

Exhibit FF - Medicaid Mental Health Retroactivity Adjustment

| Fiscal Year | | Adults 65 and Older (OAP-A) | Disabled Individuals Through 64 (AND/AB, OAP-B) | Low Income Adults ⁽¹⁾ | Adults without Dependent Children | Eligible Children (AFDC-C/BC) | Foster Care |
|--|------------------------------------|--------------------------------|---|----------------------------------|--------------------------------------|----------------------------------|-------------|
| FY 2006-07 | Average Monthly Claims | 36,562 | 59,698 | 71,961 | - | 228,302 | 17,244 |
| | Average Caseload | 35,888 | 54,858 | 61,031 | - | 205,390 | 16,724 |
| | Claims as a Percentage of Caseload | 101.88% | 108.82% | 117.91% | - | 111.16% | 103.11% |
| FY 2007-08 | Average Monthly Claims | 36,863 | 60,694 | 69,316 | - | 225,108 | 17,797 |
| | Average Caseload | 36,284 | 56,079 | 59,761 | - | 204,022 | 17,141 |
| | Claims as a Percentage of Caseload | 101.59% | 108.23% | 115.99% | - | 110.34% | 103.83% |
| FY 2008-09 | Average Monthly Claims | 37,848 | 62,224 | 77,172 | - | 251,382 | 18,587 |
| | Average Caseload | 37,619 | 57,802 | 68,850 | - | 235,129 | 18,033 |
| | Claims as a Percentage of Caseload | 100.61% | 107.65% | 112.09% | - | 106.91% | 103.07% |
| FY 2009-10 | Average Monthly Claims | 38,645 | 65,336 | 94,476 | - | 290,845 | 18,839 |
| | Average Caseload | 38,487 | 60,313 | 85,907 | - | 275,672 | 18,381 |
| | Claims as a Percentage of Caseload | 100.41% | 108.33% | 109.97% | - | 105.50% | 102.49% |
| FY 2010-11 | Estimated Average Monthly Claims | 38,873 | 68,064 | 126,568 | - | 322,354 | 18,774 |
| | Average Caseload | 38,921 | 64,052 | 116,149 | - | 302,410 | 18,393 |
| | Claims as a Percentage of Caseload | 99.88% | 106.26% | 108.97% | - | 106.60% | 102.07% |
| Weighted Average Claims as a Percentage of Caseload ⁽²⁾ | | 100.41% | 108.33% | 109.97% | - | 105.50% | 102.49% |
| Retroactivity Adjustment Factor | | 0.41% | 8.33% | 9.97% | - | 5.50% | 2.49% |

¹ Breast and Cervical Cancer Program participants share a capitation rate with the Adult population, and comprise less than 1% of that total population. As such, a separate analysis was not performed.

² The retroactivity adjustment captures the difference in total claims paid versus caseload due to retroactive eligibility. After analyzing the data and historical trends, the Department determined that the most recent year with adequate runout, which in this request is FY 2009-10, most accurately represents the relationship between average monthly claims and average caseload for all eligibility categories.

| Exhibit FF - Medicaid Mental Health Partial Month Adjustment Multiplier | | | | | | | | |
|---|---|--------------------------------|---|----------------------------------|--------------------------------------|----------------------------------|-------------|--|
| Fiscal Year | | Adults 65 and Older (OAP-A) | Disabled Individuals Through 64 (AND/AB, OAP-B) | Low Income Adults ⁽¹⁾ | Adults without Dependent Children | Eligible Children (AFDC-C/BC) | Foster Care | |
| FY 2006-07 | Weighted Claims-Based Rate | \$13.38 | \$105.59 | \$14.95 | - | \$12.80 | \$280.10 | |
| | Weighted Capitation Rate | \$13.46 | \$106.01 | \$14.96 | - | \$12.85 | \$282.90 | |
| | Claims as a Percentage of Capitation | 99.44% | 99.61% | 99.95% | - | 99.58% | 99.01% | |
| FY 2007-08 | Weighted Claims-Based Rate | \$13.07 | \$113.59 | \$17.48 | - | \$13.87 | \$260.01 | |
| | Weighted Capitation Rate | \$13.15 | \$114.03 | \$17.51 | - | \$13.94 | \$262.46 | |
| | Claims as a Percentage of Capitation | 99.35% | 99.61% | 99.84% | - | 99.49% | 99.07% | |
| FY 2008-09 | Weighted Claims-Based Rate | \$13.49 | \$122.69 | \$18.40 | - | \$14.47 | \$253.55 | |
| | Weighted Capitation Rate ⁽²⁾ | \$13.57 | \$123.19 | \$18.47 | - | \$14.57 | \$255.40 | |
| | Claims as a Percentage of Capitation | 99.42% | 99.60% | 99.63% | - | 99.34% | 99.28% | |
| FY 2009-10 | Weighted Claims-Based Rate | \$13.21 | \$127.20 | \$18.74 | - | \$14.21 | \$225.87 | |
| | Weighted Capitation Rate ⁽²⁾ | \$13.29 | \$127.70 | \$18.82 | - | \$14.29 | \$227.45 | |
| | Claims as a Percentage of Capitation | 99.40% | 99.61% | 99.56% | - | 99.44% | 99.30% | |
| FY 2010-11 | Weighted Claims-Based Rate | \$13.51 | \$136.44 | \$20.56 | - | \$15.10 | \$191.25 | |
| | Weighted Capitation Rate ⁽²⁾ | \$13.59 | \$136.95 | \$20.64 | - | \$15.19 | \$192.53 | |
| | Claims as a Percentage of Capitation | 99.39% | 99.63% | 99.63% | - | 99.44% | 99.33% | |
| Average Claims as a Percentage of Capitation ⁽³⁾ | | 99.40% | 99.61% | 99.56% | - | 99.44% | 99.30% | |
| Partial Month Adjustment Multiplier | | -0.60% | -0.39% | -0.44% | - | -0.56% | -0.70% | |

¹ Breast and Cervical Cancer Program participants share a capitation rate with the Adult population, and comprise less than 1% of that total population. As such, a separate analysis was not performed

² The Department has adjusted the rates paid to the BHOs in the last three fiscal years due to budget actions. The numbers provided, here, reflects the actual paid rates and therefore do not match the numbers in Exhibit GG, which demonstrate the trend on the actuarial point estimates.

³ The partial month adjustment captures the difference in the amount paid per claim versus the capitation rate due to paying an adjusted rate for clients enrolled for only part of a month. After analyzing the data and historical trends, the Department determined that the most recent year with adequate runout, which in this request is FY 2009-10, most accurately represents the relationship between the claims-based rate and the capitation rate for all eligibility categories.