & Injection		7,581.5	12.74	8.05		9,476.5	9.98	7.88
Physical Medicine		545.3	16.06	0.73		599.0	15.52	0.77
Miscellaneous Services		<u>6,752.6</u>	<u>32.61</u>	<u>18.35</u>		<u>7,163.4</u>	<u>30.14</u>	<u>17.99</u>
<i>Professional - Subtotal</i>		28,919.6	\$ 38.47	\$ 92.72		31,438.3	\$ 36.22	\$ 94.89
Radiology		6,339.1	\$ 70.52	\$ 37.25		6,899.6	\$ 71.47	\$ 41.09
Path/Lab		<u>14,311.8</u>	<u>14.84</u>	<u>17.70</u>		<u>15,643.3</u>	<u>15.53</u>	<u>20.25</u>
<i>Rad/Path/Lab - Subtotal</i>		20,650.9	\$ 31.93	\$ 54.96		22,542.9	\$ 32.65	\$ 61.34
MH/SA		1,253.1	\$ 14.63	\$ 1.53		3,307.2	\$ 7.90	\$ 2.18
FQHC/RHF/OP Health Facility		631.7	78.84	4.15		649.2	81.01	4.38
Pharmacy		68,271.6	61.66	350.83		68,397.0	63.98	364.65
Dental		2,246.4	60.85	11.39		2,281.1	59.28	11.27
Vision - Optometric		2,153.0	15.93	2.86		2,161.9	15.71	2.83
Home Health		4,587.8	45.52	17.40		6,777.4	44.13	24.92
Non-Emergent Transportation		206.4	17.33	0.30		230.1	18.74	0.36
Ambulance		993.4	83.81	6.94		1,057.2	83.70	7.37
Supplies & DME		4,569.6	63.97	24.36		4,752.3	67.89	26.89
Miscellaneous Services		<u>1,245.6</u>	<u>46.79</u>	<u>4.86</u>		<u>1,223.0</u>	<u>50.50</u>	<u>5.15</u>
<i>Other - Subtotal</i>		86,158.8	\$ 59.14	\$ 424.61		90,836.5	\$ 59.45	\$ 450.00
Total All Benefits		147,576.6	\$ 72.18	\$ 887.69		155,916.2	\$ 71.85	\$ 933.50

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Southwest
Population: ABD 21 +

Member Months: 178,583

Member Months: 181,864

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	360.8	1,825.3	\$ 1,796.37	\$ 273.24	376.0	1,820.9	\$ 1,783.00	\$ 270.55
Psychiatric/SA	79.4	545.6	660.61	30.03	93.0	552.3	706.64	32.52
Maternity - Deliveries	8.8	21.3	1,372.04	2.44	7.9	21.6	1,271.98	2.29
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	2.9	8.5	1,029.57	0.73	2.8	9.2	925.37	0.71
Nursing Facility	86.1	1,323.8	153.52	16.94	82.7	1,298.2	149.35	16.16
Other Inpatient	<u>14.9</u>	<u>258.4</u>	<u>1,186.06</u>	<u>25.54</u>	<u>14.7</u>	<u>242.4</u>	<u>1,299.22</u>	<u>26.24</u>
<i>Inpatient - Subtotal</i>	552.9	3,982.8	\$ 1,051.25	\$ 348.91	577.2	3,944.5	\$ 1,060.13	\$ 348.47
Emergency Room		1,682.2	\$ 233.05	\$ 32.67		1,740.7	\$ 241.45	\$ 35.02
Surgery/ASC		5,613.7	47.99	22.45		5,654.0	53.27	25.10
Cardiovascular		330.0	161.71	4.45		343.2	164.40	4.70
PT/OT/ST		1,711.8	24.12	3.44		1,579.0	23.56	3.10
Clinic		1,398.0	43.96	5.12		1,423.8	47.37	5.62
Other		<u>10,105.8</u>	<u>21.58</u>	<u>18.18</u>		<u>19,512.7</u>	<u>15.85</u>	<u>25.77</u>
<i>Outpatient - Subtotal</i>		20,841.5	\$ 49.69	\$ 86.30		30,253.5	\$ 39.39	\$ 99.32
Surgery		1,193.1	\$ 194.09	\$ 19.30		1,398.0	\$ 172.28	\$ 20.07
Anesthesia		226.5	121.36	2.29		223.3	118.96	2.21
Obstetrics		27.9	224.44	0.52		33.7	175.77	0.49
Office Visits/Consults		6,158.1	42.72	21.92		6,152.5	43.36	22.23
Inpatient Visits		3,037.2	35.46	8.97		3,157.0	36.08	9.49
Emergency Room		1,768.5	49.05	7.23		1,860.1	51.14	7.93
Immunizations & Injection		19,159.3	7.80	12.45		23,304.7	6.74	13.09
Physical Medicine		589.2	15.05	0.74		461.0	15.04	0.58
Miscellaneous Services		<u>5,233.1</u>	<u>45.49</u>	<u>19.84</u>		<u>5,466.3</u>	<u>44.05</u>	<u>20.07</u>
<i>Professional - Subtotal</i>		37,393.1	\$ 29.93	\$ 93.26		42,056.5	\$ 27.44	\$ 96.16
Radiology		6,694.6	\$ 63.57	\$ 35.46		6,598.9	\$ 64.69	\$ 35.57
Path/Lab		<u>14,565.0</u>	<u>14.00</u>	<u>16.99</u>		<u>15,354.5</u>	<u>14.71</u>	<u>18.82</u>
<i>Rad/Path/Lab - Subtotal</i>		21,259.6	\$ 29.61	\$ 52.45		21,953.4	\$ 29.73	\$ 54.39
MH/SA		2,010.9	\$ 16.10	\$ 2.70		6,061.6	\$ 8.12	\$ 4.10
FQHC/RHF/OP Health Facility		1,092.5	95.52	8.70		1,192.6	97.03	9.64
Pharmacy		62,596.5	63.91	333.37		62,397.9	64.02	332.90
Dental		1,965.0	61.78	10.12		1,900.7	58.42	9.25
Vision - Optometric		1,333.7	16.33	1.82		1,259.9	16.17	1.70
Home Health		3,509.1	50.36	14.73		4,526.5	49.24	18.58
Non-Emergent Transportation		1,606.6	15.56	2.08		1,784.0	15.31	2.28
Ambulance		985.8	66.20	5.44		1,074.3	67.36	6.03
Supplies & DME		4,540.6	65.94	24.95		4,657.0	67.25	26.10
Miscellaneous Services		<u>1,413.2</u>	<u>88.24</u>	<u>10.39</u>		<u>1,437.3</u>	<u>82.52</u>	<u>9.88</u>
<i>Other - Subtotal</i>		81,053.8	\$ 61.34	\$ 414.29		86,291.9	\$ 58.47	\$ 420.45
Total All Benefits		164,530.9	\$ 72.59	\$ 995.21		184,499.9	\$ 66.26	\$ 1,018.79

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: West Central
Population: ABD 21 +

