

**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 <sup>(1)</sup>	Adults without Dependent Children <sup>(3)</sup>	Eligible Children (AFDC-C/BC)	Foster Care
FY 2007-08	Average Monthly Claims	36,907	61,336	69,407	-	225,162	17,810
	Average Caseload	36,284	56,079	59,761	-	204,022	17,141
	Claims as a Percentage of Caseload	101.72%	109.37%	116.14%	-	110.36%	103.90%
FY 2008-09	Average Monthly Claims	37,865	62,496	77,211	-	251,445	18,597
	Average Caseload	37,619	57,802	68,850	-	235,129	18,033
	Claims as a Percentage of Caseload	100.65%	108.12%	112.14%	-	106.94%	103.13%
FY 2009-10	Average Monthly Claims	38,645	65,337	94,478	-	290,971	18,842
	Average Caseload	38,487	60,313	85,907	-	275,672	18,381
	Claims as a Percentage of Caseload	100.41%	108.33%	109.98%	-	105.55%	102.51%
FY 2010-11	Average Monthly Claims	38,950	68,948	127,050	-	323,344	18,794
	Average Caseload	38,921	64,052	116,149	-	302,410	18,393
	Claims as a Percentage of Caseload	100.07%	107.64%	109.39%	-	106.92%	102.18%
FY 2011-12	Estimated Average Monthly Claims	39,227	69,682	142,090	5,928	346,020	18,303
	Average Caseload	39,740	67,869	136,315	6,810	334,633	18,034
	Claims as a Percentage of Caseload	98.71%	102.67%	104.24%	87.05%	103.40%	101.49%
Weighted Average Claims as a Percentage of Caseload <sup>(2)</sup>		100.07%	107.64%	109.39%	-	106.92%	102.18%
Retroactivity Adjustment Factor		0.07%	7.64%	9.39%	9.39%	6.92%	2.18%

<sup>1</sup> 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.

<sup>2</sup> 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 2010-11, most accurately represents the relationship between average monthly claims and average caseload for all eligibility categories.

<sup>3</sup> The retroactivity adjustment factor for Adults without Dependent Children cannot be calculated in the same manner as the other categories because it does not have adequate runout. Therefore the Department has selected the Low Income Adults retroactivity adjustment factor for the Adults without Dependent Children factor because both eligibilities are determined strictly on level of income.

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 <sup>(1)</sup>	Adults without Dependent Children <sup>(4)</sup>	Eligible Children (AFDC-C/BC)	Foster Care	
FY 2007-08	Weighted Claims-Based Rate	\$13.07	\$113.61	\$17.48	-	\$13.87	\$260.01	
	Weighted Capitation Rate	\$13.15	\$114.07	\$17.51	-	\$13.94	\$262.46	
	Claims as a Percentage of Capitation	99.36%	99.60%	99.84%	-	99.49%	99.07%	
FY 2008-09	Weighted Claims-Based Rate	\$13.49	\$122.69	\$18.40	-	\$14.47	\$253.56	
	Weighted Capitation Rate (2)	\$13.57	\$123.19	\$18.47	-	\$14.57	\$255.41	
	Claims as a Percentage of Capitation	99.42%	99.59%	99.62%	-	99.34%	99.27%	
FY 2009-10	Weighted Claims-Based Rate	\$13.21	\$127.20	\$18.74	-	\$14.21	\$225.86	
	Weighted Capitation Rate <sup>(2)</sup>	\$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	\$136.45	\$20.56	-	\$15.11	\$191.24	
	Weighted Capitation Rate <sup>(2)</sup>	\$13.59	\$136.98	\$20.64	-	\$15.19	\$192.53	
	Claims as a Percentage of Capitation	99.39%	99.61%	99.63%	-	99.45%	99.33%	
FY 2011-12	Weighted Claims-Based Rate	\$13.71	\$139.16	\$21.46	\$100.81	\$16.13	\$176.70	
	Weighted Capitation Rate	\$13.77	\$139.57	\$21.51	\$100.81	\$16.20	\$177.69	
	Claims as a Percentage of Capitation	99.55%	99.71%	99.75%	100.00%	99.57%	99.44%	
Average Claims as a Percentage of Capitation <sup>(3)</sup>		99.39%	99.61%	99.63%	-	99.45%	99.33%	
Partial Month Adjustment Multiplier		-0.61%	-0.39%	-0.37%	-0.37%	-0.55%	-0.67%	

<sup>1</sup> 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

<sup>2</sup> The Department has adjusted the rates paid to the BHOs in the previous 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.

<sup>3</sup> 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 2010-11, most accurately represents the relationship between the claims-based rate and the capitation rate for all eligibility categories.

<sup>4</sup> The partial month adjustment factor for Adults without Dependent Children cannot be calculated in the same manner as the other categories because it does not have adequate runout. Therefore the Department has selected the Low Income Adults retroactivity adjustment factor for the Adults without Dependent Children factor because both eligibilities are determined strictly on level of income.