Member Months: 123,865

Member Months: 126,473

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	333.8	1,728.9	\$ 1,625.04	\$ 234.13	343.5	1,731.1	\$ 1,666.29	\$ 240.38
Psychiatric/SA	105.8	599.2	741.58	37.03	105.9	607.6	684.81	34.68
Maternity - Deliveries	7.9	23.3	1,146.52	2.22	9.9	26.4	1,215.10	2.67
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	0.8	2.0	840.94	0.14	1.8	5.7	754.42	0.36
Nursing Facility	110.0	1,538.1	131.17	16.81	116.7	1,590.8	126.06	16.71
Other Inpatient	<u>6.6</u>	<u>99.6</u>	<u>2,475.23</u>	<u>20.54</u>	<u>8.2</u>	<u>151.6</u>	<u>2,821.53</u>	<u>35.65</u>
<i>Inpatient - Subtotal</i>	564.8	3,991.1	\$ 934.72	\$ 310.88	585.9	4,113.2	\$ 964.05	\$ 330.45
Emergency Room		1,547.9	\$ 269.71	\$ 34.79		1,621.7	\$ 274.26	\$ 37.06
Surgery/ASC		913.1	266.92	20.31		772.1	323.62	20.82
Cardiovascular		358.3	178.67	5.33		339.3	175.45	4.96
PT/OT/ST		1,580.6	20.47	2.70		1,745.1	20.62	3.00
Clinic		1,513.5	47.38	5.98		3,398.2	21.16	5.99
Other		<u>3,419.7</u>	<u>55.47</u>	<u>15.81</u>		<u>4,084.5</u>	<u>44.41</u>	<u>15.11</u>
<i>Outpatient - Subtotal</i>		9,333.0	\$ 109.18	\$ 84.92		11,960.9	\$ 87.24	\$ 86.95
Surgery		1,299.2	\$ 193.37	\$ 20.93		1,450.9	\$ 179.60	\$ 21.72
Anesthesia		218.6	134.68	2.45		232.2	136.79	2.65
Obstetrics		29.0	202.78	0.49		39.7	189.48	0.63
Office Visits/Consults		7,654.9	42.20	26.92		7,849.3	42.50	27.80
Inpatient Visits		3,012.9	34.62	8.69		3,090.6	34.92	8.99
Emergency Room		1,710.8	53.34	7.60		1,802.1	54.80	8.23
Immunizations & Injection		15,567.2	8.63	11.20		20,011.5	7.36	12.28
Physical Medicine		1,019.6	13.60	1.16		1,229.4	13.33	1.37
Miscellaneous Services		<u>6,915.8</u>	<u>38.78</u>	<u>22.35</u>		<u>7,110.3</u>	<u>38.44</u>	<u>22.78</u>
<i>Professional - Subtotal</i>		37,427.8	\$ 32.64	\$ 101.80		42,815.9	\$ 29.83	\$ 106.43
Radiology		8,033.5	\$ 61.67	\$ 41.28		7,727.7	\$ 61.29	\$ 39.47
Path/Lab		<u>15,231.6</u>	<u>13.88</u>	<u>17.62</u>		<u>15,591.3</u>	<u>14.53</u>	<u>18.87</u>
<i>Rad/Path/Lab - Subtotal</i>		23,265.1	\$ 30.38	\$ 58.91		23,318.9	\$ 30.02	\$ 58.34
MH/SA		1,664.5	\$ 22.26	\$ 3.09		3,479.9	\$ 12.66	\$ 3.67
FQHC/RHF/OP Health Facility		141.0	92.11	1.08		151.0	95.79	1.21
Pharmacy		65,440.8	63.02	343.69		64,828.9	64.73	349.72
Dental		2,538.2	61.69	13.05		2,467.7	58.83	12.10
Vision - Optometric		1,946.1	15.71	2.55		1,904.0	15.38	2.44
Home Health		7,113.7	43.73	25.92		8,734.6	44.56	32.44
Non-Emergent Transportation		1,715.0	15.05	2.15		1,301.8	14.85	1.61
Ambulance		1,005.6	69.58	5.83		1,120.6	75.41	7.04
Supplies & DME		4,493.5	65.27	24.44		4,709.9	74.47	29.23
Miscellaneous Services		<u>1,145.1</u>	<u>97.83</u>	<u>9.34</u>		<u>1,192.1</u>	<u>112.45</u>	<u>11.17</u>
<i>Other - Subtotal</i>		87,203.3	\$ 59.33	\$ 431.14		89,890.5	\$ 60.16	\$ 450.62
Total All Benefits		161,220.3	\$ 73.51	\$ 987.63		172,099.5	\$ 72.01	\$ 1,032.80

State of Ohio
Department of Job and Family Services
ABD Cost Summary - FFS

Region: Statewide
Population: ABD 21 +

Member Months: 1,422,274

Member Months: 1,455,974

State Fiscal Year: 2005

State Fiscal Year: 2006

Category Description	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM	Admits Per 1,000	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	350.9	1,766.8	\$ 1,626.23	\$ 239.43	364.5	1,818.7	\$ 1,641.81	\$ 248.84
Psychiatric/SA	87.0	576.8	687.90	33.06	87.9	562.4	653.68	30.63
Maternity - Deliveries	8.5	24.4	1,213.27	2.46	8.6	25.6	1,194.52	2.55
Well Newborn	0.0	0.0	0.00	0.00	0.0	0.0	0.00	0.00
Maternity - Nondeliveries	2.5	9.6	848.53	0.68	2.9	11.2	868.08	0.81
Nursing Facility	103.1	1,421.1	137.74	16.31	110.1	1,480.5	131.56	16.23
Other Inpatient	<u>10.3</u>	<u>177.4</u>	<u>1,642.99</u>	<u>24.29</u>	<u>10.8</u>	<u>188.8</u>	<u>1,783.06</u>	<u>28.05</u>
<i>Inpatient - Subtotal</i>	562.3	3,976.1	\$ 954.45	\$ 316.24	584.8	4,087.2	\$ 960.38	\$ 327.11
Emergency Room		1,665.7	\$ 255.47	\$ 35.46		1,713.5	\$ 267.35	\$ 38.17
Surgery/ASC		1,528.4	148.75	18.95		1,645.1	149.84	20.54
Cardiovascular		354.3	170.66	5.04		362.2	176.34	5.32
PT/OT/ST		1,699.1	20.63	2.92		1,725.6	20.51	2.95
Clinic		1,284.0	53.70	5.75		1,505.8	50.19	6.30
Other		<u>6,495.5</u>	<u>40.96</u>	<u>22.17</u>		<u>8,589.1</u>	<u>36.94</u>	<u>26.44</u>
<i>Outpatient - Subtotal</i>		13,027.1	\$ 83.17	\$ 90.29		15,541.3	\$ 77.00	\$ 99.73
Surgery		1,343.0	\$ 178.81	\$ 20.01		1,524.6	\$ 172.59	\$ 21.93
Anesthesia		206.4	129.14	2.22		212.9	128.90	2.29
Obstetrics		27.8	225.80	0.52		29.4	212.26	0.52
Office Visits/Consults		7,373.8	41.84	25.71		7,392.4	42.51	26.19
Inpatient Visits		3,284.9	34.99	9.58		3,426.0	35.59	10.16
Emergency Room		1,809.1	51.59	7.78		1,865.0	52.91	8.22
Immunizations & Injection		12,862.2	8.38	8.98		16,764.1	7.59	10.60
Physical Medicine		871.0	14.72	1.07		837.5	14.60	1.02
Miscellaneous Services		<u>6,383.4</u>	<u>42.61</u>	<u>22.66</u>		<u>6,490.7</u>	<u>39.99</u>	<u>21.63</u>
<i>Professional - Subtotal</i>		34,161.5	\$ 34.61	\$ 98.53		38,542.7	\$ 31.93	\$ 102.55
Radiology		6,988.0	\$ 62.26	\$ 36.26		6,900.8	\$ 65.06	\$ 37.42
Path/Lab		<u>14,893.5</u>	<u>14.00</u>	<u>17.37</u>		<u>15,718.9</u>	<u>14.73</u>	<u>19.29</u>
<i>Rad/Path/Lab - Subtotal</i>		21,881.5	\$ 29.41	\$ 53.63		22,619.7	\$ 30.09	\$ 56.71
Mental Health / Substance Abuse		2,187.6	\$ 15.63	\$ 2.85		5,823.4	\$ 8.24	\$ 4.00
FQHC/RHF/OP Health Facility		517.7	92.60	3.99		578.6	95.29	4.59
Pharmacy		62,417.4	63.32	329.34		61,938.9	64.82	334.59
Dental		2,267.4	60.98	11.52		2,222.2	58.64	10.86
Vision - Optometric		1,705.5	16.14	2.29		1,684.4	15.90	2.23
Home Health		11,135.8	37.74	35.03		15,180.9	36.93	46.72
Non-Emergent Transportation		4,311.9	14.50	5.21		3,374.1	14.42	4.06
Ambulance		1,011.4	70.31	5.93		1,092.2	71.24	6.48
Supplies & DME		4,501.5	66.28	24.86		4,678.2	69.57	27.12
Miscellaneous Services		<u>1,445.4</u>	<u>73.13</u>	<u>8.81</u>		<u>1,555.6</u>	<u>74.83</u>	<u>9.70</u>
<i>Other - Subtotal</i>		91,501.5	\$ 56.37	\$ 429.83		98,128.5	\$ 55.07	\$ 450.35
Total All Benefits		164,547.7	\$ 72.09	\$ 988.53		178,919.3	\$ 69.51	\$ 1,036.45



ATTACHMENT 4

FINAL AND CONFIDENTIAL

**State of Ohio
Department of Job and Family Services
Managed Care Adjustments to ABD FFS Data**

Utilization Adjustments

<u>Category Description</u>	ABD 21 +							
	<u>CEN</u>	<u>EC</u>	<u>NE</u>	<u>NEC</u>	<u>NW</u>	<u>SE</u>	<u>SW</u>	<u>WC</u>
<i>Inpatient</i>								
Medical/Surgical	87.5%	83.4%	65.0%	83.5%	79.6%	84.5%	81.6%	87.5%
Psychiatric/SA	75.0%	75.0%	65.0%	72.8%	65.0%	75.0%	72.1%	68.6%
Maternity - Deliveries	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Well Newborn	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Maternity - Nondeliveries	79.1%	83.2%	77.5%	77.5%	77.5%	87.5%	87.5%	87.5%
Nursing Facility	75.0%	73.1%	65.0%	75.0%	74.6%	75.0%	75.0%	68.0%
Other Inpatient	77.5%	77.5%	65.0%	77.5%	87.5%	87.5%	77.5%	87.5%
<i>Outpatient</i>								
Emergency Room	63.6%	63.2%	70.0%	70.0%	55.0%	60.0%	64.1%	70.0%
Surgery/ASC	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%
Cardiovascular	90.0%	81.5%	90.0%	90.0%	80.0%	80.0%	90.0%	90.0%
PT/OT/ST	82.3%	80.0%	90.0%	90.0%	80.0%	90.0%	90.0%	90.0%
Clinic	90.0%	81.9%	80.0%	90.0%	80.0%	90.0%	86.3%	80.0%
Other	90.0%	90.0%	65.0%	90.0%	90.0%	90.0%	80.0%	90.0%
<i>Professional</i>								
Surgery	80.0%	85.3%	90.0%	90.0%	83.1%	80.1%	90.0%	90.0%
Anesthesia	86.5%	80.0%	90.0%	80.0%	89.7%	80.0%	80.0%	82.2%
Obstetrics	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Office Visits/Consults	106.3%	106.4%	105.2%	105.2%	107.8%	106.9%	106.2%	105.2%
Inpatient Visits	87.5%	80.1%	77.5%	77.5%	79.1%	87.5%	87.5%	87.5%
Emergency Room	63.9%	65.1%	70.0%	70.0%	60.0%	60.0%	65.6%	70.0%
Immunizations & Injection	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Physical Medicine	75.0%	85.0%	85.0%	75.0%	85.0%	85.0%	85.0%	75.0%
Miscellaneous Services	75.0%	79.5%	75.0%	75.0%	85.0%	75.0%	85.0%	76.6%
<i>Rad/Path/Lab</i>								
Radiology	84.2%	90.0%	89.2%	86.4%	80.0%	80.0%	88.8%	80.0%
Path/Lab	80.0%	90.0%	90.0%	80.0%	89.7%	80.0%	87.0%	88.8%
<i>Other</i>								
MH/SA	72.9%	70.0%	80.0%	80.0%	70.0%	80.0%	73.3%	80.0%
FQHC/RHF/OP Health Facility	80.0%	90.0%	90.0%	89.7%	90.0%	80.0%	80.0%	90.0%
Pharmacy	80.0%	85.4%	90.0%	86.6%	90.0%	80.0%	84.5%	84.9%
Dental	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Vision - Optometric	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Home Health	30.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%	80.0%
Non-ER Transportation	80.0%	80.0%	70.0%	80.0%	80.0%	80.0%	80.0%	80.0%
Ambulance	78.8%	79.5%	70.0%	70.0%	80.0%	70.0%	76.5%	77.2%
Supplies & DME	70.0%	80.0%	80.0%	76.6%	80.0%	70.0%	75.0%	78.1%
Miscellaneous Services	77.8%	73.9%	71.4%	70.0%	80.0%	80.0%	79.8%	80.0%

FINAL AND CONFIDENTIAL

**State of Ohio
Department of Job and Family Services
Managed Care Adjustments to ABD FFS Data**

Cost Per Service Adjustments

<u>Category Description</u>	ABD 21 +							
	<u>CEN</u>	<u>EC</u>	<u>NE</u>	<u>NEC</u>	<u>NW</u>	<u>SE</u>	<u>SW</u>	<u>WC</u>
<i>Inpatient</i>								
Medical/Surgical	104.9%	105.5%	106.6%	105.5%	105.3%	106.0%	109.9%	105.1%
Psychiatric/SA	106.2%	106.4%	106.6%	106.6%	106.8%	107.0%	110.9%	107.0%
Maternity - Deliveries	103.6%	103.8%	103.0%	103.8%	103.2%	104.4%	107.9%	103.8%
Well Newborn	103.6%	103.8%	103.0%	103.8%	103.2%	104.4%	107.9%	103.8%
Maternity - Nondeliveries	105.8%	105.5%	105.3%	106.1%	105.5%	105.7%	109.3%	105.1%
Nursing Facility	106.2%	106.6%	106.6%	106.4%	105.8%	107.0%	110.6%	107.1%
Other Inpatient	106.0%	106.1%	106.6%	106.1%	104.5%	105.7%	110.4%	105.1%
<i>Outpatient</i>								
Emergency Room	108.5%	110.1%	109.2%	108.3%	111.7%	110.1%	108.1%	106.7%
Surgery/ASC	104.2%	105.6%	106.1%	105.2%	105.5%	105.0%	103.9%	103.7%
Cardiovascular	102.1%	104.4%	104.0%	103.2%	104.5%	103.9%	101.9%	101.7%
PT/OT/ST	102.9%	104.6%	104.0%	103.2%	104.5%	102.9%	101.9%	101.7%
Clinic	102.1%	104.4%	105.1%	103.2%	104.5%	102.9%	102.3%	102.7%
Other	102.1%	103.5%	106.6%	103.2%	103.5%	102.9%	102.9%	101.7%
<i>Professional</i>								
Surgery	111.3%	109.6%	108.5%	108.3%	110.3%	111.3%	108.2%	108.2%
Anesthesia	109.3%	111.3%	108.5%	111.4%	108.2%	111.3%	111.3%	110.6%
Obstetrics	105.0%	105.0%	105.4%	105.1%	105.0%	105.0%	105.0%	105.0%
Office Visits/Consults	105.7%	105.7%	105.9%	105.7%	105.8%	105.7%	105.7%	105.5%
Inpatient Visits	106.3%	107.1%	107.7%	107.5%	107.2%	106.3%	106.3%	106.3%
Emergency Room	108.8%	108.7%	108.5%	108.3%	109.2%	109.2%	108.6%	108.2%
Immunizations & Injection	105.0%	105.0%	105.4%	105.1%	105.0%	105.0%	105.0%	105.0%
Physical Medicine	107.6%	106.6%	107.0%	107.8%	106.6%	106.6%	106.6%	107.6%
Miscellaneous Services	107.6%	107.2%	108.0%	107.8%	106.6%	107.6%	106.6%	107.5%
<i>Rad/Path/Lab</i>								
Radiology	101.4%	102.7%	103.2%	102.4%	102.6%	102.1%	101.2%	101.0%
Path/Lab	102.7%	103.5%	104.0%	103.3%	103.5%	103.2%	102.5%	102.4%
<i>Other</i>								
MH/SA	105.0%	105.0%	105.4%	105.1%	105.0%	105.0%	105.0%	105.0%
FQHC/RHF/OP Health Facility	101.0%	100.5%	100.5%	100.5%	100.5%	101.0%	101.0%	100.5%
Pharmacy	86.7%	87.7%	88.5%	87.9%	88.5%	86.7%	87.5%	87.6%
Dental	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Vision - Optometric	105.0%	105.0%	105.4%	105.1%	105.0%	105.0%	105.0%	105.0%
Home Health	103.2%	104.6%	105.1%	104.2%	104.5%	103.9%	102.9%	102.7%
Non-ER Transportation	101.1%	102.5%	103.0%	102.1%	102.4%	101.9%	100.9%	100.7%
Ambulance	101.1%	102.5%	103.0%	102.1%	102.4%	101.9%	100.9%	100.7%
Supplies & DME	101.1%	102.5%	103.0%	102.1%	102.4%	101.9%	100.9%	100.7%
Miscellaneous Services	101.1%	102.5%	103.0%	102.1%	102.4%	101.9%	100.9%	100.7%

**Note: Cost Per Service adjustments displayed above include MCP contracting adjustment



ATTACHMENT 5

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Central
Population: ABD 21 +
Estimated CY2008 MMs: 284,169

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,482.2	\$ 1,555.41	\$ 192.12	1,566.2	\$ 1,609.35	\$ 210.05
Psychiatric/SA	239.2	619.65	12.35	252.7	641.14	13.50
Maternity - Deliveries	26.1	1,057.24	2.30	27.6	1,093.90	2.51
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	9.1	659.50	0.50	9.6	682.37	0.55
Nursing Facility	978.8	131.78	10.75	1,034.3	138.47	11.93
Other Inpatient	<u>180.7</u>	<u>2,249.39</u>	<u>33.88</u>	<u>191.0</u>	<u>2,327.39</u>	<u>37.04</u>
<i>Inpatient - Subtotal</i>	2,916.1	\$ 1,036.58	\$ 251.90	3,081.3	\$ 1,073.23	\$ 275.58
Emergency Room	1,165.4	\$ 293.57	\$ 28.51	1,279.8	\$ 315.78	\$ 33.68
Surgery/ASC	1,866.4	111.82	17.39	2,049.5	120.28	20.54
Cardiovascular	316.4	182.34	4.81	347.5	196.14	5.68
PT/OT/ST	1,541.1	20.45	2.63	1,692.3	22.00	3.10
Clinic	683.7	76.45	4.36	750.8	82.24	5.15
Other	<u>5,291.3</u>	<u>58.01</u>	<u>25.58</u>	<u>5,810.4</u>	<u>62.40</u>	<u>30.22</u>
<i>Outpatient - Subtotal</i>	10,864.5	\$ 91.98	\$ 83.28	11,930.2	\$ 98.94	\$ 98.36
Surgery	1,517.8	\$ 173.95	\$ 22.00	1,635.1	\$ 176.47	\$ 24.05
Anesthesia	186.5	160.94	2.50	200.9	163.27	2.73
Obstetrics	22.6	288.07	0.54	24.3	292.24	0.59
Office Visits/Consults	9,147.8	44.49	33.91	9,854.7	45.13	37.06
Inpatient Visits	2,664.7	37.81	8.40	2,870.6	38.36	9.18
Emergency Room	1,248.9	55.04	5.73	1,345.5	55.84	6.26
Immunizations & Injection	11,753.1	8.01	7.85	12,661.3	8.13	8.58
Physical Medicine	842.4	15.26	1.07	907.5	15.48	1.17
Miscellaneous Services	<u>5,568.5</u>	<u>39.13</u>	<u>18.16</u>	<u>5,998.8</u>	<u>39.70</u>	<u>19.84</u>
<i>Professional - Subtotal</i>	32,952.3	\$ 36.47	\$ 100.16	35,498.7	\$ 37.00	\$ 109.46
Radiology	6,187.7	\$ 65.43	\$ 33.74	6,794.7	\$ 68.36	\$ 38.71
Path/Lab	<u>15,128.6</u>	<u>15.18</u>	<u>19.14</u>	<u>16,612.6</u>	<u>15.86</u>	<u>21.96</u>
<i>Subtotal</i>	21,316.3	\$ 29.77	\$ 52.88	23,407.2	\$ 31.10	\$ 60.67
MH/SA	3,716.7	\$ 9.33	\$ 2.89	4,199.5	\$ 10.03	\$ 3.51
FQHC/RHF/OP Health Facility	564.8	95.85	4.51	632.0	103.11	5.43
Pharmacy	58,452.3	53.32	259.72	60,570.5	57.91	292.28
Dental	2,268.3	54.98	10.39	2,396.8	55.78	11.14
Vision - Optometric	1,851.1	16.29	2.51	2,071.5	17.52	3.02
Home Health	12,770.1	35.11	37.36	14,291.1	37.76	44.97
Non-Emergent Transportation	1,413.3	15.15	1.78	1,581.6	16.29	2.15
Ambulance	845.6	71.30	5.02	946.3	76.70	6.05
Supplies & DME	3,791.3	66.91	21.14	4,242.9	71.98	25.45
Miscellaneous Services	<u>1,205.1</u>	<u>82.11</u>	<u>8.25</u>	<u>1,667.9</u>	<u>88.32</u>	<u>12.28</u>
<i>Other - Subtotal</i>	86,878.5	\$ 48.84	\$ 353.58	92,600.2	\$ 52.65	\$ 406.28
<i>Total All Benefits</i>	154,927.8	\$ 65.20	\$ 841.79	166,517.6	\$ 68.49	\$ 950.36
Administration					10.5%	111.49
Franchise Fee					4.5%	50.03
<i>Total Capitation Rate</i>						\$ 1,111.88

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: East Central
Population: ABD 21 +
Estimated CY2008 MMs: 149,045

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,545.3	\$ 1,608.17	\$ 207.09	1,632.8	\$ 1,663.94	\$ 226.41
Psychiatric/SA	338.5	635.40	17.92	357.7	657.43	19.59
Maternity - Deliveries	30.7	1,204.87	3.08	32.4	1,246.66	3.37
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	9.2	819.97	0.63	9.7	848.40	0.69
Nursing Facility	1,063.7	129.82	11.51	1,124.0	136.40	12.78
Other Inpatient	<u>170.8</u>	<u>1,451.84</u>	<u>20.66</u>	<u>180.4</u>	<u>1,502.18</u>	<u>22.59</u>
<i>Inpatient - Subtotal</i>	3,158.0	\$ 991.31	\$ 260.88	3,337.0	\$ 1,026.38	\$ 285.42
Emergency Room	1,171.4	\$ 264.27	\$ 25.80	1,286.3	\$ 284.26	\$ 30.47
Surgery/ASC	520.3	413.19	17.91	571.3	444.45	21.16
Cardiovascular	324.3	194.49	5.26	356.1	209.20	6.21
PT/OT/ST	1,730.6	21.68	3.13	1,900.4	23.32	3.69
Clinic	1,295.7	57.40	6.20	1,422.8	61.74	7.32
Other	<u>6,444.8</u>	<u>46.28</u>	<u>24.86</u>	<u>7,077.0</u>	<u>49.79</u>	<u>29.36</u>
<i>Outpatient - Subtotal</i>	11,487.1	\$ 86.86	\$ 83.15	12,613.9	\$ 93.43	\$ 98.21
Surgery	1,303.7	\$ 184.14	\$ 20.01	1,404.4	\$ 186.81	\$ 21.86
Anesthesia	187.4	138.07	2.16	201.8	140.07	2.36
Obstetrics	30.3	199.34	0.50	32.7	202.23	0.55
Office Visits/Consults	7,504.2	44.88	28.07	8,084.1	45.53	30.67
Inpatient Visits	2,915.1	38.30	9.30	3,140.4	38.85	10.17
Emergency Room	1,255.5	56.25	5.89	1,352.6	57.07	6.43
Immunizations & Injection	22,165.3	8.10	14.96	23,878.1	8.22	16.35
Physical Medicine	450.8	16.44	0.62	485.6	16.68	0.68
Miscellaneous Services	<u>5,397.5</u>	<u>40.69</u>	<u>18.30</u>	<u>5,814.6</u>	<u>41.28</u>	<u>20.00</u>
<i>Professional - Subtotal</i>	41,209.9	\$ 29.06	\$ 99.81	44,394.3	\$ 29.48	\$ 109.08
Radiology	6,053.5	\$ 69.15	\$ 34.88	6,647.2	\$ 72.25	\$ 40.02
Path/Lab	<u>13,230.8</u>	<u>14.87</u>	<u>16.40</u>	<u>14,528.6</u>	<u>15.54</u>	<u>18.81</u>
<i>Subtotal</i>	19,284.3	\$ 31.91	\$ 51.28	21,175.9	\$ 33.34	\$ 58.83
MH/SA	5,137.7	\$ 10.39	\$ 4.45	5,805.0	\$ 11.18	\$ 5.41
FQHC/RHF/OP Health Facility	277.7	102.14	2.36	310.8	109.87	2.85
Pharmacy	54,268.0	57.95	262.07	56,234.5	62.94	294.93
Dental	2,115.8	54.75	9.65	2,235.7	55.54	10.35
Vision - Optometric	1,758.3	16.33	2.39	1,967.7	17.57	2.88
Home Health	6,565.6	42.77	23.40	7,347.7	46.00	28.17
Non-Emergent Transportation	2,136.1	14.80	2.63	2,390.5	15.92	3.17
Ambulance	849.9	69.54	4.93	951.2	74.81	5.93
Supplies & DME	3,590.0	73.87	22.10	4,017.6	79.46	26.60
Miscellaneous Services	<u>1,210.9</u>	<u>65.57</u>	<u>6.62</u>	<u>1,675.9</u>	<u>70.53</u>	<u>9.85</u>
<i>Other - Subtotal</i>	77,910.0	\$ 52.46	\$ 340.61	82,936.6	\$ 56.45	\$ 390.13
<i>Total All Benefits</i>	153,049.3	\$ 65.53	\$ 835.72	164,457.6	\$ 68.71	\$ 941.67
Administration					10.5%	110.48
Franchise Fee					4.5%	49.58
<i>Total Capitation Rate</i>						\$ 1,101.73

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Northeast
Population: ABD 21 +
Estimated CY2008 MMs: 287,103

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,385.6	\$ 1,683.95	\$ 194.44	1,464.1	\$ 1,742.35	\$ 212.58
Psychiatric/SA	578.3	710.68	34.25	611.1	735.32	37.44
Maternity - Deliveries	28.4	1,261.60	2.99	30.0	1,305.35	3.27
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	10.2	1,094.63	0.93	10.8	1,132.58	1.02
Nursing Facility	1,562.4	140.39	18.28	1,650.9	147.51	20.29
Other Inpatient	<u>127.1</u>	<u>1,399.56</u>	<u>14.82</u>	<u>134.3</u>	<u>1,448.10</u>	<u>16.20</u>
<i>Inpatient - Subtotal</i>	3,692.0	\$ 863.63	\$ 265.71	3,901.1	\$ 894.53	\$ 290.81
Emergency Room	1,090.1	\$ 322.78	\$ 29.32	1,197.1	\$ 347.20	\$ 34.64
Surgery/ASC	592.3	381.10	18.81	650.4	409.93	22.22
Cardiovascular	318.9	164.04	4.36	350.2	176.45	5.15
PT/OT/ST	1,466.5	21.34	2.61	1,610.3	22.95	3.08
Clinic	1,641.6	64.26	8.79	1,802.7	69.12	10.38
Other	<u>8,293.9</u>	<u>35.07</u>	<u>24.24</u>	<u>9,107.4</u>	<u>37.72</u>	<u>28.63</u>
<i>Outpatient - Subtotal</i>	13,403.4	\$ 78.90	\$ 88.13	14,718.1	\$ 84.87	\$ 104.10
Surgery	1,188.6	\$ 202.79	\$ 20.09	1,280.5	\$ 205.73	\$ 21.95
Anesthesia	149.6	137.88	1.72	161.2	139.88	1.88
Obstetrics	36.4	206.75	0.63	39.2	209.75	0.68
Office Visits/Consults	7,324.3	45.86	27.99	7,890.2	46.53	30.59
Inpatient Visits	3,424.0	38.78	11.07	3,688.6	39.34	12.09
Emergency Room	1,224.7	60.75	6.20	1,319.4	61.63	6.78
Immunizations & Injection	15,057.2	7.98	10.02	16,220.7	8.10	10.95
Physical Medicine	583.2	14.62	0.71	628.2	14.83	0.78
Miscellaneous Services	<u>4,610.3</u>	<u>55.46</u>	<u>21.31</u>	<u>4,966.6</u>	<u>56.27</u>	<u>23.29</u>
<i>Professional - Subtotal</i>	33,598.3	\$ 35.62	\$ 99.73	36,194.6	\$ 36.13	\$ 108.99
Radiology	6,339.4	\$ 64.67	\$ 34.17	6,961.2	\$ 67.57	\$ 39.20
Path/Lab	<u>13,305.4</u>	<u>15.02</u>	<u>16.66</u>	<u>14,610.5</u>	<u>15.70</u>	<u>19.11</u>
<i>Subtotal</i>	19,644.8	\$ 31.05	\$ 50.82	21,571.8	\$ 32.44	\$ 58.31
MH/SA	2,243.8	\$ 14.73	\$ 2.75	2,535.2	\$ 15.85	\$ 3.35
FQHC/RHF/OP Health Facility	422.7	105.77	3.73	473.1	113.78	4.49
Pharmacy	46,607.4	61.86	240.28	48,296.3	67.19	270.40
Dental	1,916.4	51.91	8.29	2,025.0	52.66	8.89
Vision - Optometric	1,532.5	17.56	2.24	1,715.0	18.89	2.70
Home Health	8,707.3	42.96	31.17	9,744.4	46.21	37.52
Non-Emergent Transportation	8,752.5	14.99	10.93	9,794.9	16.12	13.16
Ambulance	866.6	73.00	5.27	969.9	78.52	6.35
Supplies & DME	3,747.4	72.72	22.71	4,193.7	78.22	27.33
Miscellaneous Services	<u>1,235.9</u>	<u>80.90</u>	<u>8.33</u>	<u>1,710.5</u>	<u>87.02</u>	<u>12.40</u>
<i>Other - Subtotal</i>	76,032.4	\$ 52.98	\$ 335.71	81,458.1	\$ 56.95	\$ 386.59
<i>Total All Benefits</i>	146,370.9	\$ 68.87	\$ 840.10	157,843.6	\$ 72.13	\$ 948.80
Administration					10.5%	111.31
Franchise Fee					4.5%	49.95
<i>Total Capitation Rate</i>						\$ 1,110.06

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Northeast Central
Population: ABD 21 +
Estimated CY2008 MMs: 85,309

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,491.5	\$ 1,630.53	\$ 202.66	1,576.0	\$ 1,687.07	\$ 221.57
Psychiatric/SA	398.0	643.84	21.35	420.6	666.17	23.35
Maternity - Deliveries	21.5	1,214.85	2.18	22.7	1,256.97	2.38
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	13.5	778.62	0.87	14.2	805.62	0.96
Nursing Facility	725.4	125.09	7.56	766.5	131.43	8.40
Other Inpatient	<u>179.1</u>	<u>1,342.91</u>	<u>20.05</u>	<u>189.3</u>	<u>1,389.48</u>	<u>21.92</u>
<i>Inpatient - Subtotal</i>	2,829.0	\$ 1,080.26	\$ 254.67	2,989.3	\$ 1,118.23	\$ 278.56
Emergency Room	1,012.1	\$ 317.30	\$ 26.76	1,111.4	\$ 341.30	\$ 31.61
Surgery/ASC	535.3	492.37	21.96	587.8	529.62	25.94
Cardiovascular	252.9	175.30	3.69	277.7	188.56	4.36
PT/OT/ST	1,191.4	24.56	2.44	1,308.3	26.42	2.88
Clinic	986.1	42.56	3.50	1,082.9	45.77	4.13
Other	<u>4,069.8</u>	<u>69.52</u>	<u>23.58</u>	<u>4,469.0</u>	<u>74.78</u>	<u>27.85</u>
<i>Outpatient - Subtotal</i>	8,047.6	\$ 122.17	\$ 81.93	8,837.0	\$ 131.41	\$ 96.77
Surgery	1,231.7	\$ 188.60	\$ 19.36	1,326.9	\$ 191.33	\$ 21.16
Anesthesia	247.9	94.31	1.95	267.1	95.68	2.13
Obstetrics	31.6	210.50	0.55	34.0	213.55	0.61
Office Visits/Consults	9,794.9	42.42	34.62	10,551.8	43.03	37.84
Inpatient Visits	2,952.5	34.55	8.50	3,180.6	35.05	9.29
Emergency Room	1,121.0	61.58	5.75	1,207.6	62.47	6.29
Immunizations & Injection	14,146.6	8.52	10.04	15,239.8	8.64	10.98
Physical Medicine	1,705.9	16.93	2.41	1,837.7	17.18	2.63
Miscellaneous Services	<u>5,220.7</u>	<u>44.67</u>	<u>19.44</u>	<u>5,624.1</u>	<u>45.32</u>	<u>21.24</u>
<i>Professional - Subtotal</i>	36,452.8	\$ 33.78	\$ 102.62	39,269.7	\$ 34.27	\$ 112.16
Radiology	5,998.7	\$ 67.17	\$ 33.58	6,587.1	\$ 70.19	\$ 38.53
Path/Lab	<u>13,435.5</u>	<u>15.83</u>	<u>17.73</u>	<u>14,753.4</u>	<u>16.54</u>	<u>20.34</u>
<i>Subtotal</i>	19,434.2	\$ 31.68	\$ 51.31	21,340.5	\$ 33.10	\$ 58.87
MH/SA	2,566.0	\$ 17.59	\$ 3.76	2,899.4	\$ 18.92	\$ 4.57
FQHC/RHF/OP Health Facility	487.4	101.77	4.13	545.4	109.47	4.98
Pharmacy	52,375.2	62.35	272.13	54,273.1	67.71	306.25
Dental	2,214.3	49.70	9.17	2,339.7	50.42	9.83
Vision - Optometric	2,012.2	16.70	2.80	2,251.8	17.96	3.37
Home Health	5,358.7	47.59	21.25	5,996.9	51.19	25.58
Non-Emergent Transportation	602.3	14.84	0.74	674.1	15.96	0.90
Ambulance	862.8	70.86	5.09	965.5	76.22	6.13
Supplies & DME	3,552.7	75.04	22.22	3,975.8	80.72	26.74
Miscellaneous Services	<u>1,997.5</u>	<u>52.95</u>	<u>8.81</u>	<u>2,764.7</u>	<u>56.96</u>	<u>13.12</u>
<i>Other - Subtotal</i>	72,029.0	\$ 58.33	\$ 350.12	76,686.5	\$ 62.82	\$ 401.47
<i>Total All Benefits</i>	138,792.7	\$ 72.68	\$ 840.65	149,123.0	\$ 76.27	\$ 947.83
Administration					10.5%	111.20
Franchise Fee					4.5%	49.90
<i>Total Capitation Rate</i>						\$ 1,108.93

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Northwest
Population: ABD 21 +
Estimated CY2008 MMs: 137,407

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,499.5	\$ 1,781.79	\$ 222.65	1,584.5	\$ 1,843.58	\$ 243.43
Psychiatric/SA	621.8	654.02	33.89	657.0	676.69	37.05
Maternity - Deliveries	29.6	1,279.05	3.16	31.3	1,323.41	3.45
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	10.2	935.08	0.79	10.8	967.50	0.87
Nursing Facility	1,032.4	131.40	11.30	1,090.9	138.07	12.55
Other Inpatient	<u>69.1</u>	<u>1,885.60</u>	<u>10.85</u>	<u>73.0</u>	<u>1,950.98</u>	<u>11.87</u>
<i>Inpatient - Subtotal</i>	3,262.5	\$ 1,039.62	\$ 282.65	3,447.4	\$ 1,076.34	\$ 309.21
Emergency Room	1,266.1	\$ 321.20	\$ 33.89	1,390.3	\$ 345.50	\$ 40.03
Surgery/ASC	715.3	328.95	19.61	785.5	353.84	23.16
Cardiovascular	350.5	180.98	5.29	384.9	194.67	6.24
PT/OT/ST	1,915.7	21.29	3.40	2,103.6	22.90	4.01
Clinic	1,652.4	56.77	7.82	1,814.4	61.06	9.23
Other	<u>4,023.4</u>	<u>82.91</u>	<u>27.80</u>	<u>4,418.0</u>	<u>89.18</u>	<u>32.83</u>
<i>Outpatient - Subtotal</i>	9,923.4	\$ 118.26	\$ 97.80	10,896.8	\$ 127.21	\$ 115.51
Surgery	1,265.8	\$ 205.15	\$ 21.64	1,363.6	\$ 208.12	\$ 23.65
Anesthesia	181.8	146.99	2.23	195.9	149.12	2.43
Obstetrics	22.9	307.82	0.59	24.7	312.28	0.64
Office Visits/Consults	7,576.3	43.22	27.29	8,161.7	43.85	29.82
Inpatient Visits	2,829.5	36.25	8.55	3,048.1	36.77	9.34
Emergency Room	1,444.0	56.77	6.83	1,555.5	57.59	7.47
Immunizations & Injection	17,752.5	8.54	12.64	19,124.3	8.67	13.81
Physical Medicine	622.9	16.26	0.84	671.0	16.49	0.92
Miscellaneous Services	<u>5,129.6</u>	<u>45.30</u>	<u>19.36</u>	<u>5,526.0</u>	<u>45.95</u>	<u>21.16</u>
<i>Professional - Subtotal</i>	36,825.3	\$ 32.57	\$ 99.96	39,670.9	\$ 33.05	\$ 109.25
Radiology	6,167.1	\$ 63.61	\$ 32.69	6,772.0	\$ 66.46	\$ 37.51
Path/Lab	<u>13,463.7</u>	<u>14.12</u>	<u>15.84</u>	<u>14,784.3</u>	<u>14.75</u>	<u>18.18</u>
<i>Subtotal</i>	19,630.8	\$ 29.67	\$ 48.53	21,556.4	\$ 31.00	\$ 55.68
MH/SA	7,908.6	\$ 9.46	\$ 6.24	8,935.9	\$ 10.18	\$ 7.58
FQHC/RHF/OP Health Facility	361.0	90.62	2.73	404.0	97.48	3.28
Pharmacy	51,239.2	58.13	248.21	53,096.0	63.13	279.33
Dental	1,968.1	49.68	8.15	2,079.6	50.40	8.73
Vision - Optometric	1,760.7	16.35	2.40	1,970.4	17.58	2.89
Home Health	3,612.1	47.32	14.24	4,042.3	50.90	17.15
Non-Emergent Transportation	1,381.5	15.86	1.83	1,546.0	17.06	2.20
Ambulance	784.5	77.57	5.07	877.9	83.44	6.10
Supplies & DME	3,545.8	77.14	22.80	3,968.1	82.98	27.44
Miscellaneous Services	<u>1,046.9</u>	<u>90.51</u>	<u>7.90</u>	<u>1,449.0</u>	<u>97.36</u>	<u>11.76</u>
<i>Other - Subtotal</i>	73,608.3	\$ 52.09	\$ 319.55	78,369.1	\$ 56.11	\$ 366.45
<i>Total All Benefits</i>	143,250.3	\$ 71.08	\$ 848.49	153,940.6	\$ 74.53	\$ 956.11
Administration					10.5%	112.17
Franchise Fee					4.5%	50.34
<i>Total Capitation Rate</i>						\$ 1,118.62

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Southeast
Population: ABD 21 +
Estimated CY2008 MMs: 152,735

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,381.2	\$ 1,499.72	\$ 172.61	1,459.4	\$ 1,551.72	\$ 188.72
Psychiatric/SA	210.8	621.78	10.92	222.7	643.34	11.94
Maternity - Deliveries	19.2	991.56	1.59	20.3	1,025.95	1.73
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	4.9	882.73	0.36	5.2	913.34	0.39
Nursing Facility	457.9	117.58	4.49	483.8	123.54	4.98
Other Inpatient	<u>99.9</u>	<u>2,416.71</u>	<u>20.11</u>	<u>105.5</u>	<u>2,500.51</u>	<u>21.99</u>
<i>Inpatient - Subtotal</i>	2,173.8	\$ 1,159.70	\$ 210.08	2,297.0	\$ 1,200.31	\$ 229.76
Emergency Room	1,079.8	\$ 268.08	\$ 24.12	1,185.7	\$ 288.36	\$ 28.49
Surgery/ASC	725.5	294.24	17.79	796.7	316.50	21.01
Cardiovascular	384.8	222.55	7.14	422.5	239.39	8.43
PT/OT/ST	1,346.2	20.61	2.31	1,478.2	22.17	2.73
Clinic	339.4	58.24	1.65	372.7	62.65	1.95
Other	<u>3,729.2</u>	<u>60.71</u>	<u>18.87</u>	<u>4,095.0</u>	<u>65.30</u>	<u>22.29</u>
<i>Outpatient - Subtotal</i>	7,604.8	\$ 113.41	\$ 71.87	8,350.8	\$ 121.99	\$ 84.89
Surgery	1,165.6	\$ 196.95	\$ 19.13	1,255.7	\$ 199.80	\$ 20.91
Anesthesia	186.0	151.43	2.35	200.3	153.63	2.56
Obstetrics	25.3	235.96	0.50	27.3	239.38	0.54
Office Visits/Consults	8,867.3	44.22	32.68	9,552.6	44.86	35.71
Inpatient Visits	2,365.1	38.57	7.60	2,547.8	39.13	8.31
Emergency Room	1,137.5	53.61	5.08	1,225.4	54.38	5.55
Immunizations & Injection	9,179.2	11.32	8.66	9,888.5	11.48	9.46
Physical Medicine	511.1	16.66	0.71	550.6	16.91	0.78
Miscellaneous Services	<u>5,447.8</u>	<u>33.15</u>	<u>15.05</u>	<u>5,868.8</u>	<u>33.63</u>	<u>16.44</u>
<i>Professional - Subtotal</i>	28,884.9	\$ 38.12	\$ 91.75	31,117.0	\$ 38.67	\$ 100.27
Radiology	5,609.3	\$ 73.35	\$ 34.29	6,159.5	\$ 76.64	\$ 39.34
Path/Lab	<u>12,702.3</u>	<u>15.95</u>	<u>16.88</u>	<u>13,948.2</u>	<u>16.66</u>	<u>19.37</u>
<i>Subtotal</i>	18,311.6	\$ 33.53	\$ 51.17	20,107.8	\$ 35.04	\$ 58.71
MH/SA	2,236.3	\$ 10.68	\$ 1.99	2,526.8	\$ 11.49	\$ 2.42
FQHC/RHF/OP Health Facility	540.0	82.84	3.73	604.3	89.11	4.49
Pharmacy	55,562.7	55.86	258.63	57,576.2	60.66	291.05
Dental	2,104.3	53.36	9.36	2,223.5	54.13	10.03
Vision - Optometric	2,264.0	16.38	3.09	2,533.7	17.62	3.72
Home Health	5,112.0	47.28	20.14	5,720.8	50.86	24.24
Non-Emergent Transportation	186.9	19.05	0.30	209.1	20.49	0.36
Ambulance	761.4	87.11	5.53	852.1	93.70	6.65
Supplies & DME	3,446.4	69.38	19.93	3,856.9	74.63	23.99
Miscellaneous Services	<u>1,031.8</u>	<u>51.36</u>	<u>4.42</u>	<u>1,428.1</u>	<u>55.24</u>	<u>6.57</u>
<i>Other - Subtotal</i>	73,245.8	\$ 53.59	\$ 327.10	77,531.6	\$ 57.81	\$ 373.53
<i>Total All Benefits</i>	130,221.0	\$ 69.30	\$ 751.97	139,404.1	\$ 72.92	\$ 847.16
Administration					10.5%	99.39
Franchise Fee					4.5%	44.60
<i>Total Capitation Rate</i>						\$ 991.15

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: Southwest
Population: ABD 21 +
Estimated CY2008 MMs: 174,390

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,526.2	\$ 1,877.50	\$ 238.79	1,612.7	\$ 1,942.61	\$ 261.07
Psychiatric/SA	407.2	734.89	24.94	430.3	760.38	27.26
Maternity - Deliveries	22.1	1,342.89	2.47	23.4	1,389.46	2.70
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	8.0	998.89	0.67	8.5	1,033.53	0.73
Nursing Facility	1,005.4	159.24	13.34	1,062.3	167.31	14.81
Other Inpatient	<u>196.7</u>	<u>1,335.14</u>	<u>21.88</u>	<u>207.8</u>	<u>1,381.44</u>	<u>23.92</u>
<i>Inpatient - Subtotal</i>	3,165.6	\$ 1,145.16	\$ 302.09	3,344.9	\$ 1,185.68	\$ 330.50
Emergency Room	1,156.9	\$ 263.65	\$ 25.42	1,270.4	\$ 283.59	\$ 30.02
Surgery/ASC	5,024.3	54.78	22.94	5,517.2	58.93	27.09
Cardiovascular	319.8	170.13	4.53	351.2	183.00	5.36
PT/OT/ST	1,527.7	24.68	3.14	1,677.6	26.55	3.71
Clinic	1,280.2	48.36	5.16	1,405.8	52.02	6.09
Other	<u>13,918.2</u>	<u>18.49</u>	<u>21.45</u>	<u>15,283.5</u>	<u>19.89</u>	<u>25.34</u>
<i>Outpatient - Subtotal</i>	23,227.2	\$ 42.70	\$ 82.64	25,505.6	\$ 45.93	\$ 97.61
Surgery	1,240.1	\$ 192.86	\$ 19.93	1,335.9	\$ 195.65	\$ 21.78
Anesthesia	185.2	132.83	2.05	199.5	134.75	2.24
Obstetrics	32.9	199.34	0.55	35.5	202.23	0.60
Office Visits/Consults	6,746.0	45.47	25.56	7,267.3	46.13	27.94
Inpatient Visits	2,818.2	38.05	8.94	3,035.9	38.60	9.77
Emergency Room	1,240.5	54.71	5.66	1,336.3	55.50	6.18
Immunizations & Injection	22,737.4	7.39	14.00	24,494.4	7.49	15.30
Physical Medicine	439.1	15.99	0.59	473.1	16.22	0.64
Miscellaneous Services	<u>4,733.1</u>	<u>47.28</u>	<u>18.65</u>	<u>5,098.9</u>	<u>47.96</u>	<u>20.38</u>
<i>Professional - Subtotal</i>	40,172.6	\$ 28.65	\$ 95.91	43,276.9	\$ 29.06	\$ 104.82
Radiology	6,136.4	\$ 65.68	\$ 33.59	6,738.3	\$ 68.63	\$ 38.53
Path/Lab	<u>13,704.1</u>	<u>14.99</u>	<u>17.12</u>	<u>15,048.4</u>	<u>15.66</u>	<u>19.64</u>
<i>Subtotal</i>	19,840.5	\$ 30.67	\$ 50.71	21,786.6	\$ 32.04	\$ 58.18
MH/SA	3,687.0	\$ 11.32	\$ 3.48	4,165.9	\$ 12.18	\$ 4.23
FQHC/RHF/OP Health Facility	974.2	99.57	8.08	1,090.3	107.11	9.73
Pharmacy	53,622.2	57.02	254.80	55,565.4	61.93	286.74
Dental	1,778.3	53.04	7.86	1,879.0	53.81	8.43
Vision - Optometric	1,345.3	16.84	1.89	1,505.5	18.11	2.27
Home Health	3,530.7	52.08	15.32	3,951.3	56.02	18.45
Non-Emergent Transportation	1,450.1	15.84	1.91	1,622.8	17.04	2.30
Ambulance	839.6	69.00	4.83	939.6	74.22	5.81
Supplies & DME	3,633.9	68.84	20.85	4,066.8	74.05	25.09
Miscellaneous Services	<u>1,196.4</u>	<u>86.78</u>	<u>8.65</u>	<u>1,655.9</u>	<u>93.35</u>	<u>12.88</u>
<i>Other - Subtotal</i>	72,057.8	\$ 54.57	\$ 327.67	76,442.5	\$ 59.02	\$ 375.94
<i>Total All Benefits</i>	158,463.7	\$ 65.05	\$ 859.02	170,356.5	\$ 68.12	\$ 967.05
Administration					10.5%	113.45
Franchise Fee					4.5%	50.91
<i>Total Capitation Rate</i>						\$ 1,131.41

State of Ohio
Department of Job and Family Services
CY 2008 ABD Capitation Rate Development

Region: West Central
Population: ABD 21 +
Estimated CY2008 MMs: 123,260

Category Description	MC Adjusted 2006			2008 Managed Care Rate		
	Util Per 1,000	Cost Per Service	PMPM	Util Per 1,000	Cost Per Service	PMPM
Medical/Surgical	1,554.1	\$ 1,661.20	\$ 215.14	1,642.2	\$ 1,718.80	\$ 235.21
Psychiatric/SA	426.0	717.82	25.48	450.2	742.72	27.86
Maternity - Deliveries	26.1	1,185.11	2.58	27.6	1,226.20	2.82
Well Newborn	0.0	0.00	0.00	0.0	0.00	0.00
Maternity - Nondeliveries	4.1	783.45	0.27	4.3	810.62	0.29
Nursing Facility	1,099.0	130.60	11.96	1,161.3	137.22	13.28
Other Inpatient	<u>121.9</u>	<u>2,730.57</u>	<u>27.73</u>	<u>128.8</u>	<u>2,825.26</u>	<u>30.32</u>
<i>Inpatient - Subtotal</i>	3,231.3	\$ 1,051.59	\$ 283.16	3,414.3	\$ 1,088.77	\$ 309.79
Emergency Room	1,172.7	\$ 297.31	\$ 29.05	1,287.7	\$ 319.81	\$ 34.32
Surgery/ASC	726.5	324.23	19.63	797.7	348.76	23.18
Cardiovascular	325.5	183.18	4.97	357.4	197.04	5.87
PT/OT/ST	1,597.6	21.36	2.84	1,754.3	22.98	3.36
Clinic	2,360.0	30.62	6.02	2,591.5	32.93	7.11
Other	<u>3,657.8</u>	<u>49.63</u>	<u>15.13</u>	<u>4,016.6</u>	<u>53.38</u>	<u>17.87</u>
<i>Outpatient - Subtotal</i>	9,840.1	\$ 94.69	\$ 77.64	10,805.3	\$ 101.85	\$ 91.71
Surgery	1,304.5	\$ 198.15	\$ 21.54	1,405.3	\$ 201.02	\$ 23.54
Anesthesia	193.4	150.17	2.42	208.4	152.35	2.65
Obstetrics	37.5	202.57	0.63	40.4	205.51	0.69
Office Visits/Consults	8,457.1	44.64	31.46	9,110.7	45.28	34.38
Inpatient Visits	2,769.9	36.92	8.52	2,983.9	37.46	9.31
Emergency Room	1,281.8	58.62	6.26	1,380.9	59.47	6.84
Immunizations & Injection	19,242.9	8.11	13.00	20,729.9	8.23	14.21
Physical Medicine	901.7	14.39	1.08	971.4	14.60	1.18
Miscellaneous Services	<u>5,574.7</u>	<u>41.30</u>	<u>19.19</u>	<u>6,005.5</u>	<u>41.90</u>	<u>20.97</u>
<i>Professional - Subtotal</i>	39,763.7	\$ 31.42	\$ 104.11	42,836.4	\$ 31.87	\$ 113.78
Radiology	6,523.9	\$ 62.57	\$ 34.02	7,163.9	\$ 65.38	\$ 39.03
Path/Lab	<u>14,330.2</u>	<u>14.81</u>	<u>17.68</u>	<u>15,735.9</u>	<u>15.47</u>	<u>20.29</u>
<i>Subtotal</i>	20,854.2	\$ 29.75	\$ 51.70	22,899.8	\$ 31.08	\$ 59.32
MH/SA	2,443.7	\$ 16.73	\$ 3.41	2,761.1	\$ 17.99	\$ 4.14
FQHC/RHF/OP Health Facility	139.5	97.12	1.13	156.1	104.47	1.36
Pharmacy	56,081.5	57.27	267.63	58,113.8	62.19	301.19
Dental	2,305.3	53.28	10.24	2,435.9	54.05	10.97
Vision - Optometric	2,010.3	16.07	2.69	2,249.8	17.29	3.24
Home Health	6,902.8	46.46	26.72	7,724.9	49.97	32.17
Non-Emergent Transportation	1,200.3	15.33	1.53	1,343.2	16.49	1.85
Ambulance	878.1	75.68	5.54	982.6	81.41	6.67
Supplies & DME	3,801.9	73.65	23.33	4,254.7	79.22	28.09
Miscellaneous Services	<u>987.7</u>	<u>110.98</u>	<u>9.13</u>	<u>1,367.1</u>	<u>119.38</u>	<u>13.60</u>
<i>Other - Subtotal</i>	76,751.0	\$ 54.94	\$ 351.36	81,389.3	\$ 59.46	\$ 403.27
<i>Total All Benefits</i>	150,440.2	\$ 69.23	\$ 867.98	161,345.0	\$ 72.73	\$ 977.86
Administration					10.5%	114.72
Franchise Fee					4.5%	51.48
<i>Total Capitation Rate</i>						\$ 1,144.06



ATTACHMENT 6

FINAL AND CONFIDENTIAL

**State of Ohio
Department of Job and Family Services
CY2008 ABD Capitation Rate Development**

Region	Projected CY 2008 Member Months	CY 2008 Guaranteed Rate	CY 2008 At Risk Rate	CY 2008 Rate
Central	284,169	\$ 1,101.26	\$ 10.62	\$ 1,111.88
East Central	149,045	1,091.21	10.52	1,101.73
Northeast	287,103	1,099.46	10.60	1,110.06
Northeast Central	85,309	1,098.34	10.59	1,108.93
Northwest	137,407	1,107.94	10.68	1,118.62
Southeast	152,735	981.68	9.47	991.15
Southwest	174,390	1,120.61	10.80	1,131.41
West Central	123,260	1,133.13	10.93	1,144.06
Statewide	1,393,418	\$ 1,092.43	\$ 10.53	\$ 1,102.96



ATTACHMENT 7

FINAL AND CONFIDENTIAL

**State of Ohio
Department of Job and Family Services
CY2008 ABD Capitation Rate Development**

Region	Projected CY 2008 Member	CY 2007		CY 2008		% Change	\$ Change
	Months	CY 2007 Rate	Expenditures	CY 2008 Rate	Expenditures		
Central	284,169	\$ 1,100.43	\$ 312,708,093	\$ 1,111.88	\$ 315,961,828	1.0%	\$ 3,253,735
East Central	149,045	\$ 1,043.46	\$ 155,522,496	\$ 1,101.73	\$ 164,207,348	5.6%	\$ 8,684,852
Northeast	287,103	\$ 1,088.93	\$ 312,635,070	\$ 1,110.06	\$ 318,701,556	1.9%	\$ 6,066,486
Northeast Central	85,309	\$ 1,073.18	\$ 91,551,913	\$ 1,108.93	\$ 94,601,709	3.3%	\$ 3,049,797
Northwest	137,407	\$ 1,086.81	\$ 149,335,302	\$ 1,118.62	\$ 153,706,218	2.9%	\$ 4,370,917
Southeast	152,735	\$ 958.68	\$ 146,423,990	\$ 991.15	\$ 151,383,295	3.4%	\$ 4,959,305
Southwest	174,390	\$ 1,116.83	\$ 194,763,984	\$ 1,131.41	\$ 197,306,590	1.3%	\$ 2,542,606
West Central	123,260	\$ 1,093.08	\$ 134,733,041	\$ 1,144.06	\$ 141,016,836	4.7%	\$ 6,283,795
Statewide	1,393,418	\$ 1,074.82	\$ 1,497,673,887	\$ 1,102.96	\$ 1,536,885,380	2.6%	\$ 39,211,493